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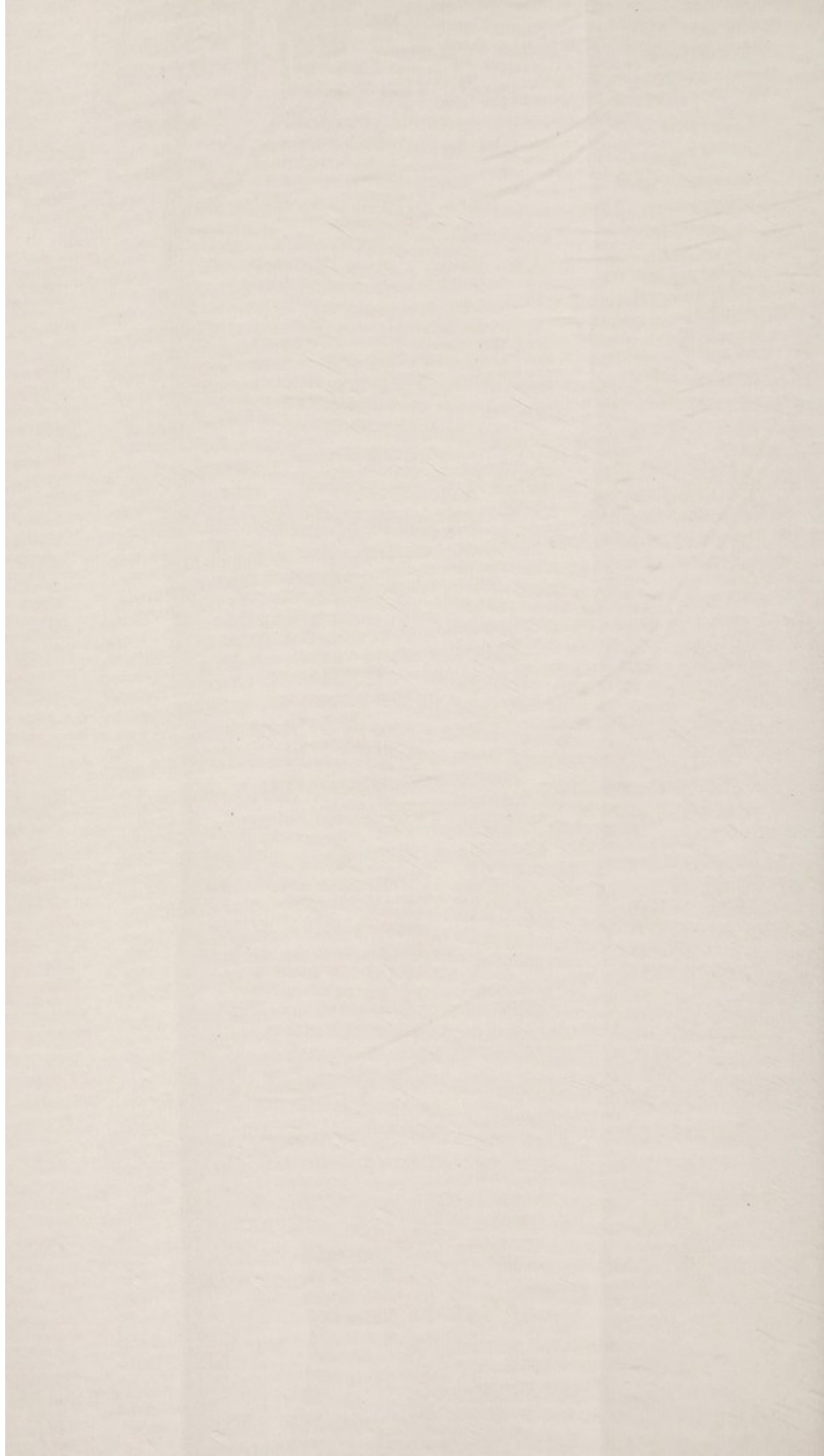



THE  
ANNUAL  
REPORTS  
OF THE  
COUNTY  
MEDICAL  
OFFICER  
OF  
HEALTH  
AND  
PRINCIPAL  
SCHOOL  
MEDICAL  
OFFICER



THE  
HEALTH  
OF  
WEST  
SUSSEX

1965





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CRAWLEY  
TRAINING  
CENTRE

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September  
1965



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It is easy to bear others'  
misfortunes with fortitude,  
and the more remote your  
position, the easier it is.

*W. Somerset Maugham: 1874-1965*

Telephone: Chichester 85100

COUNTY HALL

CHICHESTER

15th May, 1966

*To the Members of the County Council of West Sussex*

I present for your information another edition of *The Health of West Sussex* which has been compiled in accordance with the requirements of the *Public Health Officers Regulations, 1959* and at the request of the Department of Education and Science; it comprises my Annual Reports on the Health of the County and of the School Child for the year 1965, the sixth edition of such reports for which I have been responsible.

As was foreshadowed last year, the present issue is much shorter than its immediate predecessors. Each Part of the Report has been reduced to a recital of the relevant statistics with only such comment as is necessary either to draw attention to new developments or to account for the Council's stewardship in preserving existing standards of service.

### **Pointers to Performance**

Although there were few developments of outstanding importance, the year was not without its notable features and there were a few new records. The infant, neonatal and perinatal mortality rates (which are among the best indices of health in any community) were lower than at any time in the past. There was however further evidence that the diseases of affluence are on the increase, including the diseases of personal habit such as the smokers' cancer, the sitters' heart condition and the venereal disease of the promiscuous. Deaths from lung cancer numbered 336 (72 more than last year) and one-third of them were of men under the age of 65; deaths from diseases of the circulatory system were up by 379 and more than half of this increase was due to coronary artery disease; the number of persons attending venereal disease clinics was higher than ever before.

New records were established in the infectious disease immunity indices, more persons were nursed at home than in any previous year, more were given home help, more travelled on ambulances, more had chiropody, more were registered as blind, more were admitted to mental hospitals and, with the opening of two new training centres and a hostel, better facilities became available for the mentally subnormal and their families.

### **Fluoridation Re-Revived**

In a year that marked the centenary of Lister's introduction of anti-septic surgery (there were special issues of commemorative 4d. and 1s. postage stamps) and the tercentenary of the Plague of London, some further consideration was given to the abatement of dental caries by the fluoridation of domestic water supplies.

In February, 1963 the Council had decided to urge water undertakers operating in the County to raise to the approved level the fluoride content of the water they supply but this decision was reversed nine months later. The Ministry of Health revived the subject in



August, 1965\* and, upon the unanimous recommendation of the County Health Committee, the Council resolved by a narrow majority on 24th November, 1965 to revert to their decision of February, 1963. Most members of the Council had been subjected to ignorant and unscrupulous propaganda from the anti-fluoridationists and, in the event, the number of votes cast in favour of the decision fell short of a majority of the total number of members serving on the Council.

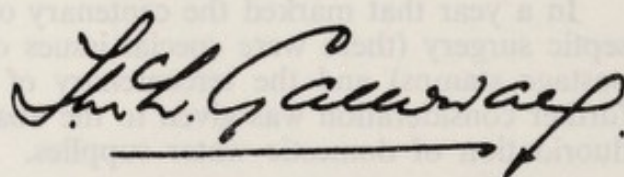
### **Sources of Service**

Behind the details contained in these pages lies a record of useful achievement and of sound service to humanity of which both the Council and the staff can be justifiably proud. As representatives of the Council, the staff are probably in touch with more people, often at times when they are faced with the complications of life, than any other single social agency.

Working in close association with the family doctor, the midwife advises on how to prepare for the baby and she often delivers the mother of her child; the home nurse is there when the breadwinner falls sick or when the old lady has to be nursed through a terminal illness; the mental welfare officer is ready with help when the mentally disturbed young man needs care and attention. Doctors, dentists and chiropodists are available to diagnose, to advise and to treat. Health visitors and other social workers, playing a full part in preventive medicine and social action, are there to show the way to healthier living. At the various stages of human development the staff are in and out of the homes of the people giving advice and practical help. Few of the confidential details of the successes and disappointments they experienced will be found in these pages but there was evidence enough that they were not slow to seize the many opportunities of service which came their way.

### **Acknowledgments**

On your behalf and mine I acknowledge the valuable work of all the staff. I also record my sincere appreciation of the consideration I have always been shown by the Council as a whole and by the Committees responsible for the activities of the County Health Department. I do so not merely because it is customary in a document of this kind but rather because it is both cordial and sincere. A medical officer of health can have no greater encouragement than to know that the elected members to whom he is accountable will never completely reject a reasonable argument made on behalf of the local health services. That has been my experience in West Sussex during the past six years and I am most grateful. Some results of that policy can plainly be seen in the ever-improving health and well-being of the people.



*County Medical Officer of Health  
and Principal School Medical Officer*

\*By Circular 15/65.



# PART I—GENERAL AND STATISTICAL

## Vital Statistics

The Ministry of Health have again asked that certain vital statistics relating to mothers and infants should be included in the Report in the following form and detail; those for 1964 are also shown for comparative purposes.

<i>Live Births</i>		1964	1965
Number	... ..	6,567	6,506
Rate a 1,000 population	... ..	17.1	17.1
<i>Illegitimate Live Births</i> (per cent of total live births) ...		6.3	6.8
<i>Stillbirths</i>			
Number	... ..	91	96
Rate a 1,000 total live and still births	... ..	13.7	14.5
<i>Total Live and Still Births</i>	... ..	6,658	6,602
<i>Infant Deaths</i> (deaths under one year) ...	... ..	108	81
<i>Infant Mortality Rates</i>			
Total infant deaths a 1,000 total live births	... ..	16.4	12.4
Legitimate infant deaths a 1,000 legitimate live births	... ..	15.8	12.2
Illegitimate infant deaths a 1,000 illegitimate live births	... ..	26.5	15.8
<i>Neonatal Mortality Rate</i>			
(Deaths under four weeks a 1,000 total live births)		12.6	8.8
<i>Early Neonatal Mortality Rate</i>			
(Deaths under one week a 1,000 total live births) ...		10.4	7.4
<i>Perinatal Mortality Rate</i>			
(Stillbirths and deaths under one week combined a 1,000 total live and still births) ...	... ..	23.9	21.8
<i>Maternal Mortality</i> (including abortion)			
Number of deaths	... ..	3	1
Rate a 1,000 total live and still births	... ..	0.5	0.2

The table on page 11 gives details of the population and the main vital statistics for each County district. The table on page 16 gives details of the causes of death in various age groups.

## Area

There were no boundary changes during the year and the area of the County remained therefore at 405,287 acres or about 630 square miles.



# **VITAL STATISTICS** **West Sussex compared with England and Wales**

Year	Population (mid-year estimate)	Live Births			Deaths			Infant Mortality			Neonatal Mortality			Stillbirths			Maternal Mortality		
		West Sussex	Eng- land & Wales	Rate a 1,000 population	No.	West Sussex	Eng- land & Wales	No.	West Sussex	Eng- land & Wales	No.	West Sussex	Eng- land & Wales	No.	West Sussex	Eng- land & Wales	No.	West Sussex	Eng- land & Wales
1911	92,725	3,386	19.1	24.4	2,203	13.1	14.6	288	85.0	130	†	†	†	†	†	†	6	1.8	3.7
1921	195,795	3,214	17.4	22.4	2,185	11.4	12.1	158	49.2	83	†	†	†	†	†	†	11	3.3	3.9
1931	216,760	3,134	14.5	15.8	2,808	13.0	12.3	139	44.4	66	†	†	†	†	†	†	13	4.1	4.0
1950	316,090	4,203	14.7	15.8	4,454	10.4	11.6	109	26.0	29.6	66	15.7	18.5	83	19.4	22.6	5	1.2	0.9
1951	317,900	4,068	14.2	15.5	4,654	10.8	12.5	100	25.0	29.7	69	17.0	18.8	98	23.3	23.0	2	0.5	0.8
1952	319,600	4,177	14.5	15.3	4,304	10.0	11.3	74	18.0	27.6	52	12.4	18.3	87	20.8	22.7	4	0.9	0.7
*1953	327,340	4,271	14.4	15.5	4,519	10.4	11.4	95	22.0	26.8	67	15.7	17.7	99	22.7	22.5	4	0.9	0.8
1954	338,500	4,681	16.0	15.2	4,606	9.5	11.3	112	24.0	25.4	88	18.8	17.7	106	22.1	23.5	1	0.2	0.7
1955	347,700	4,681	15.3	15.0	4,696	9.5	11.7	99	21.0	24.9	77	16.4	17.3	102	21.3	23.2	1	0.2	0.6
1956	358,700	5,021	15.4	15.6	5,138	10.7	11.7	122	24.0	23.8	85	16.9	16.8	105	20.5	22.9	3	0.6	0.6
1957	370,200	5,287	15.4	16.1	4,757	10.2	11.5	103	19.5	23.1	77	14.6	16.5	130	24.0	22.5	1	0.2	0.5
1958	382,500	5,541	15.4	16.4	5,267	11.0	11.7	100	18.0	22.5	74	13.4	16.2	106	18.8	21.5	1	0.2	0.4
1959	390,000	5,656	15.1	16.4	5,537	11.8	11.6	95	16.8	22.2	64	11.3	15.9	121	20.9	20.8	2	0.4	0.4
1960	397,240	5,802	14.9	17.1	5,679	12.2	11.5	118	20.3	21.8	88	15.2	15.5	84	13.7	19.8	1	0.2	0.4
1961	410,930	5,947	14.6	17.5	5,975	12.6	11.9	107	18.0	21.4	79	13.3	15.3	97	16.1	19.0	1	0.2	0.3
1962	418,470	6,183	14.8	18.9	6,122	12.9	11.9	124	20.1	21.7	92	14.9	15.1	106	17.1	18.1	2	0.3	0.4
1963	425,710	6,395	17.3	18.1	6,634	11.2	12.2	114	17.8	21.1	86	13.4	14.3	92	14.2	17.2	—	—	—
1964	436,770	6,567	17.1	18.4	6,976	10.0	11.3	108	16.4	19.9	83	12.6	13.8	91	13.7	16.3	3	0.5	0.3
1965	444,690	6,506	17.1	18.1	6,539	9.7	11.5	81	12.4	19.0	57	8.8	13.0	96	14.5	15.7	1	0.2	0.2

Note : The rates given for the Administrative County have been adjusted for age and sex and are therefore comparable with those for England and Wales.

\*Boundary change.

†Not available.



**Chief Vital Statistics for each County District in West Sussex**

DISTRICT	Estimated population middle of 1965	No. of births	Birth rates		No. of illegitimate births	No. of deaths	Death rates		Deaths under one year	Infant mortality rate a 1,000 live births	Respiratory tuberculosis		Cancer death rate
			Crude	Standardised			Crude	Standardised			No. of deaths	Death rate	
<b>Urban Districts</b>													
Arundel (M.B.) ...	2,670	46	17.2	21.9	4	56	21.0	13.8	—	—	—	—	4.1
Bognor Regis ...	30,590	431	14.1	21.0	46	572	18.7	9.7	8	18.6	2	0.07	3.8
Chichester (M.B.) ...	20,490	274	13.4	13.9	20	322	15.7	9.1	4	14.6	—	—	2.5
Crawley ...	60,290	1,133	18.8	14.8	48	313	5.2	10.1	11	9.7	—	—	1.4
Horsham ...	23,830	429	18.0	19.1	19	266	11.2	9.9	3	7.0	1	0.04	2.4
Littlehampton ...	17,590	285	16.2	18.3	22	247	14.0	10.5	4	14.0	1	0.06	3.0
Shoreham-by-Sea ...	18,190	256	14.1	14.6	20	202	11.0	9.8	1	3.9	—	—	2.3
Southwick ...	11,960	141	11.8	13.4	9	180	15.1	12.2	3	21.3	—	—	2.8
Worthing (M.B.) ...	81,100	933	11.5	17.5	81	1,895	23.4	10.3	10	10.7	3	0.04	4.3
<b>All Urban Districts</b>	<b>266,710</b>	<b>3,928</b>	<b>14.7</b>	<b>16.6</b>	<b>269</b>	<b>4,053</b>	<b>15.2</b>	<b>10.0</b>	<b>44</b>	<b>11.2</b>	<b>7</b>	<b>0.03</b>	<b>3.0</b>
<b>Rural Districts</b>													
Chancetonbury ...	24,900	386	15.5	18.6	25	349	14.0	10.8	9	23.3	1	0.04	3.1
Chichester ...	56,600	863	15.2	18.9	70	624	11.0	8.6	8	9.3	2	0.04	2.6
Horsham ...	26,190	396	15.1	15.7	25	287	11.0	10.0	4	10.1	—	—	2.1
Midhurst ...	18,200	252	13.8	15.5	5	307	16.9	10.1	7	27.8	1	0.05	2.7
Petworth ...	10,110	136	13.5	16.4	10	136	13.5	9.7	2	14.7	—	—	3.3
Worthing ...	41,920	545	13.0	19.9	40	783	18.7	9.0	7	12.8	4	0.10	3.7
<b>All Rural Districts</b>	<b>177,980</b>	<b>2,578</b>	<b>14.5</b>	<b>18.1</b>	<b>175</b>	<b>2,486</b>	<b>14.0</b>	<b>9.2</b>	<b>37</b>	<b>14.4</b>	<b>8</b>	<b>0.04</b>	<b>2.9</b>
<b>Administrative County ...</b>	<b>444,690</b>	<b>6,506</b>	<b>14.6</b>	<b>17.1</b>	<b>444</b>	<b>6,539</b>	<b>14.7</b>	<b>9.7</b>	<b>81</b>	<b>12.4</b>	<b>15</b>	<b>0.03</b>	<b>3.0</b>



# POPULATION: 1960 to 1965

DISTRICT	Home Population						Increase 1960 to 1965		Increase 1964 to 1965	
	30th June, 1960	30th June, 1961	30th June, 1962	30th June, 1963	30th June, 1964	30th June, 1965	No. of persons	Percentage increase	No. of persons	Percentage increase
<b>Urban Districts</b>										
Arundel (M.B.)	2,680	2,630	2,650	2,640	2,670	2,670	—10	—0.4	—	—
Bognor Regis	26,920	27,200	28,070	28,620	29,620	30,590	3,670	13.6	970	3.3
Chichester (M.B.)	19,030	19,480	19,540	19,560	20,280	20,490	1,460	7.7	210	1.0
Crawley	52,150	53,860	55,360	56,790	59,000	60,290	8,140	15.6	1,290	2.2
Horsham	19,950	21,320	21,950	22,430	23,250	23,830	3,880	19.4	580	2.5
Littlehampton	15,630	15,640	15,920	16,220	17,060	17,590	1,960	12.5	530	3.1
Shoreham-by-Sea	16,190	17,240	17,520	17,690	18,050	18,190	2,000	12.4	140	0.8
Southwick	11,740	11,870	11,870	11,990	11,970	11,960	220	1.9	—10	—0.1
Worthing (M.B.)	77,140	79,550	79,750	79,710	80,580	81,100	3,960	5.1	520	0.6
<b>All Urban Districts</b>	<b>241,430</b>	<b>248,790</b>	<b>252,630</b>	<b>255,650</b>	<b>262,480</b>	<b>266,710</b>	<b>25,280</b>	<b>10.5</b>	<b>4,230</b>	<b>1.6</b>
<b>Rural Districts</b>										
Chancetonbury	22,270	22,810	23,070	23,320	24,380	24,900	2,630	11.8	520	2.1
Chichester	48,680	50,110	51,520	53,650	54,890	56,660	7,980	16.4	1,770	3.2
Horsham	22,610	24,040	24,590	25,280	25,860	26,190	3,580	15.8	330	1.3
Midhurst	17,150	17,520	17,890	17,890	18,070	18,200	1,050	6.1	130	0.7
Petworth	9,770	9,690	9,770	9,920	10,100	10,110	340	3.5	10	0.1
Worthing	35,330	37,970	39,000	40,000	40,990	41,920	6,590	18.7	930	2.3
<b>All Rural Districts</b>	<b>155,810</b>	<b>162,140</b>	<b>165,840</b>	<b>170,060</b>	<b>174,290</b>	<b>177,980</b>	<b>22,170</b>	<b>14.2</b>	<b>3,690</b>	<b>2.1</b>
<b>Administrative County</b>	<b>397,240</b>	<b>410,930</b>	<b>418,470</b>	<b>425,710</b>	<b>436,770</b>	<b>444,690</b>	<b>47,450</b>	<b>11.9</b>	<b>7,920</b>	<b>1.8</b>



## Population

The Registrar General's estimate of the mid-year population of the County was 444,690, an increase of 7,920 or 1.8 per cent compared with the previous mid-year estimate. The 1965 increase was entirely due to migration. The following table shows how the population of the County is continuing to increase.

Year	Mid-year population*	Population increase		Year	Mid-year population*	Population increase	
		Persons*	Per cent			Persons*	Per cent
1946	289	22	7.59	1956	359	11	3.07
1947	299	9	3.13	1957	370	12	3.11
1948	310	11	3.69	1958	383	12	3.22
1949	313	2	0.77	1959	390	8	1.92
1950	316	3	1.07	1960	397	7	1.82
1951	318	2	0.57	1961	411	14	3.33
1952	320	2	0.53	1962	418	8	1.80
1953	327	8	2.36	1963	426	7	1.73
1954	339	11	3.30	1964	437	11	2.60
1955	348	9	2.65	1965	445	8	1.81

\*Figures to nearest thousand.

The table on page 12 shows the estimated population variations in the County and in each of the district council areas during the past five years.

## Births

The table on page 10 gives the number of births in the County over the years and compares the local and national rates.

There was a further increase (from 415 in 1964 to 444 in 1965) in the number of illegitimate live births. In the County as a whole, one in 15 of all live births was to an unmarried mother.

Stillbirths registered during the year numbered 96, which was five more than in the previous year. This number gave a stillbirth rate of 14.5 a 1,000 total (live and still) births. In 1964 the rate was 13.7. The provisional rate for England and Wales in 1965 was 15.7.

The number of premature (live and still) births was slightly higher in 1965 than in the previous year, and the percentage of premature births to total (live and still) births rose by 0.3.

1957	1958	1959	1960	1961	1962	1963	1964	1965
7.5	6.6	6.7	6.6	6.2	6.4	6.2	6.4	6.7

The following table gives particulars of all premature births in each county district during 1965.



DISTRICT	3lb. 4oz. or less	Over 3lb. 4oz. up to and including 4lb. 6oz.	Over 4lb. 6oz. up to and including 4lb. 15oz.	Over 4lb. 15oz. up to and including 5lb. 8oz.	Total pre- mature births	Total notified (live and still) births	Percent- age of births weighing 5½lb. or less
<b>Urban Districts</b>							
Arundel (M.B.)	1 (1)	— (—)	— (—)	3 (—)	4 (1)	51	7.8
Bognor Regis ...	7 (1)	4 (—)	5 (—)	22 (3)	38 (4)	451	8.4
Chichester (M.B.)	4 (1)	5 (1)	3 (1)	9 (—)	21 (3)	275	7.6
Crawley ...	13 (6)	13 (3)	13 (—)	32 (1)	71 (10)	1,157	6.1
Horsham ...	3 (—)	3 (—)	6 (1)	18 (3)	30 (4)	461	6.5
Littlehampton ...	3 (—)	3 (1)	5 (—)	14 (1)	25 (2)	275	9.1
Shoreham-by- Sea ...	2 (1)	1 (—)	3 (—)	14 (—)	20 (1)	252	7.9
Southwick ...	— (—)	— (—)	1 (—)	3 (—)	4 (—)	137	2.9
Worthing (M.B.)	7 (5)	14 (2)	17 (—)	23 (1)	61 (8)	970	6.3
<b>Total Urban Districts ...</b>	<b>40 (15)</b>	<b>43 (7)</b>	<b>53 (2)</b>	<b>138 (9)</b>	<b>274 (33)</b>	<b>4,029</b>	<b>6.8</b>
<b>Rural Districts</b>							
Chancetonbury ...	3 (2)	2 (—)	7 (—)	13 (1)	25 (3)	393	6.4
Chichester ...	13 (4)	6 (—)	13 (1)	23 (—)	55 (5)	844	6.5
Horsham ...	3 (1)	5 (2)	4 (2)	14 (1)	26 (6)	369	7.0
Midhurst ...	2 (—)	3 (1)	3 (—)	9 (1)	17 (2)	259	6.6
Petworth ...	1 (1)	2 (—)	1 (—)	4 (—)	8 (1)	152	5.3
Worthing ...	7 (3)	8 (2)	4 (—)	19 (1)	38 (6)	559	6.8
<b>Total Rural Districts ...</b>	<b>29 (11)</b>	<b>26 (5)</b>	<b>32 (3)</b>	<b>82 (4)</b>	<b>169 (23)</b>	<b>2,576</b>	<b>6.6</b>
<b>Administrative County ...</b>	<b>69 (26)</b>	<b>69 (12)</b>	<b>85 (5)</b>	<b>220 (13)</b>	<b>443 (56)</b>	<b>6,605</b>	<b>6.7</b>

*Note:* The figures in brackets relate to premature stillbirths and are included in the totals.

### Infant Mortality

There were 81 deaths of infants under one year of age, giving an infant mortality rate of 12.4 a 1,000 live births; the rate for England and Wales was 19.0. The national and local rates were the lowest ever recorded. Particulars of the various causes of infant deaths are given in the table on page 16.

Of all the infant deaths, 57 took place during the first four weeks of life and this resulted in a neonatal mortality rate of 8.8 a 1,000 live births, compared with 12.6 in 1964 and 13.4 in 1963.

Perinatal mortality (stillbirths and deaths under one week a 1,000 total live and still births) was also lower in 1964. The rate was 21.8 compared with 23.9 in the previous year. The rate for England and Wales in 1964 was 28.2; the national figure for 1965 was not available at the time the Report was prepared.

The trends in the infant mortality rate for the County and for England and Wales over the last ten years are shown on the next page.



### Infant Mortality Rates: 1956 to 1965

	1956	1957	1958	1959	1960	1961	1962	1963	1964	1965
West Sussex	24.3	19.5	18.0	16.8	20.3	18.0	20.1	17.8	16.4	12.4
England & Wales	23.7	23.1	22.6	22.2	21.9	21.6	21.6	20.9	20.0	19.0

### Deaths from All Causes

There was a nine-per-cent increase in the number of deaths from all causes. After adjustment for inward and outward transfers, the total number attributable to the County was 6,539, an increase of 563 over the previous year.

The crude death rate was 14.7 a 1,000 population (13.7 in 1964 and 15.6 in 1963) and the adjusted death rate (i.e. the rate comparable with the correspondingly adjusted rate for any other area and with the crude rate for England and Wales as a whole) was 9.7 a 1,000 population. The provisional national rate was 11.5 a 1,000 population which was 0.2 higher than that for 1964.

The following table gives particulars of the crude and adjusted death rates in urban and rural districts for each of the past seven years and enables comparisons to be made with the annual rates for England and Wales.

AREA	Death rate a 1,000 of the estimated population						
	1959	1960	1961	1962	1963	1964	1965
<b>Urban Districts</b>							
Crude ... ..	14.5	14.6	14.9	14.9	16.0	13.9	15.2
Adjusted ... ..	12.2	12.1	12.8	13.0	11.3	10.0	10.0
<b>Rural Districts</b>							
Crude ... ..	13.7	13.8	14.0	14.2	15.0	13.3	14.0
Adjusted ... ..	11.4	11.7	12.3	12.6	11.1	9.8	9.2
<b>Administrative County</b>							
Crude ... ..	14.2	14.3	14.5	14.6	15.6	13.7	14.7
Adjusted ... ..	11.8	12.2	12.6	12.9	11.2	10.0	9.7
<b>England and Wales</b> ...	11.6	11.5	12.0	11.9	12.2	11.3	11.5

The table on page 11 gives details of the numbers of deaths and the crude and standardised death rates for each county district. The table on page 16 shows the numbers and causes of death in age groups for the County as a whole. The numbers of deaths in each sex and the percentage of total deaths in the various age groups during each of the past two years are shown on page 17.



### Causes of Death at Different Periods of Life

Causes of death	Total all ages		Under 1 year	1-4	5-14	15-44	45-64	65 and over
	M	F						
1. Tuberculosis, respiratory ...	9	6	—	—	—	—	7	8
2. Tuberculosis, other	1	—	—	—	—	—	1	—
3. Syphilitic diseases ...	3	3	—	—	—	—	1	5
4. Diphtheria ...	—	—	—	—	—	—	—	—
5. Whooping cough ...	—	—	—	—	—	—	—	—
6. Meningococcal infections ...	—	—	—	—	—	—	—	—
7. Acute poliomyelitis	—	—	—	—	—	—	—	—
8. Measles ...	1	—	—	1	—	—	—	—
9. Other infective and parasitic diseases ...	5	4	1	1	—	1	3	3
10. Malignant neoplasm, stomach ...	66	66	—	—	—	2	25	105
11. Malignant neoplasm, lung, bronchus ...	272	64	—	—	—	9	117	210
12. Malignant neoplasm, breast ...	—	115	—	—	—	8	47	60
13. Malignant neoplasm, uterus ...	—	48	—	—	—	5	17	26
14. Other malignant and lymphatic neoplasms	331	323	—	—	3	19	163	469
15. Leukaemia, aleukaemia ...	16	17	—	1	3	3	5	21
16. Diabetes ...	9	21	—	—	—	2	1	27
17. Vascular lesions of nervous system ...	384	605	—	—	1	4	101	883
18. Coronary disease, angina ...	793	570	—	—	—	12	251	1,100
19. Hypertension with heart disease ...	24	51	—	—	—	—	4	71
20. Other heart disease ...	329	544	—	—	1	7	47	818
21. Other circulatory disease ...	117	157	—	—	—	4	32	238
22. Influenza ...	2	4	—	—	—	1	—	5
23. Pneumonia ...	204	255	9	3	—	5	36	406
24. Bronchitis ...	187	72	6	1	1	3	43	205
25. Other diseases of respiratory system	40	27	2	1	—	2	16	46
26. Ulcer of stomach and duodenum ...	23	19	—	—	—	2	5	35
27. Gastritis, enteritis and diarrhoea ...	7	21	—	1	—	2	5	20
28. Nephritis and nephrosis ...	22	15	—	—	—	3	10	24
29. Hyperplasia of prostate ...	23	—	—	—	—	—	—	23
30. Pregnancy, child birth, abortion ...	—	1	—	—	—	1	—	—
31. Congenital malformations ...	19	12	19	1	2	4	1	4
32. Other defined and ill-defined diseases...	171	207	39	2	3	17	61	256
33. Motor vehicle accidents ...	43	28	—	1	4	22	19	25
34. All other accidents	42	80	5	1	3	6	14	93
35. Suicide ...	30	30	—	—	—	13	28	19
36. Homicide and operations of war ...	—	1	—	—	—	—	1	—
<b>All Causes ...</b>	<b>3,173</b>	<b>3,366</b>	<b>81</b>	<b>14</b>	<b>21</b>	<b>157</b>	<b>1,061</b>	<b>5,205</b>

### Deaths: Age and Sex Groups

	<i>Under 1 year</i>	<i>1 and under 5</i>	<i>5 and under 15</i>	<i>15 and under 25</i>	<i>25 and under 45</i>	<i>45 and under 65</i>	<i>65 and under 75</i>	<i>75 and over</i>	<i>All ages</i>
Males ...	47 (56)	9 (7)	10 (9)	20 (21)	63 (74)	630 (571)	977 (853)	1,417 (1,198)	3,173 (2,789)
Females ...	34 (52)	5 (6)	11 (7)	11 (7)	63 (73)	431 (414)	735 (699)	2,076 (1,929)	3,366 (3,187)
TOTALS ...	81 (108)	14 (13)	21 (16)	31 (28)	126 (147)	1,061 (985)	1,712 (1,552)	3,493 (3,127)	6,539 (5,976)
Percentages of totals ...	1.2 (1.8)	0.2 (0.2)	0.3 (0.3)	0.5 (0.5)	2.0 (2.4)	16.2 (16.5)	26.2 (26.0)	53.4 (52.3)	100.0 (100.0)

Note: The figures in brackets relate to 1964.

### Tuberculosis Deaths

Year	Respiratory						Non-Respiratory					
	0-	25-	45-	65-	75-	Total	0-	25-	45-	65-	75-	Total
1956	-	6	8	3	4	21	-	1	2	1	-	4
1957	-	9	10	5	4	28	2	-	-	1	1	4
1958	1	5	13	5	4	28	-	1	2	1	1	5
1959	1	1	14	4	5	25	1	-	3	-	-	4
1960	-	2	11	8	5	26	1	1	-	1	1	4
1961	-	3	7	3	4	17	-	-	-	3	1	4
1962	-	2	9	6	7	24	-	-	-	-	-	-
1963	-	1	5	4	4	14	-	-	-	1	1	2
1964	-	-	10	8	2	20	-	1	-	-	1	2
1965	-	-	7	6	2	15	-	-	1	-	-	1

### Cancer Deaths

Site	1959	1960	1961	1962	1963	1964	1965	Seven year average
Stomach ...	103	121	109	120	107	114	132	115
Lung and bronchus	216	189	233	267	243	264	336	250
Breast ...	115	109	116	132	124	137	115	121
Uterus ...	37	44	39	34	40	38	48	40
Other ...	551	500	571	555	589	595	654	558
Leukaemia and aleukaemia	29	35	31	41	30	30	33	33
TOTALS ...	1,051	998	1,099	1,149	1,133	1,178	1,318	1,132



# Deaths from Cancer: 1965

Sites	MALES									FEMALES									Total Males and Females		
	Age Groups									Total Males	Age Groups									Total Females	
	0-	1-	5-	15-	25-	45-	65-	75-	0-		1-	5-	15-	25-	45-	65-	75-				
Stomach ...	— (—)	— (—)	— (—)	— (—)	1 (1)	16 (23)	27 (18)	22 (20)	66 (62)		— (—)	— (—)	— (—)	1 (—)	9 (10)	24 (14)	32 (28)	66 (52)	132 (114)		
Lung, bronchus ...	— (—)	— (—)	— (—)	— (—)	7 (4)	99 (64)	105 (98)	61 (54)	272 (220)		— (—)	— (—)	— (—)	2 (1)	18 (21)	23 (12)	21 (10)	64 (44)	336 (264)		
Breast ...	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)		— (—)	— (—)	— (—)	8 (11)	47 (47)	31 (38)	29 (41)	115 (137)	115 (137)		
Uterus ...	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)		— (—)	— (—)	— (—)	5 (5)	17 (13)	14 (12)	12 (8)	48 (38)	48 (38)		
Other organs ...	— (—)	— (—)	2 (—)	2 (—)	8 (8)	79 (71)	106 (99)	134 (111)	331 (289)		— (1)	— (2)	1 (—)	1 (1)	8 (9)	92 (88)	137 (126)	323 (306)	654 (595)		
Leukaemia, aleukaemia ...	— (—)	1 (—)	1 (—)	1 (—)	1 (2)	2 (6)	2 (7)	8 (4)	16 (19)		— (—)	— (—)	2 (1)	— (—)	1 (1)	3 (4)	5 (5)	6 (—)	17 (11)	33 (30)	
TOTALS ...	— (—)	1 (—)	3 (—)	3 (—)	17 (15)	196 (164)	240 (222)	225 (189)	685 (590)		— (1)	— (2)	3 (1)	1 (1)	25 (27)	178 (174)	189 (169)	237 (213)	633 (588)	1,318 (1,178)	

Note: The figures in brackets relate to 1964.

### Deaths from Diseases of the Circulatory System

<i>Disease</i>	1959	1960	1961	1962	1963	1964	1965
Vascular lesions of the nervous system ... ..	902	910	934	872	1,002	883	989
Coronary disease, angina ... ..	877	1,006	1,003	1,056	1,197	1,164	1,363
Other heart disease* ... ..	1,027	1,051	1,018	1,031	1,134	896	948
Other circulatory disease ... ..	273	226	289	268	295	252	274
TOTALS ... ..	3,079	3,193	3,244	3,227	3,628	3,195	3,574
Percentages of total annual deaths ... ..	55.6	56.2	54.3	52.7	54.8	53.5	54.7

\*Includes hypertension with heart disease.

### Deaths from Diseases of the Respiratory System

<i>Disease</i>	1959	1960	1961	1962	1963	1964	1965	<i>Seven-year average</i>
Influenza ... ..	66	9	32	36	83	3	6	34
Pneumonia ... ..	297	350	423	429	530	431	459	417
Bronchitis ... ..	169	181	263	260	291	230	259	236
Other respiratory diseases ... ..	46	62	57	70	61	56	67	60
TOTALS ... ..	578	602	775	795	965	720	791	747

### Death from Accident and Suicide

	1959	1960	1961	1962	1963	1964	1965	<i>Seven-year average</i>
Motor vehicle accidents ... ..	46	51	37	70	61	60	71	57
Other accidents ... ..	96	95	108	106	113	92	122	105
Suicide ... ..	48	68	50	62	75	59	60	60
TOTALS ... ..	190	214	195	238	249	211	253	221

### Morbidity: First Certificates of Incapacity

<i>National Insurance Office</i>	1962*	1963*	1964*	1965†
Bognor Regis ... ..	3,472	3,695	3,456	3,569
Chichester ... ..	7,685	8,094	7,300	7,713
Crawley ... ..	8,480	9,847	8,957	9,667
Littlehampton ... ..	3,545	3,999	3,574	3,728
Worthing ... ..	11,205	11,504	10,473	10,143
TOTALS ... ..	34,387	37,139	33,760	34,820

\* 52 weeks.

† 51 weeks.



# THE WEATHER AT WORTHING: 1965

1965	Air temperature (deg. F.)						Rainfall		Sunshine	
	Highest max.	Lowest min.	Mean max.	Mean min.	Mean	Difference from average	Total (ins.)	Percentage of average	Total (hrs.)	Percentage of average
January ...	50	28	43.6	36.0	39.8	— 1.1	3.51	119	86.0	121
February ...	47	29	42.3	34.2	38.3	— 2.6	0.30	15	58.9	71
March ...	67	22	47.7	36.9	42.3	— 1.5	2.34	136	137.5	98
April ...	63	37	53.6	41.2	47.4	— 0.6	1.02	57	159.4	85
May ...	69	39	58.6	48.3	53.5	0.0	1.56	98	209.9	91
June ...	73	46	63.4	52.3	57.9	— 1.2	1.75	114	180.6	74
July ...	69	47	65.1	53.9	59.5	— 3.0	3.30	154	154.2	69
August ...	73	50	67.4	56.1	61.7	— 0.9	2.85	125	203.6	93
September ...	67	44	62.3	50.8	56.5	— 2.9	4.81	223	158.0	95
October ...	70	39	60.4	48.8	54.6	+ 1.7	0.66	23	182.9	146
November ...	59	28	48.6	38.3	43.4	— 2.8	3.53	103	100.7	139
December ...	53	23	47.8	37.5	42.7	+ 0.9	5.11	148	74.0	121
Means or extremes	73	22	55.0	44.5	49.7	— 1.3	30.74	112	1,705.7	93

## PART II—EPIDEMIOLOGY

### Notifiable Diseases

The total number of notifications of infectious diseases was 6,792 compared with 8,787 in 1963 (in which year, as in 1965, there was a measles epidemic). In 1964, when there was no measles epidemic, the total number of notifications was 1,618. No case of smallpox or diphtheria occurred during the year and only 41 cases of dysentery were notified, the lowest number for seven years. Despite an increase to 72 in the number of notified cases of food poisoning, there appeared to be an overall decrease in the incidence of food-borne infections.

There was one notification of acute paralytic poliomyelitis, the first since 1960. This was of a vaccinated boy aged 16 whose home address was in Worthing but who was employed in a residential naval establishment in Portsmouth. The likelihood is that the infection occurred outside the County.

### Venereal Disease

The figures show that there was a further increase in 1965 in the number of persons attending venereal disease clinics for syphilis and gonorrhoea but it must be borne in mind that approximately one third of the patients attending for other conditions are found not to require treatment.

<i>Year</i>	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other</i>
1961	7	52	285
1962	10	60	296
1963	1	62	291
1964	6	100	435
1965	15	103	441

The Report for 1963 drew attention to the increasingly serious national problem of venereal disease; these figures emphasise that the problem is not being contained. It is mainly one of health education which must persist in trying to persuade people not to expose themselves to the dangers of contracting infection. The numbers of patients diagnosed during 1965 as suffering from venereal disease are shown in the following table.

<i>Hospital</i>	<i>Syphilis</i>	<i>Gonorrhoea</i>	<i>Other</i>
St. Richard's Hospital, Chichester ...	1	20	104
Worthing Hospital ... ..	9	37	168
Royal Surrey County Hospital, Guildford ... ..	—	—	—
St. Helier Hospital, Carshalton ...	—	—	—
St. Mary's Hospital, Portsmouth ...	1	7	31
Redhill General Hospital ... ..	—	2	12
Royal Sussex County Hospital, Brighton ... ..	4	37	126
TOTALS ... ..	15	103	441



# NOTIFICATION OF INFECTIOUS DISEASES: 1965

COUNTY DISTRICT	Acute encephalitis		Acute pneumonia	Acute polio-myelitis		Diphtheria	Dysentery	Erysipelas	Food poisoning	Measles	Meningococcal infection	Ophthalmia neonatorum	Paratyphoid fevers	Puerperal pyrexia	Rubella*	Scarlet fever	Whooping cough	TOTAL
	Infec-tive	Post Infec-tious		Para-lytic	Non Para-lytic													
Urban Districts	—	—	—	—	—	—	—	—	—	27	—	—	—	—	—	1	—	28
Arundel M.B.	—	—	—	—	—	—	12	—	3	204	—	—	2	—	—	—	—	221
Bognor Regis	—	—	—	—	—	—	—	1	1	123	—	1	—	6	—	1	3	136
Chichester M.B.	—	—	—	—	—	—	1	—	—	1,219	—	1	—	28	—	13	1	1,264
Crawley	—	—	—	—	—	—	2	—	—	414	—	—	—	11	—	8	2	440
Horsham	—	—	2	—	—	—	—	1	—	412	—	—	—	—	—	6	—	433
Littlehampton	—	1	—	—	—	—	1	2	1	356	1	—	1	21	—	6	—	389
Shoreham-by-Sea	—	—	1	—	—	—	—	—	—	195	—	—	—	—	—	3	—	199
Southwick	—	—	—	—	—	—	—	1	—	759	—	—	—	1	—	7	—	796
Worthing M.B.	—	—	3	1	—	—	9	1	—	—	—	—	—	—	—	—	15	—
Total Urban Districts	—	1	6	1	—	—	25	8	6	3,709	1	2	3	67	—	45	32	3,906
Rural Districts	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Chancetonbury	—	—	2	—	—	—	6	1	6	404	—	—	—	—	—	9	6	434
Chichester	—	—	3	—	—	—	2	3	11	421	—	—	—	—	—	11	20	471
Horsham	—	—	4	—	—	—	6	1	—	404	—	—	—	2	—	15	—	432
Midhurst	—	—	2	—	—	—	—	—	44	309	—	—	—	—	—	2	1	358
Petworth	—	—	2	—	—	—	—	—	4	124	—	—	—	—	—	—	2	132
Worthing	—	—	1	—	—	—	2	2	1	646	—	—	—	17	381	4	5	1,059
Total Rural Districts	—	—	14	—	—	—	16	7	66	2,308	—	—	—	19	381	41	34	2,886
Total Administrative County	—	1	20	1	—	—	41	15	72	6,017	1	2	3	86	381	86	66	6,792
Total Administrative County 1964	—	—	27	—	—	—	252	10	7	909	4	1	11	111	15	75	196	1,618

\*Notifiable only in Worthing R.D.



# NOTIFICATION OF INFECTIOUS DISEASES 1959 to 1965

Disease	1959	1960	1961	1962	1963	1964	1965	Seven-year average
Acute encephalitis								
(a) infective ...	1	1	—	2	—	—	—	0.6
(b) post-infectious ...	—	2	—	—	2	—	1	0.7
Acute pneumonia ...	77	41	72	46	58	27	20	38.7
Acute poliomyelitis								
(a) paralytic ...	3	2	—	—	—	—	1	0.9
(b) non-paralytic ...	7	—	1	—	—	—	—	1.1
Diphtheria ...	—	—	2	—	—	—	—	0.3
Dysentery ...	197	207	52	126	194	252	41	152.7
Erysipelas ...	17	19	14	7	11	10	15	13.3
Food poisoning ...	43	35	29	28	12	7	72	32.3
Measles ...	5,345	574	7,137	409	8,164	909	6,017	4,079.3
Meningococcal infection ...	2	1	2	3	2	4	1	2.1
Ophthalmia neonatorum ...	2	—	—	2	1	1	2	1.1
Paratyphoid fevers ...	13	2	2	—	3	11	3	4.9
Puerperal pyrexia ...	112	90	78	72	120	111	86	95.6
*Rubella ...	—	—	22	382	57	15	381	171.4†
Scarlet fever ...	275	240	93	53	74	75	86	128.0
Whooping cough ...	198	645	297	43	89	196	66	219.1
Total ...	6,292	1,859	7,801	1,173	8,787	1,618	6,792	4,903
Attack rate a 1,000 living ...	16.1	4.7	19.0	2.8	20.6	3.7	15.3	11.7

\*A notifiable disease in Worthing R.D. since 1st May, 1961.

†Five-year average,

## Food Poisoning

Salmonellosis in cattle is not a rare condition and any infection in cattle to which man is susceptible can be a danger if the channel of infection from the farm to the public is unobstructed.

This was illustrated by an outbreak\* of food poisoning in the early part of the year which proved to be milk-borne and to have originated in a calf-rearing unit on a farm which also supplied unpasteurised milk to the public. The organism responsible was *salmonella typhimurium* and the human cases (of which there were over 50) ceased when the milk was pasteurised.

With raw milk as the vehicle of infection the chain of events may be relatively easy to follow. However, one infected animal slaughtered in an abattoir can give rise to widespread dissemination of *salmonella* by way of the slaughterers' and butchers' knives and the working surfaces upon which the meat is dressed. Contamination can then pass to cooked meats, sausages, and other products which are not sterilised before being eaten. This can also happen in the domestic kitchen.

\*Recorded by Dr. V. P. Geoghegan, Med. Offr. of Hlth., Midhurst R.D. THE MEDICAL OFFICER CXIV. 5.



## **Vaccination and Immunisation**

### **Electronic Data Processing**

Reference was made in previous Reports to the use being made of the computer to process vaccination and immunisation records and to the introduction of an appointment system for patients to attend either their general practitioners or the Council's clinics.

At the beginning of 1965, the immunisation records of 125 general practitioners were on the computer and appointments were being made for their patients; the records and attendances at 11 County clinics were being similarly managed. By the end of the year, all County clinics and the patients of all but one of the remaining doctors in the County, with the exception of those who practise in the Borough of Worthing (which has delegated powers), had been included in the scheme.

In introducing electronic data processing to this important part of the Department's work, the feature which from the outset necessitated the most careful organisation and delicate handling was the transfer to the computer of the manually-kept records. This operation has taken three years to complete and has evoked from the staff the very best qualities of patience, tenacity and skill. The outcome of all their efforts is recorded in the next section of the Report which draws attention to impressive increases in the infectious disease immunity indices.

From the beginning, the routine operations in the Department were in the immediate charge of a clerk who had three assistants. For a period of six months when the speed of take-on to the computer was increased, three additional temporary clerks were employed. They gave general assistance in the office and, in order to reduce delay in the transmission of records to County Hall, they were also available to visit doctors' surgeries to help with the scanning of practice immunisation records; most doctors had from a half to one-and-a-half days' clerical assistance for this purpose. Direct personal contact between the clerk in charge of the scheme and the doctors' secretaries was an important factor in overcoming difficulties, most of which arose from errors in the doctors' records or from courses of immunisation which had not been completed. Within a few months of the practice or County clinic records being transferred to the computer, the appointment system worked smoothly and with the minimum of clerical effort. Although it was sometimes necessary for a departmental medical officer either to visit a family doctor or to discuss a point of professional detail with him on the telephone, experience has shown that it is neither necessary nor advantageous to attempt to give the practitioners throughout the County an intimate understanding of the technical details involved in the appoint-



ment system. What is important is that the clerical staff concerned should have the experience to decide instantly on the telephone the nature of any problem and be able to deal with it efficiently.

In order to promote the smooth transition to the new system and to ensure that bottlenecks did not occur, a progress statement was completed each week. The table shows an extract of the statement for five different weeks at quarterly intervals.

	1.1.65	1.4.65	1.7.65	1.10.65	31.12.65
<i>County Clinics:</i>					
Number on computer ... ..	11	13	23	29	32
<i>Family Doctors:</i>					
Number on computer ... ..	125	139	170	187	190
Number to be offered computer system ... ..	48	24	1	1	1
Number requiring clerical assistance ... ..	11	8	8	—	—
Number of practice records being prepared ... ..	5	18	10	3	—
TOTALS ... ..	189	189	189	191	191

The chief characteristic of the computer is its efficiency. One of the primary source documents for entry into the system is the birth notification card. This is received for all births and, since only 0.6 per cent of parents have declined to give consent for their children to be immunised in the last two years, the computer makes appointments for virtually every child. This fact is of the utmost importance during the period when records are being taken on because of the limited availability of clinical facilities. Whilst the time of general practitioners is usually sufficient for current work, it does not often permit a backlog (which may sometimes be considerable) to be dealt with quickly. During the take-on period it is consequently essential to ensure that the flow of work is sensibly regulated and that proper regard is paid to such matters as the availability of professional time and the size of doctors' surgeries and waiting rooms. This requires the exercise of intelligence and sound judgement on the part of the staff in arranging for the computer (which always complies precisely with its instructions) to make such appointments as will match the doctors' available resources.

Because of the arrears of immunisations not done by the clinics and family doctors, about 34 appointments were made by the computer during the take-on period for every 100 records processed. This is illustrated in the following table which also shows that, in time, the number of appointments made falls appreciably despite a continuing increase in the number of records held in computer storage.



Practices	On 5th November, 1964			On 3rd December, 1965			
	Records on computer	Appointments made		Records on computer	% increase col. (5) on col. (2)	Appointments made	
		Number	% of col. (2)			Number	% of col. (5)
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1	213	149	70.4	510	139.4	115	22.5
2	104	62	59.6	243	133.7	37	15.2
3	187	98	52.4	348	86.1	73	21.0
4	559	183	32.7	1,160	107.5	177	15.3
5	507	121	23.9	675	33.1	116	17.2
6	196	40	20.4	200	2.0	28	14.0
<i>Clinics</i>							
1	674	174	25.8	756	12.2	108	14.3
2	113	27	23.9	237	109.7	24	10.1
TOTALS	2,553	854	33.5	4,129	61.8	678	18.7

### Immunity Indices

The results obtained by the introduction of an efficient appointment system are evident from the following table which shows the improved local performance and compares local rates where possible with those for England and Wales. It will be seen that there was a rise in the local indices for poliomyelitis and smallpox between 1963 and 1964 and that in 1965 there was a marked rise in all four figures.

Area	Children born in 1964 and vaccinated by 31st December, 1965			Children under two years vaccinated in 1965 as percentage of 1964 births
	Diphtheria (per cent)	Whooping cough (per cent)	Poliomyelitis (per cent)	Smallpox (per cent)
West Sussex ... England & Wales	88 *	88 *	87 *	76 *
	Children born in 1963 and vaccinated by 31st December, 1964			Children vaccinated in 1964 as percentage of 1963 births
West Sussex ... England & Wales	71 69	71 68	67 60	57 32
	Children born in 1962 and vaccinated by 31st December, 1963			Children vaccinated in 1963 as percentage of 1962 births
West Sussex ... England & Wales	71 65	71 64	59 53	28 *

\*Not available.

The next table compares the 1965 immunity indices relating to the Borough of Worthing (where the computer system was not used) with those for the remainder of the County.

Area	Children born in 1964 and vaccinated by 31st December, 1965			Children under two years vaccinated in 1965 as percentage of 1964 births
	Diphtheria (per cent)	Whooping cough (per cent)	Polio-myelitis (per cent)	Smallpox (per cent)
Worthing ...	76	75	71	36
Remainder of West Sussex ...	90	90	90	83
West Sussex ...	88	88	87	76

The next three tables give details of the various immunisation procedures carried out by family doctors and at County clinics during 1965. Particulars of comparable figures for 1964 are also shown.

#### Diphtheria, Whooping Cough and Tetanus

Type of Injection	By County Medical Staff		By General Practitioners		TOTALS	
	Primary course	Reinforcing injections	Primary course	Reinforcing injections	Primary course	Reinforcing injections
Triple antigen ...	1,813 (1,714)	1,597 (1,120)	5,088 (4,032)	4,214 (3,132)	6,901 (5,746)	5,811 (4,252)
Diphtheria	— (2)	113 (30)	— (1)	3 (14)	— (3)	116 (44)
Diphtheria and whooping cough	— (—)	— (—)	— (—)	2 (1)	— (—)	2 (1)
Diphtheria and tetanus	234 (372)	2,126 (1,352)	451 (246)	6,690 (3,001)	685 (618)	8,816 (4,353)
Quadruple vaccine ...	— (—)	— (—)	102 (59)	73 (14)	102 (59)	73 (14)
TOTALS ..	2,047 (2,088)	3,836 (2,502)	5,641 (4,338)	10,982 (6,162)	7,688 (6,426)	14,818 (8,664)
Percentage variation during 1965	—2	+53	+30	+78	+20	+71

Note: The figures in brackets relate to 1964.



### Poliomyelitis

Age Group	Primary Vaccination (3 doses Sabin oral; 2 injections Salk; or 3 injections quadruple)		Reinforcing Vaccination (4th dose Sabin oral; 3rd or 4th injection Salk; or 4th injection quadruple)	
	By County Medical Staff	By General Practitioners	By County Medical Staff	By General Practitioners
Children born 1965 ... ..	325	1,277	—	—
Children born 1964 ... ..	1,343	3,219	8	47
Children born 1963 ... ..	173	323	1	53
Children born 1962 ... ..	72	192	1	24
Children born 1958-61 ...	167	473	1,428	4,478
Others under 16	61	137	177	478
TOTALS ...	2,141 (2,173)	5,721 (5,079)	1,615 (1,482)	5,080 (3,086)
Percentage variation during 1965 ...	—1	+11	+9	+65

*Note:* The figures in brackets relate to 1964.

### Smallpox

Age Group	Number Vaccinated			Number Re-vaccinated		
	By County Medical Staff	By General Practi- tioners	TOTALS	By County Medical Staff	By General Practi- tioners	TOTALS
Under 1 year	9 (112)	123 (298)	132 (410)	— (—)	— (—)	— (—)
1 year ...	1,304 (780)	3,582 (2,432)	4,886 (3,212)	— (—)	1 (7)	1 (7)
2-4 years ...	227 (77)	646 (331)	873 (408)	2 (2)	31 (130)	33 (132)
5-15 years	16 (11)	117 (292)	133 (303)	121 (27)	813 (1,712)	934 (1,739)
TOTALS ...	1,556 (980)	4,468 (3,353)	6,024 (4,333)	123 (29)	845 (1,849)	968 (1,878)
Percentage variation during 1965	+59	+33	+39	+324	—54	—48

*Note:* The figures in brackets relate to 1964.



## The Worthing Dispute

In Worthing the vaccination and immunisation functions of the County Council have been delegated to the Borough Council under the provisions of Part III of the *Local Government Act, 1958* and reference was made in the last Report to the Borough's decision not to allow the new developments to be used for the benefit of children living in Worthing.

Discussions were subsequently entered into with representatives of the Borough Council with a view to this decision being reconsidered and at a meeting of the Borough Health and Welfare Committee held on 9th March, 1965

The Chairman reported upon a meeting held at County Hall on 23rd February, 1965 to discuss the management of the Borough's vaccination and immunisation procedures by the County Council's computer. The meeting had been held at the request of the County Council following this Committee's decision on 8th December, 1964 that the offer of the County Council to transfer these procedures to the computer be declined at the present time.

After hearing the report and a further report of the Chairman on further investigations which he had made following the meeting on 23rd February, 1965, the Committee were not satisfied that any case had been made out for the suggested transfer or that any benefit would derive therefrom. It was accordingly

RESOLVED, That the previous decision be adhered to.

This decision was reported to the Nursing Sub-Committee of the County Health Committee on 4th June, 1965. At that meeting the Sub-Committee also gave consideration to the Scheme of Delegation made under section 46 of the *Local Government Act, 1958*, which was approved by the Minister of Health on 17th January, 1961, under which the Borough Council were authorised to exercise on behalf of the County Council for and in respect of the Borough some of the County Council's health functions, including those contained in section 26 of the *National Health Service Act, 1946*. Article 6 of that scheme provides that

The Council (*i.e. the Borough Council*) shall observe any regulations of the County Council (including any requirements relating to scales and standards designed to secure reasonable uniformity) which apply to the services comprised in the delegated functions. The County Council, before making any such regulations, shall consult the Council and give them an opportunity of considering and commenting on the draft. Where the Council wish for a variation of the regulations in relation to the delegated functions and the County Council are unwilling to agree, the Council may refer the matter for determination by the Minister.

The Nursing Sub-Committee thereupon

RECOMMENDED — That, in pursuance of article 6 of the Worthing Borough Health and Welfare Services Delegation Scheme, 1959, a regulation be made requiring that in order to secure reasonable standards of uniformity in the performance of the County Council's duties under section 26 of the *National Health Service Act, 1946* electronic data processing methods shall be used throughout the area of the administrative County, including the Borough of Worthing, to the extent that the County Medical Officer of Health and the County Treasurer shall consider desirable.



This recommendation was approved by the County Health Committee at a meeting held on 23rd July, 1965 and, with the approval of the County Council conferred earlier the same day, the Committee also made an appropriate regulation to come into operation on 1st October, 1965 under article 6 of the Scheme of Delegation. In order to give the Borough Council an opportunity of reconsidering the matter in the hope that they might see their way clear to reverse their previous decisions, the Committee decided that the regulation should not however be implemented immediately on 1st October, 1965 so far as the Borough was concerned.

These decisions were reported to a meeting of the Borough Health and Welfare Committee held on 14th September, 1965 when the Town Clerk was asked to report on the legal position to the next meeting and the Committee declined a further invitation extended to members and officers to visit County Hall to see a demonstration of the computer processing vaccination and immunisation records. On 9th November, 1965 the Town Clerk reported on the legal position regarding the article 6 regulation and the Committee authorised him to obtain counsel's opinion.

The County Health Executive Sub-Committee (to whom this matter had been referred, with power to act) reconsidered this matter on 7th December, 1965 and, having regard to all the circumstances, recorded the opinion that there were no reasonable grounds for delaying the extension of the arrangements to Worthing any longer and resolved that the article 6 regulation be implemented in respect of the Borough on 1st January, 1966.

By letter dated 9th December, 1965 the Clerk of the County Council sought an assurance from the Town Clerk that the records in respect of the Borough would be made available from 1st January, 1966. A reply from the Town Clerk, received on 3rd January, 1966, stated that the records would be retained by the Borough Council until the position had been clarified.

At the time the Report was compiled, the County Council had approved a recommendation of the County Health Committee

That, having regard to the failure of the Worthing Borough Council to comply with the regulations relating to the mechanisation of vaccination and immunisation records made under article 6 of the Worthing Borough Health and Welfare Services Delegation Scheme, 1959, the matter be referred to the Minister of Health, with a view to an order being made under the provisions of section 49 of the *Local Government Act, 1958* declaring the Borough Council to be in default and to direct compliance with the article 6 regulation.

### **Computer Conference**

With the co-operation of the County Treasurer, a conference on the use of computers in health administration was held at County Hall on 29th October, 1965. Senior officers from more than 40 authorities



attended to learn more about the ways in which a computer is being used to manage the more complicated records and procedures of a health department.

The amount of time spent by senior staff of the Department and of the County Treasurer's Department in correspondence with other authorities about computer developments has been greatly reduced by the holding of these occasional conferences; they have proved to be very worthwhile.

### **Investigation of Measles Vaccines**

In the last Report reference was made to the field trial of measles vaccines which had been conducted by the Measles Vaccines Committee of the Medical Research Council.

In July, 1965 the Director of the trial offered measles vaccination to those children who were allocated to the unvaccinated group or who had failed to attend during 1964. As a result, 66 children completed a course of killed and live vaccine during the autumn of 1965.

These children were followed-up during the third week after receiving live vaccine and they will be included in the long-term follow-up envisaged for all children who were registered for the investigation in 1964.

### **Anthrax Vaccination**

By Circular 19/65 dated 6th September, 1965 the Ministry of Health advised local health authorities that vaccination against anthrax is desirable for workers exposed to special risks of contracting the disease.

After consultation with the West Sussex Local Medical Committee, it was ascertained that general practitioners would wish to give anthrax protection to their own patients where there was no factory medical officer. It was also agreed that when for any reason it was not possible for a patient to be vaccinated by his doctor or the factory medical officer, the vaccination would be carried out by the medical staff of the Department.

### **Cancer and Leukaemia Survey**

The study of childhood malignancies which has been conducted by Dr. Alice Stewart of the Department of Social Medicine, Oxford University, since 1962, continued during the year when a further eight investigations were carried out.



## PART III—CARE OF MOTHERS AND YOUNG CHILDREN

### Ante-natal and Post-natal Care

At the end of the year the Council were providing ante-natal clinics at six centres throughout the County. Details of attendances during the last two years are shown below.

	1964	1965
Number of ante-natal clinics provided at end of year	9	8
Number of sessions held a month ... ..	34	30
Number of women in attendance:		
(i) for ante-natal examination ... ..	1,406	1,127
(ii) for post-natal examination ... ..	326	284

Compared with the previous year, there was a decrease in 1965 of 20 per cent in the number of women in attendance at the Council's ante-natal clinics. This was due mainly to the discontinuance of sessions at Littlehampton and to the fact that general practitioners are providing more ante-natal care.

### Child Welfare Centres

The number of child welfare centres was increased by two (at Part-ridge Green and Westbourne). At the end of the year, 50 centres were provided throughout the County. A list of the areas in which these clinics operated was given on page 48 of the last Report.

Although the total number of children who attended clinics showed a decrease (of about 2 per cent compared with an increase of 18 per cent in 1964), the number of children born in 1965 who attended for the first time remained high (70 per cent of the total live births compared with 72 per cent in 1964). The special clinics held in Crawley, at which the medical staff examined difficult cases, were continued and the co-operation of general practitioners in referring children to these clinics was greatly appreciated.

The numbers of children of various ages who attended the clinics during 1964 and 1965 are given below.

1964				1965			
<i>Born in</i>				<i>Born in</i>			
1964	...	...	4,678	1965	...	...	4,581
1963	...	...	4,271	1964	...	...	4,139
1959-1962	...	...	4,153	1960-1963	...	...	4,141
TOTAL	...		<u>13,102</u>	TOTAL	...		<u>12,861</u>

## Weighing Centres

The numbers of children who attended weighing centres during 1964 and 1965 are given below.

1964				1965			
<i>Born in</i>				<i>Born in</i>			
1964	...	...	547	1965	...	...	533
1963	...	...	519	1964	...	...	513
1959-1962	...	...	628	1960-1963	...	...	684
TOTAL			1,694	TOTAL			1,730

Health visitors give advice at these centres about infant care to groups which are too small to justify the regular attendance of a medical officer.

## Family Planning Clinics

Family planning clinics in the County are listed in the next table which also shows the numbers of new cases and total attendances. Ten years ago new cases and total attendances were 373 and 1,022, and five years ago 886 and 3,452; there has therefore been a steady growth of the service provided over the years. The clinic at Shoreham-by-Sea was provided by the Council; the others were run by the Family Planning Association.

<i>Clinic</i>			<i>New cases</i>		<i>Total attendances</i>	
			1964	1965	1964	1965
Bognor Regis	...	...	86	168	764	897
Chichester	...	...	90	192	714	734
Crawley	...	...	488	482	1,253	1,163
Horsham	...	...	212	273	1,496	1,826
Midhurst	...	...	34	34	228	225
Shoreham-by-Sea	...	...	28	33	98	116
*Worthing	...	...	—	336	—	1,347
TOTALS			938	1,518	4,553	6,308

\* Sessions commenced in 1965.

## Mothercraft and Relaxation Classes

Mothercraft and relaxation classes for expectant mothers and classes in post-natal exercises were held at the nine centres shown in the following table which also gives particulars of the numbers of attendances made in 1964 and 1965. Physiotherapists took charge of some of the classes; others were run by midwives or health visitors.



Area	Sessions held	Total number of attendances	
		1964	1965
Bognor Regis ... ..	Weekly	413	323
Chichester ... ..	Weekly	1,007	1,562
Crawley ... ..	Weekly	1,043	1,032
Horsham ... ..	Weekly	1,725	1,322
Langley Green ... ..	Weekly	—	135
Midhurst ... ..	Fortnightly	113	102
Roffey ... ..	Weekly	184	196
*Selsey ... ..	*	24	83
Shoreham-by-Sea ... ..	Weekly	228	277
Worthing ... ..	Weekly	342	—†
TOTALS ... ..	...	5,079	5,032

\*Classes held when required. †No classes held in 1965.

## Welfare Foods

At the request of the Ministry of Health, the Council continued to arrange the distribution of welfare foods to expectant and nursing mothers and children under five years of age. A total of 93 distribution centres were in operation at the end of the year; 12 of these were main centres situated in the towns and 81 were sub-centres at clinics, private houses and local stores.

The following table shows the quantities of welfare foods issued to beneficiaries during the past five years.

Year	National dried milk (tins)	Cod liver oil (bottles)	Vitamins A and D tablets (packets)	Orange juice (bottles)
1961	57,553 (1,106)	15,982* (307)	14,522* (279)	130,747* (2,514)
1962	58,030 (1,116)	7,358 (141)	9,269 (178)	83,050 (1,596)
1963	59,678 (1,147)	7,117 (137)	8,410 (161)	92,363 (1,776)
1964	59,512 (1,144)	6,425 (123)	7,925 (152)	103,486 (1,990)
1965	56,686 (1,090)	6,616 (126)	6,965 (134)	110,390 (2,111)

\*Withdrawal of subsidy from 1st June, 1961.

Note: The figures in brackets indicate average weekly distribution.

The Women's Voluntary Service were responsible for the distribution of the foods at all main centres (eight of which are on their premises) and at 26 sub-centres. The value of the sales was £15,726.



## Proprietary Foods and Medicaments

Large quantities of infant proprietary foods and medicaments were sold at infant welfare clinics throughout the County at cost price plus a ten-per-cent handling charge. The cost of purchases during 1965 was £17,714 compared with £15,561 in the previous year.

## Care of the Unmarried Mother and her Child

Financial aid was given by the Council towards the funds of the Chichester Diocesan Moral Welfare Association and the Southwark Catholic Children's Society who undertake the care of unmarried mothers in West Sussex through their own officers working in co-operation with the County nursing staff. A small financial contribution was also made in support of the work of the National Council for the Unmarried Mother and her Child.

In 1965, 52 cases (the same number as in 1964) were referred to the Department for financial assistance towards the maintenance of unmarried mothers at mother and baby homes.

Details of the new applications dealt with in the past two years by the Chichester Diocesan Moral Welfare Association are given in the table on page 36.

## Care of Premature Infants

The statistics relating to premature infants in the County during the last two years are given below.

	1964	1965
(1) Total number of premature live births during year ...	363	387
(2) Number of premature infants born at home or nursing home during year ...	47	42
Number of these:		
(a) transferred to hospital ...	12	12
(b) died at home during first 24 hours ...	1	—
(c) died at home between 2nd and 28th day ...	—	—
(d) survived at end of one month ...	39	37
Of the infants transferred to hospital in 1965, 5 died on or before 28th day; the comparable figure for 1964 was 7.		
(3) Number born in hospital or maternity home (regional hospital board) ...	316	345
Died on or before 28th day ...	47	29

In West Sussex 6.7 per cent of the notified live and stillbirths were premature. Although 92.6 per cent of the premature babies were delivered in hospital, facilities were readily available in the County for those born at home to be transferred to hospital if necessary. Of the 387 premature babies born in the County during the year, 34 (8.8 per cent) died before the 28th day of life but all the 30 premature babies who were born and nursed at home survived the first 28 days.



# THE UNMARRIED MOTHER

Particulars of 295 new applications dealt with in 1965 by

The Chichester Diocesan Moral Welfare Association

<i>Source of Referral</i>		<i>Marital Status</i>		<i>Association's Branch Office</i>	
Clergy	...	Single	...	Bognor Regis	...
Doctors	...	Married	...	Chichester	...
Health visitors, nurses and clinics	...	Widowed	...	Crawley	...
Hospital almoners...	...	Divorced	...	Horsham	...
National Council for the Unmarried	...	Separated	...	Worthing	...
Mother	...			Hove	...
Social agencies	...			Lewes	...
Other sources	...				...
<i>Home Conditions</i>		<i>Education</i>		<i>Age</i>	
Apparently stable home	...	Secondary modern	...	15 years and under	...
Broken home	...	Grammar	...	16 years	...
Step parents	...	Comprehensive	...	17 years	...
Only one parent	...	Technical	...	18 years	...
Adopted	...	University	...	19 years	...
Away from home	...	Special school	...	20 years	...
Not known...	...	Private or not recorded	...	21 years and over	...
				Not recorded	...

Note: The figures in brackets relate to 1964.



## Congenital Malformations

Congenital malformations observed at birth by the doctor or midwife who attended the delivery were notified on the birth notification card. In 1965, there were 123 such notifications (of which 13 related to still-births) and these represented 147 varieties of congenital malformation.

## Report of the Chief Dental Officer

The figures given on page 38 include, for comparison, those relating to 1964. As expected, fewer mothers and pre-school children were referred than in 1964.

In the children under 5, each required, on average, 0.7 extractions and 2.5 fillings. The extraction figure remained the same and the filling figure was 0.7 less than last year. The D.M.F. (decayed, missing and filled teeth per child) showed, as in previous years, a gradual increase through the age groups from 2.3 in the 1 to 2 year olds to 3.6 in the 4 to 5 year olds. These figures are comparable with last year's and are again slightly below the national average.

## Midwifery

The Council continued to provide a domiciliary midwifery service throughout the County under the provisions of Section 23 of the *National Health Service Act, 1946*. In the urban areas, full-time midwives were employed but in rural areas the nursing staff had dual appointments as home nurse/midwife or combined appointments as health visitor/home nurse/midwife.

The numbers of midwives practising in the County at the end of 1964 and 1965 are given below.

	1964	1965
(a) Employed by the County Council:		
(i) Whole-time ... ..	24	25
(ii) Part-time ... ..	54	54
(iii) Total whole-time equivalent ... ..	43	45
(b) In private practice ... ..	10	10
(c) Employed by Hospital Management Committees	101	110

Thirteen midwives employed by the Council (8 fewer than in 1964) were sent on refresher courses (in Southampton, Oxford and Hastings) in order to keep them up-to-date in modern techniques.

The arrangements with Crawley Hospital for pupils to be attached to Crawley and Horsham midwives continued and ten midwives in the area acted as teachers.

The total number of pupils who completed their training in 1965 was 25 and a further four were in training at the end of the year.

The number of births, adjusted by inward and outward transfers, notified under section 203 of the *Public Health Act, 1936* totalled 6,605, an increase of 43 over the preceding year; of these, 5,134 or 77.7 per cent occurred in hospital. The percentage of hospital confinements in each county district is shown on page 39.



# DENTAL TREATMENT PROVIDED FOR EXPECTANT AND NURSING MOTHERS AND YOUNG CHILDREN

(a) Numbers provided with dental care

	Examined	Needing treatment	Treatment commenced	Made dentally fit
Expectant and nursing mothers	41 (46)	40 (52)	38 (45)	32 (43)
Children under five	450 (474)	350 (297)	307 (260)	255 (252)

(b) Forms of dental treatment provided

	Extractions	Anaesthetics		Fillings	Scaling and/or gum treatment	Silver nitrate treatment	Inlays	Crowns	X-rays	Dentures provided		Dentures repaired
		Local	General							Complete	Partial	
Expectant and nursing mothers	48 (109)	36 (35)	3 (11)	81 (104)	9 (41)	— (1)	— (6)	— (—)	7 (16)	2 (11)	6 (9)	4 (1)
Children under five	178 (160)	54 (32)	68 (56)	623 (798)	8 (9)	71 (37)	— (—)	— (—)	3 (1)	— (—)	— (—)	— (—)

Note: The figures in brackets relate to 1964.

### Hospital Confinements

<i>Urban Districts</i>	<i>Per cent</i>		<i>Rural Districts</i>	<i>Per cent</i>	
	1964	1965		1964	1965
Arundel M.B. ... ..	82	82	Chanctonbury ... ..	74	74
Bognor Regis ... ..	64	63	Chichester ... ..	74	75
Chichester M.B. ... ..	66	72	Horsham ... ..	82	85
Crawley ... ..	77	81	Midhurst ... ..	80	80
Horsham ... ..	76	78	Petworth ... ..	77	88
Littlehampton ... ..	72	75	Worthing ... ..	74	75
Shoreham-by-Sea ... ..	76	77			
Southwick ... ..	81	78			
Worthing M.B. ... ..	78	83			

The next table gives the numbers of domiciliary and hospital confinements in the County during the last six years and shows the progressive shift which has taken place from domiciliary to hospital confinement. This has been made possible by the increasing application of the 48-hour admission and early discharge schemes which were described in detail in the last Report.

<i>Year</i>	<i>Domiciliary</i>	<i>Institutional</i>	<i>Totals</i>
1960	2,307 (39.3)	3,565 (60.7)	5,872
1961	2,254 (37.6)	3,744 (62.4)	5,998
1962	2,055 (32.8)	4,207 (67.2)	6,262
1963	1,710 (26.3)	4,781 (73.7)	6,491
1964	1,630 (24.8)	4,932 (75.2)	6,562
1965	1,471 (22.3)	5,134 (77.7)	6,605

*Note:* The figures in brackets denote the percentage of the total number of births in that year.

Details of the number of domiciliary confinements attended by County Council midwives during 1965 are given below.

<i>Doctor not booked</i>	<i>Doctor booked</i>	<i>Total</i>
18 (22)	1,442 (1,575)	1,460 (1,597)

*Note:* The figures in brackets relate to 1964.

The number of mothers who did not book a doctor for their home confinement was only 18, four fewer than in 1964. In 1965, 277 pregnant women who were booked for a domiciliary confinement had to be delivered in hospital. It is in this group that perinatal mortality is high and the aim is to reduce this number as much as possible by proper case selection when a booking is first made.



Medical aid was summoned by domiciliary midwives on 240 occasions, five fewer than in 1964. In all but five cases the medical practitioner had already arranged to provide the patient with maternity medical services under the National Health Service.

There were 86 notifications of puerperal pyrexia, 25 fewer than in the previous year. Two of the cases occurred in women confined at home and all the others in cases confined in hospital.

### **Short-stay Confinements in Hospital**

Reference was made in the last Report to the proposed introduction of experimental arrangements with the maternity unit at Crawley Hospital whereby domiciliary midwives could accompany their patients into hospital to deliver them. The scheme commenced in January, 1965 after legal indemnities had been exchanged between the Regional Hospital Board and the Council.

The maternity unit consists of a general practitioners' unit and a consultants' unit, each of 30 beds, on adjacent floors in the hospital. In this scheme the general practitioner books a patient for a forty-eight hour stay in the general practitioners' unit after discussing the matter with the domiciliary midwife and the patient. The type of patients considered suitable are normal primigravida or multipara, whose home conditions are satisfactory for early return. Alternatively, the patient may be booked for a ten-day stay, or for admission to the consultant unit, or for a home delivery, according to the medical and social factors in the case.

Ante-natal care is undertaken by the general practitioner and the domiciliary midwife. When the patient comes into labour, she summons the midwife exactly as though she were going to have her baby at home. The midwife decides whether the patient is ready to go to hospital and, if she is, the usual ambulance arrangements are made. The midwife thereupon tells the hospital that the patient is on the way and she also keeps the general practitioner informed. In hospital the domiciliary midwife conducts and supervises the patient's labour, in just the same way as she would do at home. There is no supervision of the domiciliary midwife by the hospital nursing staff; the hospital merely provides "domestic care" such as would normally be given by the husband or other relatives if the patient were at home. Nursing care is undertaken during the puerperium by the domiciliary midwife who visits the hospital for this purpose and who continues to look after the patient when she returns home after 48 hours.

During the year 58 patients were delivered under the scheme, one patient was transferred to the consultant unit and the arrangements in two cases were cancelled.



The essence of the scheme was summed up by Mr. N. E. Gourlay, Consultant Obstetrician and Gynaecologist at Crawley Hospital, when he said that "these were domiciliary confinements which happened to take place on hospital premises." No difficulties of any kind have arisen during the first year and it is evident that arrangements of this kind are perfectly practicable and entirely in the interests of the patients. As might be expected, the success of the scheme has been due in very large measure to the co-operation and excellent personal relationships existing with the Consultant Obstetrician, the Matron, the Midwifery Superintendent, the general practitioners and the staff of the Department. The attachment of all domiciliary nursing staff to general practices means that patients remain under the care of the same midwife throughout their pregnancy and during the puerperium and there is little doubt that they find this reassuring.

### **Pre-Sterilised Equipment**

The arrangements which have been made for the Central Sterile Supplies Department of Crawley Hospital to provide sterile packs for midwives and home nurses in the Crawley and Horsham areas are described on page 48.

The delivery packs supplied to midwives contain all the standard items which were previously bought, borrowed or begged before delivery as well as the cotton wool which was formerly supplied in local health authority maternity packs, which have now become unnecessary. The new pack contains a receiver, a six-inch bowl, a foil gallipot, two pairs of artery forceps, a pair of scissors, two Hollister clamps, one Kleenex surgical sheet, cotton wool swabs and two maternity pads, all wrapped in Sterifield paper and sealed with sensitised tape. As the receiver holds exactly one pint and is used for measuring any loss occurring in the third stage, a jug is no longer needed. Standard maternity nursing packs containing swabs, pads and a foil gallipot are used for post-natal nursing visits; small packs containing foil gallipots and others containing cotton wool swabs are provided for the care of the infant. Sterile cord dressings are supplied by the Department where a midwife wishes to use them. Individually wrapped sterile maternity pads are supplied to each mother until she is able to go to the bath.

The hospital also provides a service for the general practitioner; should it be necessary for him to suture the perineum, he can collect a suture pack on his way to the house or his representative can do so if the doctor is already at the house for the delivery.

After a delivery, a Crawley midwife returns the non-disposable equipment to special receptacles at the hospital. She cleans her nursing bag in the usual way but, instead of having to boil the equipment, the bag is restocked with new packs and a clean gown which she collects from the hospital. The provision of sterile packs to the staff has presented no problem. In Horsham packs are delivered to the health clinic for collection by the midwives.



## Health Visiting

### Staff

The equivalent whole-time health visiting staff employed by the Council at the end of the year numbered 48.9, 0.2 more than at the end of the previous year. In the rural districts, nurses with combined duties (health visiting, home nursing and midwifery) were employed and the total number of staff with either whole or part-time health visiting responsibility was 85, four fewer than at the end of 1964.

At the end of the year there were only three health visitors in the County who were not qualified. These were all senior staff approaching retirement who were undertaking combined work. There were no health visitors in the County employed specifically as tuberculosis visitors.

Ten students were in training during 1965; of these six successfully completed the course and the other four had not completed their training by the end of the year.

Six health visitors were sent on refresher courses including two on a field-work instructors' course.

### Work Undertaken

Details of the main types of cases visited by health visitors during the year are given below.

<i>Type of case</i>						<i>Number of cases visited</i>	
Children born in 1965	...	...	...	...	...	6,743	
Children born in 1964	...	...	...	...	...	6,983	
Children born in 1960-63	...	...	...	...	...	13,953	
						1964	1965
Children under the age of 5 years	...	...	...	...	...	27,158	27,679
Persons aged 65 or over	...	...	...	...	...	3,261 (1,382)	4,084 (2,184)
Mentally disordered persons	...	...	...	...	...	127 (81)	144 (94)
Persons discharged from hospital other than maternity or mental cases	...	...	...	...	...	466 (295)	596 (420)
Tuberculous households visited	...	...	...	...	...	336	329
Households visited on account of other infectious diseases	...	...	...	...	...	819	640

*Note:* The figures in brackets denote the number of persons visited at the special request of a general practitioner or hospital.

The statistics show that the number of children visited who were under the age of five years was about the same in 1965 as in 1964. There was an appreciable increase (25.2 per cent) in the number of old people visited but, nevertheless, visits to persons over 65 years of age represented only 12.2 per cent of the total number made. The support of old people at home is an aspect of the Department's work which must become of increasing importance and efforts are being made to direct the work of the staff to this end.



# PART IV—PREVENTION OF ILLNESS, CARE AND AFTER CARE

## Health Education

Health education continued to be provided along the lines described in previous Reports. In June, the Department took part in a mental health exhibition at Worthing organised by the Friends of Graylingwell Hospital. In October a technical assistant was appointed. The health education staff gave 370 talks and showed 319 films during the year. Health visitors attended the following health education sessions.

Ante-natal mothercraft and relaxation classes...	...	319
Mothers' clubs ... ..	...	337
Schools ... ..	...	273
Youth clubs ... ..	...	67
Others ... ..	...	259
<b>TOTAL</b> ... ..	...	<b>1,255</b>

A very successful annual refresher course was again held at the Council's residential conference centre, Lodge Hill, Pulborough, in April. Lectures were given in various aspects of public health work and the discussion sessions again proved popular.

## Tuberculosis

### Notifications

The following table shows the numbers of primary notifications received during the year and gives particulars of sex and age groups.

Age	Respiratory			Non-Respiratory		
	Male	Female	TOTALS	Male	Female	TOTALS
0-1 ...	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
1-2 ...	— (—)	— (—)	— (—)	— (—)	— (1)	— (1)
2-4 ...	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
5-9 ...	— (—)	— (—)	— (—)	1 (—)	— (—)	1 (—)
10-14 ...	— (—)	— (—)	— (—)	— (—)	— (—)	— (—)
15-19 ...	2 (—)	3 (4)	5 (4)	— (—)	— (—)	— (—)
20-24 ...	2 (3)	3 (—)	5 (3)	— (—)	— (1)	— (1)
25-34 ...	9 (4)	— (6)	9 (10)	— (2)	1 (2)	1 (4)
35-44 ...	9 (1)	3 (4)	12 (5)	1 (—)	— (1)	1 (1)
45-54 ...	5 (7)	3 (2)	8 (9)	1 (—)	1 (—)	2 (—)
55-64 ...	5 (5)	3 (2)	8 (7)	— (—)	1 (1)	1 (1)
65-74 ...	4 (3)	3 (4)	7 (7)	— (—)	— (—)	— (—)
75+ ...	2 (2)	1 (1)	3 (3)	— (1)	— (—)	— (1)
<b>TOTALS ...</b>	<b>38 (25)</b>	<b>19 (23)</b>	<b>57 (48)</b>	<b>3 (3)</b>	<b>3 (6)</b>	<b>6 (9)</b>

Note: The figures in brackets relate to 1964.



## Chest Clinic Statistics

The details in the next table were supplied by the chest physicians and give an account of some of the work of the chest clinics. At the end of the year, the total number of patients on the register of the clinics in the four areas showed an increase of 5 (709 compared with 704 in 1964). New patients first examined totalled 2,202 (a decrease of 8.4 per cent compared with 1964) and, of these, 56 (52 in 1964) were found to be suffering from tuberculosis.

	<i>Chest Clinics</i>			
	<i>Worthing and Southlands</i>	<i>Horsham</i>	<i>Crawley</i>	<i>Chichester and Bognor Regis</i>
1. Approximate population of area served ...	186,000	47,020	59,000	156,170
2. Patients on register at 1.1.65	91	140	215	263
3. Transfers from other areas ...	9	4	8	14
4. New notifications ...	24*	4	17*	17
5. Removed from register:				
(a) Recovered ...	15	7	—	32
(b) Left area or lost sight of ...	8	5	9	9
(c) Died ...	3†	3	1	10
6. Patients on register at 31.12.65	98	133	230	243
7. (a) New patients first examined ...	750‡	309	441	702
(b) Of these, numbers found to be tuberculous ...	21	3	15	17
8. (a) Contacts of 7 (b) examined ...	69§	9	111	92
(b) Of these, number found to be tuberculous ...	1	2	2	—

\*Including cases restored to register.

†Only two died of tuberculosis.

‡Excluding transfers.

§Total contacts seen; does not refer specifically to contacts of 7 (b).

## Contact Tracing

The following table, also compiled from information supplied by the chest physicians, shows the number of new contacts examined and the number found to be tuberculous during the years 1958 to 1965.

<i>Year</i>	<i>No. of contacts examined</i>	<i>No. found tuberculous</i>
1958	574	2
1959	505	9
1960	471	10
1961	448	3
1962	527	7
1963	376	7
1964	433	1
1965	388	5

### **B.C.G. Vaccination**

The County scheme for B.C.G. vaccination of school leavers was continued. The parents of children of 13 years and over were offered protection for their children by B.C.G. vaccination if the tuberculin skin test showed them to have an inadequate resistance to tuberculous infection.

Particulars of the work carried out during 1965 will be found in Part IX of the Report.

### **Mass Radiography**

The Mass Radiography Unit from Portsmouth continued its visits to many places throughout the County during 1965 and the Surrey Mass Radiography Unit continued to visit Crawley every week. A number of West Sussex cases were also seen at the Brighton Unit, but no separate record of these patients was kept by the Unit.

	<i>Number X-rayed</i>			<i>*Significant pulmonary tuberculosis</i>		<i>Primary lung cancer</i>	
	<i>Male</i>	<i>Female</i>	<i>Totals</i>	<i>Male</i>	<i>Female</i>	<i>Male</i>	<i>Female</i>
General practitioners' chest X-ray service:				†	†	†	†
Portsmouth Unit	3,159	2,671	5,830	5	6	43	12
Surrey Unit ...	503	474	977	3	1	3	—
General public and factory groups:							
Portsmouth Unit	5,431	4,326	9,757	2	1	5	—
Surrey Unit ...	2,447	1,519	3,966	3	—	1	—
TOTALS ...	11,540	8,990	20,530	13	8	52	12

\*i.e. cases requiring treatment and/or close clinic supervision.

†Does not include all results for last quarter.



## Medical Arrangements for Long-Stay Immigrants

In January, 1965 the Ministry of Health informed local health authorities that a review had been made of the special problems which arise in connection with the health and treatment of long-stay immigrants to this country and that it had been decided to introduce certain new arrangements. Medical inspectors at ports would try to obtain destination addresses from immigrants referred to them and would forward these addresses to the appropriate medical officer of health who should arrange for the immigrants to be visited in their new homes. Immigrants could thus be given information about the health services and be persuaded to register themselves and their dependents with general medical practitioners with a view particularly to chest x-ray where necessary.

Up to the end of 1965 the Department had received 364 advice notes about immigrants who had given destination addresses within the County. Of these, 304 related to immigrants from European countries. The health visitors were unable to trace three persons at the addresses given on the advice notes and these were referred to the port of arrival.

## Discharge from Hospital

In the last Report details were given of the arrangements made for the after-care of patients discharged from hospital. During 1965, 355 requests were received from 11 local hospitals and a further 6 requests for after-care were made by hospitals in the London area. The majority of the requests (240) were again from the hospitals in the Chichester area. The greatest call was still for the services of the home nurse. In 48 cases, requests were made for more than one service to be provided.

## Home Nursing

### Staff

The number of home nurses employed at the end of the year is shown in the following table which also gives the corresponding figures for previous years.

Category	Number of home nurses employed at end of year			
	1962	1963	1964	1965
Whole-time ... ..	54	58	62	62
Part-time ... ..	57	64	63	60
TOTAL WHOLE-TIME EQUIVALENT ... ..	86.5	90.6	93.3	92.1



Six nurses attended post-certificate refresher courses in various parts of the country.

Early in the year, arrangements were made with the Chichester and Graylingwell Hospital Management Committee for home nurses to spend a day on the geriatric wards of the hospitals to gain first-hand experience of the wards and of those hospital services which their patients are likely to need from time to time. Arrangements were also made for hospital nurses to spend a day with home nurses on their rounds. It is hoped that this scheme will enable both the home and the hospital nurses to reassure patients, particularly the elderly, on points of detail which are apt to worry them when they have to go to hospital or when they are being discharged home.

After discussions with the Queen's Institute of District Nursing, a scheme was introduced for district nurse training whereby practical training is undertaken in the County, under the supervision of an area nursing officer, and theoretical study is provided at the Brighton Training Home for  $1\frac{1}{2}$  days a week for approximately 11 weeks. The intention of the scheme is to make an approved standard of training available to married nurses who find it difficult to take residential courses owing to family commitments.

### Work Undertaken

Details are given below of the numbers of patients treated and the visits paid during the past two years.

	1964	1965
Total number of persons nursed during year ... ..	12,699	13,000
Number of persons under 5 years ...	429	442
Number of persons over 65 years ...	6,871	7,952
Total number of visits ... ..	270,306	294,194

The number of persons nursed was greater than ever before; the total rose from 12,669 in 1964 to 13,000 in 1965 although the increase (2.4 per cent) was smaller than in 1964 (9.1 per cent). A new record was also achieved by the number of visits paid which was 8.8 per cent more than in 1964. There was an increase of 1,081 in the number of patients over 65 years. Patients in this category accounted for 61.2 per cent of the total number nursed, 7.0 per cent more than in 1964.

A meeting was held at County Hall early in the year with representatives of the British Red Cross Society to assess ways in which the Society could give assistance with nursing problems. Agreement was reached for the referral to the Society of appropriate cases.



## **Night Nursing**

For some years the Council have taken part in the area welfare grant scheme of the Marie Curie Memorial Foundation whereby the Foundation make available sums of money for the special needs of patients suffering from cancer. The amount received from the Foundation has increased each year mainly due to the demand for night nursing. On 28th July, 1965 the Foundation asked for a contribution to the funds of the Foundation because of the strain imposed on its financial resources.

In response to this appeal the Council approved a recommendation that a nominal grant should be made to the Foundation, that funds available from the Foundation through the area welfare grant scheme be restricted to the provision of help and medical comforts of a kind which the Council cannot give, and that the County Council should themselves assume responsibility for the night nursing service. At the same time it was decided to extend the service to provide for patients suffering from non-malignant conditions as well as cancer. It is hoped to build up a panel of nurses who will be willing to undertake occasional night nursing; where no nurses are available, they will be sought through registered nursing agencies.

By the end of the year, three patients had received night nursing care under these arrangements.

## **Equipment**

At the beginning of 1965 the Central Sterile Supplies Department of Crawley Hospital began to provide sterile packs for home nurses and domiciliary midwives working in the Crawley and Horsham areas.

Disposable equipment already in use by the domiciliary staff included incontinence pads, disposable syringes and "Steritemp" thermometer covers. Polythene sheeting, both smooth and "Airwrap," was available instead of rubber mackintoshes. The midwives used disposable caps, masks and mucous catheters, and disposable urethral catheters were supplied to midwives and nurses on request.

The basic, completely-disposable, dressing pack now supplied to domiciliary nurses consists of a cardboard tray containing a foil gallipot, cotton wool swabs, gauze, three pairs of disposable dissecting forceps and a paper dressing towel, the whole being wrapped in a "Sterifield" sheet, which opens to form a clean working surface. The pack is sealed with sensitised tape. The basic pack is sufficient for the majority of the surgical dressings but, when necessary, it can be supplemented by the addition of individually-packed stitch scissors, clip removers and sinus forceps. These are not disposable and after use they are returned



to the hospital department for cleaning and re-sterilisation. Where a large area needs to be dressed, a varicose ulcer for example, extra gauze and cotton wool is provided in a proprietary pack.

Estimates suggest that the cost of the scheme will not be appreciably higher than the cost of the instruments, dressings and equipment previously purchased and, if professional time is taken into account, there is little doubt that the new arrangements are cheaper.

As will be seen from the following table, there was a substantial rise in demand for equipment to facilitate the nursing of patients in their own homes. No fewer than 2,033 items of equipment were issued during the year compared with 1,192 items in 1964, an increase of 70.5 per cent.

Article	Stock		Number of issues		Article	Stock		Number of issues	
	1964	1965	1964	1965		1964	1965	1964	1965
Back rests ...	26	53	33	85	Helping hands ...	19	40	14	15
Bath boards ...	16	34	14	17	Hoists:				
Bath mats ...	20	50	19	43	Hydraulic ...	16	20	32	39
Bath safety rails ...	24	50	35	65	King ...	21	21	14	13
Bath seats ...	68	91	52	86	Inflatable mattresses ...	8	15	16	15
Beds ...	59	59	59	62	Mattresses ...	66	76	62	76
Bed blocks ...	8	20	5	13	Poles and chains	28	31	31	35
Bed cradles ...	64	86	57	113	Sanicushions ...	8	12	8	2
Bed ladders ...	22	44	9	12	Sanitary pushchairs ...	5	5	4	3
Bed pans ...	56	84	48	70	Seat aids ...	6	10	9	16
Commodore ...	160	222	245	363	Toilet seats (raised) ...	19	20	11	14
Crutches ...	44	70	43	60	Urinals ...	20	42	23	49
Dunlopillo rings	80	130	53	86	Walking aids:				
Ejector seats ...	8	12	8	11	Sticks ...	118	166	94	131
Exercycles ...	1	3	1	3	Frames ...	128	198	134	230
Fracture boards ...	8	28	17	21	Wheelchairs ...	115	166	119	280

The shortage of wheelchairs became acute in the early summer; doctors and nurses had to be reminded that they could only be supplied temporarily to patients and that chairs needed indefinitely should be obtained through the Ministry of Health. Even so, over 50 wheelchairs were purchased during the year (bringing the stock to 166) and 280 requests were met.

In addition to the items shown in the table, plastic drawsheets and incontinence pads were also supplied to patients as well as a number of miscellaneous items such as alternating pressure mattresses (5), baby walking aids and chairs (3), bed elevators (2), footstools (3), stocking aids (3) and a portable suction pump. Flexible drinking straws, feeding mugs and "hot plates" were also provided.



## Home Help Service

A directly-administered service was introduced on 1st October, 1964 and the period under review was therefore the first full year during which the new arrangements, fully described in the last Report, were in operation.

Area meetings for home helps were arranged in various parts of the County in order to promote recruitment. In October, 1965 a rally for the whole staff was held at Chichester which was attended by 200 home helps. The meeting, presided over by the Chairman of the Nursing Sub-Committee, was a success and gave the staff a much better appreciation of the important part they play in the running of the community health services.

In November, 1965 the first training course ever provided for home helps in the County was held at Bognor Regis. This was a three-day course of talks and practical demonstrations on all aspects of a home help's work. One day was taken up by a practical demonstration of cooking at the Chichester College of Further Education and the staff were shown how to cook quick, economical, and well-balanced meals for small and large families. The course was well worthwhile and it is hoped to hold others elsewhere in the County during 1966.

The Council continued the policy whereby home helps who had cars were authorised to use them on their work when it was not practicable to use public transport; twelve were so authorised during 1965. In the rural areas, this was a great asset. Bicycles were purchased for the use of home helps in both urban and rural areas and these proved to be a useful acquisition.

The recruitment of suitable home helps remained difficult, particularly in the coastal areas during the summer when more remunerative employment was available in hotels, boarding houses and eating places.

Since the service became directly-administered, the number of hours given to long-term cases has been reviewed and this has resulted in a reduction of the hours given to some of the cases. There was a decrease of 4.6 per cent in the equivalent whole-time staff employed which resulted in a decrease of 2.3 per cent in the number of hours worked.

	1961	1962	1963	1964	1965
Whole-time helps employed ...	—	—	—	1	—
Part-time helps employed ...	448	480	522	538	498
Whole-time equivalent ...	126.6	139	148	173	165
Hours worked ...	275,982	303,620	328,202	367,395	358,842



**STATISTICS RELATING TO THE HOME HELP SERVICE  
1949 to 1965**

Year	Number of area organisers	Number of cases assisted					Number of helps employed		Number of hours worked	Average number of hours a case a week	Gross expenditure £	Income £	Net expenditure £
		Maternity	Tuber- culosis	Chronic sick, aged and infirm	Others	TOTAL	Whole- time	Part- time					
1949	10	347	3	—	971	1,321	12	145	171,179	2.5	21,997	7,597	14,400
1953	14	270	49	647	621	1,587	2	241	197,433	2.4	27,796	6,548	21,248
1957	16	316	27	1,218	601	2,162	—	337	255,732	2.3	45,779	10,015	35,764
1958	15	281	18	1,313	591	2,203	—	370	257,898	2.3	48,620	10,528	38,092
1959	16 (10)	297	18	1,438	651	2,404	—	362	275,129	2.2	51,829	11,382	40,447
1960	24 (9)	281	13	1,501	602	2,397	—	413	273,879	2.2	54,013	10,919	43,094
1961	21 (9)	265	15	2,033	728	3,041	—	448	275,982	1.7	60,470	11,489	48,981
1962	21 (9)	249	12	1,940	562	2,763	—	480	303,620	2.1	69,353	12,838	56,515
			Chronic sick and Tuber- culosis	Aged 65 and over	Men- tally dis- ordered	Others	TOTAL						
1963	21 (9)	201	158	2,362	9	340	—	522	328,202	2.1	81,410	14,496	66,914
1964	10 (6)	163	174	2,635	12	358	1	538	367,395	2.1	94,115	15,970	78,145
1965	10 (8)	201	143	2,970	14	276	—	498	358,842	1.9	105,654	17,206	88,448

Notes: 1. The figures in brackets denote whole-time equivalents.

2. A directly-administered service was introduced from 1st October, 1964.



The number of persons helped rose from 3,342 in 1964 to 3,604 in 1965, an increase of 7.0 per cent. The greatest increase (23.3 per cent) occurred in the number of maternity cases assisted; persons helped who were over the age of 65 years rose by 12.7 per cent.

Greater use of the neighbourly help scheme was made during 1965 when 70 persons received help compared with 37 during 1964.

Category	Number of Persons Helped				
	1961	1962	1963	1964	1965
Aged 65 years and over ...	2,048	1,952	2,362	2,635	2,970
Chronic sick and tuberculous ...			158	174	143
Mentally disordered ...	—	—	9	12	14
Maternity ...	265	249	201	163	201
Others ...	728	562	340	358	276
TOTALS ...	3,041	2,763	3,070	3,342	3,604

The table on page 51 gives some statistical details about the growth of the service over the years.

## Chiropody Service

The demand for chiropody, particularly amongst the elderly, continued to grow appreciably. The recruitment of another chiropodist (bringing the whole-time equivalent to 5.1) and the construction of separate chiropody rooms at Bognor Regis, Lancing and Littlehampton clinics resulted in a temporary reduction of the waiting lists but at the end of the year patients in those areas were still having to wait for treatment for approximately three months; waiting periods of between two and three months were common at other clinics.

It is evident that, for a variety of reasons, the needs of the elderly and the physically handicapped will not adequately be met for some years to come. Qualified staff remain in short supply, static clinic accommodation is insufficient, and demand from an increasing and ageing population shows no signs of abatement. What can be done is nevertheless being done. More chiropodists are being employed and their accommodation and equipment are being improved; a mobile unit to serve the rural areas is being brought into use; voluntary organisations providing a satisfactory service are being accorded financial support, and the Council have expressed their intention in the development plan to expand the directly-administered service three-fold over the next ten years.

A summary of the development of the service since its inception in May, 1962 is given in the next table.



Year	Treatments			
	Clinic	Domiciliary	Total	Percentage free
1962*	2,081	—	2,081	43
1963	5,633	—	5,633	43
1964	8,393	211	8,604	39
1965	11,099	1,928	13,027	39

\*Eight months only.

Details of the location and frequency of the clinics, together with the numbers of attendances in 1965, are given in the following table.

Clinic	Number of clinic sessions in 1965	Clinic attendances		Domiciliary visits		Total treatments		
		First	Total	First	Total	First	Total	Percentage free
Arundel ...	12	5	41	—	—	5 (4)	41 (52)	54 (31)
Bognor Regis ...	137	92	1,067	19	332	111 (88)	1,399 (775)	27 (28)
Camelsdale ...	11	2	86	3	13	5 (2)	99 (109)	47 (43)
Chichester ...	52	35	426	33	343	68 (51)	769 (366)	49 (45)
Cowfold ...	—	—	—	6	64	6 (—)	64 (—)	58 (—)
Crawley—								
Exchange Road	185	106	1,349	11	110	117 (91)	1,459 (1,343)	50 (49)
*Gossops Green ...	13	7	101	—	—	7 (5)	101 (91)	50 (41)
*Langley Green ...	13	4	107	—	—	4 (10)	107 (102)	28 (42)
*Three Bridges ...	13	4	97	—	—	4 (5)	97 (99)	60 (60)
*Tilgate ...	13	11	80	—	—	11 (1)	80 (62)	49 (55)
East Preston ...	9	6	54	—	—	6 (9)	54 (11)	100 (82)
Fernhurst ...	17	5	151	—	—	5 (6)	151 (111)	40 (39)
Harting ...	12	5	97	2	3	7 (10)	100 (65)	21 (11)
Henfield ...	48	10	218	7	45	17 (26)	263 (164)	25 (23)
Horsham ...	44	31	315	24	157	55 (14)	472 (176)	28 (30)
Lancing ...	65	43	533	39	258	82 (73)	791 (508)	32 (29)
Littlehampton ...	205	101	1,320	13	68	114 (68)	1,388 (608)	38 (45)
Midhurst ...	20	3	133	—	9	3 (5)	142 (135)	61 (36)
Partridge Green ...	11	18	75	1	4	19 (—)	79 (—)	34 (—)
Petworth—								
Lombard Street	12	11	81	2	6	13 (10)	87 (55)	45 (67)
Mant Road ...	12	1	90	—	1	1 (8)	91 (24)	93 (91)
Roffey ...	97	51	745	3	113	54 (50)	858 (826)	39 (40)
Rogate ...	12	3	72	—	7	3 (5)	79 (70)	43 (51)
Rustington ...	4	3	47	—	—	3 (10)	47 (10)	100 (100)
Selsey ...	44	20	192	7	120	27 (30)	312 (187)	42 (40)
Shoreham-by-Sea—								
Ham Road ...	107	41	678	—	1	41 (23)	679 (336)	32 (45)
Middle Road ...	61	29	448	44	272	73 (33)	720 (305)	39 (35)
Southbourne ...	12	7	78	—	2	7 (4)	80 (60)	54 (58)
Worthing ...	435	369	2,418	—	—	369 (272)	2,418 (1,954)	34 (34)
ADMINISTRATIVE COUNTY ...	1,676	1,023	11,099	214	1,928	1,237 (913)	13,027 (8,604)	39 (39)

\*Services of a sessional chiropodist used for these clinics.

Note: The figures in brackets relate to 1964.



The directly-administered service was augmented by the work of the 13 voluntary organisations shown in the next table. The grants paid to these organisations varied between £10 and £100 a year depending on the frequency of the clinics they held.

Voluntary Organisation	Payment of grant commenced	Number of sessions held during 1965 or since receipt of grant	Attendances		
			First	Total	Percentage free
Arundel Good Companions Club ...	1.11.63	47 (48)	3 (10)	305 (308)	37 (23)
Chichester W.V.S. ...	1. 2.62	26 (26)	— (4)	179 (168)	— (—)
*Cowfold Darby & Joan Club ...	1.11.63	2 (12)	— (2)	12 (82)	41 (61)
Graffham, Lavington, South Ambersham and Selham District Nursing Association ...	1. 4.62	38 (39)	3 (4)	324 (424)	1 (32)
Henfield Darby & Joan Club ...	1.11.63	24 (24)	3 (4)	160 (156)	14 (13)
Midhurst Darby & Joan Club ...	1. 7.64	11 (7)	— (—)	100 (51)	— (—)
*Partridge Green Welcome Club ...	1.11.63	8 (12)	2 (—)	55 (85)	45 (47)
Petworth Old People's Welcome Committee ...	1.12.63	22 (24)	2 (5)	149 (167)	28 (31)
Rustington Old Age Pensioners' Club ...	1. 4.65	24 (—)	23 (—)	175 (—)	— (—)
Steyning Darby & Joan Club ...	1.11.63	40 (40)	15 (16)	280 (272)	33 (52)
Storrington Darby & Joan Club ...	1.11.63	11 (12)	6 (3)	79 (79)	48 (50)
Tillington Darby & Joan Club ...	1.11.63	12 (12)	2 (2)	67 (65)	13 (5)
West Ashling Darby & Joan Club ...	1.11.63	12 (7)	3 (8)	78 (54)	35 (45)
Westbourne Old People's Welfare Committee ...	1.11.65	2 (—)	15 (—)	17 (—)	35 (—)
West Chiltington Darby & Joan Club ...	1.11.63	12 (11)	1 (2)	94 (86)	40 (30)
ADMINISTRATIVE COUNTY ...		291 (274)	78 (60)	2,074 (1,997)	20 (30)

\*Grant withdrawn during year.

Note: The figures in brackets relate to 1964.

## County Almoners

Although there was a slight decrease in the number of direct referrals, this did not reduce the volume of work but resulted rather in a change of emphasis; there was a marked increase in the amount of indirect service to the patient through consultation with health visitors, district nurses and other statutory and voluntary organisations. This



was partly due to the attachment to group practices of health visitors and district nurses which has led to closer teamwork. Of the cases referred, two-thirds were over the age of 60 years.

<i>Sources of Referral</i>	1964	1965
General medical practitioners ... ..	252	304
Chest and other consultants ... ..	171	147
Hospital almoners ... ..	361	263
County nursing staff ... ..	207	199
Other statutory agencies ... ..	73	51
Voluntary agencies ... ..	38	37
Other ... ..	106	115
<b>TOTALS ... ..</b>	<b>1,208</b>	<b>1,116</b>

<i>Reasons for Referral</i>	1964	1965
Recuperative holidays and convalescence ...	233	219
After care on discharge from hospital ...	350	185
Advice on residential care—		
(a) temporary... ..	67	77
(b) permanent ... ..	104	232
Social and personal problems ... ..	366	343
Rehabilitation ... ..	28	16
Other ... ..	109	90
<b>TOTALS ... ..</b>	<b>1,257</b>	<b>1,162</b>

*Note:* In some cases there was more than one reason for referral.

Over 50 patients, many of them cancer sufferers, were referred for help with terminal care. The National Society for Cancer Relief and the Marie Curie Memorial Foundation helped to meet the cost of nursing home fees and to provide special care at home. Over £3,000 was administered for the National Society for Cancer Relief and many other voluntary societies provided help which was not readily available from statutory sources.

It remained difficult to find suitable vacancies for the elderly and frail where their special needs would receive sympathetic consideration; only the small private convalescent homes were able to fill this rôle. The absence of special accommodation for the young chronic sick in hospitals also continued to be a source of difficulty. Although cases were few, the problem of their proper placement was sometimes insuperable.



In addition to seeking practical solutions to the problems with which patients were confronted, much time was spent in giving support to patients and their relatives in situations which often appeared almost intolerable and where there was no really satisfactory solution. In these situations, the almoners co-operated fully with statutory and voluntary agencies in every field of the social services.

## Occupational Therapy

There is little to add to what was said in the last Report. The same crafts were in demand by the patients with the addition of jewellery which had been done previously by a patient who moved into the County from Surrey; arrangements were made for him to continue.

The British Red Cross Society were helpful in finding male visitors for several patients who live alone and who needed the social contact. Many patients were also assisted in various ways by the Care Committee of the Sussex Rural Community Council.

				1964	1965
Number of new patients	...	...	...	25	24
Number of patients visited	...	...	...	94	90
Number of visits made	...	...	...	864	741
Value of materials sold	...	...	...	£273	£284

Of the 90 patients visited, 77 were referred by consultant chest physicians, 9 by mental welfare officers, 3 by county almoners, and there was one request received direct. Most of the patients visited were suffering from chronic chest conditions; 32 from pulmonary tuberculosis, 13 from carcinoma of the bronchus and the remainder from chronic bronchitis, asthma and bronchiectasis; some of the mentally disordered also suffered from some physical handicap.

## Geriatric Services

At the inaugural meeting of the Joint Liaison Committee with the South West Metropolitan Regional Hospital Board held at Chichester on 24th September, 1965, consideration was given to the planning of further geriatric accommodation in the County. It was agreed that the Board should be asked to consider immediately the provision of 50 additional geriatric beds in Chichester and of 100 beds in the Worthing area. It was also agreed that a more detailed statement on the geriatric position in the north-east of the County should be prepared for the next meeting of the Joint Committee.



The consultant physicians in geriatric medicine (both of whom gave part-time service to the Council) continued to work under extreme difficulty in meeting the many demands made upon them. Dr. J. N. Micker-son of Chichester reports

"The need to improve welfare accommodation in West Sussex is still a pressing feature, particularly in the Chichester area, but there has been an encouraging increase in the domiciliary services, especially the meals-on-wheels service.

If restrictions are likely to continue with regard to new building, a greater weight of responsibility will fall on the domiciliary services for essential help to the elderly people in West Sussex."

The pressures on the services for which Dr. R. B. Franks of Worthing was responsible remained great as will be seen from the following statistical summaries.

	1963	1964	1965
Applications: Male ... ..	349	325	299
Female ... ..	725	623	546
TOTALS ... ..	1,074	948	845
Domiciliary assessment visits by consultant or registrar ... ..	931	719	640
Average number of hospital beds available for the year	255	260	254
Admissions from waiting list ... ..	663	593	506
Discharges home or to private or welfare accommodation ... .. (Short-stay discharges included in this figure) ...	315 (109)	275 (70)	242 (110)
Transfers to geriatric beds in other groups ... ..	3	9	6
Transfers to mental hospital ... ..	1	6	3
Transfers to acute hospital beds ... ..	12	19	20
Deaths in hospital ... ..	316	291	242
Total of discharges, transfers out and deaths... ..	647	600	513
Discharges, transfers out and deaths per available bed per year ... ..	2.5	2.3	2.0
Average length of stay in hospital in months... ..	4.8	5.2	5.9
Geriatric outpatients seen in clinics ... ..	218	220	294

The next table shows the numbers of patients on the waiting lists at the end of 1964 and 1965.



<i>Type of List</i>	<i>Males</i>	<i>Females</i>	<i>TOTALS</i>
A* ...	28 (32)	60 (46)	88 (78)
B† ...	5 (3)	18 (14)	23 (17)
Short Stay ...	3 (8)	11 (15)	14 (23)
Other Hospital Groups ...	1 (1)	4 (—)	5 (1)
TOTALS ...	37 (44)	93 (75)	130 (119)

\*In need of admission.

†Can be nursed at home or in a nursing home for the time being.

*Note:* The figures in brackets relate to 1964.

## Ascertainment Surveys

### Diabetes

The last Report gave particulars (at Appendix E) of a *Diabetic Survey of a Semi-Rural Group Practice* which had been carried out between July, 1963 and May, 1964 by Dr. F. Cockcroft, Medical Officer of Health of the Rural District of Worthing, in collaboration with a group of general medical practitioners. Towards the end of the year a follow-up survey had been started on the "at risk" group. This involved a health visitor calling on about 600 persons and arranging a urine test following a loading dose of glucose. It will be some time before this survey is complete.

### Cervical Cancer

Laboratory facilities for the screening of cervical smears became available in 1965 at the Royal West Sussex Hospital (St. Richard's), Chichester, and at Worthing Hospital. In Chichester, patients may avail themselves of this service by asking their general practitioners to refer them to the gynaecology clinic at St. Richard's Hospital. As the number of slides which can be screened by the laboratory increases, some general practitioners may wish to take smears themselves and the service may also become available through family planning clinics in the area.

In Worthing, a cervical cytology clinic was established in November at Worthing Hospital under the auspices of the "Worthing and District Cervical Cytology Service." The chairman of the committee of this independent body is the Consultant Pathologist to the Worthing Group Hospital Management Committee and members of the committee include



hospital consultants, the Medical Officer of Health of Worthing, and representatives of the general practitioners, the Family Planning Association and the County Council.

Towards the end of the year, the South West Metropolitan Regional Hospital Board provided funds for the employment of a technician to screen smears at Redhill Hospital and it is hoped that this will make it possible for the service to become available to residents in Crawley and Horsham in 1966.

It is evident that the development of cervical cytology in the County will be governed by the capacity of the hospital laboratories to screen the smears and by the demand from the public for this service. A modification of the approved proposals under Section 28 of the *National Health Service Act, 1946* is being sought by the Council to enable them to take smears as required.

### Phenylketonuria

A number of children were referred for further investigation following a test for phenylketonuria which it is standard practice to carry out on all babies at the age of six weeks. As a result of these tests, one child was found to be suffering from the disease in 1965 and is now receiving treatment from a consultant paediatrician.

## Sussex Rural Community Council

The work of the Community Council continued along the lines described in previous Reports and the County Council made a grant in support of their general activities. The table shows the kinds of help provided during the past two years.

Area	Form of Help Provided*						TOTALS
	Milk	Fares	Fuel	Tele-vision	Debts	Other	
Chichester/Midhurst ...	2 (2)	— (1)	14 (22)	1 (2)	— (1)	— (4)	17 (32)
Crawley ...	4 (1)	— (—)	4 (6)	— (—)	1 (3)	3 (2)	12 (12)
Horsham ...	3 (1)	1 (4)	8 (11)	1 (1)	1 (—)	1 (3)	15 (20)
Littlehampton/Bognor Regis ...	7 (8)	— (1)	16 (20)	— (—)	— (—)	2 (—)	25 (29)
Shoreham-by-Sea/Southwick ...	8 (10)	1 (—)	14 (12)	— (—)	— (2)	5 (—)	28 (24)
Worthing ...	7 (5)	1 (—)	9 (9)	— (—)	1 (1)	1 (5)	19 (20)
ADMINISTRATIVE COUNTY	31 (27)	3 (6)	65 (80)	2 (3)	3 (7)	12 (14)	116 (137)

\*Some persons received more than one form of help.

Note: The figures in brackets relate to 1964.



# PART V—AMBULANCE SERVICE

## General

During the second complete year of direct administration, the satisfactory performance of the ambulance and hospital car services continued to justify the Council's decision to end the former agency arrangements. Much still remains to be done but great improvements have already been made and further progress will be brought about by the implementation of the Council's intentions contained in the ten-year plan for the development of the health services.

At the end of the year, seven of the nine purpose-built ambulance stations envisaged in the original (1962) plan had either been finished or were being built. One of the two remaining stations (Wittering) was withdrawn from the development plan and a start on the other (Horsham) was delayed following the reception of Ministry of Health Circular 20/65 dated 2nd September, 1965 which dealt with the deferment of expenditure on capital projects. The replacement station at Crawley (included for the first time in the 1964 revision) is unlikely to be needed before 1969/70.

In June, 1965 approval was given to a proposal that a central control system should be inaugurated during 1966 at Chichester, when the new ambulance station and control premises come into operational use. Great benefits are expected to derive from this re-arrangement which will provide for the employment of specialist control staff who will ensure that vehicles are used to the best advantage. By the end of the year, good progress had been made with the planning of the new control and the prospect of improved communications had been secured with the obtaining of permission to attach radio aerials to a mast on the highest point of the Downs.

Ambulances attended a rail crash at Angmering on 22nd September, 1965 and arrangements for the conveyance of the casualties went smoothly both at control and operational levels.

Volunteers of the St. John Ambulance Brigade and the British Red Cross Society assisted the service on ambulances and as escorts on rail journeys; this assistance is gratefully acknowledged.

## Statistics

The accompanying statistical tables show that ambulances continued to convey more walking patients, with a corresponding decrease in the numbers conveyed by hospital cars.



The combined figures for both services show that the total number of patients conveyed in 1965 compared with 1964 increased by 3,987 (2 per cent) and the total mileage travelled increased by 4,746 (0.3 per cent). The average mileage per patient conveyed by ambulance was 6.6 compared with 6.7 in 1964 and 7.5 in 1963, which illustrates the continuing success of attempts to co-ordinate ambulance journeys. Accident and emergency cases rose from 4,152 in 1964 to 4,301 in 1965 (an increase of 3.6 per cent) and accounted for 3.9 per cent of all patients conveyed. Patients conveyed by rail for part of their journey numbered 762. This was 2 more than in 1964 and 17 fewer than in 1963.

### Hospital Car Service

The following table shows that further substantial reductions were made in the numbers of patients conveyed and the mileage travelled by hospital cars. The present intention is that the provision of hospital cars will be a responsibility of the central control to be established at Chichester in 1966 and this should lead to even more economy in the use of vehicles.

Area	Patients			Miles		
	1964	1965	Variation	1964	1965	Variation
Chichester	21,968	20,751	—1,217	192,651	192,906	+ 255
Horsham	23,765	26,061	+2,296	329,034	344,561	+15,527
Worthing	44,849	40,287	—4,562	341,234	294,184	—47,050
TOTALS ...	90,582	87,099	—3,483	862,919	831,651	—31,268

Car drivers were issued with a jacket lapel badge signifying their membership of the service, and this helped in their identification at hospitals.

Thanks are due to all drivers for their assistance and for their willingness to have their personal affairs disrupted when patients were kept for long periods at hospitals. It is known that many patients appreciated their efforts.

### Staff and Vehicles

The table on page 63 shows the number of staff employed at each ambulance station in the County at the end of each of the past two years. There was no difficulty in recruiting and retaining staff, and such new entrants as it was necessary to appoint were of a good standard.



For the first time, a formal training programme was introduced. New entrants on 1st April, 1965 were given a two weeks' initial training course which covered every aspect of the work except civil defence. During the autumn, 32 of the existing staff attended six courses (one of which was on civil defence), each of one week's duration.

The occasional attendance of staff at hospital casualty departments was extended to the Crawley and Worthing hospitals. These visits proved valuable and there was the utmost co-operation by the medical and nursing staff.

In order to reduce the number of vehicle accidents, lectures were given during the summer months at all ambulance stations. Out of 56 drivers entered for the Safe Driving Competition of the Royal Society for the Prevention of Accidents, 50 were successful. This was a big improvement on 1964 when, out of 48 entered, 36 were successful.

Nine teams entered for the County Ambulance Efficiency Competition held in Chichester on 29th May, 1965. This was won by a team from Crawley. In the regional Competition at Battersea Park, London on 26th June, 1965, they were placed sixth out of 11 entrants.

Three cadets were appointed on 1st April, 1965. After an initial two weeks' training with other new entrants, they continued to receive training from the Staff Officer in charge of training at the casualty and other departments of hospitals, at the ambulance controls and stations, and at colleges of further education. It is still too early to assess the value of the cadet scheme but the young men appointed have shown great keenness to learn all they can about ambulance work.

Six new ambulances were purchased, one of which was a sitting-case vehicle, and the fleet was increased by two vehicles.

### **Civil Defence**

At the end of the year, there were 452 volunteers in the Ambulance and First Aid Section of the Civil Defence Corps, 22 more than at the end of 1964. Of these, 119 had passed the standard test and 39 the advanced test. The County had the highest percentage of passes (83 per cent) for both standard and advanced tests in the South Eastern Region.

At the Annual Field Day at Westerton near Chichester on 15th May, 1965 11 teams competed for the Ambulance and First Aid Section Cup. This was won by Littlehampton and Horsham were second.

Two members of the full-time ambulance service passed as locally-trained civil defence instructors and 14 volunteer members attended civil defence standard courses.

**AMBULANCE SERVICE**  
**Staff, Vehicles, Mileage and Patients**

Station	Staff		Vehicles		Mileage			Patients		
	1964	1965	1964	1965	1964	1965	Variation	1964	1965	Variation
Bognor Regis ...	9 (9)	9 (9)	5	6	87,866	103,060	+ 15,194	22,256	26,110	+ 3,854
Chichester ...	14 (14)	16 (16)	5	6	98,592	101,349	+ 2,757	16,769	16,132	— 637
Crawley ...	10 (10)	10 (10)	6	6	103,913	98,574	— 5,339	16,750	15,487	— 1,263
Horsham ...	10 (10)	11 (11)	4	4	80,738	81,828	+ 1,090	10,280	9,445	— 835
Littlehampton ...	5 (5)	5 (5)	2	2	57,163	59,978	+ 2,815	4,363	5,153	+ 790
Midhurst ...	4 (4)	4 (4)	2	2	44,244	50,784	+ 6,540	3,438	3,771	+ 333
Pulborough ...	3 (2.25)	2 (2)	2	2	38,917	38,707	— 210	1,153	1,224	+ 71
Shoreham-by-Sea ...	5 (4.5)	5 (4.5)	2	2	43,587	48,485	+ 4,898	5,666	6,923	+ 1,257
Worthing ...	18(16.25)	21(18.25)	8	8	137,670	145,939	+ 8,269	22,370	26,270	+ 3,900
TOTALS ...	78 (75)	83(79.75)	36	38	692,690	728,704	+ 36,014	103,045	110,515	+ 7,470

*Note:* The figures in brackets indicate whole-time equivalents.



# PART VI—MENTAL HEALTH SERVICE

## Statistics

### *Mental Illness*

The following statement, provided by Graylingwell Hospital, shows the numbers of patients admitted to the hospital during 1965. The mental welfare officers assisted in the arrangements for statutory admission of patients under Sections 25, 26 and 29 of the *Mental Health Act, 1959*.

Whereas informal admissions rose by 86 as compared with 1964, the number of persons admitted under statutory procedure remained at 265, the same as in the previous year. There was, however, a welcome reduction in the number of such cases dealt with under the "emergency" section.

### Admissions to Graylingwell Hospital

<i>Mental Health Act, 1959</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
Section 5—(Informal) ... ..	429 (355)	691 (679)	1,120(1,034)
Section 25—(Observation — 28 days) ... ..	19 (11)	60 (16)	79 (27)
Section 26—(Treatment) ...	13 (5)	18 (9)	31 (14)
Section 29—(Observation in emergency—3 days)	59 (103)	94 (117)	153 (220)
Section 60—(Court Order) ...	1 (2)	— (—)	1 (2)
Section 65—(Court Order with restrictive clause)	— (1)	— (—)	— (1)
Section 72—(Transfer from prison by Home Office)	1 (—)	— (—)	1 (—)
TOTALS ... ..	522 (478)	863 (821)	1,385(1,299)

*Note:* The figures in brackets relate to 1964.

The average age on admission was 50 years and 393 of the patients admitted were aged 65 or over.

During the year, 1,153 patients (407 males and 746 females) left the hospital and 206 (97 males and 109 females) died. It will be noted from the following table that, of the 206 deaths, 178 were of people over 65 years of age.

1965	<i>Male</i>		<i>Female</i>		<i>TOTALS</i>	
	<i>Under 65 years</i>	<i>Over 65 years</i>	<i>Under 65 years</i>	<i>Over 65 years</i>	<i>Under 65 years</i>	<i>Over 65 years</i>
Departures	327 (340)	80 (81)	576 (554)	170 (170)	903 (894)	250 (251)
Deaths ...	16 (13)	81 (65)	12 (18)	97 (78)	28 (31)	178 (143)

*Note:* The figures in brackets relate to 1964.

At the end of the year, one mentally ill person was being maintained by the local health authority in residential accommodation.

### *Mental Subnormality*

The total number of subnormal persons under care at the end of the year is shown in the next table.

<i>Form of Care</i>	<i>Male</i>	<i>Female</i>	<i>Children</i>	<i>TOTALS</i>
Hospitals and homes under regional hospital board ...	209 (204)	113 (113)	85 (85)	407 (402)
Mental nursing homes ...	— (—)	— (—)	5 (6)	5 (6)
Residential homes ...	10 (8)	28 (26)	12 (8)	50 (42)
Boarded out in private homes	8 (9)	24 (25)	4 (—)	36 (34)
Durrington Hostel ...	— (—)	— (—)	10 (—)	10 (—)
Rustington Hostel ...	20 (20)	— (—)	— (—)	20 (20)
Informal community care ... (7 of the cases in residential or private homes are subject to guardianship orders)	265 (253)	297 (259)	142 (145)	704 (657)
<b>TOTALS ...</b>	<b>512 (494)</b>	<b>462 (423)</b>	<b>258 (244)</b>	<b>1,232(1,161)</b>

*Note:* The figures in brackets relate to 1964.

The numbers of subnormal persons admitted to hospital during 1965 and the total numbers accommodated at the end of the year are shown in the following table.



<i>Hospital</i>	<i>Admitted during 1965</i>			<i>Total number accommodated at 31.12.65</i>		
	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
Royal Earlswood Hospital, Redhill	8 (6)	6 (11)	14 (17)	168 (163)	109 (111)	277 (274)
The Manor, Epsom ... ..	— (—)	— (—)	— (—)	10 (10)	9 (11)	19 (21)
Farmfield, Horley ... ..	— (2)	— (—)	— (2)	31 (40)	— (—)	31 (40)
Laughton Lodge, near Lewes ...	— (—)	— (—)	— (—)	18 (15)	9 (11)	27 (26)
Other hospitals and homes (regional hospital board) ...	3 (2)	2 (—)	5 (2)	37 (29)	16 (12)	53 (41)
TOTALS ... ..	11 (10)	8 (11)	19 (21)	264 (257)	143 (145)	407 (402)

*Note:* The figures in brackets relate to 1964.

At the end of the year the names of 22 subnormal persons were on the waiting list for admission to hospital. This was five more than at the end of 1964 and some of them were urgent.

The following particulars show the immediate sources of information which led to subnormal persons being dealt with during the year.

<i>Source of Referral</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
General practitioners ... ..	2 (2)	— (1)	2 (3)
Hospitals ... ..	3 (6)	3 (10)	6 (16)
Courts and police ... ..	2 (—)	— (—)	2 (—)
Local education authority ...	19 (11)	16 (10)	35 (21)
Other sources ... ..	20 (10)	18 (12)	38 (22)
TOTALS ... ..	46 (29)	37 (33)	83 (62)

*Note:* The figures in brackets relate to 1964.

The cases were dealt with as follows.

<i>Disposal</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
Admitted to psychiatric hospitals ...	1 (1)	2 (1)	3 (2)
Placed in residential homes ... ..	2 (1)	4 (2)	6 (3)
Placed in mental nursing homes ...	— (—)	— (1)	— (1)
Placed under informal community care	43 (27)	31 (28)	74 (55)
Action not yet taken ... ..	— (—)	— (1)	— (1)
TOTALS ... ..	46 (29)	37 (33)	83 (62)

*Note:* The figures in brackets relate to 1964.



## Training Centres

The next table shows the numbers of pupils and staff at training centres. In addition, 16 other pupils attended centres maintained by other authorities or by voluntary bodies.

Centre	Staff		Pupils					
	Head Teacher/ Manager	Assist- ant Teachers and Trainees	On register					Daily average attend- ance
			Males		Females		TOTALS	
			Under 16	Over 16	Under 16	Over 16		
*Chichester ...	1	5	6	3	9	13	31	27
*Crawley ...	1	6	19	1	11	14	45	33
*Durrington ...	1	9	33	—	30	—	63	59
†Rustington ...	1	2	—	26	—	—	26	25
†Worthing ...	1	3	—	15	—	23	38	33

\*Junior Training Centre. †Adult Training Centre.

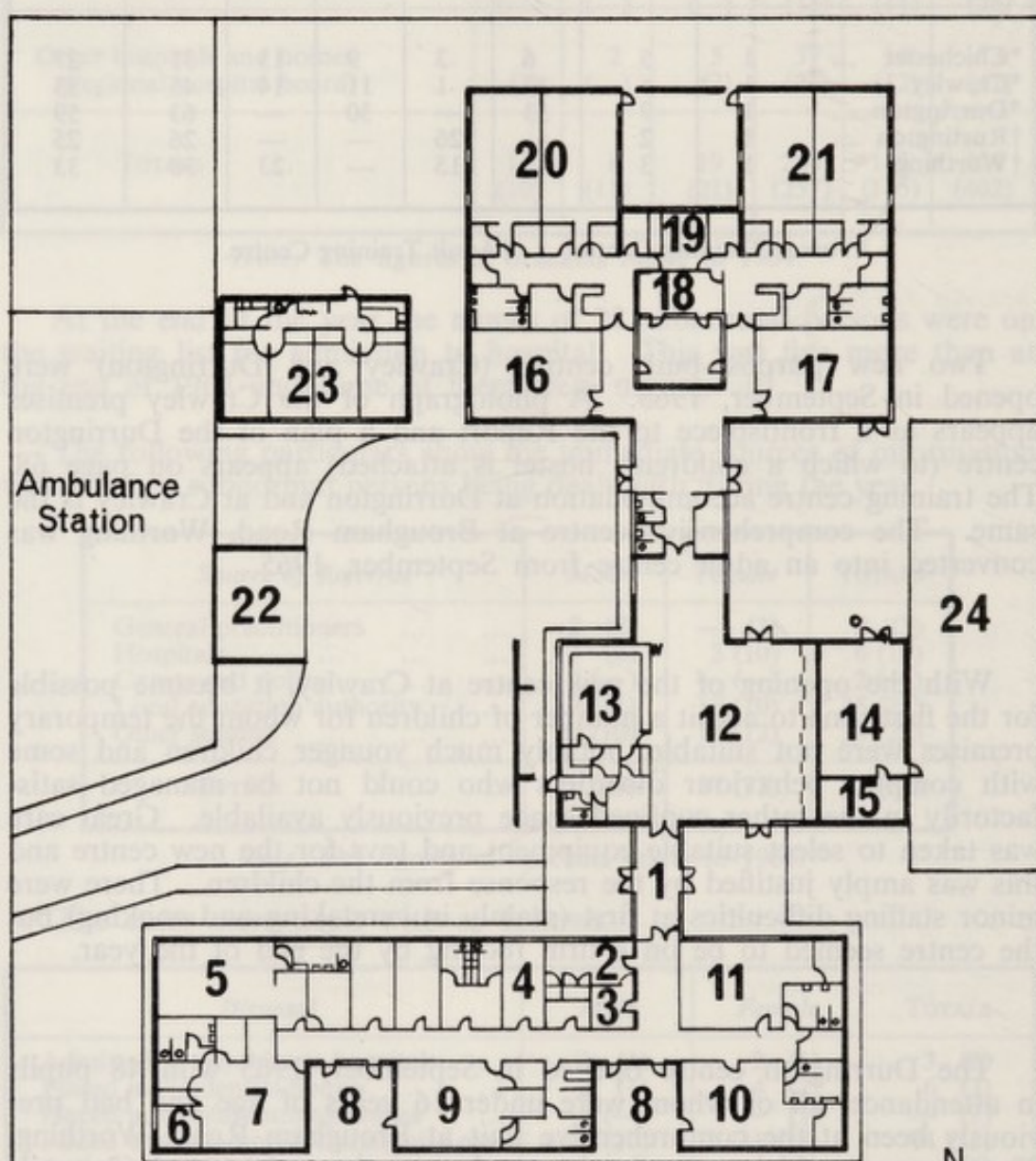
Two new purpose-built centres (Crawley and Durrington) were opened in September, 1965. A photograph of the Crawley premises appears as a frontispiece to the Report and a plan of the Durrington centre (to which a children's hostel is attached) appears on page 68. The training centre accommodation at Durrington and at Crawley is the same. The comprehensive centre at Brougham Road, Worthing was converted into an adult centre from September, 1965.

With the opening of the new centre at Crawley, it became possible for the first time to admit a number of children for whom the temporary premises were not suitable, notably much younger children and some with complex behaviour disorders who could not be managed satisfactorily in the rather confined space previously available. Great care was taken to select suitable equipment and toys for the new centre and this was amply justified by the response from the children. There were minor staffing difficulties at first (mainly in caretaking and cooking) but the centre seemed to be on a firm footing by the end of the year.

The Durrington centre opened in September, 1965 with 48 pupils in attendance, all of whom were under 16 years of age and had previously been at the comprehensive unit at Brougham Road, Worthing. There was a rapid increase in the number on the register and 63 pupils were attending at the end of the year. As at Crawley, it was possible to admit younger children, the youngest being only two years old. There was much appreciation, both from pupils and staff, of the new and



- |                    |                      |
|--------------------|----------------------|
| 1. Entrance        | 13. Kitchen          |
| 2. Office          | 14. Boiler Room      |
| 3. Waiting         | 15. Tank Room        |
| 4. Staff           | 16. Lounge           |
| 5. Manual Training | 17. Recreation       |
| 6. Bedroom         | 18. Nursery          |
| 7. Housecraft Room | 19. Control          |
| 8. Patio           | 20. Boys' Dormitory  |
| 9. Nursery         | 21. Girls' Dormitory |
| 10. Juniors        | 22. Car Port         |
| 11. Teaching       | 23. Staff Quarters   |
| 12. Assembly       | 24. Hard Play Area   |



DURRINGTON TRAINING CENTRE  
AND HOSTEL.



improved facilities and the housecraft work in particular was much more successful with the excellent equipment and accommodation which became available. Courses were started in simple cookery and many of the children showed surprising ability.

The Worthing centre started as an industrial unit for adults in September, 1965. It was decided to keep the centre open for 48 weeks a year and arrangements were made for the trainees to receive appropriate payment for work done. The results were much better than expected, for the trainees settled down exceptionally well and seemed to enjoy the work they carried out. A great deal of energy went into finding sufficient work, which varied from the simple folding and packaging of leaflets to the drilling and stamping of metal parts.

At Chichester, the centre was still located in a church hall. These premises were far from suitable for the Council's purpose. Work progressed satisfactorily on the new building in Summersdale Road which will be completed during 1966.

More carpentry was taught at the adult centre attached to Rustington Hostel and more time was spent on the cultivation of the gardens.

### **Residential Care**

The opening of the new hostel for children at Durrington (a plan of which appears on page 68) was delayed for three months because of problems of staff recruitment but the first six children moved in on 6th December, 1965 and thereafter the numbers increased. The premises were built for children who could benefit from attendance at a training centre but who were unable for various reasons to live at home. By the end of the year a mixed group of children had been admitted, two of whom had severe personality disorders in addition to being retarded; it is hoped to see improvement in their general ability and behaviour as a result of hostel and training centre placement.

At Rustington, a new warden and matron took up their posts at the beginning of the year. Although there were a number of staffing difficulties, recruitment was, on the whole, more satisfactory than formerly. A full account of the work of this hostel was given in the last Report.

During the year, nine patients were admitted to Forest Hospital, Horsham and one to the Royal Earlswood Hospital, Redhill, for short-term care owing to the illness of their parents or other special circumstances. In addition, two males were admitted to Graylingwell Hospital for short-term care whilst their foster parents took a holiday. One male was admitted to Durrington Hostel and nine patients were placed in residential homes for short periods.

Eighty pupils from training centres spent a week's holiday at Pirates' Spring Holiday Home at Dymchurch, Kent in May, 1965 and 24 senior girls from Worthing and Chichester centres spent a week at Southsea during May. Unfortunately it proved impossible to obtain holiday accommodation for the pupils of Rustington Training Centre.



### **Mental Nursing Homes**

At the end of the year, there were six homes registered in the County as mental nursing homes. One of these homes catered for 31 severely subnormal and physically handicapped children under the age of five years and the other five, with a total bed complement of 186, received aged and infirm patients, some of whom were confused.

### **Mental Welfare Officers**

The number of mental welfare officers was increased by two during the year. The Administrative Officer for Mental Health was re-designated Superintendent Mental Welfare Officer and was thereafter included in the field staff, and a welfare assistant, after the successful completion of a training course, was appointed mental welfare officer at Crawley; this brought the total establishment to ten.

The provision of a modern office for the mental welfare officer at Chichester, in premises at the rear of the health clinic, meant that the six district offices were satisfactory.

### **Social Clubs**

A weekly evening social club was started in local authority clinic premises at Lancing in October, 1965; this was promoted by a consultant psychiatrist and the Council's mental welfare officers. By the end of the year, the club had been successfully established and was proving to be specially useful for people who still needed some informal support whilst recovering from their illness.

## **PART VII—OTHER SERVICES**

### **Blind and Partially-Sighted Persons**

#### **Registration**

On 31st December, 1965 there were 1,145 blind and 360 partially-sighted persons on the register, compared with 1,063 blind and 338 partially-sighted on 31st December, 1964.

#### **Examination of applicants for registration**

During the year, 198 new (i.e. excluding transferred) cases of blindness and 77 cases of partial sight were added to the register following examination by consultant ophthalmic surgeons.



## Analysis of Forms B.D.8

An examination of the certificates (Forms B.D.8) reveals that, of the 275 cases newly-registered as blind or partially-sighted, the principal causes were cataract 89, retinal and macular degeneration 69, glaucoma 43, retinopathy 15 and myopia 13. There were no cases of retrolental fibroplasia.

## Follow-up action

Where treatment was recommended by ophthalmic surgeons, the cases were followed up to ensure that the treatment prescribed was carried out. The results of this follow-up action are tabulated below.

	Primary Ocular Disease			TOTALS
	Cataract	Glaucoma	Other	
1. Number of cases registered during the year in respect of which Forms B.D.8 recommended:				
(a) No treatment ... ..	30 (28)	13 (6)	69 (64)	112 (98)
(b) Treatment (medical, surgical, optical or hospital supervision) ... ..	59 (50)	30 (32)	74 (76)	163 (158)
TOTALS ... ..	89 (78)	43 (38)	143 (140)	275 (256)
2. Number of cases at 1 (b) above which:				
(a) Continued to receive treatment ... ..	34 (31)	26 (27)	57 (47)	117 (105)
(b) Refused treatment... ..	5 (5)	— (—)	— (—)	5 (5)
(c) Had treatment deferred or discontinued ... ..	3 (4)	1 (—)	1 (—)	5 (4)
(d) Were placed on waiting list for admission to hospital ... ..	2 (1)	— (1)	— (1)	2 (3)
(e) Died or left County before investigation ... ..	— (1)	— (—)	1 (—)	1 (1)
(f) Were under investigation at end of year ... ..	15 (8)	3 (4)	15 (28)	33 (40)
TOTALS ... ..	59 (50)	30 (32)	74 (76)	163 (158)

Note: The figures in brackets relate to 1964.

## Ophthalmia Neonatorum

1. Total number of cases notified during year ... ..	2 (1)
2. No of cases in which:	
(a) vision lost ... ..	— (—)
(b) vision impaired ... ..	— (—)
(c) treatment continuing at end of year ... ..	— (—)

Note: The figures in brackets relate to 1964.



## Nurseries and Child Minders

*The Nurseries and Child Minders Regulation Act, 1948* places a duty upon local health authorities to keep registers of, and empowers them to supervise

- (a) premises (i.e. day nurseries) in their area, other than premises wholly or mainly used as private dwellings, where children are received to be looked after for the day or a substantial part thereof or for any longer period not exceeding six days; and
- (b) persons (i.e. child minders) in their area who for reward receive into their homes children under the age of five to be looked after for the day or a substantial part thereof or for any longer period not exceeding six days.

It is an offence under the Act for an occupier of premises to carry on a day nursery if the premises are not registered or for an unregistered child minder to receive into his home three or more children, of whom he is not a relative, from more than one household.

	Numbers registered at 31st December		Number of children provided for	
	1964	1965	1964	1965
(a) Premises ... ..	51	60	1,178	1,401
(b) Daily minders ... ..	17	19	171	215

## Nursing Homes

The number of nursing homes in West Sussex has not varied much over the last five years. In 1965, 52 homes provided accommodation for geriatric and medical patients and the majority of their patients came within the category of elderly chronic sick.

The general standard is slowly improving and there is a steady demand for beds at moderate fees. There is evidence of some pressure for lower-priced beds from hospital almoners who wish to clear hospital beds and this is bound to be the case so long as the National Health Service is unable to provide adequately for geriatric cases.

The following table gives details of the registration of nursing homes in the County during the past five years.

	1961	1962	1963	1964	1965
Registered at 1st January ... ..	61	58	62	63	61
New homes registered ... ..	3	5	10	12	2
Registrations withdrawn ... ..	6	1	9	14	1
Registered at 31st December... ..	58	62	63	61	62



The accommodation available at the end of the year in nursing homes registered by the Council is shown below.

Size of homes (beds)	Number of homes	Number of beds provided			
		General	Maternity	Psychiatric	TOTALS
25 and over ... ..	11 (4)	239	—	171	410
20 to 24 ... ..	9 (1)	180	—	15	195
15 to 19 ... ..	15	241	—	—	241
10 to 14 ... ..	14	171	—	—	171
5 to 9 ... ..	8 (1)	45	—	8	53
Under 5 ... ..	5	9	4	—	13
TOTALS ... ..	62 (6)	885	4	194	1,083

*Note:* The figures in brackets denote homes (included in totals) also registered as mental nursing homes under the *Mental Health Act, 1959*.

It will be noted that only four maternity beds were provided, which suggests that there is little demand for this type of private accommodation in the County. Homes undertaking surgical operations were three in number, all in Worthing.

### West Sussex Nursing Homes Association

An emergency bed service was started in 1965 and it is hoped that this will provide a useful service for general practitioners. The proprietors of about one-third of the nursing homes in the County are members of the Association; it is hoped that others will join as the aims of the Association become more widely known.

## Nurses Agencies

The *Nurses Agencies Act, 1957* empowers county and county borough councils to issue licences to agencies for the supply of nurses. The Act provides, *inter alia*, that

no person shall carry on an agency for the supply of nurses on any premises in the area of any licensing authority unless he is a holder of a licence from that authority authorising him so to do on those premises; and that any such application may be refused, and any such licence which has been granted may be revoked, on any of the following grounds:

- that the applicant or, as the case may be, the holder of the licence is an individual under the age of twenty-one years or is unsuitable to hold such a licence;
- that the premises are unsuitable;
- that the agency has been or is being improperly conducted; or
- that offences against the Act or Part II of the *Nurses Act, 1943* have been committed in connection with the carrying on of the agency.

At the end of 1965, four agencies were licensed in the Council's area.



## Medical Examination of Staff

The following tables give particulars of the numbers of medical statements completed by, and medical examinations carried out on, prospective employees of the County Council.

### (a) Medical Statements Completed

<i>Department</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
Architect's ... ..	17 (17)	3 (—)	20 (17)
Archivist's ... ..	— (2)	— (1)	— (3)
Children's ... ..	16 (18)	42 (29)	58 (47)
Civil Defence ... ..	5 (5)	— (—)	5 (5)
Clerk's ... ..	20 (12)	33 (21)	53 (33)
Consumer Protection ... ..	6 (—)	4 (1)	10 (1)
Education:			
(a) Full-time staff ... ..	75 (64)	87 (41)	162 (105)
(b) Part-time teachers and canteen staff	27 (25)	338 (460)	365 (485)
Fire ... ..	1 (1)	5 (2)	6 (3)
Health ... ..	25 (40)	213 (434)	238 (474)
Library ... ..	3 (2)	11 (10)	14 (12)
Planning ... ..	6 (10)	3 (6)	9 (16)
Police ... ..	7 (3)	12 (8)	19 (11)
River Board ... ..	26 (6)	10 (1)	30 (7)
Surveyor's ... ..	69 (47)	3 (5)	72 (52)
Treasurer's ... ..	21 (13)	12 (5)	33 (18)
Valuer and Land Agent's ... ..	2 (4)	1 (1)	3 (5)
Welfare ... ..	3 (4)	22 (22)	25 (26)
West Sussex Valuation Panel ... ..	— (—)	— (2)	— (2)
<b>TOTALS</b> ... ..	<b>329 (273)</b>	<b>799(1,049)</b>	<b>1,128 (1,322)</b>

*Note:* The figures in brackets relate to 1964.

### (b) Medical Examinations

<i>Department</i>	<i>Male</i>	<i>Female</i>	<i>TOTALS</i>
Fire: (a) Full-time ... ..	37 (48)	4 (19)	41 (67)
(b) Part-time ... ..	24 (10)	1 (2)	25 (12)
Health: (a) Ambulance staff ... ..	3 (20)	— (—)	3 (20)
(b) Home Helps ... ..	— (—)	— (12)	— (12)
Surveyor's ... ..	1 (—)	1 (—)	2 (—)
Other Authorities ... ..	30 (30)	11 (17)	41 (47)
<b>TOTALS</b> ... ..	<b>95 (108)</b>	<b>17 (50)</b>	<b>112 (158)</b>

*Note:* The figures in brackets relate to 1964.



## PART VIII—ENVIRONMENTAL HEALTH SERVICES

During the year the Public Health Sub-Committee, as such, met on two occasions. At the second meeting it was decided that future meetings should be held at quarterly intervals and later the County Health Committee resolved that the Ambulance Sub-Committee and the Public Health Sub-Committee should be combined and should meet on a fixed date in each quarter. The Ambulance and Public Health Sub-Committee held two meetings during the last six months of the year, the second meeting being mainly for the purpose of preparing the 1966/67 financial estimates.

Matters considered by the Sub-Committee included grants for the extension of water mains and the provision of new sewers, sanitary conveniences on highways, sewage outfalls to the sea, and the control of milk supplies.

Following the receipt of Ministry of Health Circular 15/65 dated 3rd August, 1965 further consideration was given to the fluoridation of domestic water supplies and, at a meeting held on 26th November, 1965, the Council resolved

“That all water undertakers operating in the Administrative County of West Sussex be urged to raise the fluoride content of the water they supply to one part per million as soon as they can conveniently do so.”

Every endeavour is being made to implement this resolution but difficulties exist where the water undertakings are situated outside the County in the areas of local health authorities opposed to the fluoridation of water supplies.

Good relations continued to exist between the staff of the Department and those employed by the district councils and other public bodies; this enabled matters of joint concern to be dealt with speedily and effectively.

### Food and Drugs Act, 1955

#### Milk

The pasteurising establishments referred to in the last Report continued to operate satisfactorily.

The number of licence holders showed an increase of 13 over the previous year.

	1964	1965
Pasteurisers ... ..	6	6
“Untreated” (formerly “tuberculin-tested”) dealers ...	12	19
“Pre-packed” licence holders ... ..	315	321
	<hr/> 333	<hr/> 346



A total of 2,939 samples of milk, involving over 7,000 examinations, was submitted to the Public Health Laboratories in Brighton and Portsmouth. The thanks of the Department are again extended to the staffs of these laboratories for their co-operation and assistance.

The examinations of milk samples showed that the high standards reached in previous years were maintained; out of 526 samples of pasteurised milk obtained from pasteurising plants in the County, only one sample did not satisfy the statutory requirements. There is, however, cause for some concern at the number of herds affected by brucellosis and at the number of ex-farm samples found to contain inhibitory substances.

There were 872 samples of farm supplies (raw milk) submitted for examination

- (a) by the methylene blue test to check keeping quality;
- (b) to ascertain the presence of antibiotics or other inhibitory substance; and
- (c) by the brucella ring test, which indicates the presence or otherwise of brucella antibodies and is used as a screening test; a positive result indicates the need for further investigation.

Samples of "untreated" milk examined biologically for the presence of *tubercle bacilli* numbered 215. These were taken from 66 herds and all proved to be negative.

### **Brucellosis**

The 872 samples referred to above were procured from 221 herds and 215 of the samples (from 66 herds) showed a positive ring test. The positive samples were then submitted for further investigation by culture and/or by biological methods. Of these, 25 samples (involving 17 herds) were found to be positive to brucellosis giving an infected herd rate of 7.7 per cent. From two herds the milk was being sold to the public as "untreated" (farm bottled) milk but in each case the sale was stopped by the farmers immediately the result of the test was known and no recourse to statutory action was therefore required. Herd investigations involving 742 individual cow samples followed and all the "suspect" animals were removed from the herds before the milk was again sold to the public for use without heat treatment. The other 15 herds were supplying milk for pasteurisation and the only part of these supplies used without heat treatment was a small quantity consumed by the farmers, the farm workers and their respective families. They were warned of possible dangers and advised to boil the milk used for domestic purposes. In 8 of the 15 cases referred to, the farmer was helped to eradicate the disease by procuring individual cow samples on his behalf; the animals identified as positive to brucella were then sold for slaughter. In the remaining 7 cases, no further action could be taken



as the farmer was not prepared to stand the financial loss involved in slaughter. There is a need to eradicate this disease and it is to be hoped that before long the Government will promote an eradication scheme with compensation similar to that which proved so successful in dealing with the eradication of tuberculosis in cattle.

No statutory standard is provided for cream. Occasional samples were nevertheless taken to ascertain whether the cream was made from milk produced from cows suffering from brucellosis. Samples procured during the year gave no positive results. Fortunately, most of the cream used in the County is either pasteurised or made from pasteurised milk.

### **Antibiotics and Other Inhibitory Substances in Milk**

Of the 872 samples examined for the presence of antibiotics or other inhibitory substances, 31, or 3.6 per cent, were positive. Advisory visits to the farms by officers of the Department revealed that in 26 cases antibiotics had been used and various excuses were offered as to how the milk from animals treated with antibiotics had been included in the bulk supply. In 5 cases no reasonable explanation could be obtained and in one of these it appeared likely that the inhibitory substance entered the milk during the use of a special cleaning agent used in the milk plant.

It is most necessary that farmers should realise the importance of avoiding the introduction of antibiotics into milk. During the year a report was received from a general medical practitioner concerning a patient who was suffering from a serious reaction which appeared to be due to the ingestion of penicillin. Enquiries revealed that milk consumed by the patient was pasteurised and obtained from a local dairy. Samples of the milk were procured from the dairy immediately and three samples of pasteurised milk, including one of a school supply, were found to contain penicillin. Only 14 farms supplied the milk to the dairy concerned and samples from each farm supply were obtained without delay. These samples revealed that the milk from one farm contained the antibiotic. Subsequent samples of both the pasteurised and raw milk proved to be satisfactory.

This isolated case emphasises the need for continued sampling of milk for the presence of antibiotics, particularly as the process of pasteurisation (although restraining the action of penicillin) does not completely destroy the drug. No doubt when the penalty of a price



reduction of a shilling a gallon is imposed by the Milk Marketing Board, more care will be taken by farm workers to ensure that milk supplies do not contain antibiotics.

### Salmonella in Milk

Notification of an outbreak of food poisoning, due to salmonella infection in milk, was received during the year and the Department co-operated with the medical officer of health of the county district concerned in helping to eradicate the infection in the herd. Further reference to this outbreak is made on page 23.

During the year, four other farms were sampled for suspected salmonella infection and, although a number of milk samples and rectal swabs were taken from individual cows, no infection was found.

Details of the numbers of samples of milk procured during the year for bacteriological examination are given in the following tables.

### Samples Procured for Bacteriological Examination

#### Heat-Treated Milk

Class of milk	No. of samples		Tests	Result of tests			
	A	B		Passed		Failed	
				A	B	A	B
1	2	3	4	5	6	7	8
Pasteurised ...	298	454	Phosphatase ... Methylene Blue	298 297	454 437	— 1	— 17
Channel Island (Pasteurised)	140	33	Phosphatase ... Methylene Blue	140 140	33 33	— —	— —
Homogenised ...	88	122	Phosphatase ... Methylene Blue	88 88	122 120	— —	— 2
Sterilised ...	—	12	Turbidity ...	—	12	—	—
School Supplies (Pasteurised)	138	29	Phosphatase ... Methylene Blue	137 134	29 28	1 4	— 1
TOTALS ...	664	650		658	630	6	20



## Raw Milk

1	2	3	4	5	6	7	8
"Untreated" (Farm bottled)	144	196	Methylene Blue	134	189	10	7
"Untreated" (Dairy deliveries)	98	—	Methylene Blue	70	—	28	—
"Untreated" (Farms)	—	421	Methylene Blue	—	413	—	8
School Supplies	—	13	Methylene Blue	—	13	—	—
TOTALS ...	242	630		204	615	38	15

A from processing plants.

B from other dairies and shops (in raw milk table, also farms)

*Note:* The figures given in columns 5 to 8 refer to the number of samples taken and not to the totals of the different tests.

## Bottle Washing at Dairies

Regular examination of washed bottles continued and the results are set out below. A high standard was again maintained; only 12 bottles out of a total of 1,236 proved to be unsatisfactory.

					1964	1965
Number of bottles examined	...	...	...	...	1,172	1,236
Number of bottles satisfactory	...	...	...	...	1,108	1,134
Number of bottles fairly satisfactory	...	...	...	...	46	90
Number of bottles unsatisfactory	...	...	...	...	18	12

## Inspection of Dairies and Sampling of Dairy Water Supplies

Inspections of dairies numbered 219 and, in addition, 951 visits were made to retail milk vendors' premises; 36 farms were visited regarding antibiotics, 36 regarding brucellosis and 7 in connection with salmonella infections.

## Housing

### New Houses

New houses erected in the County during 1965 numbered 5,011. Of these, 3,962 were erected by private owners, 983 (including 189 in Crawley New Town) by local authorities and 66 by housing associations. From April, 1945 to December, 1965 70,652 houses have been built in West Sussex; 42,718 by private owners, 27,721 by local authorities (including 11,602 in Crawley New Town) and 213 by housing associations.



# HOUSING STATISTICS

Construction of new houses up to 31st December, 1965							Registrar General's estimated population mid-1965 (000's) (9)	Houses in clearance areas and unfit houses elsewhere		
Local authorities			Private owners		Houses provided by Housing Associations			Included in orders 1.1.55 to 31.12.65 (10)	Demolished or closed 1.1.55 to 30.9.65	Elsewhere (12)
In tenders approved but not started (1)	Under construction (2)	Completed since 1.4.45 (3)	Under construction (4)	Completed since 1.4.45 (5)	Under construction (6)	Completed since 1.4.45 (7)				
16	—	172	—	174	—	6	2.7	—	—	65
—	4	1,360	59	901	—	—	20.5	182	230	111
141	148	1,921	404	9,523	51	15	81.1	67	68	52
76	53	861	230	2,972	20	29	30.6	3	3	20
—	—	1,101	201	2,531	97	49	60.3	29	25	43
32	65	967	163	2,867	—	19	23.8	71	39	71
—	14	710	166	1,333	—	36	17.6	42	42	23
93	—	635	172	2,266	—	—	18.2	153	104	10
18	20	875	14	668	—	—	11.9	142	153	30
48	144	1,374	268	1,954	—	—	24.9	10	—	91
41	136	2,048	699	6,588	—	—	56.7	29	47	306
3	88	1,265	159	2,113	—	6	26.2	24	16	334
38	20	902	114	790	—	14	18.2	—	—	263
61	—	473	126	458	—	—	10.1	—	—	109
—	228	1,455	508	7,580	16	39	41.9	—	—	225
87	68	11,602	—	1,865*	—	—	—*	—	—	—
654	988	27,721	3,283	42,718	184	213	444.7	752	727	1,753

\*Note: These figures are included in those for Crawley Urban District.



Out of the total of 3,962 houses built by private enterprise during 1965, 2,872 (72.4 per cent) were constructed in coastal districts (excluding the boroughs of Arundel and Chichester) and, of this number, 1,624 were built in the rural districts of Chichester and Worthing. Houses demolished during the period 30th September, 1964 to 1st October, 1965 numbered 238 of which 105 were in clearance areas and 133 elsewhere. The number of houses included in clearance areas in 1965 was 21. These figures show a net increase in the number of houses in the County during the year of 4,773.

The table on page 80, compiled from information made available by the Ministry of Housing and Local Government, gives full details of the number of houses built and those demolished and closed in the various districts of the County.

### Caravans

During the year an attempt was made to deal with a gypsy encampment. Arrangements were made for the site to be acquired by the County Council who were prepared to lay it out to an acceptable standard on condition that the district council would undertake the future maintenance and management. The district council were unwilling to play their part and at the end of the year the matter was unresolved.

## Water

### Sampling

The following samples of water were obtained on behalf of the North West Sussex Water Board.

					1964	1965
<b>Total number of samples (bacteriological)</b>	...	...	...	...	<b>1,163</b>	<b>1,151</b>
Number procured from:						
<b>Pumping and Booster Stations</b>	...	...	...	...	<b>854</b>	<b>961</b>
Satisfactory	...	...	...	...	769	899
Suspicious	...	...	...	...	50	13
Unsatisfactory	...	...	...	...	35	49
<b>Distribution Points</b>	...	...	...	...	<b>309</b>	<b>190</b>
Satisfactory	...	...	...	...	306	190
Suspicious	...	...	...	...	—	—
Unsatisfactory	...	...	...	...	3	—

The suspicious and unsatisfactory samples were all obtained from one pumping station and were all of water which had not been subjected to any purification treatment. Treated water supplies from the same supply were all satisfactory.



## Extension of Water Mains

<i>District and Parish or Village</i>	<i>Works and Cost</i>	<i>County Council Grant</i>
<b>Chanctonbury R.D.</b> Amberley (Mill Cottages) ... ..	Extension of 70 yards of 3" main to serve one property and improve supply to another; cost £135.	Lump sum grant of £28.
<b>Chichester R.D.</b> Chilgrove ... ..	Sum required towards cost of deficiency grant on the proposed acquisition of 4,500 yards of 4" main and a reservoir owned by an estate company at an estimated cost of £9,079 to improve the supply to 36 properties.	Provisional estimated grant of £150 a year for 12 years. Scheme defer- red on financial grounds.
<b>Horsham R.D.</b> Cowfold (Peacocks Hill) ... ..	Extension of 1,515 yards of 4" main to serve three properties and provide a link between mains; cost £2,375.	Lump sum grant of £315.
Ifield (Whitehall Drive) ... ..	Extension of 20 yards of 3" main to serve one property; cost £74.	Lump sum grant of £15.
Southwater (Shaws Lane) ... ..	Extension of 320 yards of 3" main to serve one property and improve supplies to two others; cost £465.	Lump sum grant of £65.
<b>Midhurst R.D.</b> Harting (Church Farm Lane) ... ..	Extension of 155 yards of 3" main to supply four properties; cost £340.	Lump sum grant of £93.
Harting (Cross Dykes)	Extension of 80 yards of 3" main to supply one property; cost £225.	Lump sum grant of £48.
Milland (Milland Place) ... ..	Extension of 420 yards of 3" main to supply three properties; cost £690.	Lump sum grant of £132.
<b>Petworth R.D.</b> Fittleworth (Holly Grove) ... ..	Extension of 400 yards of 3" main to supply three properties; cost £720.	Lump sum grant of £227.
Kirdford (Hawkhurst Cross Roads to Marshalls and Crouchers Farms)	Extension of 1,250 yards of 4" main to supply nine properties and part of a link main; cost £1,775.	Lump sum grant of £105.

## Sewerage and Sewage Treatment

The opposition to the proposed sea outfall for sewage at Bognor Regis had not been resolved at the end of the year but a Public Inquiry was fixed for a date early in 1966.

The arrangements for the disposal of sewage at Arundel remained unsatisfactory. It is unfortunate that the river authority are unable to take statutory action to eliminate the contamination of the River Arun by sewage from this borough.



### Approved Schemes

<i>District and Parish or Village</i>	<i>Works and Cost</i>	<i>County Council Grant</i>
<b>Chanctonbury R.D.</b> Coldwaltham and Watersfield ...	Part of comprehensive sewerage scheme approved in 1960; village scheme to deal with 270 properties; estimated cost £116,320, including £28,840 for sewage treatment works.	50 per cent of approved revenue charges.
Wineham ...	Part of comprehensive sewerage scheme approved in 1960; village scheme to deal with 52 properties; estimated cost £32,750, including £14,230 for sewage treatment works.	50 per cent of approved revenue charges.
<b>Chichester R.D.</b> Appledram ...	Alterations to scheme approved in 1964; extension of sewers to deal with 47 properties; estimated cost £14,765.	£586 a year for 30 years.
Singleton ...	Extension of sewers and enlargement of sewage treatment works to deal with 60 properties (34 for the first time); estimated cost £10,780, including £4,188 for sewage treatment works.	£2,600 (lump sum).
<b>Horsham R.D.</b> Barns Green...	Scheme for village to serve 200 properties (150 for the first time); estimated cost £81,100, including £31,777 for sewage treatment works.	£1,554 a year for 30 years.
Horsham Rural (Kerves Lane) ...	Extension of sewer and pumping main to serve 18 properties; estimated cost £6,580.	£246 a year for 30 years.
Mannings Heath ...	Revision of scheme submitted during 1964; to serve 221 properties (118 for the first time); estimated cost £31,000, including £9,783 for sewage treatment works.	£666 a year for 30 years.
<b>Petworth R.D.</b> Plaistow ...	Extension of the Loxwood sewerage scheme to include the village of Plaistow; estimated cost of complete scheme now £400,243, including £52,170 for sewage treatment works; to serve 705 properties. The additional cost to include Plaistow is approximately £161,000; a scheme to provide sewerage and a sewage treatment works for Plaistow was submitted to the Government during 1951-3 at an estimated cost of £19,150; the Government considered the scheme too costly and the proposals were abandoned.	For complete scheme £11,162 a year for 30 years.



## Other Matters

Other matters dealt with during the year included an infestation by moles and rabbits on property belonging to the Council, litter on highways, delays in emptying cesspools, sewage treatment plants at Council premises, the siting of a slaughterhouse and the provision of public conveniences on highways. References to the environmental health inspection of schools and to the supervision of school swimming pools are contained in Part IX of the Report.

Inspections were made of refuse tips where the owners had been given planning permission by the Council. A matter of interest was the difficulty of disposing of plastic bags and containers on tips receiving pulverised refuse. It was found that, in certain exposed parts, even though screening was provided against wind, cellophane bags were apt to be blown into neighbouring fields and become a nuisance to farmers and cattle.

The long-term survey designed to measure air pollution throughout the country was continued. There were 110 visits to the premises containing the two instruments maintained by the Council for measuring the daily deposit of carbon and sulphur dioxide in the atmosphere. Reports were made monthly to the Warren Springs Laboratory of the Ministry of Technology.

No further smokeless areas were created during the year in connection with the *Clean Air Act, 1956*.

## PART IX—SCHOOL HEALTH SERVICE

### Statistics

#### Child Population

As the following table shows, the child population has increased by 1,900 since last year.

				1964	1965	Increase
Children	under 1 year	...	...	6,260	6,430	170
	1 to 4 years	...	...	26,540	27,170	630
				<hr/>		
TOTAL	under 5 years	...	...	32,800	33,600	800
	5 to 14 years	...	...	61,300	62,400	1,100
				<hr/>		
TOTAL	under 15 years	...	...	94,100	96,000	1,900

#### School Population

In January, 1966 there were 62,461 children on the rolls of maintained schools in the County, an increase of 1,356 on the figure for last year. The numbers of children in the various types of maintained schools in the County during the past two years are shown on the next page.



<i>Type of school</i>	<i>Number of schools</i>		<i>Number on roll</i>	
	1964	1965	1964	1965
Nursery ... ..	4	4	273	289
Primary ... ..	177	176	35,429	36,220
Secondary: Grammar ... ..	10	10	5,593	5,674
Comprehensive ... ..	3	4	3,849	4,683
Modern ... ..	26	26	14,965	15,084
Technical High ... ..	1	—	484	—
Special ... ..	5	5	512	511
TOTALS ... ..	226	225	61,105	62,461

## Medical Inspection

### Periodic and Special Inspections

There was no change in the arrangements for children to be medically examined at least three times during their school lives. These examinations take place as soon as possible after admission to school, in the last year at a primary school or the first year in a secondary school and in the last year of compulsory school attendance. A further examination is arranged for those children who remain at school after they have reached the statutory school-leaving age.

The table which follows shows the number of children examined and re-examined in the various age groups during the past two years.

The reduction in the number of children examined in 1965 was due in part to the loss of medical officers' time owing to illness and to their commitments on other work.

<i>Type of examination</i>	1964	1965
Entrants ... ..	6,468	5,025
Other periodic examinations (Children aged 10-11 years or those who had not been previously examined in this age group)	6,185	5,904
Leavers ... ..	4,944	4,289
TOTALS ... ..	17,597	15,218
Special examinations ... ..	177	102
Re-examinations ... ..	11,624	9,319
TOTALS ... ..	29,398	24,639



## Co-ordination with other Services

Close liaison was maintained, and where possible improved, with all the services concerned with the health, education and welfare of children. I am particularly grateful for the help and co-operation received from family doctors with whom the Department is constantly in communication about individual children.

## General Physical Condition

Seventeen of the 15,218 children examined at periodic medical inspections were considered by the school medical officers to be of unsatisfactory physical condition. The reasons for this classification are shown below.

Underweight	...	...	4	Overweight	...	...	10
Asthma	...	...	1	Colitis	...	...	1
Sequelae of glandular fever			1				

Year	Physical condition of school children		
	Percentage found to be satisfactory	Percentage found to be unsatisfactory	
		West Sussex	England and Wales
1961	99.86	0.14	0.68
1962	99.99	0.01	0.62
1963	99.98	0.02	0.54
1964	99.90	0.10	0.45
1965	99.89	0.11	*

\*Not available.

## Foot Health

Dr. G. A. G. Robinson has supplied the following comment:

"I have noticed some improvement in the footwear of teenagers. Many of them now have small straps or low lacing on their shoes, although they are still pointed. The feet of the younger girls show less evidence of hallux valgus."

Dr. F. Cockcroft reported:

"I have noticed in the winter months that teenage girls have very red ankles and very cold feet, frequently with chilblains. I rarely see this condition in boys of a similar age. The most obvious cause appears to be the fact that girls wear thin nylon stockings and very flimsy shoes, whereas boys wear woollen socks and stouter shoes."

At the beginning of the year, following reports from a number of medical practitioners which indicated an increased incidence of verrucae, representations were made to the Director of Education with a view to



prohibiting the practice of physical education in bare feet in indoor accommodation in schools. Advice on this point was sought from the Department of Education and Science and from the Ministry of Health but neither was prepared to give an authoritative opinion in the absence of conclusive evidence that foot infections can be spread in this way.

The matter was subsequently considered by the County Education Committee who agreed that children in secondary schools must wear suitable footwear for all indoor activities. The parents of children in primary schools were given the option of their children taking part in physical education activities in bare feet or in plimsolls.

Head teachers were reminded by the Director of Education of the need to prohibit any children with foot infections from taking part in any activity which might result in the infection being passed to other children. Attention was also drawn to the importance of good standards of cleaning and hygiene in gymnasias, changing rooms, showers, swimming pools and assembly halls.

### **Cleanliness**

There was no change in the arrangements for routine hygiene inspections. These were carried out at all primary schools with the exception of those in Crawley. At secondary schools, visits were made only at the request of head teachers.

The number of individual examinations carried out during the year was 58,908, and 146 children were found to have nits or vermin in their hair.

The following table shows the numbers of children found to have vermin in their heads in each of the last ten years.

<i>Year</i>	<i>Total number of individual examinations</i>	<i>Total number of individual children found to be infested</i>
1956	82,236	206
1957	91,725	171
1958	85,218	123
1959	50,683	104
1960	56,739	112
1961	53,936	104
1962	36,431	61
1963	51,795	92
1964	56,028	75
1965	58,908	146



## Medical Treatment

### Statistics

Of the 15,218 children examined in the three main age groups, 1,539 (10.1 per cent) were found to require treatment for 1,652 defects. This showed an increase of 0.2 per cent on the corresponding figure for 1964.

As in previous years, defective vision was the most common defect noted at periodic medical inspections and, of the children requiring treatment, 676 (42.1 per cent) were referred for this condition.

Numbers and types of defects found by periodic and special medical inspections to require treatment or observation are shown in the table on page 108.

In the following table the numbers of children examined in the various age groups and the numbers found to require treatment during the year are compared with the figures for 1964.

Age group	Number of children examined		Number found to require treatment		Percentage found to require treatment			
					West Sussex		England and Wales	
	1964	1965	1964	1965	1964	1965	1964	1965
Entrants ...	6,468	5,025	610	510	9.4	10.1	16.0	•
Other periodic inspections ...	6,185	5,904	651	630	10.5	10.7		
Leavers ...	4,944	4,289	485	399	9.8	9.3		
TOTALS ...	17,597	15,218	1,746	1,539	9.9	10.1		

\*Not available.

### Eye Clinics

School eye clinics continued to be held at various centres in the County. Due to the resignations of the ophthalmologists, the clinic at Crawley was closed in January, 1965. It was re-opened in May for one session a week when the South West Metropolitan Regional Hospital Board obtained the services of a locum ophthalmologist. From October, following the appointment of a second locum ophthalmologist, the clinic was held on two sessions a week.

The number of children examined by the ophthalmologists during the year was 2,998; an increase of 51 on the figure for 1964. The number of examinations was 3,207 compared with 3,684 in the previous year.



Spectacles known to have been prescribed for children during the year numbered 1,654. Of these, 1,403 were prescribed at school eye clinics, 191 fewer than in 1964.

Forty-eight school children and 27 children under school age were known to have received operative treatment for squint during the year.

Orthoptists treated 373 children at clinics at Chichester, Crawley, Horsham and Worthing, 76 fewer than in the previous year. The following table shows the numbers of new and old cases seen at the school eye clinics during the year and the total attendances made.

<i>Clinic</i>	<i>Number of cases seen</i>			<i>Total attendances</i>
	<i>New</i>	<i>Old</i>	<i>TOTALS</i>	
Arundel ... ..	3 (—)	27 (—)	30 (—)	31 (—)
Bognor Regis ... ..	73 (20)	209 (31)	282 (51)	298 (59)
Chichester ... ..	156 (30)	482 (41)	638 (71)	681 (77)
Crawley ... ..	155 (3)	422 (1)	577 (4)	608 (5)
Horsham ... ..	76 (12)	264 (20)	340 (32)	350 (36)
Lancing ... ..	38 (15)	147 (43)	185 (58)	194 (67)
Littlehampton ... ..	38 (—)	87 (—)	125 (—)	126 (—)
Shoreham-by-Sea ... ..	83 (16)	314 (29)	397 (45)	425 (50)
Worthing ... ..	132 (48)	292 (35)	424 (83)	494 (157)
<b>TOTALS ... ..</b>	<b>754 (144)</b>	<b>2,244 (200)</b>	<b>2,998 (344)</b>	<b>3,207 (451)</b>

*Note:* The numbers in brackets refer to children under school age and are included in the total figures.

### Orthopaedic Clinics

Orthopaedic clinics continued to be held in six centres in the County. The number of children attending the orthopaedic clinics increased from 701 (including 222 under school age) in 1964, to 742 (including 230 under school age) in 1965.

Thirty-one children (including four under school age) received in-patient treatment and 113 children (including 24 under school age) were supplied with 121 orthopaedic appliances.

The following table shows the number of sessions held by school orthopaedic surgeons, the number of cases seen, and the attendances. The numbers in brackets refer to children under school age and are included in the total figures.



Clinic	No. of sessions	No. of cases seen			Total attendances
		New	Old	TOTALS	
Chichester ... ..	12	80 (30)	146 (46)	226 (76)	347 (121)
Crawley ... ..	17	91 (34)	79 (16)	170 (50)	272 (82)
Horsham ... ..	15	60 (27)	79 (17)	139 (44)	209 (67)
Lancing ... ..	8	33 (13)	36 (3)	69 (16)	107 (29)
Littlehampton ... ..	8	26 (7)	34 (3)	60 (10)	97 (14)
Worthing ... ..	10	50 (30)	28 (4)	78 (34)	127 (54)
TOTALS ... ..	70	340 (141)	402 (89)	742 (230)	1,159 (367)

The types of cases seen by the orthopaedic surgeons are shown below; again, the figures in brackets refer to children under school age and are included in the totals.

Diagnosis	Number of		TOTALS
	Boys	Girls	
Club foot ... ..	13 (2)	4 (3)	17 (5)
Dislocation of hip ... ..	3 (2)	4 (1)	7 (3)
Spastic paralysis ... ..	20 (6)	22 (3)	42 (9)
Spina bifida ... ..	7 (1)	4 (1)	11 (2)
Torticollis ... ..	4 (3)	7 (3)	11 (6)
Bow legs ... ..	2 (2)	6 (5)	8 (7)
Knock knees ... ..	70 (36)	48 (23)	118 (59)
Abnormalities of spine ... ..	12 (—)	18 (—)	30 (—)
Flat feet, etc. ... ..	178 (53)	125 (44)	303 (97)
Poliomyelitis (paralyses or pareses) ... ..	13 (—)	15 (—)	28 (—)
Perthe's disease ... ..	2 (—)	— (—)	2 (—)
Pseudo-hypertrophic muscular dystrophy ... ..	2 (—)	2 (—)	4 (—)
Other conditions ... ..	83 (22)	77 (20)	160 (42)
Osteomyelitis ... ..	— (—)	1 (—)	1 (—)
TOTALS ... ..	409 (127)	333 (103)	742 (230)

## Physiotherapy

The following statement shows the cases treated by the physiotherapists under the instructions of the orthopaedic surgeons. Sessions were held at various clinics (see page 111) and, when necessary, children were visited in their homes and schools. Compared with 1964, 46 more children were treated. Total attendances fell by 546, a percentage decrease of 9.2.



<i>Number of cases treated</i>			<i>Total attendances</i>
<i>Old</i>	<i>New</i>	<i>TOTAL</i>	
416 (97)	448 (175)	864 (272)	5,406 (1,477)

*Note :* The numbers in brackets refer to children under school age and are included in the total figures.

### **Speech Therapy**

The speech therapist in the north-east of the County resigned in April and the therapist in the south-east of the County resigned in June, 1965. A series of advertisements, both national and local, for full-time or part-time speech therapists failed to produce any applications for the vacant posts.

By letter dated 2nd November, 1965 the Department of Education and Science informed local education authorities that the continuing shortage of speech therapists in the school health service was being studied to see what could be done to improve matters. Authorities were asked to give details of the career histories of speech therapists employed in the school health service since 1st January, 1960 and to estimate their staff needs up to 1970. The study is likely to continue for some months and the results cannot be forecast at this stage.

The senior speech therapist working in the west of the County and the therapist in Crawley both had heavy case loads and were unable to give other than token assistance for urgent cases in the areas at present without speech therapists. In view of the travelling and consequent loss of treatment time it was quite impracticable for the two speech therapists to maintain the regular service previously undertaken by four. To attempt this would have resulted in a further weakening of the service, for experience in similar circumstances in the past has shown that when Peter is robbed to pay Paul all those concerned about Peter's welfare are no less vociferous in their claims for service than those who champion Paul.

The following comments have been supplied by Miss M. G. A. McCombie, the senior speech therapist.

"This has been a discouraging year. It is with regret that Mrs. Miles and I must limit our numbers and the extent of our areas; but unless we do so our work can have no value. We do examine any urgent cases in other parts of the County and give advice and occasional help to them but we find it difficult enough to give adequate care to those children already in our charge without adding to their numbers.

The incidence of speech defects and disorders remains constant and the numbers are high in Crawley, Chichester, Midhurst and Petworth. It can only be hoped that more therapists may be appointed soon."

During the year, 371 children were treated and 690 were seen for observation. The corresponding figures for 1964 were 454 and 794.



# SPEECH THERAPY

Centre	Defect or disorder of speech								New cases	Number discharged during the year	Waiting list at 31.12.65
	Articulation	Language	Fluency	Voice	Associated with cerebral palsy	Associated with cleft palate	Total number of children	Total attendances			
Crawley ... ..	146 (65)	23 (8)	38 (26)	4 (2)	3 (1)	10 (2)	224 (104)	2,522 (226)	70	92	35
Horsham and Southwater ...	45 (30)	—	14 (10)	—	—	2 (—)	61 (40)	205 (92)	8	31	8
Billingshurst & Wisborough Green	16 (8)	—	4 (3)	—	1 (1)	—	21 (12)	101 (18)	2	5	—
Bognor Regis ... ..	77 (59)	—	6 (3)	—	—	—	83 (62)	108 (62)	2	4	—
Chichester ... ..	178 (137)	15 (11)	30 (22)	1 (—)	7 (6)	8 (5)	239 (181)	920 (429)	92	82	15
Midhurst ... ..	57 (46)	1 (1)	7 (4)	—	—	2 (—)	67 (51)	385 (166)	17	12	6
Lancing ... ..	39 (21)	4 (3)	6 (5)	—	—	2 (1)	51 (30)	59 (30)	—	1	1
Littlehampton ... ..	47 (31)	—	9 (6)	—	1 (—)	1 (—)	58 (37)	70 (37)	4	4	3
Shoreham-by-Sea ... ..	50 (39)	1 (1)	7 (6)	—	—	—	58 (46)	155 (110)	5	16	—
Petworth, Ashington, Storrington & Thakeham ... ..	81 (66)	2 (2)	12 (9)	1 (1)	2 (1)	2 (2)	100 (81)	275 (103)	45	40	—
Steyning ... ..	6 (3)	1 (—)	1 (—)	1 (—)	1 (—)	—	10 (3)	82 (10)	1	2	—
Worthing & Findon ... ..	57 (26)	6 (2)	16 (11)	—	3 (—)	7 (4)	89 (43)	133 (43)	10	4	3
TOTALS ... ..	799 (531)	53 (28)	150 (105)	7 (3)	18 (9)	34 (14)	1,061 (690)	5,015 (1,326)	256	293	71

Note: The unbracketed figures indicate the numbers of children treated; bracketed figures show the numbers under observation and are included in the totals.



The table on page 92 gives particulars of the numbers of pupils treated and under observation, according to category of defect or disorder of speech, at the various treatment centres. The numbers in brackets refer to the children under observation and are included in the total figures.

### Consultative and Advice Clinics

During the year, 690 children made 1,213 attendances at these clinics held by school medical officers. The corresponding figures for 1964 were 647 and 1,357.

### Enuresis

The treatment of nocturnal enuresis by means of pad and bell alarms was continued during the year and reports were received on 58 boys and 25 girls.

The results are analysed in the following table which also shows the results of treatment in the preceding four years.

Year	Complete success		Marked improvement		Some improvement		Not improved		TOTALS	
	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls	Boys	Girls
1961	7	—	2	1	2	—	2	—	13	1
1962	14	1	2	2	2	1	2	3	20	7
1963	29	8	5	4	4	1	6	2	44	15
1964	48	15	4	—	8	5	10	2	70	22
1965	44	20	2	—	2	2	10	3	58	25
TOTALS	142	44	15	7	18	9	30	10	205	70

### Convalescence

During the year, short-term convalescence was provided for 19 children in accordance with the provisions of section 48(3) of the *Education Act, 1944*. This was three more than in 1964.

## Handicapped Pupils

### Ascertainment

The duty laid upon a local education authority by the *Education Act, 1944* to ascertain handicapped children and to provide for their special needs has been fully documented in previous editions of the Report. This important aspect of the school health service continued to operate satisfactorily during the year and school medical officers carried out 337 examinations of children known or thought to have some physical or mental impairment.



# HANDICAPPED PUPILS

	(1) Blind (2) Partially Sighted		(3) Deaf (4) Partially Hearing		(5) Physically Handicapped (6) Delicate		(7) Maladjusted (8) Educationally Sub-normal		(9) Epileptic (10) Speech Defects		TOTALS (1)-(10)
	(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	
IN THE CALENDAR YEAR: Handicapped pupils A. Newly assessed as needing special educational treatment at special schools or in boarding homes	—	3	2	3	11	15	23	92	—	1	150
B. (i) Included at A above and newly placed in special schools or boarding homes ...	—	3	1	—	2	6	9	57	—	—	78
(ii) Assessed prior to January, 1965 and newly placed in special schools or boarding homes	1	—	1	—	2	5	8	32	—	1	50
TOTAL (B (i) and B (ii) ) ...	1	3	2	—	4	11	17	89	—	1	128
AS AT 20TH JANUARY, 1966: C. Number requiring places in (a) day ... special schools ... (b) boarding ...	—	—	—	1	1	—	—	48	—	—	50
	—	—	3	1	7	3	9	11	—	1	35
D. (i) Number on the registers of: (1) Maintained special (a) day pupils ... schools as ... (b) boarding pupils ... (2) Non-maintained (a) day pupils ... special schools as ... (b) boarding pupils	—	—	—	—	—	—	—	337	—	—	337
	—	2	3	—	2	1	40	82	—	—	130
	—	—	—	—	—	—	—	—	—	—	—
	6	10	3	9	15	25	8	3	—	1	80
TOTAL ...	6	12	6	9	17	26	48	422	—	1	547
(ii) Independent schools under arrangements made by the authority ...	—	—	13	1	5	1	9	3	—	—	32
TOTAL (D (i) and D (ii) ) ...	6	12	19	10	22	27	57	425	—	1	579
(iii) Boarded in homes and not included in (i) or (ii)	—	—	—	—	—	1	17	—	—	—	18
TOTAL (D (i), (ii) and (iii) ) ...	6	12	19	10	22	28	74	425	—	1	597
E. Number being educated under arrangements made in accordance with Section 56 of the Education Act, 1944 (i) in hospitals ... (ii) in other groups ... (iii) at home ...	—	—	—	—	5	1	—	—	—	—	6
	—	—	—	—	—	—	—	—	—	—	—
	1	1	—	1	12	5	—	1	—	—	21



A summary of the information sent to the Department of Education and Science showing the number of handicapped children ascertained as needing education in special schools or boarding homes during 1965 is given on page 94. It also shows the number of handicapped children newly placed during the year and, as on 20th January, 1966, the number awaiting admission to, and those on the registers of, special schools or boarding homes.

### Children found to be Unsuitable for Education at School

During the year, 39 children were reported to the local health authority under section 57(4) of the *Education Act, 1944* as being unsuitable for education at school. Two children previously reported as being unsuitable for education at school were reviewed under the provisions of section 57A but in neither case was the original decision cancelled.

### Child Guidance

This is the sixth successive year in which reference has been made in this section of the Report to a shortage of staff. Although there has been a full establishment of psychiatrists since early in 1964, it has not yet been possible to recruit psychiatric social workers, educational psychologists and child psychotherapists to complete the child guidance clinic teams.

Opportunities were taken, within the approved budget provision, to appoint either psychiatric social workers or child psychotherapists according to their availability. Whilst this flexibility of approach helped to some extent, it did not solve the problem completely.

The following table shows the staffing position at the four clinics at the end of the year and also the staff establishment. For convenience, the time worked has been expressed as whole-time equivalents.

<i>Clinics</i>	<i>Psychiatrists</i>	<i>Psychiatric Social Workers</i>	<i>Social Workers</i>	<i>Child Therapists</i>	<i>Educational Psychologists</i>
Chichester ...	0.45	0.16	—	—	} 0.5
Crawley ...	0.45	1.24	—	0.71	
Horsham ...	0.36	0.6	0.32	0.16	
Worthing ...	0.54	0.92	0.4	—	
Total present staff ...	1.8	2.92	0.72	0.87	0.5
Establishment	1.8	4		2	1.8

I am indebted to Dr. M. Duncan (Chichester), Dr. H. M. N. Rees (Crawley and Horsham) and Dr. M. Aldridge (Worthing) for the following comments on the work at the child guidance clinics.

#### Chichester

"The Chichester Child Guidance Clinic is at present a first-aid centre, due to lack of staff. It is kept going largely because those who *are* available are prepared to exchange rôles as and when necessary, and do what *can* be done rather than what they know *should* be done.



We have had only one educational psychologist session a week since July, when Miss Turner left.

We have had no psychiatric social worker since May. Miss M. E. Cullen kindly puts in about three social work sessions each week, seeing parents initially and making home visits, but she has no time to undertake parent treatment. The psychiatrist has to do this, which means that she has little or no time for the treatment of the children themselves: such treatment as *is* done is largely undertaken by a student of the Institute of Education course for teachers of maladjusted children. He is supervised by Dr. Duncan. Without him we should be unable to undertake *any* treatment, and we are fortunate to have him for six months.

The annual figures to some extent reflect the present state of the clinic, and the expectations raised in the public's mind by good and helpful clinic work in the recent past (January to May, 1964). For example, referrals through the educational psychologist in 1965 were 10, as compared with 15 in 1964, and through head teachers 17 as compared with 25. General practitioners' referrals during 1965 numbered 39, as compared with 23 in 1964. Mrs. Parker, our educational psychologist, who spends one morning a week here but cannot visit local schools, reports as follows:

'Half a day a week is clearly not enough for educational psychologist's time, and the chief effect this has on the work is that no school visits are possible, so that any liaison with teachers must necessarily be by telephone, which is not as satisfactory. A side-effect of this is that fewer referrals came from the schools, since when visiting a teacher about one child inevitably some others are brought up for discussion, and of these one or two would always become child guidance cases. This is particularly unfortunate in relation to nursery and infants' schools, since it cuts down the amount of preventive work with young children which the clinic can carry out.

However, those children who have needed testing have been seen, and it has proved possible to take on one or two cases for supportive work.'

Dr. Duncan's figures (of patients seen by her) are up on 1964 by 243 (660 : 417), the direct result of seeing parents *and* children in the time previously given to one *or* the other. Quantity obviously takes the place of quality, to our great regret. This is a bad sign, not a good one. The increase in the attendances is similar, but the student's work is also reflected in this figure.

Speaking generally, adolescent problems take up much of our time, need more placements than are available and much more attention here than we can give them. Many of the younger children ought to be taken on for treatment, but are not. In these cases, we do what we can either through other agencies or the schools, or through the remedial classes of Miss Gann and Mrs. Marten. It is a great pleasure to us to be working still more closely with both these teachers, and with the Children's Department.

I would like to take this opportunity of expressing our team's gratitude to our excellent secretary, Miss Parker, without whom we should be in still more dire straits."

### **Crawley and Horsham**

"In spite of their ecological dissimilarities and for reasons outlined in the 1964 Report, the work in these two areas will be considered together.  
*Staff*

The joint staffs have been augmented by the appointment of Mrs. R. Ryle as Social Worker at Horsham; Miss Kingdon, Teacher in Charge of the newly-established Horsham Remedial Class and the return of Mr. Ashwell to the Crawley Remedial Class (after his year on the London University Course).

Miss N. K. Hunnybun, with our natural regret, has elected to reduce her work to six sessions a week.

The great need is for extra sessions for educational psychologists — again because of this dearth of psychologists, Mr. Jeffery, the Senior County Educational Psychologist, has had to reduce his sessions to one every two



weeks in the Crawley and Horsham areas — to put this in proportion, about one tenth of the sessional time allocated for this invaluable colleague with psychiatric teams working in London Clinics.

### *Assessments*

From facts derived from the Epidemiological Survey of Childhood Neurotic and Behaviour Disorders, which was previously reported upon, the referrals to the clinics would appear to be devious and arbitrary, more related to the sensitivity or the tolerance of the referring person than either the diagnostic category or the degree of severity of the children referred.

A radical deployment of the child psychiatric team may be necessary if these facts are confirmed by a well-mounted and methodologically-sophisticated epidemiological research. A truly rational policy merits such fact finding.

Nevertheless, with the imperative need to relieve human misery, the predicted increase of community referral rate (290 new referrals and 4,295 attendances, an increase of 150 per cent), and the necessity to keep waiting time to a maximum of two months if the child psychiatry service is to be at all effective, the present and increasing intake is already higher than could be effectively treated in spite of radical economy of time and therapy.

### *Research*

- (1) The controlled and objective comparison of behaviour, therapy and psychotherapy is now near completion and publication by Mr. Humphery. Accurate and careful initial assessment, treatment, completion and follow-up has now been finished.
- (2) The Home Office Research on Delinquency in which we are involved has already started.
- (3) With the Medical Director's research commitment on autistic children elsewhere, it is becoming more apparent that further provision for such children is urgently needed in this area.

Nineteen sixty-six may be a year of challenge and there are no illusions that only partial solutions for the presenting problems will be available. Challenges, however, are to be picked up."

### *Worthing*

"Referrals have continued to rise and this pressure has forced a re-appraisal of old methods and some have finally been discarded. Gone are long stints of psychotherapy with the child. We have continued to try to deal mostly with the situation and to rely for improvement on the resilience and growing maturity of the child.

In the spring we appointed a new secretary, Miss Snell, who is a tower of strength. Mrs. E. T. Rosselli joined us as part-time psychiatric social worker, giving us a transatlantic flavour. Mrs. D. P. Haig came to us as a part-time social worker and has mental hospital experience. Mr. V. W. Robinson is, once more, a part-time psychiatric social worker and has clinical and teaching duties. The first three of our students, from Sussex University, began here in November; their stay of four months in the clinic seems, perhaps, rather short. Mr. Shaw left the Remedial Centre at the end of the year for an interesting post at Portsmouth with Dr. Haffner and Mr. John Colebrook will take his place. Mrs. D. Raphael, an art teacher at the French Lycée in London, kindly initiated for us a painting group and ran it for six months. This innovation was very successful and I would like to see it re-started. Mrs. Raphael now has a similar appointment at Ealing Child Guidance Clinic.

I was sorry to have to discard the sessions for adolescents for lack of staff.

A valuable innovation has been the pre-school infants' group which is run jointly by the educational psychologist, Mrs. Parker, and the psychiatrist. This has proved to be of both diagnostic and therapeutic value. An autistic child, originally in this group, has been in treatment once weekly for six months and has made gratifying progress.



The problem of staff shortage remains and the time is approaching when the rising rate of referrals will require a second part-time psychiatrist. We badly need further educational psychology sessions and are short of a full-time psychiatric social worker and could do with, once more, an art therapist.

Recruitment is difficult: of psychiatric social workers because academic and/or financial attractions are open to draw them in other directions and of educational psychologists the existence of a gross shortage, understandably, causes the law of supply and demand to operate fairly freely.

The practice of child guidance still seems to be too isolated a speciality and I would like to see more links with paediatric units and also with adult psychiatry. I would think that joint appointments to adult and child psychiatric units could do nothing but good."

Details of the work of the four clinics are given below.

1. REFERRAL	1964	1965
Number of children referred by:		
(a) School Medical Officers ... ..	89	58
(b) Courts and Probation Officers ... ..	55	102
(c) Parents and others ... ..	106	140
(d) Boarding schools and hostels ... ..	86	33
(e) General practitioners ... ..	133	185
(f) Children's Department ... ..	25	17
(g) Educational psychologists ... ..	60	130
(h) Other Child Guidance Clinics ... ..	8	3
Brought forward from previous year ... ..	78	48
(awaiting investigation on 1st January)		
TOTALS ... ..	640	716
2. INVESTIGATION		
Number of children investigated during the year and found to be:		
(a) In need of child guidance help ... ..	407	422
(b) Educationally sub-normal ... ..	4	6
(c) Unsuitable for education at school ... ..	1	2
(d) Not in need of child guidance help ... ..	78	111
(e) Withdrawn before investigation ... ..	102	136
(f) Awaiting investigation on 31st December... ..	48	39
TOTALS ... ..	640	716
3. TREATMENT		
Number of children:		
(a) Receiving help on 1st January ... ..	253	323
(b) Helped during the year ... ..	569	598
(c) Receiving help at 31st December ... ..	323	371
4. RECOMMENDATIONS		
Number of children recommended during the year for:		
(a) Special schools ... ..	19	31
(b) Hostels ... ..	5	1
TOTALS ... ..	24	32
5. CLINIC ATTENDANCES AND HOME VISITS		
(a) Number of attendances at clinics during the year	4,506	6,268
(b) Number of homes visited during the year ...	530	99



## Infectious Diseases

There was one notification of paralytic poliomyelitis during the year, the first since 1960. This was of a vaccinated boy of 16 who had left school.

For the fourth year in succession no case of diphtheria was notified. In the past eleven years there have only been two cases of this disease in the County. Full details of the vaccination and immunisation arrangements will be found in Part II of the Report.

### Tuberculosis

No school child was notified as suffering from tuberculosis.

In June an investigation was carried out at an independent boarding school following a report that a pupil had fallen ill whilst at home outside the County and was thought to be suffering from pulmonary tuberculosis. The other children at the school were tuberculin-tested and x-ray examinations of the positive reactors and of all adult staff showed no evidence of tuberculosis.

### B.C.G. Vaccination

The vaccination against tuberculosis of children aged 13 years and over was continued. The following table shows the number of children skin-tested and vaccinated in each of the ten years since 1956 when the scheme was first introduced into the County.

<i>Year</i>	<i>Number skin-tested</i>	<i>Number positive</i>	<i>Percentage positive</i>	<i>Number negative</i>	<i>Number vaccinated</i>
1956	2,444	489	20.2	1,936	1,871
1957	2,787	675	24.2	2,044	2,040
1958	2,124	289	13.6	1,803	1,785
1959	1,756	250	14.2	1,475	1,471
1960	1,284	120	9.4	1,164	1,158
1961	2,358	192	8.2	2,103	2,097
1962	6,767	656	9.7	5,889	5,863
1963	6,222	483	7.8	5,459	5,430
1964	4,166	250	6.0	3,801	3,765
1965	4,231	294	6.9	3,745	3,632

### Gastro-intestinal Infections

Notifications of children absent with gastric upsets were received from a number of schools and investigations indicated that, in the main, the children affected were suffering from the condition known as winter or virus vomiting.

As soon as it was known that a school had children with symptoms of gastro-enteritis, the medical officer of health of the district was



informed. The following report from Dr. K. N. Mawson typifies the symptoms and duration of winter vomiting and the investigations carried out.

"When enquiries were made at the school it was found that a fairly considerable number of children and later many of the staff had been affected, mainly with abdominal pain and vomiting, diarrhoea being present in only a minority of cases. Although most of the children showed complete recovery within thirty-six hours, the majority of the adults (four teachers, two mid-day supervisors and one cook) were affected for a longer period and mostly had complained of diarrhoea in addition. In the case of one of the teachers, a faecal specimen had already been submitted to the laboratory, with negative results, and as a precautionary measure specimens were obtained from the school food-handlers but these were also negative. I have no doubt that this outbreak is of viral origin."

## **Report of the Principal School Dental Officer**

### **Staff**

Mr. P. D. Bristow, an area dental officer, resigned on 31st August, 1965, to take up the appointment of Principal School Dental Officer of Portsmouth. He was replaced by Mr. R. J. Smee, who commenced duty on 1st October, 1965. Mr. J. O. Legg, school dental officer, Crawley, who resigned on 31st August, 1965, was replaced by Mr. L. B. Deubert on 22nd November, 1965. After 14 years' service, Mr. C. P. Urbani, Area Dental Officer, Worthing, retired on 31st March, 1965 and was succeeded by Mr. D. E. Gibbons on 1st June, 1965. It is with regret that I report the death of Mr. P. L. Carnall, school dental officer for the Shoreham-by-Sea area on 19th December, 1965. He had been with the authority since 1959 and was a quiet, unassuming, likeable and efficient dental officer who is missed both by his colleagues and by many of his patients.

The authorised establishment of dental officers was 11.5 and, at the end of the year, there were ten dental officers in post.

The ratio of dental officers to pupils on the register of maintained schools was approximately one to 5,700; the comparable ratio in 1964 was one to 5,500.

During the year, I gave a series of lectures to two dental surgery assistants in preparation for the examination for the Certificate of the Examining Board for Dental Surgery Assistants. Both sat for the examination and were awarded certificates. Six of the 12 dental surgery assistants on the staff now hold this certificate.

### **Inspection and Treatment**

As a result of resignations and sickness, 405 fewer sessions were worked during the year (3,422 as compared with 3,827 in 1964).



Despite this, a total of 59,350 pupils were routinely inspected, of whom 8,083 received a second inspection later in the year.

Sessions used for this important facet of the school dental service numbered 454, giving an inspection rate of 132 pupils a session, ten more than in 1964. A further 1,218 children were inspected as "casuals".

Of the 59,350 pupils inspected, 23,089 (40 per cent) were found to require treatment and 22,399 (97 per cent) were offered treatment. The children treated numbered 9,463, giving an approximate acceptance rate of 42 per cent.

Statistics for the year will be found on page 113.

### **Dental Health**

The dental hygienist visited 109 schools and gave talks to over 25,000 pupils. Once again I wish to record my thanks to all the head teachers who have made the dental hygienist so welcome in their schools. Both she and I gave a number of talks to mothers' clubs and parent-teacher associations. I also lectured at the Chichester College of Further Education and at the Bishop Otter College, Chichester, where one of the mobile dental units was also put on display.

### **Review of County Dental Service**

One of the dental officers of the Department of Education and Science and the Ministry of Health visited the County for three days in July, 1965 to review and report on the County dental services. In the report which was subsequently received, the local authority was commended on the generally high standard of its dental services. Reference was also made to the good organisation, the fact that the output of work was above the national average and that a satisfactory rate of dental inspections had been reached.

The Ministers were pleased to see that the dental staff had done valuable work in the field of dental health education and expressed the hope that this aspect of the service would continue to develop and that an increase could be made in the amount of dental care and, where needed, conservation treatment given to young children.

### **Acknowledgements**

I wish to record once again my thanks to members of the Council and to my colleagues in the County Health, Education and other Departments for their help and encouragement.

P. S. R. CONRON

*Principal School Dental Officer*



## Other Services

### School Meals and Milk

I am indebted to the Director of Education for the following information on the service of meals and milk in schools:

"The number of children taking advantage of school meals continues to increase daily, and the School Meals Service is now reaping the benefits of staff training, in improved and more varied menus. The training and refresher courses continued throughout 1965 and all the senior staff will have attended a course, either in the Chichester or Horsham training kitchens by July, 1966. Preparations are now in hand to continue training with a more basic course for assistant staff who wish to obtain promotion.

The following information relates to the numbers of children in maintained schools in the area who received dinners and milk on a day in October, 1965. Although numbers continued to rise, the percentage of regular milk drinkers again showed a slight decrease.

<i>Meals</i>	1964	1965
Number of children present on day selected	56,105	57,567
Number of school dinners served ... ..	39,485	42,563
Percentage taking dinners ... ..	70.4	73.9
<i>Milk</i>		
Number of children present on day selected ...	56,535	57,850
Number of children who received one-third pint of milk ... ..	44,029	43,511
Percentage of milk drinkers ... ..	77.8	75.2

### School Hygiene and Sanitation

Following their visits to schools, medical officers drew attention to a number of matters affecting the general well-being of pupils. As a result, representations were made to the Director of Education in respect of the following deficiencies:

<i>Subject of report</i>	<i>Number of schools</i>	<i>Subject of report</i>	<i>Number of schools</i>
Washing facilities ...	3	Lavatory accommodation	9
Lighting ... ..	1	Heating ... ..	1
Water supply ...	1	Flooring ... ..	1

In connection with these matters and matters of food hygiene, the county public health inspectors made 75 visits to schools, excluding those made to school swimming pools. Advice was given with regard to cleaning and general hygiene, particularly in schools where it was known that pupils had foot infections.

Minor improvements to school premises continued to be made during the year.

### Road Accidents to Children

Examination of the analyses produced on the Council's computer shows that 3,274 persons were involved in road accidents in the County during the year. Of these, 336 (12.6 per cent) were children under 15 years of age. The corresponding figures for 1964 were 3,178 and 351 (11.4 per cent). The numbers of children involved in accidents during the last two years are shown on the next page.



Category of road user	Number of children involved in accidents	
	1964	1965
Pedestrians ... ..	154	158
Cyclists ... ..	96	93
Passengers in vehicles ... ..	101	87
TOTALS ... ..	351	338

Compared with the previous year, there were 14 fewer children who were involved in accidents while they were passengers in vehicles and, although the number of accidents to child cyclists fell by three, those involving pedestrians rose by four. The following tables show the ages at which the accidents to the 251 child pedestrians and cyclists occurred and the severity of their injuries; they also show that more boys than girls continued to be involved as pedestrians and as cyclists.

Age	Pedestrians	Cyclists
Under 1	1 (2)	1 (—)
1	— (1)	— (—)
2	4 (9)	— (—)
3	16 (14)	— (—)
4	14 (11)	— (1)
Total under 5 years	35 (37)	1 (1)
5	12 (15)	— (1)
6	28 (15)	2 (1)
7	10 (17)	3 (1)
8	20 (16)	7 (9)
9	6 (16)	4 (10)
Total 5 to 9 years	76 (79)	16 (22)
10	13 (9)	12 (9)
11	9 (12)	14 (12)
12	9 (6)	11 (18)
13	5 (6)	20 (19)
14	11 (5)	19 (15)
Total 10 to 14 years	47 (38)	76 (73)
ALL AGES UNDER 15 ...	158 (154)	93 (96)

Note: The figures in brackets relate to 1964.



<i>Severity of injury</i>	<i>Pedestrians</i>	<i>Cyclists</i>	<i>Pedestrians and cyclists</i>
Killed ... ..	5 (2)	1 (1)	6 (3)
Severely injured ...	46 (48)	28 (22)	74 (70)
Slightly injured ...	107 (104)	64 (73)	171 (177)
TOTALS ... ..	158 (154)	93 (96)	251 (250)

*Note:* The figures in brackets relate to 1964.

Collision with moving vehicles continued to be the main cause of accidents to child cyclists as the following analysis shows.

<i>Cause of accident</i>	1964	1965
1. Collision with moving vehicles		
(a) Turning right, often without warning ... ..	22	13
(b) Emerging from side road, drive, etc. ... ..	7	4
(c) At road junctions ... ..	27	20
(d) Moving out to pass stationary object without regard to following fast traffic ... ..	8	19
(e) Unspecified ... ..	13	7
TOTAL ... ..	77	63
2. Collision with stationary vehicles ... ..	9	10
3. Collision with car door being opened by driver or passenger ... ..	4	3
4. Collision with pedestrians ... ..	2	13
5. Other causes ... ..	4	2
TOTAL ALL CAUSES ... ..	96	91

### School Swimming Pools

In 1965, new swimming pools were opened at 18 junior schools and at one secondary school and, excluding Worthing, there are now pools at 56 maintained schools.

During the year, 222 visits were made to schools in connection with swimming pools and, to ascertain the chlorine content, pH value and clarity of the water in these pools, 162 examinations were carried out. Generally, "break-point" chlorination has been adopted and, in consequence, it was necessary to take only a few samples for bacteriological examination. In no case was it necessary to prohibit the use of a pool. Efficient filtration and chlorination equipment was provided at 55 of the 56 pools and the exception, where there was only chlorination, will have a filter installed early in 1966.



As a result of the advice given by the Department on suitable plant for filtration and chlorination of water, a local manufacturer modified his equipment and was able to reduce his price for a combined filtration and chlorination unit from £136 to £100. Ten of these modified units were fitted to pools at junior schools and have proved most satisfactory. The suggested modification to the chlorination units was also accepted by two other contractors who supplied new plant at 15 other pools at one-tenth of the cost of the equipment formerly in use.

The condition of the pools was maintained satisfactorily, although the difficulty of dealing with changes of teaching and maintenance staff occasionally upset the regular routine for short periods. This point emphasises the necessity for regular inspections by the public health inspectors.

### **Medical Examination of Entrants to Courses of Training for Teachers and to the Teaching Profession**

During the year, 243 candidates for admission to training colleges for teachers and 56 new entrants to the teaching profession were examined by school medical officers. The comparable figures for 1964 were 252 and 47 respectively. In addition, three new entrants to the teaching profession were examined on behalf of other authorities.

### **Children and Young Persons Act, 1933**

In accordance with the requirements of section 22 of the *Children and Young Persons Act, 1933* two children were medically examined in connection with the issue of licences to take part in entertainments. Medical information on 283 children (an increase of 19 on the previous year) was submitted to juvenile courts as required by section 35 of the Act.

### **Health Education**

The work of the Department in this connection continued to increase. In the autumn a concentrated effort began in connection with smoking and health, particularly in primary schools. The film "The Smoking Machine" was shown to 6,128 children in 51 schools followed by discussion. The enthusiasm of the teaching staffs who encouraged the children to write essays and paint their own posters following a session, greatly helped to emphasise the points made in the film and brought out in the discussion.

### **National Child Development Study**

In 1958, a survey was carried out of virtually every baby who was born in the week 3rd to 9th March, 1958 which provided information on factors in pregnancy affecting new-born infants. In order that the study of the development of these children could be continued, local education authorities were asked to collaborate in further investigations and, during the year, school medical officers examined and completed medical questionnaires about 131 children living in the County. Prior to these medical examinations, health visitors had obtained social and medical histories from the parents.



## RETURN OF MEDICAL INSPECTION AND TREATMENT FOR THE YEAR ENDED 31st DECEMBER, 1965

MEDICAL INSPECTION OF PUPILS ATTENDING MAINTAINED PRIMARY  
AND SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)

### Periodic Medical Inspections

<i>Age groups inspected (by year of birth)</i>	<i>No. of pupils who have received a full medical examina- tion</i>	<i>Physical condition of pupils inspected</i>		<i>No. of pupils found not to warrant a medical examina- tion</i>	<i>Pupils found to require treat- ment (excluding dental diseases and infestation with vermin)</i>		
		<i>Satis- factory</i>	<i>Unsatis- factory</i>		<i>For defective vision (excluding squint)</i>	<i>For any other condition</i>	<i>Total individual pupils</i>
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
1961 and later ...	120	120	—	—	1	5	6
1960 ...	2,168	2,166	2	—	71	159	225
1959 ...	2,737	2,735	2	—	102	191	279
1958 ...	367	366	1	—	16	26	39
1957 ...	198	198	—	—	10	13	23
1956 ...	153	152	1	—	5	10	15
1955 ...	994	993	1	—	34	53	87
1954 ...	3,284	3,278	6	—	138	224	346
1953 ...	696	695	1	—	49	48	96
1952 ...	212	212	—	—	14	10	24
1951 ...	585	585	—	—	39	39	75
1950 and earlier	3,704	3,701	3	—	197	134	324
TOTALS	15,218	15,201	17	—	676	912	1,539

Col. (3) total as a  
percentage of Col. (2)

total ... .. 99.89%

Col. (4) total as a  
percentage of Col. (2)

total ... .. 0.11%

### Other Inspections

					1964	1965
Number of Special Inspections ...	...	...	...	...	177	102
Number of Re-inspections ...	...	...	...	...	11,624	9,319
TOTALS ...	...	...	...	...	11,801	9,421



## Infestation with Vermin

	1964	1965
(a) Total number of individual examinations of pupils in schools		
by school nurses or other authorised persons ... ..	56,028	58,908
(b) Total number of individual pupils found to be infested ...	75	146
(c) Number of individual pupils in respect of whom cleansing notices were issued (Section 54 (2), <i>Education Act</i> , 1944)	—	—
(d) Number of individual pupils in respect of whom cleansing orders were issued (Section 54 (3), <i>Education Act</i> , 1944)	—	—

## Screening Tests of Vision and Hearing

- (1) (a) Is the vision of entrants tested as a routine within their first year at school ? ... .. Yes.
- (b) If not, at what age is the first routine test carried out ? ... .. —
- (2) At what age(s) is vision testing repeated during a child's school life ? ... .. At ages 8, 10, 14 and 16+.
- (3) (a) Is colour vision testing undertaken ? ... .. Yes.
- (b) If so, at what age ? ... .. 11 years.
- (c) Are both boys and girls tested ? ... .. Boys only.
- (4) (a) By whom is vision testing carried out ? ... .. Health visitors and qualified nursing assistants.
- (b) By whom is colour vision testing carried out ? ... .. School medical officers.
- (5) (a) Is routine audiometric testing of entrants carried out within their first year at school ? ... .. Yes, in some schools (about a quarter, and increasing)
- (b) If not, at what age is the first routine audiometric test carried out ? ... .. —
- (c) By whom is audiometric testing carried out ? ... .. Health visitors.



# **Defects found by Periodic and Special Medical Inspections during the Year**

Defect Code No. (1)	Defect or disease (2)					Periodic inspections				Special inspec- tions (7)
						Entrants (3)	Leavers (4)	Others (5)	TOTAL (6)	
4.	Skin	...	...	...	T	25	49	35	109	1
					O	124	68	101	293	—
5.	Eyes: (a) Vision	...	...	...	T	186	233	257	676	19
					O	837	641	661	2,139	4
	(b) Squint	...	...	...	T	44	10	11	65	—
					O	88	19	74	181	1
	(c) Other	...	...	...	T	13	9	5	27	—
					O	29	7	26	62	—
6.	Ears: (a) Hearing	...	...	...	T	57	7	31	95	6
					O	190	25	63	278	7
	(b) Otitis Media	...	...	...	T	8	1	4	13	—
					O	75	5	17	97	—
	(c) Other	...	...	...	T	4	2	11	17	—
					O	52	7	15	74	—
7.	Nose and Throat	...	...	...	T	58	10	20	88	1
					O	628	45	160	833	4
8.	Speech	...	...	...	T	37	2	17	56	2
					O	249	15	38	302	2
9.	Lymphatic Glands	...	...	...	T	5	1	3	9	—
					O	418	12	48	478	3
10.	Heart	...	...	...	T	7	2	4	13	1
					O	110	30	46	186	—
11.	Lungs	...	...	...	T	21	4	11	36	1
					O	169	50	102	321	2
12.	Developmental: (a) Hernia	...	...	...	T	11	1	5	17	—
					O	31	2	17	50	—
	(b) Other	...	...	...	T	14	4	55	73	—
					O	111	45	105	261	—
13.	Orthopaedic: (a) Posture	...	...	...	T	21	26	44	91	2
					O	55	40	89	184	—
	(b) Feet	...	...	...	T	36	13	57	106	2
					O	155	39	114	308	1
	(c) Other	...	...	...	T	31	26	42	99	—
					O	301	96	146	543	1
14.	Nervous System: (a) Epilepsy	...	...	...	T	3	1	3	7	—
					O	19	11	16	46	2
	(b) Other...	...	...	...	T	1	—	1	2	—
					O	28	6	32	66	1
15.	Psychological: (a) Develop-ment	...	...	...	T	1	—	3	4	2
					O	142	26	101	269	2
	(b) Stability	...	...	...	T	1	1	5	7	—
					O	169	29	136	334	4
16.	Abdomen	...	...	...	T	3	1	2	6	—
					O	63	21	60	144	—
17.	Other	...	...	...	T	7	7	22	36	34
					O	68	49	123	240	1

T indicates number of pupils requiring treatment.

O indicates number of pupils requiring observation.



**TREATMENT OF PUPILS ATTENDING MAINTAINED PRIMARY AND  
SECONDARY SCHOOLS (INCLUDING NURSERY AND SPECIAL SCHOOLS)**

**Eye Diseases, Defective Vision and Squint**

	<i>Number of cases known to have been dealt with</i>	
	1964	1965
External and other, excluding errors of refraction and squint ... ..	64	41
Errors of refraction (including squint) ... ..	3,134	2,860
TOTALS ... ..	3,198	2,901
Number of pupils for whom spectacles were prescribed	1,791	1,654

**Diseases and Defects of Ear, Nose and Throat**

	<i>Number of cases known to have been dealt with</i>	
	1964	1965
Received operative treatment:—		
(a) For diseases of the ear ... ..	2	—
(b) For adenoids and chronic tonsillitis ... ..	49	30
(c) For other nose and throat conditions ... ..	—	—
Received other forms of treatment ... ..	70	19
TOTALS ... ..	121	49
Total number of pupils in schools who are known to have been provided with hearing aids:—		
(a) In year ... ..	12	28
(b) In previous years... ..	71	90

**Orthopaedic and Postural Defects**

	<i>Number of cases known to have been treated</i>	
	1964	1965
(a) Pupils treated at clinics or out-patients' departments ... ..	651	632
(b) Pupils treated at school for postural defects ... ..	33	—
TOTALS ... ..	684	632



### Diseases of the Skin

							<i>Number of cases known to have been treated</i>	
							1964	1965
Ringworm:	(a) Scalp	...	...	...	...	...	—	1
	(b) Body	...	...	...	...	...	2	3
Scabies	...	...	...	...	...	...	4	2
Impetigo	...	...	...	...	...	...	27	11
Other skin diseases	...	...	...	...	...	...	183	225
TOTALS							216	242

### Child Guidance Treatment

							<i>Number of cases known to have been treated</i>	
							1964	1965
Pupils treated at Child Guidance Clinics							569	598

### Speech Therapy

							<i>Number of cases known to have been treated</i>	
							1964	1965
Pupils treated by speech therapist							454	371

### Other Treatment Given

							<i>Number of cases known to have been dealt with</i>	
							1964	1965
(a)	Pupils with minor ailments	...	...	...	...	...	206	270
(b)	Pupils who received convalescent treatment under School Health Service arrangements	...	...	...	...	...	16	19
(c)	Pupils who received B.C.G. vaccination	...	...	...	...	...	3,765	3,632
(d)	Other than (a), (b) and (c) above:							
	Orthoptic	...	...	...	...	...	449	373
	Enuresis (pad and bell alarms)	...	...	...	...	...	92	83
TOTAL (a)-(d)							4,529	4,377



**List of School Clinics held in the County: 1965**

Place	Address	Type of Clinic Held							
		Dental**	Minor Ailment	Refraction	Orthoptic	Orthopaedic	Physiotherapy	Speech§	Child Guidance
ARUNDEL ...	Maltravers Street	—	—	Mon.†*	—	—	—	—	—
BILLINGSHURST	The Weald School	—	—	—	—	—	—	Mon.†	—
BOGNOR REGIS	Westloats Lane	Mon.-Fri.	Tues.†	Tues.††	—	—	Tues.†† Fri.††	Wed.	—
CHICHESTER ...	Chapel Street	Mon.-Fri.	Wed.† f	Wed.††	Mon. f Wed. Thurs.	Tues.†† m	Mon.†† Tues.† Fri.†	Wed.††	—
	St. Anthony's School	—	—	—	—	—	—	Wed.†	—
	St. John's Street	—	—	—	—	—	—	—	Mon.-Fri.
CRAWLEY ...	Exchange Road	Mon.-Fri.	Wed.†	—	—	*Mon.	Mon. Wed. Fri.††	Fri.†	Mon.-Fri.
	Gossops Green	—	—	—	—	—	—	Tues.†	—
	Langley Green	Thurs. & Fri.	—	—	—	—	—	Fri.††	—
	Tilgate	Mon. Tues. Wed.	—	—	—	—	—	Thurs.†	—
	Hospital	—	—	Tues.† Thurs.	—	—	—	—	—
	Desmond Anderson Sch.	—	—	—	—	—	—	Thurs.††	—
	Ifield School	—	—	—	—	—	—	Tues.††	—
	Little Deerswood Sch.	—	—	—	—	—	Wed.††	Thurs.†	—
	Northgate School	—	—	—	—	—	—	Thurs.††	—
	Southgate School	—	—	—	—	—	Tues.† Fri.†	Wed.††	—
	Three Bridges School	—	—	—	—	—	—	Mon.††	—
	West Green School	—	—	—	—	—	—	Wed.†	—
FINDON ...	Parochial School	—	—	—	—	—	—	Tues.† f	—
HORSHAM ...	Hurst Road	Mon.-Fri.	—	Fri.††	—	*Mon.	Wed.† Fri.†	Tues.†† Wed.	—
	Brighton Road	—	—	—	—	—	—	—	Mon.-Fri.
LANCING ...	Irene Avenue	Mon.-Fri.	—	Tues.† f	—	*Mon.††	Tues.† Fri.†	Mon.	—
LITTLEHAMPTON	Elm Grove Road	Mon.-Fri.	Fri.†	Wed.† f	—	*Mon.†	Mon.† Wed.† Thurs.†	Fri.	—
MIDHURST ...	County Sec. School	—	—	—	—	—	—	Mon.†	—
PETWORTH ...	C.S. & C.P. Schools	—	—	—	—	—	—	Mon.†	—
STEYNING ...	C.S. & C.P. Schools	—	—	—	—	—	—	Tues.†	—
STORRINGTON	C.S. & C.P. Schools	—	—	—	—	—	—	Tues.†m	—
SOUTHWATER ...	C.P. School	—	—	—	—	—	—	Mon.††	—
SHOREHAM-BY-SEA ...	Middle Road	Mon.-Fri.	—	Fri.†	—	—	Mon.† Wed.† Thurs.†	Fri.	—
WORTHING ...	Stoke Abbott Road	Mon.-Fri.	Mon.-Fri.†	Thurs.††	Mon.† Wed. Thurs.†	Sat.†m	Mon. Wed. Thurs. Fri.††	Thurs.	—
	33 Madeira Avenue	—	—	Wed.†† f	—	—	—	—	—
	6 Southey Road	—	—	—	—	—	—	—	Mon.-Fri.

Morning and afternoon sessions are held unless otherwise stated. † Morning. †† Afternoon. m Monthly. f Fortnightly. \* Approximately every six weeks.

\*\* In addition four mobile dental units operate in the County.

§ Some clinics not held in 1965 owing to staffing difficulties.



Type of Case		Address		Date	
1	2	3	4	5	6
7	8	9	10	11	12
13	14	15	16	17	18
19	20	21	22	23	24
25	26	27	28	29	30
31	32	33	34	35	36
37	38	39	40	41	42
43	44	45	46	47	48
49	50	51	52	53	54
55	56	57	58	59	60
61	62	63	64	65	66
67	68	69	70	71	72
73	74	75	76	77	78
79	80	81	82	83	84
85	86	87	88	89	90
91	92	93	94	95	96
97	98	99	100	101	102

The first and second columns are filled with the names of the persons who are the subjects of the cases.



# **DENTAL INSPECTION AND TREATMENT CARRIED OUT BY THE AUTHORITY**

Number of pupils on the registers of maintained primary and secondary schools (including nursery and special schools) in January, 1966 ... 62,461

## **ATTENDANCES AND TREATMENT**

	<i>Ages 5 to 9</i>	<i>Ages 10 to 14</i>	<i>Ages 15 and over</i>	<b>TOTAL</b>
First visit ... ..	5,108	2,797	340	8,245
Subsequent visits ... ..	7,683	5,657	724	14,064
Total visits ... ..	12,791	8,454	1,064	22,309
Additional courses of treatment commenced	403	279	33	715
Fillings in permanent teeth ... ..	4,115	6,862	1,066	12,043
Fillings in deciduous teeth ... ..	6,887	495	—	7,382
Permanent teeth filled ... ..	3,329	5,838	938	10,105
Deciduous teeth filled ... ..	6,288	448	—	6,736
Permanent teeth extracted ... ..	179	695	88	962
Deciduous teeth extracted ... ..	3,984	970	—	4,954
General anaesthetics ... ..	914	230	10	1,154
Emergencies ... ..	708	447	63	1,218
Number of pupils x-rayed ... ..	...	...	...	282
Prophylaxis ... ..	...	...	...	1,198
Teeth otherwise conserved ... ..	...	...	...	1,105
Number of teeth root filled ... ..	...	...	...	7
Inlays ... ..	...	...	...	4
Crowns ... ..	...	...	...	6
Courses of treatment completed ... ..	...	...	...	7,249

## **ORTHODONTICS**

Cases remaining from previous year ... ..	...	...	...	148
New cases commenced during year ... ..	...	...	...	104
Cases completed during year ... ..	...	...	...	95
Cases discontinued during year ... ..	...	...	...	35
No. of removable appliances fitted ... ..	...	...	...	129
No. of fixed appliances fitted ... ..	...	...	...	1
Pupils referred to hospital consultant ... ..	...	...	...	2

## **PROSTHETICS**

	<i>Ages 5 to 9</i>	<i>Ages 10 to 14</i>	<i>Ages 15 and over</i>	<b>TOTAL</b>
Pupils supplied with F.U. or F.L. (first time)	—	—	—	—
Pupils supplied with other dentures (first time)	1	23	8	32
Number of dentures supplied ... ..	1	29	9	39

**ANAESTHETICS** General anaesthetics administered by dental officers ... 618

## **INSPECTIONS**

(a) First inspection at school — number of pupils ... ..	...	...	...	49,372
(b) First inspection at clinic — number of pupils ... ..	...	...	...	9,463
Number of (a) + (b) found to require treatment ... ..	...	...	...	23,089
Number of (a) + (b) offered treatment ... ..	...	...	...	22,399
(c) Pupils re-inspected at school clinic ... ..	...	...	...	8,083
Number of (c) found to require treatment ... ..	...	...	...	2,400

## **SESSIONS**

Sessions devoted to treatment ... ..	...	...	...	2,968
Sessions devoted to inspection ... ..	...	...	...	454
Sessions devoted to dental health education ... ..	...	...	...	335



# Appendix A

## COUNTY HEALTH COMMITTEE

(at 31st December, 1965)

### County Council Members

	<i>Sub-Committees</i>
MRS. E. S. M. BAXENDALE	a, e, Cn
MRS. H. C. CARMAN, J.P.	a, m
† DR. IVAN CLOUT <span style="float: right;"><i>Chairman</i></span>	Ce, Cm
MRS. M. COBBY	m, n
CAPT. J. A. D. COCHRANE-BARNETT, O.B.E.	
MRS. M. J. DAVIS-POYNTER	m, n
MR. A. D. FREEMAN	m
MRS. G. F. GRIFFIN	n
MRS. E. M. KING-JONES	a
MR. C. C. LANSDALL	a
MAJOR-GENERAL H. M. LIARDET, C.B., C.B.E., D.S.O.	a
MR. J. E. MILES	a, m
* MR. P. MURSELL, M.B.E., D.L. ( <i>Chairman of the County Council</i> )	
MRS. P. B. P. NAUNTON, J.P.	e, m
† MR. W. G. S. POPE <span style="float: right;"><i>Vice-Chairman</i></span>	Ca
MR. W. J. O'REILLY	m
MR. C. W. REECE	a, e
MR. T. H. SIGGS	n
MR. J. M. SMITH	a
MRS. D. STAPLETON SKINNER	
* BRIG. L. L. THWAYTES, D.L. ( <i>Vice-Chairman of the County Council</i> )	
MR. G. E. WALLER	a, e, m
MR. E. L. WALTER	a, n
* MR. J. E. WHITTOME, O.B.E. ( <i>Chairman of the Finance and General Purposes Committee</i> )	

### Other Members

MISS E. J. CLUNES	representing the West Sussex Branch of the Royal College of Midwives	n
DR. W. S. COLTART	representing the West Sussex Branch of the British Medical Association	n
MR. H. K. GRIFFITH	representing the Sussex Branch of the British Red Cross Society	a
DR. T. H. HARRISON	representing the Local Medical Committee for West Sussex	a
MRS. N. M. LEPHARD	representing Worthing Borough Council	m
MR. R. A. MITCHELL	representing Worthing Borough Council	m
MRS. M. GALE MOORE		n
DR. H. ROSENBERG, O.S.T.J.	representing the Executive Council for the County of West Sussex	m
H.R.H. PRINCE TOMISLAV OF YUGOSLAVIA	representing the Sussex Branch of the St. John Ambulance Brigade	a
SIR GEOFFREY TODD, K.C.V.O., O.B.E.	representing the South West Metropolitan Regional Hospital Board	n
MRS. J. L. VANRENEN	representing the Women's Voluntary Service	n
MRS. H. CONSTANDUROS		e, n
DR. J. D. MORRISSEY		m
THE HON. MRS. R. J. P. WYATT		n

\* Ex-officio member of the Committee and of the Sub-Committees.

† Ex-officio member of the Sub-Committees.

C Chairman of Sub-Committee.

a Ambulance and Public Health Sub-Committee.

e Executive Sub-Committee.

m Mental Health Sub-Committee.

n Nursing Sub-Committee.



# COUNTY EDUCATION COMMITTEE

(at 31st December, 1965)

## County Council Members

		Sub-Committee
MR. D. R. ATKINS		
DR. H. M. AYRES, C.ST.J.		
† MAJOR S. R. BROOKS	Vice-Chairman	s
LADY BRUNDRETT		
DR. IVAN CLOUT		s
MR. L. A. FOSTER		
MR. J. P. GEE, J.P.		s
MR. E. J. F. GREEN, J.P.		
MRS. G. F. GRIFFIN		s
† MR. R. MARTIN	Chairman	
MRS. M. KEOGH MURPHY		Cs
MR. C. P. MASON, M.B.E., J.P.		
MR. R. MAY		
MR. R. MILES		s
MR. D. W. MORECRAFT, J.P.		
* MR. P. MURSELL, M.B.E., D.L. (Chairman of the County Council)		
SIR CLINTON PELHAM, K.B.E., C.M.G.		
MR. A. G. W. PENNEY, J.P.		
MRS. D. M. PENNICOTT		s
MR. W. G. S. POPE		
MRS. D. E. RUDD		
MRS. N. B. M. SHARP		s
LT.-COL. E. S. SHAXSON, M.C., D.L., J.P.		
COL. E. L. STEPHENSON, D.S.O., M.C.		s
* BRIG. L. L. THWAYTES, D.L. (Vice-Chairman of the County Council)		
* MR. J. E. WHITTOME, O.B.E. (Chairman of the Finance and General Purposes Committee)		
MR. C. E. C. WOOLLEY		

## Other Members

MR. F. J. CHAPMAN	representing Worthing Committee for	s
MR. R. EDWARDS	Education	
MR. D. HILL		
THE REV. CANON M. C. LANGTON	representing Religious Denominations	
THE REV. R. H. SMITH		s
THE VERY REV. CANON E. WAKE		
MR. K. D. ANDERSON	representing teachers employed in	
MR. P. H. KEYTE	schools maintained by the Local	s
MR. S. NORRIS	Education Authority	
MISS D. M. M. EDWARDS-REES		s
MAJOR-GEN. C. LLOYD, C.B., C.B.E., T.D.		
MISS W. A. WAITE		
MRS. M. J. DAVIS-POINTER	representing the Children's Committee	s

\* Ex-officio member of the Committee and of the Sub-Committee.

† Ex-officio member of the Sub-Committee.

C Chairman of Sub-Committee.

s Special Services Sub-Committee.



## Appendix B

### STAFF

(at 31st December, 1965)

*County Medical Officer of Health and  
Principal School Medical Officer:*

T. McL. GALLOWAY, M.D., F.R.C.P., D.P.H., Dr.P.H.

*Deputy County Medical Officer of Health and  
Deputy Principal School Medical Officer:*

D. WILD, M.B., Ch.B., D.Obst., R.C.O.G., D.P.H., D.M.A.

*Principal Medical Officer:*

A. H. SNAITH, M.D., M.C.Path., D.P.H.

*Principal Administrative Officer:*

J. SAUNDERS, F.C.C.S.

*Medical Officers of the Department and School Medical Officers:*

\*J. C. AITKEN, M.B., Ch.B., D.P.H.

\*ROSETTA C. BARKER, M.B., B.Ch., B.A.O., D.P.H.

\*D. WARREN BROWNE, M.R.C.S., L.R.C.P., D.T.M. and H., D.P.H.

\*F. COCKCROFT, M.A., M.R.C.S., L.R.C.P., D.P.H.

\*V. P. GEOGHEGAN, M.D., D.P.H.

\*J. A. G. GRAHAM, M.B., Ch.B., D.P.H.

CHRISTINA A. GUNN, M.B., Ch.B., D.P.H.

ELIZABETH M. JOHNSON, M.B., Ch.B., D.C.H., D.Obst., R.C.O.G.

ESTHER S. KERR, M.A., M.B., B.Ch., D.Obst., R.C.O.G.

A. LOWRY, M.R.C.S., L.R.C.P., D.C.H.

\*K. N. MAWSON, M.B., Ch.B., D.P.H.

MARJORIE B. MORTON, M.R.C.S., M.R.C.P., D.T.M., D.Obst., R.C.O.G.

MERLE NEWTON, M.R.C.S., L.R.C.P., D.C.H.

GLADYS A. G. ROBINSON, M.B., Ch.B.

*Chief Dental Officer and Principal School Dental Officer:*

P. S. R. CONRON, L.D.S.

*Area Dental Officers:*

D. E. GIBBONS, B.D.S.

R. J. SMEE, L.D.S.

*Dental Surgeons:*

G. C. CLARKE, L.D.S.

L. W. DEUBERT, B.D.S.

W. P. HOLDSWORTH, L.D.S.

G. C. KENT, L.D.S.

P. NATHANAIL, B.D.S.

J. A. W. PURNELL, L.D.S.

L. D. SMITH, L.D.S.

F. C. TOMLYN, L.D.S.

*Consultant Chest Physicians:*

\*J. E. WALLACE, M.D., Ch.B.

\*A. SAKULA, M.D., B.S., M.R.C.P.

\*E. W. THOMPSON EVANS, M.D., Ch.B., D.P.H.

\*FLORENCE R. PILLMAN, M.B., B.S., M.R.C.P.

*Consultant Geriatric Physicians:*

\*R. B. FRANKS, M.R.C.S., M.R.C.P.

\*J. N. MICKERSON, M.D., M.R.C.P.

*Consultant Ophthalmologists:*

\*N. CRIDLAND, D.M., D.O. (OXON)

\*H. B. JACOBS, F.R.C.S., D.O.M.S.

\*V. BELL, M.B., B.S., D.O.

\*S. D. WALLIS, M.R.C.S., L.R.C.P., D.O.M.S.

*Ophthalmologists:*

\*P. W. ARUNDELL, M.R.C.S., L.R.C.P., D.O.M.S.

\*J. M. BIRD, M.B., B.S., D.O.

\*W. B. HEYWOOD-WADDINGTON, M.B., B.S.

\* Part-time



*Consultant Orthopaedic Surgeons:*

\*J. A. CHOLMELEY, F.R.C.S.

\*J. D. WILSON, F.R.C.S.

*Consultant Psychiatrists:*

\*M. ALDRIDGE, B.A., M.B., B.Ch., D.P.M.

\*H. M. N. REES, B.Sc., M.B., B.Ch., M.R.C.P., D.P.M.

*Psychiatrist:*

\*MARGARET DUNCAN, M.R.C.S., L.R.C.P.

*County Public Health Officer:*

F. W. MASON, F.R.S.H., F.A.P.H.I.

*Assistant County Public Health Inspector:*

G. R. CROWTHER, M.R.S.H., M.A.P.H.I.

*County Ambulance Officer:*

V. A. GLOVER, F.I.A.O.

*Superintendent Nursing Officer:*

MISS D. M. SMITH, S.R.N., S.C.M., H.V.CERT.

*Deputy Superintendent Nursing Officer:*

MISS B. C. THORNTON, S.R.N., S.C.M., H.V.CERT.

*Area Nursing Officers:*

MISS M. NASH, S.R.N., S.C.M., H.V.CERT.

MISS J. W. PARNELL, S.R.N., S.C.M., H.V.CERT.

MISS A. M. RYDER, S.R.N., S.C.M., M.T.D., H.V.CERT.

*Health Education Organiser:*

MISS B. M. JACOB, S.R.N., S.C.M., H.V. CERT.

*Assistant Health Education Organisers:*

MRS. E. LOWETH, S.R.N., H.V.CERT.

MISS B. A. WRAIGHT, S.R.N., S.C.M.

*Senior County Almoner:*

MISS J. GATEHOUSE, B.A., A.I.M.S.W.

*County Almoners:*

MISS O. M. CATER, A.I.M.S.W.

MISS M. B. FLEMONS, A.I.M.S.W.

MISS M. F. WESTON, A.I.M.S.W.

*Chief Chiropodist:*

A. C. CAMPBELL, S.R.N., M.Ch.S., S.R.Ch.

*Senior Chiropodists:*

MRS. E. DROMGOOLE, M.Ch.S., S.R.Ch.

MRS. D. M. PRICE, M.Ch.S., S.R.Ch.

F. A. BAKER, M.Ch.S., S.R.Ch.

*County Home Help Organiser:*

MRS. R. E. HOLMES

*Area Home Help Organisers:*

MRS. J. M. BURLING

MRS. M. BROWN-CONSTABLE

MRS. J. M. PLATER

*Occupational Therapist:*

MRS. D. B. PAYNE, M.A.O.T.

*Physiotherapists:*

\*MRS. B. ANDREWS, M.C.S.P.

\*MRS. W. M. K. HOPE-GILL, M.C.S.P.

\*Mrs. M. E. KING, M.C.S.P.

\*Mrs. O. R. NETTLES, M.C.S.P.

\*Miss M. E. WELLS, M.O.A.P.

*Orthoptists:*

\*Miss D. BALLANCE, D.B.O.

\*Miss M. SMITH, D.B.O.

\*Miss H. WISE, D.B.O.

*Senior Speech Therapist:*

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