

Training of Dental Nurses.—This has been ably carried out by Mr. J. B. Bibby, Superintendent of the Wellington Clinic and Training School, assisted by the instructional staff. During the year there have been fifty-six probationer dental nurses in training, thirty-five in their second year, and twenty-one in the first year. Of the former, twenty-six have now completed their training, of whom three have already been transferred to school dental clinics in the field.

The Primary Examination (Anatomy and Physiology) was held in September, 1931, the Examiners being Dr. Ada Paterson and Dr. F. S. Maclean. Of the twenty-one candidates, six failed to pass in one of the two papers; these candidates, however, were successful in gaining a pass in a special examination held in February, 1932.

The Final Examination was held on the 7th, 9th, and 10th March, 1932. The examination was conducted by Mr. Millen Paulin, B.D.S., and associated with him was the Superintendent of the Training School. Of the twenty-nine candidates eligible to sit, twenty-six passed. Nine will sit for a special examination to be held in a few months time.

No additional probationer dental nurses have been appointed for this coming year. Thus there will be a further reduction in the number of dental nurses in training, allowing the release of one of the instructional staff.

Inspection and Supervision.—As from the 1st January, 1932, a change was made in the system of supervising the work of the school dental clinics. The new system, that of decentralized control through district officers, has already fully justified its introduction. Instead of the whole Service being controlled in detail from Wellington on the reports of Inspecting Dental Officers, there are now District Dental Superintendents with headquarters at the district health offices at the four main centres. These officers control the school dental clinics in their own districts, the work being co-ordinated from this office. The District Dental Superintendents are: Wellington, Mr. R. D. Elliott; Auckland, Mr. F. B. Rice, B.D.S.; Christchurch, Mr. A. D. Brice, B.D.S.; Dunedin, Mr. J. S. Nicolson. This system enables a much closer personal touch to be maintained not only with the officers in charge of clinics, but also with the local dental clinic committees. These committees fulfil a very important function in connection with the operation of school dental clinics, particularly in regard to finance, and it is very desirable that there should be the closest co-operation between the Committees and the officers of the Department. The system of administration that is now in operation provides for this, and there is every indication that it will secure not only increased efficiency, but also economy.

SECTION 2.—STATISTICS.

(a) Operations performed in the field and in the training school from the 1st January to the 31st December, 1931 :—

Fillings—

In permanent teeth	110,132
In "first" teeth	224,695
Total fillings	334,827
Extractions	80,389
Other operations	147,543
Total operations.. ..	562,759

(b) Number of schools under systematic treatment, 1,118.

(c) Number of children receiving systematic treatment, 68,995.

The following figures illustrate the progress of the Service during the last three years :—

Year.	Number of Schools under Systematic Treatment.	Number of Children receiving Systematic Treatment.	Total Number of Operations.
1929	775	62,100	370,074
1930	930	67,652	463,204
1931	1,118	68,995	562,759

The total number of operations performed since the inception of the Service (1921), 2,689,259.

SECTION 3.—POLICY.

The past year has been marked by an important change in policy. Dental Clinic Committees have been called on to increase their contribution towards the maintenance of the school dental clinics to the extent of paying to the Department the sum of £30 per annum to cover the cost of materials used by each Dental Officer or dental nurse employed. This payment is in addition to certain maintenance expenses, amounting to at least an equal sum, which have always been borne by the local Committees. In order to assist them in raising the increased sum, Committees were empowered to levy a charge not exceeding 5s. per year for each child treated. As was anticipated, many difficulties had to be