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# Annual Report

on the Health

of the

County Borough of EAigan

by the

Medical Officer of Health

1949





# ANNUAL REPORT

# ON THE

# HEALTH

# OF THE

# COUNTY BOROUGH OF WIGAN

FOR THE YEAR 1949

J. HAWORTH HILDITCH, M.B., Ch.B., D.P.H., Medical Officer of Health and School Medical Officer.

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# HEALTH COMMITTEE, 1949.

Chairman	 	Alderman T. RAMSDEN.
Vice-Chairman	 	Alderman Mrs. E. ASHURST.
The Mayor	 	Alderman J. E. RILEV, J.P.
The Ex-Mayor	 	Councillor E. MALONEY.
Aldermen	 	J. H. BANKS, (to Dec.) F. W. ROBERTS.
Councillors	 	T. BRADSHAW (from Dec.), T. COBLEY, J. COLLINS, H. HOUGHTON, J. T. LYNCH, M. MCNICHOLAS, T. MONKS, P. NOLAN, J. TABERNER, J. W. WHITEHEAD.
Co-opted Members	 	Mrs. M. Frodsham, Mrs. E. Lewis, Mr. C. E. Marsden, Mr. W. Parkinson, Dr. J. P. Johnson.

# WELFARE SERVICES COMMITTEE, 1949.

Chairman		 	Alderman F. W. ROBERTS, J.P.
Vice-Chairman	n	 	Councillor J. T. LVNCH.
The Mayor		 	Alderman J. E. RILEV, J.P.
The Ex-Mayo	r	 	Councillor E. MALCNEY.
Aldermen		 	(Mrs.) E. Ashurst.
Councillors		 	J. Bowden, E. Droney, T. Higham, M. McNicholas, R. Prestt, J.P., J. Rankin, O. Somers, J. Taberner, A. H. Walker, J. W. Whitehead.

# STAFF, 1949.

Medical Officer of Health	 J. HAWORTH HILDITCH, M.B., Ch.B., D.P H.
Assistant Medical Officers	 I. M. SMITH, M.B., Ch.B., D.P.H. *E. R. M. WILSON, M.B., Ch.B.
Dentist	 *C. F. L. PURSLOW, L.D.S., R.C.S. Eng.
Tuberculosis Physician	 *H. RICHMOND, M.B., Ch.B., D.P.H.
Clinical V.D. Officer	 *H. BARDSLEV, M.R.C.S., L.R.C.P.
Orthopaedic Surgeon	 *Miss M. F. JOHNSTONE, M.B., Ch.B.

Consultant Obstetric Surgeons *C. H. WALSH, M.B., Ch (to 31st March)	
*T. N. HART, M.B.E., M (to 31st October)	
* R. L. HARTLEY, M.D., 1 (from 1st April) F.	
Public Analyst S. Ernest Melling, F.I.	.C.
Chief Sanitary Inspector J. ASHTON (a) (b).	
Deputy Chief Sanitary Inspector V. JONES $(a)$ $(b)$	
Sanitary Inspectors R. C. WOODS (a) (b)	
P. Strafford $(a)$ $(b)$ $($	<i>f</i> )
F. I. THOMAS (a)	
J. B. MARSH (a) (b)	
E. S. J. Blackwood (a)	
G. DUNN (a)	
H. C. ORMEROD $(a)$ $(b)$ (to	(f) 30th June)
C. JACKSON (a) (from 1st	November)
Health Visitors M. E. WHEAT (c) (d) (d)	e)
E. HANSON $(c)$ $(d)$ $(e)$	
E. M. WRIGHT (c) (d) (	e )
C. W. CAMPBELL (c) (d) (to	l) (e) 10th April)
C. JACKSON $(c)$ $(d)$ $(e)$	(g)
C. LAVIN (c) (d) (e) (h)	)
E. FARLEY (c) (d) (e) (from is	st February)
Tuberculosis Nurse E. Cody $(c)$ $(d)$	
Supervisor of Midwives E. M. READING $(c)$ $(d)$	

Midwives : E. B. BROOKS (c) C. MORRIS (c) (d)M. QUINN (c) (d)C. RYDER (c) (d)E. HIGHTON (C) E. WILLIAMS (c) (d)L. JACKSON (c) (d)M. WOODWARD (C) M. L. LYNCH (c) R. M. HADDOCK (c) (d)M. McGough (c) E. S. ROGERS (c)M. MAGEE (c) (d)M. V. HUGHES (c) (d)H. E. MAXWELL (c) (from 1st December) Ellesmere Road Nursery : .... M. F. LAVIN (d) (h) Matron .... .... Home Nursing : .... L. MAHER (c) (d) (g)Superintendent .... Occupation Centre : Supervisor .... .... J. HANSON .... Chief Clerk .... .... .... A. N. BYERS. Mental Health Service : Authorised Officers and V. CROWLEY J. A. PIETRASZKIEWICZ Mental Health Visitors Authorised Officer & Clerk J. AINSCOUGH Welfare Services : Senior Clerk .... J. C. DAVENPORT \* Part-time Officers. (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors

- (a) Certificate of the Royal Sanitary Institute and Sanitary Inspectors Examination Joint Board.
- (b) Meat Inspectors Certificate.
- (c) Certificate, Central Midwives Board.
- (d) General Trained.
- (e) The Royal Sanitary Institute Health Visitors Certificate.
- (f) The Royal Sanitary Institute Smoke Inspectors Certificate.
- (g) Queen's Nurse.
- (h) Registered Fever Nurse.

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#### Health Office,

WIGAN.

# To the Mayor, Aldermen and Councillors of the County Borough of Wigan.

#### MR. MAYOR, LADIES AND GENTLEMEN.

I have the honour to submit to you the annual report on the Health of the Borough of Wigan for the year 1949.

Following the precedent of the report for the year 1948, one section deals with the administration of the Council's functions under the National Assistance Act, 1948, which is undertaken by the Health Department. The Council's schemes prepared in accordance with Sections 21 and 29 of the above-mentioned act, and as approved by the Ministry of Health are reprinted as Appendices to this Report.

The Registrar General's estimate of the population of the Borough calculated for mid-1949 was 84,770, which compares with 84,390 in 1948, and 82,550 in 1939. It is evident that the population of the town is increasing, though slowly.

A perusal of the figures in the Statistical section of the report reveals that the live birth rate at 17.02 per thousand of the population, is again lower than in the previous year and lower than the average rate for the County Boroughs and Great Towns (18.7 per thousand). On the other hand the crude death rate has increased slightly to 12.49 per thousand (11.55 in 1948).

It is disappointing to record that in spite of the comprehensive nature of the new Health Services, the death rates for Tuberculosis and Cancer are still rising. Improvement in the former is closely bound up with the provision of more housing accommodation and more beds in sanatoria, both of which measures will provide the isolation necessary to limit the spread of infection, as well as ensuring a more satisfactory environment in which early treatment and adequate after-care can take place. During the year the Health Department has recommended for re-housing 48 cases of infectious respiratory tuberculosis, of which 19 were successful in obtaining accommodation.

I have pleasure in recording a further improvement in the Infantile Mortality Rate, which at 47 per 1,000 births compares well with the rate for 1948 (54 per 1,000 births), and is in fact a record for the Borough.

Of the 1,443 births occurring in the Borough during the year, 34 were illegitimate. No infant death was recorded in this latter group.

Prematurity and Pneumonia, which accounted for 19 and 20 infant deaths respectively, are still by far the commonest causes of infant mortality, and although the causes of prematurity are still obscure, the acute housing problem is to some extent responsible for the incidence of respiratory disease in the new-born. There are still many families living in grossly overcrowded conditions. Often one hears of a whole family including perhaps two children and a very young baby living and sleeping in one room, which is usually badly ventilated. In this close and oppressive atmosphere from which the stale smell of the cooking is seldom absent it is not surprising that the infants contract respiratory diseases.

The new duties assigned to Local Health Authorities under the National Health Service Act have been completely assimilated by the department and experience is accumulating which may be of assistance in rendering the services more effective.

The popularity of the Ambulance Service continues but notwithstanding the greatly increased number of calls on the service in the period under review, no properly authorised request for an ambulance or car has been refused. The number of patients carried during the year by the combined service was 10,620 as compared with 3,909 in 1946. Whilst it is difficult to mark down actual cases of abuse *it* is equally certain that a great many people who would previously have made their own way to the out-patient departments now demand as their "right" the provision of an ambulance or car.

The Home Help Service has proved a boon to families when the mother has been unable through illness or confinement to cope with her daily duties. The scope of the service has been extended to cover aged persons who are unable, perhaps temporarily, to manage their household affairs.

The Home Nursing Service is becoming increasingly popular with the general practitioners, who realise that to call in a nurse to renew a dressing or administer an injection can save a visit and allow time to be spent on more urgent or important work. The number of visits made by the nurses during the year is more than treble the number paid in a similar period previous to July 1948. This service, together with the Home Help Service, can do much to relieve pressure on the hospital beds.

Only one case of Diphtheria was notified during the year and this, which was a mild case clinically, occurred in an adult. Comparing this with experiences of the early '30's, one cannot but admit that immunisation is responsible for the disappearance of much needless suffering and mortality especially amongst the child population. Every effort has been made during the year to increase the percentage of children immunised and our efforts have met with some success. Unfortunately the same cannot be said for vaccination. The cessation of compulsory vaccination brought about by the National Health Service Act, has led to a further diminution in the numbers of those seeking protection. In fact only 3.1% of the infants born during 1949, were vaccinated. If this situation continues, the introduction of the smallpox virus into the community will find us unprotected and the results may be disastrous.

Infectious diseases have given little trouble throughout the year with the exception of a mild form of dysentery which occurred in epidemic form in the Borough during the last quarter. This epidemic emphasises the danger of dispensing an easily contaminated commodity such as ice-cream from an open cart in which the proper facilities for maintaining cleanliness are of necessity reduced to a minimum. The pre-packing of ice-cream which is to be sold in the streets would minimise the danger of contamination.

A glance at the sections of the report dealing with environmental hygiene is sufficient to indicate the tremendous volume of work accomplished by the sanitary inspectors in connection with housing and the inspection and supervision of food. The main plank in our campaign for improvement in food hygiene is the education of the food handler carried out by the sanitary inspectors individually in the course of their normal duties.

As previously stated the housing problem in the Borough is still unsatisfactory and much of the time of the sanitary inspectors which could otherwise be more profitably spent is taken up interviewing tenants who are dissatisfied, usually not without reason, with their present accommodation.

The Welfare Services section of the department is functioning satisfactorily and much preparatory work has been done during the year towards the planning of new hostel accommodation. In addition to this the Crompton Street Social Centre for handicapped persons was opened and appears to be very popular. The Centre is open on each week day in the afternoons and evenings and light refreshments are served. The Welfare Services Committee wisely decided to admit aged persons, both men and women, to the Centre and it is gratifying to see these old folks enjoying themselves, free for a time at least from the boredom of the lonely cottage or the harrassed tolerance of overworked daughters-in-law.

The integration of the Welfare Services Department with the Health Department has had a profound effect upon the problem of handling the aged who are temporarily or permanently unfit to take care of themselves. Joint action by welfare officers, health visitors, home nurses, domestic helps and sanitary inspectors has led to the rehabilitation of several such cases and has enabled them to take a renewed interest in life. Sometimes it has been necessary to admit the person to hospital for a short period and I am pleased to record that no case recommended by the Health Department for admission to hospital on social grounds has been refused.

In conclusion I would like to thank officers of other Corporation departments who have supplied statistical material for inclusion in this report. My thanks are due to the Chairmen and Members of the Health and Welfare Services Committees for the courtesy and kindness with which they have considered the various suggestions and recommendations made to them.

Also I would acknowledge the loyalty and assistance rendered by the Staff of the Department in the common effort to maintain the Public Health.

I am,

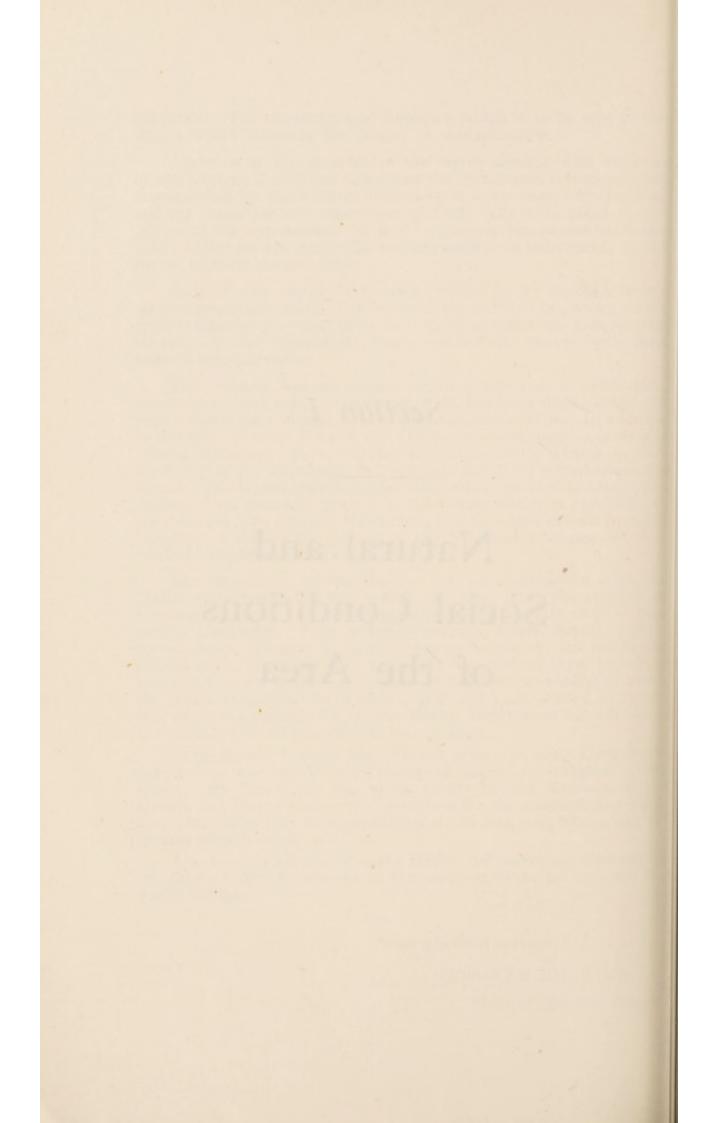
Your obedient servant,

#### J. HAWORTH HILDITCH,

Medical Officer of Health.

Section I

Natural and Social Conditions of the Area



#### GENERAL.

Area in acres						••••	5,082
Rateable value	of the	Borou	gh			£	6444,424
Sum represente	d by a	penny	rate				£1,832
Registrar Gener 1949 (on whi based)		ire stat	istics	in this	repor	t are	84,770
Number of inha 1949 (accordi							22,896
Number of mar during 1949	riages s 	olemni 	sed wi	thin tl	ne Boro	ough	835 .

A considerable portion of the Borough is used for agricultural purposes. These areas are sparsely populated. The average number of persons per acre varies in the fourteen wards within the Borough from 5 to 105, the average being 16.8. The Borough of Wigan forms a considerable part of the valley of the River Douglas. The river is the boundary on the north side, continues its course to the centre of the town and finally becomes the boundary at the west side. The levels on which the river enters and leaves are respectively 150 and 69 feet. Water is taken from the river for feeding the Leeds and Liverpool Canal which traverses the town. Due to the meagre drop in level the river water flows slowly and the bed is self-cleaning only during the winter months. The waters are badly polluted before they enter the Borough and as a result of this and subsequent pollution the river maintains little or no life-plant or animal. The maximum elevations of the town are at the extreme north 254 feet and at the south-west 260 feet. The lowest level is at the north-west boundary which is 60 feet above sea level.

Geologically, the whole of the Borough rests on the lower coal measures, or Gannister beds, which are here very superficial. This has led to outcrop mining in several parts of the district. The subsoil is mainly clay which in places has a depth of nearly 20 feet; but there is an important layer of sand covering a large part of the centre of the town and extending northwards in the direction of Standish. This sand is also found in " pockets " in other parts of the Borough. Much of the western portion, beyond the Park, lies on a fairly extensive gravel bed.

Extensive mining operations over several generations have brought about subsidence in many parts of the Borough. In some areas subsidence has had a disastrous effect on property and is a constant source of worry both as regards the condition of old sewers and water mains and planning sites for new buildings.

The population is essentially an industrial one, the principal industries being coal, iron, cotton, and the manufacture of clothing.

#### BATHS.

The local authority possess only one Public Bathing establishment, which is situate in Millgate. This accommodation is insufficient for a town with a population of 84,770, especially when it is realised that the great majority of dwellinghouses are not and cannot in the forsecable future be provided with a private bath. The provision of pit-head baths will do something to alleviate the conditions of the very large number of the male population engaged in the coal mining industry. It is felt, however, that bearing in mind the recent accent on physical education in schools, urgent steps should be taken to provide more commodious and more modern bathing facilities.

The Baths Superintendent, Mr. J. H. Cockrell, has kindly supplied the following figures and report :---

Number of bathers during the past five years :--

Year ending 31st March :

1946	 		 154,437
1947	 	• · · •	 149,323
1948	 		 142,543
1949	 		 165,629
1950	 		 202,283

### PARTICULARS OF THE BOROUGH BATHING ESTABLISHMENT FOR THE YEAR ENDED 31st MARCH, 1950.

Number	of	Plunge	Baths	 	 2
Number	of	Private	Baths	 	 16

#### Bathers.

Male Plun	ge Baths				87,414
Male Priva	ate Baths				21,533
Female Pl	unge Baths				34,138
Female Pr	ivate Baths				7,101
Mixed Bat	hing : Adul	ts and	Juniors		12,380
Contracts,	Free Passes,	Season	Tickets,	etc.	39,717
				-	
1	fotal				202,283

The above figures show an increase as compared with the previous year, due to the abnormal weather conditions experienced last summer. The figures for 1950, constitute an all time record in the history of the Baths.

Tests are taken three times a day by the Baths Superintendent to determine the residual Chlorine and Alkali content of the water.

It is compulsory for patrons using the swimming bath to precleanse in the shower bath before entering the water. It is true to say that owing to the limited accommodation in this department and the vast area which this small establishment has to serve, it is impossible to maintain a standard comparable with other towns of a similar size who are fortunate enough to possess a number of bathing establishments.

Each year applications from organisations desiring to form swimming clubs have to be turned down and in the summer time it is necessary to stop booking, to relieve congestion

Bathing facilities in this town lag painfully behind and it is to be regretted that the possibilities of extension to present facilities are very remote.

## PARKS AND OPEN SPACES.

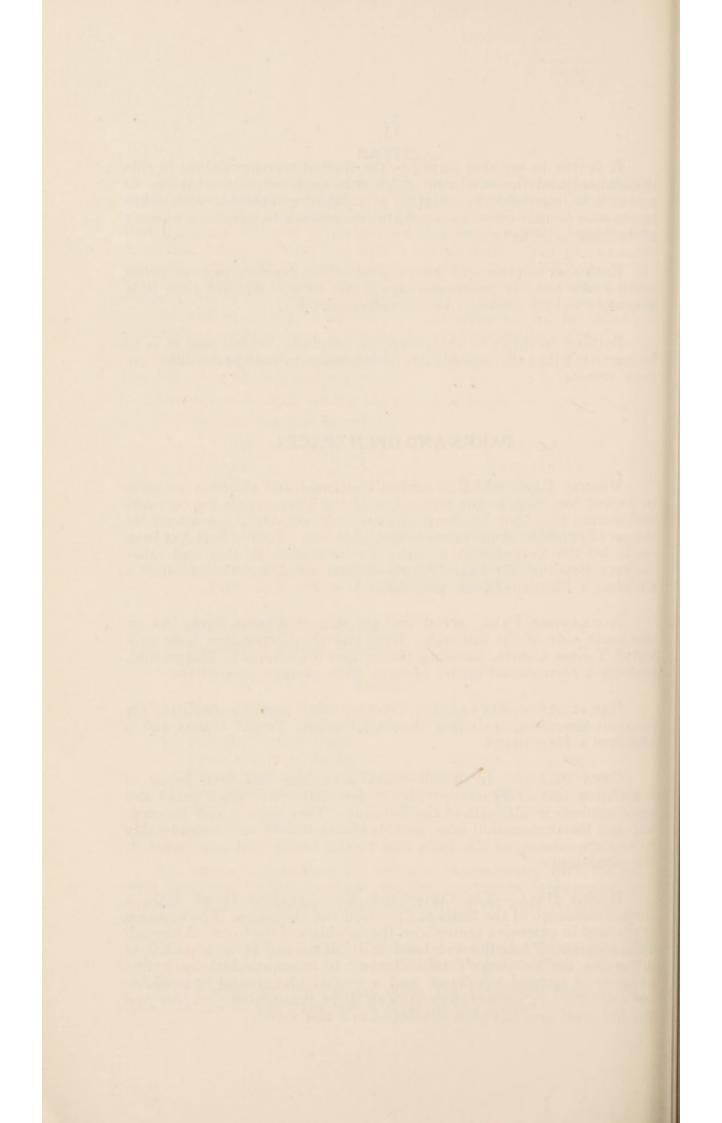
MESNES PARK which is centrally situated and of about 20 acres in extent has been in the possession of the Corporation for 60 years and during that time has been given a most attractive appearance by means of constant improvements and additions. Every effort has been made by the Corporation to cater for recreation in this and other parks : Bowling Greens, Tennis Courts, Putting Green and a Children's Playground are provided.

ALEXANDRA PARK, about half the size of Mesnes Park, lies on the south side of the Borough. Here also the Corporation have provided Tennis Courts, Bowling Green and a Children's Playground, making a recreational centre of more than average proportions.

GREAT ACRE RECREATION GROUND also provides facilities for open-air exercises, including Bowling Greens, Tennis Courts and a Children's Playground.

OPEN SPACES.—In recent years advantage has been taken of demolition and clearance activities to form attractive small parks and open gardens in all parts of the Borough. This work is still proceeding and the Corporation hope by this means to add very considerably to the appearance of the town and to the health and enjoyment of the inhabitants.

HAIGH HALL.—The Corporation have acquired Haigh Hall, a former residence of the Earls of Crawford and Balcarres. The mansion is situated in extensive grounds on the outskirts of the town. Although this acquisition has not yet been fully developed it is a centre of attraction for the town's inhabitants. It is approached by a fine expanse of natural woodland, and a special playground is available for children. A conservatory is open daily throughout the year and the lily pond area has been developed as a rest garden.



# Section II

# Statistics



# VITAL STATISTICS, 1948-1949.

Area (acres)	1948. —	1	1949. 5,082
Population (Estimated by Registrar General)	84,390		84,770
Live Births: Males 721 Females 722 Total	. 1,590		1,443
Ditto, for England and Wales	17.90		16.7
Ditto, 126 County Boroughs and great towns	20.00		18.7
Illegitimate births number 34, or .40 per 1,000 of population, a percentage of			2.36
Deaths : Males 552 Females 507 Total	975		1,059
Death Rate per 1,000 population	11.55		12.49
Ditto, for England and Wales	10.80		11.7
Ditto, 126 County Boroughs and great towns	11.60		12.5
Excess of Registered births over deaths	ion (Estimated by Registrar General) $84,390$ $84,770$ rths: Males $721$ Females $722$ Total I,590 I,443 ate per 1,000 population II. S84 I7.02 or England and Wales II. II. S90 I8.84 ate per 1,000 population II. S84 I7.02 or England and Wales II. II. S5 remate births number 34, or .40 per 1,000 of ulation, a percentage of II. S5 remates $552$ Total 975 I.059 Rate per 1,000 population II. S5 remates $507$ Total 975 I.059 Rate per 1,000 population II. S5 or England and Wales II. S5 or England and Wales II. S5 of Registered births over deaths 615 384 at Death Rate per 1,000 live and still births 615 384 ate (per 1,000 births) from Diarrhœa and eritis II. S4 re rate (deaths per 1,000 births) 54 47 or England and Wales II. S5 re rate (deaths per 1,000 births) 54 re rate (deaths per 1,000 births) 39 re rate (deaths per 1,000 births) .		384
Maternal Death Rate per 1,000 live and still births	.61		1.98
Tuberculosis Death Rates : Pulmonary 0.49 Other than Pulmonary 0.08 } Total	0.47		0.57
Total deaths from Diarrhœa and Enteritis under two years	10		4
Death rate (per 1,000 births) from Diarrhœa and Enteritis	6.29		2.77
Infantile rate (deaths per 1,000 births)	54		47
Ditto, for England and Wales	34		32
Ditto, for 126 County Boroughs and great towns	39		37
			II
Ditto 1 year (legitimate) Ditto 1 year (illegitimate)			68 nil
, the second sec	4		

# REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1949.

			All		.				
	CAUSES.	Sex.	Ages.	0+	1+	5+	15+		
	ALL CAUSES	M. F.	552 507	35 33	8 3	1 5	45 46	174 126	289 294
1.	Typhoid and Paratyphoid Fevers	M. F.	_	=		_	=	_	_
2.	Cerebro-Spinal Fever	M. F.		1	=	=	_		-
3.	Scarlet Fever	M. F.	=	=	=	-	=	=	
4.	Whooping Cough	M. F.	_	=	=	=	-	=	=
5.	Diphtheria	M. F.	=	-	-	=	=	=	-
6.	Tuberculosis of Respiratory System	M. F.	23 19	-		=	7 15	14 4	2
7.	Tuberculosis Other Forms	M. F.	6 1	1	1	-	3 1	1	=
8.	Syphilitic Disease	M. F.	1	-	-	=	=	1	=
9.	Influenza	. M. F.	19 14	=	-	=	4	8	777
10.	Measles	. M. F.		2	-	-	-	=	-
11.	Acute Poliomyelitis and Polio- encephalitis	. M. F.	-	-	-	-	-	-	-
12.	Acute Infectious Encephalitis	. M. F.		-	-	=		Ξ	
13.	M. Cancer of Buccal Cavity and Os F. Cancer of Uterus	E	5 7	-	-	-		2 4	32
14.	Cancer of Stomach and Duodenum	M. F.	18 14	=	-	=	1	7 4	11 9
15.	Cancer of Breast	. M. F.	1 15	-		-		-9	1 4
16.	Cancer of all other sites	. <u>M</u> . F.	51 36	=	-	=	13	23 12	27 21
17.	Diabetes	. M. F.	3 5	-	=	-	1	22	1 3
18.	Intra-Cranial Vascular Lesions	. M. F.	58 55	=	-	-	22	7 13	49 40

	CAUSES.	Sex.	All Ages.	0+	1+	5+	15+	45+	65+
	All Causes	M. F.	552 507	35 33	8 3	1 5	45 46	174 126	289 294
19.	Heart Disease	M. F.	150 141	-	_	-	7 4	52 34	91 103
20.	Other Circulatory Diseases	M. F.	17 16			_		5 1	11 15
21.	Bronchitis	M. F.	66 44	_	_		5 2	23 11	38 31
22.	Pneumonia	M. F.	28 22	11 9	2 1		-	7 5	8 6
23.	Other Respiratory Diseases	M. F.	9 4	_	_1		1	4	3 2
24.	Ulceration of Stomach and Duodenum	M. F.	2 1	=	=	_	_	1 1	1
25.	Diarrhœa (under two years)	M. F.	22	2 2	=	-	_	_	=
26.	Appendicitis	M. F.	1 1	=	-	_	1	1	_
27.	Other Digestive Diseases	M. F.	8 13	=	1		2 2	3 5	3 5
28.	Nephritis	M. F.	10 7	=	=	-	1 1	4 1	5 5
29.	Puerperal and Post Abortive Sepsis	F.	1	-	-	-	1	-	
30.	Other Maternal Causes	F.	2	_	_	-	2	-	<u> </u>
31.	Premature Birth	M. F.	8 11	8 11	=	=		_	+
32.	Congenital Malformations, Birth Injury and Infantile Diseases	M. F.	9 8	8 7	_	1		_	_
33.	Suicide	M. F.	1 5	=	=	_	1	1 3	1
34.	Road Traffic Accidents	M. F.	5 2	=	1	1 1	2	1	1
35.	Other Violent Causes	M. F.	7 8	1	1	-	3	2	3 4
36.	All Other Causes	M. F.	43 50	4	2 1		5 4	8 7	24 36

# CAUSES OF DEATH WITH DEATH RATES, 1949.

	Disease	Ν	o. of Deaths,	Rate.
Ι.	Typhoid and Paratyphoid Fevers .			_
2.	Cerebro Spinal Fever		I	.01
3.	Scarlet Fever		-	
4.	Whasping Cauch			-
5.	Diphtheria			_
6.	Tuberculosis of Respiratory System .		42	.50
7.	Other Forms of Tuberculosis		7	.08
8.	Syphilitic Disease		I	.01
9.	Influenza		33	.39
IO.	Measles		2	.02
II.	Acute Poliomyelitis and Polioencepha	alitis	_	
12.	Acute Infectious Encephalitis		I	.01
13M	. Cancer of Buccal Cavity and Oesopha	agus	5	.06
13F.	Cancer of Uterus		7	.08
14.	Cancer of Stomach and Duodenum .		32	.38
15.	Cancer of Breast		16	.19
16.	Cancer of all sites		87	1.03
17.	Diabetes		8	.09
18.	Intra-Cranial Vascular Lesions		113	1.33
19.	Heart Disease		291	3.43
20.	Other Circulatory Diseases		33	.39
21.	Bronchitis		IIO	1.30
22.	Pneumonia		50	.59
23.	Out Designed Discourse		13	.15
24.	Ulceration of Stomach or Duodenum		3	.04
25.	Diarrhoea (under 2 years)		4	.05
26.	Appendicitis		2	.02
27.	Other Digestive Diseases		21	.25
28.	Nephritis		17	.20
29.	Puerperal and Post-Abortive Sepsis		I	.01
30.	Other Maternal Causes		2	.02
31.	Premature Births		19	.23
32.	Congenital Malformations, Birth Injun	ry, Infan	tile	
-	Discase		17	.20
33.	Suicida		6	.07
34.	Dood Traffic Assidants		7	.08
35.	Other Vielent Causes		15	18
36.	All Other Causes		93	1.10
	Total		1,059	12.49

# CAUSES OF DEATH DURING 10 YEARS, 1940-1949.

	Class	1		-	1	1	1				
CAUSES		1940	1941	1942	1943	1944	1945	1946	1947	1948	1949
Typhoid and Paratyphoid Fevers	1	-	-		-	-	-	-	-	-	-
Cerebro Spinal Fever	2	1	3	4	1	-	1	2	1	-	1
Scarlet Fever	3	1	1			1	-	-	1	-	-
Whooping Cough	4		4	2	1	3	-	3	2		
Diphtheria	5	15	14	12	5	2		1	1		-
Tuberculosis of Respiratory System	6	55			49	41	37	36	64	35	42
Other Forms of Tuberculosis	7	10			14	10	9	3	3	5	7
Syphilitic Disease	8	5	6	3	4	11	-	4	5	2	1
Influenza	9	54			51	19	23	33	27	19	33
Measles	10	2	3	2	6		2	-	5	1	2
Acute Poliomyelitis & Polioencephaliti		-	-	-	-	-	-	-	3		
Acute Infectious Encephalitis	12	3	1	3	3	4	4	3	-	1	1
Cancer of Buccal Cavity & Oesophagu				7	11	9	5	6	6	5	5
Cancer of Uterus	13F	10		10	7	7	6	3	6	9	7
Cancer of Stomach and Duodenum	14	29		23	30	21	24	22	31	23	32
Cancer of Breast	15	10		9	7	14	16	11	14	13	16
Cancer of all other sites	16	50		68	69	78	66	79	74	79	87
Diabetes	17	8		8	10	14	7	10	9	5	8
Intra-Cranial Vascular Lesions	18	112		118	132	108	105	112	120	129	113
Heart Disease	19	213	182	197	199	197	189	186	269	254	291
Other Circulatory Diseases	20	12	10		11	19	15	20	19	31	33
Bronchitis	21	188		104	112	97	79	89	97	73	110
Pneumonia	22	108		69	62	49	44	48	70	49	50
Other Respiratory Diseases	23	13		11	16	14	8	11	12	10	13
Ulceration of Stomach and Duodenum	24	13		7	8	6	6	5	.9	2	3 4
Diarrhoea (under two years)	25	5		6		9	6	6	14	10	
Appendicitis	26	6				5	2	3	3	2	2
Other Digestive Diseases	27	26		15		24	28	21	24		21
Nephritis	28	28				10	18	18	22	23	1/
Puerperal and Post-Abortive Sepsis	29	3		5	-	2	1	1	3	1	2
Other Maternal Causes	30	3			4	1		5	4		
Premature Birth	31	33	36	20	24	20	23	37	29	16	19
Congenital Malformations, Birth	20	24	20	20	20	25			20	21	17
Injury, Infantile Disease	32	26					29	23	28	21	6
Suicide	33	8				6	4	7	1	7	7
Road Traffic Accidents	34	14					4		7		15
Other Violent Causes	35	39					16		25		93
All Other Causes	36	154	147	119	129	124	125	115	117	106	93
All Causas Tatals		1271	1102	1020	1113	1014	903	057	1125	075	1059
All Causes—Totals		12/1	1103	1030	1113	1014	903	951	1125	915	1055
		1									

# DEATHS REGISTERED DURING THE

(Classified locally under the Registrar-General's causation, age and

		Deaths at the sub-joined ages of "Residents" whether occurring in or beyond the District							
Causes of Deaths.	Class. No.	All Ages	Under 1 year.	1 and under 5.	5 and under 15.	15 and under 45.	45 and under 65.	65 and over.	
Typhoid and Paratyphoid Fevers          Cerebro Spinal Fever          Scarlet Fever          Whooping Cough          Diphtheria          Tuberculosis of Respiratory System          Other Forms of Tuberculosis          Syphilitic Disease          Influenza          Measles          Acute Poliomyelitis and Polioencephalitis         Acute Infectious Encephalitis          Cancer of Buccal Cavity and Oesophagus         Cancer of Stomach and Duodenum         Cancer of Stomach and Duodenum         Cancer of Breast             Diabetes              Intra-Cranial Vascular Lesions          Heart Disease          Other Circulatory Diseases          Bronchitis          Pneumonia              Other Respiratory Diseases              Other Digestive Diseases <t< td=""><td>1 2 3 4 5 6 7 8 9 10 11 12 13M 13F 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36</td><td><math display="block">\begin{array}{c} -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 </math></td><td>   </td><td></td><td></td><td><math display="block">\begin{array}{ c c c c c c c c c c c c c c c c c c c</math></td><td><math display="block">\begin{array}{c ccccccccccccccccccccccccccccccccccc</math></td><td><math display="block">\begin{array}{c ccccccccccccccccccccccccccccccccccc</math></td></t<>	1 2 3 4 5 6 7 8 9 10 11 12 13M 13F 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30 31 32 33 34 35 36	$\begin{array}{c} -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 \\ -1 $	 			$\begin{array}{ c c c c c c c c c c c c c c c c c c c$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	
Totals		1060	68	11	6	91	300	584	

# 52 WEEKS ENDED, 31st DECEMBER, 1949.

short list—grouped according to ward residence)

	Doutins at an Agos.														
Class No.	St. George Ward.	Lindsay Ward.	St. Catharine Ward.	St. Patrick Ward.	St. Thomas Ward.	Poolstock Ward.	victoria Ward.	St. Andrew Ward.	Swinley Ward.	All Saints Ward.	berton Ward.	North Pem- berton Ward.	Central Pem- berton Ward.	South Pem- berton Ward.	Total Deaths.
	1	2	3	4	5	6	7	8	9	10	11	12	13	14	
1 2 3 4 5 6 7 8 9 10 11 12 13M 13F 14 15 16 17 18 19 20 21 22 24 25 26 27 28 29 30 31 32 33 34 35 36 	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c c c c c c c c c c c c c c c c c c c $	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$ \begin{array}{c} \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\ \\$	$ \begin{array}{c}                                     $	4           6   3   5165891   1   1   31   25	$\begin{array}{c c c c c c c c c c c c c c c c c c c $	$\begin{array}{c c c c c c c c c c c c c c c c c c c $	$ \begin{array}{c c}                                    $	$\begin{array}{c c c c c c c c c c c c c c c c c c c $	$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$		$ \begin{array}{c ccccccccccccccccccccccccccccccccccc$	$\begin{array}{c} - \\ 1 \\ - \\ - \\ 42 \\ 5 \\ 2 \\ 34 \\ 2 \\ - \\ 1 \\ 4 \\ 7 \\ 32 \\ 14 \\ 92 \\ 9 \\ 109 \\ 286 \\ 42 \\ 111 \\ 55 \\ 22 \\ 2 \\ 4 \\ 21 \\ 19 \\ 1 \\ 21 \\ 14 \\ 5 \\ 7 \\ 16 \\ 76 \end{array}$
	44	52	94	81	44	48	70	185	123	29	30	69	134	57	1060

Deaths at all Ages.

Wa	ard		Ward No.	Estimated Population	Death Totals	Death Rate
St. George		 	1	2730	44	16.12
Lindsay		 	2	4955	52	10.49
St. Catharine		 	3	5762	94	16.31
St. Patrick		 	4	6654	81	12.17
St. Thomas		 	5	2711	44	16.23
Poolstock		 	$\frac{6}{7}$	3903	48	12.30
Victoria		 		3004	70	23.30
St. Andrew		 	8	16988	185	10.89
Swinley		 	9	10556	123	11.65
All Saints		 	10	2271	- 29	12.77
West Pemberto	n	 	11	3691	30	8.13
North Pembert	on	 	12	6768	69	10.20
<b>Central</b> Pembe	rton	 	13	9780	134	13.70
South Pembert		 	14	4997	57	11.41
Totals		 		84770	1060	*12.49

### POPULATION OF WARDS, WITH COMPARATIVE DEATHS AND DEATH RATES.

\*Death Rate is based on the Registrar General's estimated Population of 84,770.

# DEATH-RATES FOR WIGAN DURING THE LAST TEN YEARS.

1940	1941	1942	1943	1944	1945	1946	1947	1948	1949
15.81	18.72	12.95	14.30	12.92	11.42	11.55	18.87	11.55	12.49

AVERAGE FOR TEN YEARS, 13.00.

.

S FROM STATED CAUSES AT VARIOUS PERIODS	
AT	
CAUSES	
0	
M STATE	AGE.
NO	PF
FR	B
DEATHS	UNDER I YEAR OF AGE.
H	2
NUMBER OF DEATHS	5
1949.	
MORTALITY,	
INFANT	

	Total Deaths under I year	89	000-400-0 <u>0</u> -0	68
	9 months & under 12 mths.	6	-   -   00   -	9
	6 months 9 m & under & 1 9 months 12	5	-       -   -	5
	weeks 3 months 6 months 9 months t under & under & under months 6 months 9 months 12 mths.	∞	0   -     -   0   0	8
	4 weeks & under 3 months	15	-  0    -0 0	15
	Total under 4 weeks	34		34
	3-4 weeks	- 1	-	1
	2-3 weeks	1 12	-	5
	1-2 weeks	4	-   -	4
	Under 1 week	27	~   ~ =   ~     <u></u>	27
-		::		:
		::	Atelectasis and Asphysxia at Birth Atrophy, Debility and Marasmus Congenital Malformations Convulsions Gastro-Enteritis Injury at Birth Measles	:
	th	d	ysxia dd Mi dd Mi ms) ms) s) s	:
	Dea	Certified	Asph: ty an forma forma r form form rlying	:
	Cause of Death	05	and Mall Mall Sirth Othe Birth Birth (othe Birth Sirth Othe Sirth	Total
	Cau	auses	Atelectasis and Asphysxi Atrophy, Debility and I Congenital Malformatio Convulsions Gastro-Enterits Injury at Birth Meanles Meningitis (other forms) Premature Birth Pneumonia (all forms) Other Causes	Tc
		All Causes : Certified Uncertified	Atelectasis and Asphysxia a Atrophy, Debility and Ma Congenital Malformations Convulsions Gastro-Enteritis Injury at Birth Measles Meningitis ( <i>Tuberculous</i> ) Meningitis (other forms) Premature Birth Pneumonia ( <i>all forms</i> ) Suffocation, overlying Other Causes	

#### INFANTILE MORTALITY.

The number of deaths of children under one year is 68, or 47 per 1,000 births, and of children over one year and under five years 11, or 0.13 per 1,000 of the population.

In 1948 there were 86 deaths under one year, a rate of 54 per 1,000.

It will be noted that 39 of the 68 deaths were due to premature birth (19), and pneumonia (20). Half the total deaths, i.e, 34, occurred in the first 4 weeks of life.

The infant deaths occurred as follows :---

27 Home.

17 Billinge Hospital.

14 R.A.E. Infirmary.

7 Whelley Hospital.

I Christopher Nursing Home.

1 Royal Manchester Children's Hospital.

1 Tyldesley-with-Shakerley Sanatorium.

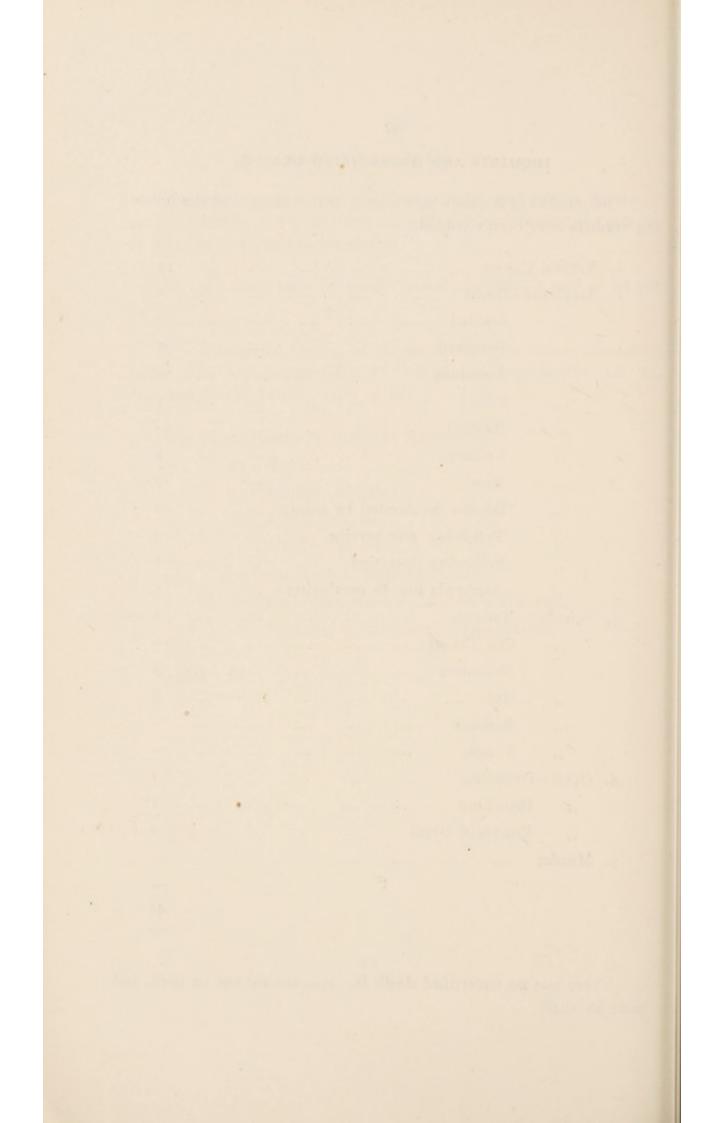
Total 68

# INQUESTS AND UNCERTIFIED DEATHS.

The number of inquests held during 1949 was 44. and the following verdicts have been recorded :---

1. Natural Causes				 	12
2. Accidents-Burnt				 	-
,, Scalded				 	-
,, Drowned				 	2
,, Poisoning				 	
,, Falls				 	7
,, Railway				 	_
,, Colliery				 	I
,, Road				 	7
,, Disease acc	celerat	ted by	injury	 	2
,, Following	war	service		 	2
", Following	opera	tion		 	I
,, Asphyxia	due t	o overla	ying	 	I
3. Suicides-Hanging				 	I
,, Cut Throat				 	
" Drowning				 	2
,, Gas				 	2
,, Railway				 *	_
,, Poison				 	-
4. Open—Poisoning				 	I
" Drowning				 	I
,, Fractured Sku	11			 	2
5. Murder			••••	 	
					-
					44

- There was no uncertified death in 1949, against one in 1948, and none in 1947.



Section III

Provision of Health Services in the Area The undermentioned Centres were open on the days and at the times stated :---

#### Centre.

Wigan Central Clinic, Municipal Buildings, Library Street.

Pemberton Clinic, 15 Billinge Road, Pemberton.

Scholes Clinic.

Methodist Chapel, Worsley Mesnes.

Springfield Boys' Club, Springfield Road,

Orthopædic Clinic, Municipal Buildings, Library Street, Wigan.

#### Days Open.

Infant and Young Children's Clinic : Wednesday afternoons, 2 to 4-30 p.m.

Ante-natal Clinic :

Tuesdays, 10 a.m. and 2 p.m.

A Consultant attends on one Thursday of each month.

Post-natal Clinic : Alternate Thursdays, 2 p.m.

Dental Clinic for expectant and nursing mothers and young children : Tuesday morning, 9-30.

Class for expectant mothers : Friday afternoon, 2 p.m.

Infant and Young Children's Clinic : Friday afternoons, 2 to 4-30 p.m.

Ante-natal Clinic : Thursday afternoon, 2 p.m.

A Consultant attends on one Thursday of each month.

Infant and Young Children's Clinic : Monday afternoons from 2 to 4-30 p.m.

Infant and Young Children's Clinic : Wednesday mornings at 10 a.m.

Infant and Young Children's Clinic : Tuesday afternoons from 2 to 4-30 p.m.

For treatment of crippling defects. Open each Monday morning. Surgeon attends twice monthly. Cases from Ince, Hindley, and Standish also attend.

#### ATTENDANCES AT CLINICS.

### ANTE-NATAL CLINICS.

	Wigan	Centre.	Pemberton.		
	Weekly Clinic.		Weekly Clinic.	Special Clinic.	
Number of primary cases attend-					
ing Clinic during the year	512	175	 137	103	
Total number of attendances	2167	181	 720	386	

#### Classes for Expectant Mothers:

47 classes were held during the year 1949, and 324 attendances were made by mothers.

## POST-NATAL CLINIC.

Attendances were as follows :---

New Cases.	Return	Cases.	Total.
76	 32		108

# INFANT AND YOUNG CHILDREN'S CLINICS.

Attendances were as follows:---

Clinic		under	dren over 12 mths.	Total	Mothers	Primary cases	Cases examined by medical attendant
Central		2340	487	2827	2620	319	1409
Scholes		1798	392	2190	2083	226	1086
Pemberton		1335	263	1598	1530	260	820
Worsley Mesn	les	743	300	1043	957	128	602
Springfield		1542	543	2085	1997	185	1061
Totals		7758	1985	9743	9187	1118	4978

Comparative attendances for the last 5 years :

				1945	1946		1947		1948	1949
Babies				8424	 9144	I	0172	I	0077	 9743
Primary	attenda	inces	of							
Babies				961	 1207		1305		1181	 1118
Expectant	Mothers	:								
Central:										
2010/02/02/02/02/02/02/02/02/02/02/02/02/02	v Clinic			200						
Special	Clinic			152	 165		211		198	 181
Pemberto	on:									
	v Clinic			723	 855		1045		1098	 720
Special	Clinic				 				-	 386

It will be observed that the attendances at the various clinics in 1949 were fewer than in the previous two years. This is attributed to the influence on local authority services of other services provided for mothers and children under the National Health Service Act. It will be interesting to observe how far this trend will continue.

#### DENTAL CLINIC

#### REPORT OF THE SENIOR DENTAL OFFICER.

A summary of the dental work carried out during the year for the Maternity and Child Welfare Clinic is given in the following table :---

	Examined	Needing Treatment	Treated	
Expectant and Nursing Mothers	 134	134	134	
Children under five	 72	72	72	

(a) Numbers provided with dental care :--

		Anaesthetics			Scalings	Silver			Dentures provided	
	Extrac- tions	Local	General		Scaling and gum treat- ment	Nitrate treat- ment	Dress- ings	Radio- graphs	Com- plete	Partial
Expectant and Nursing Mothers	83	83		34	46	-	-	_	1	1
Children under five	35	35	_	10	17	18	-	_		-

(b) Forms of dental treatment provided :--

In addition, 347 children under five years of age were examined in the routine school dental work and 80 received dental treatment.

From January to October only one session each week was devoted to this work and very little time was therefore available for the dental inspection of the patients attending these clinics. At the end of October, the dental work which was carried out for the Tuberculosis Department was transferred to the Hospital Management Committee. The time taken up for this session is now being utilised for the Dental Inspection of those attending the Ante-natal Clinic and it is anticipated that the two sessions per week now available will make it possible for all patients attending this clinic to receive an oral examination.

#### RESULTS OF SUNLIGHT TREATMENT.

Two patients were under treament on the 1st January; one

ceased to attend and the other was discharged, greatly improved.

Three new patients were admitted during the year ; one ceased to attend and the remaining two were discharged, cured.

#### NURSERY.

The 24-hour Nursery provided by the Local Authority is situated at Ellesmere Road, Pemberton, and has accommodation for 52 children during the day and 17 at night.

The Nursery is recognised as a training nursery for the N.N.B. Examination for Nursery Nurses. During the year two students were presented for and one passed the examination.

The demand for admission of children to the nursery continues and there are 200 applicants on the waiting list.

The average attendances during the year were :--

	DAY (including those who remain at night)	NIGHT
Children under 2 years of age	 15	8
Children between 2 and 5 years	 29	7
Totals	 44	15

#### EXTRACTS FROM VITAL STATISTICS.

## Live Births

L	ve birtns.		М.		F.	Total.
	Legitimate Illegitimate		701 20		708 14	 1,409 34
			721		722	1,443
	Birth rate per 1,00	oo pop	ulation,	17.03	2.	
Sti	ll Births.		М.		F.	Total.
	Legitimate Illegitimate		33 I		31 2	 64 3
			34		33	67
Inf	fant Deaths.			f		
	Deaths of children	under	M.	e or i	F.	Total.
	Legitimate Illegitimate		35		33	 68 —
	Thestimate					

35

68

33

#### Infantile Mortality.

The Infant Mortality Rate (i.e., the number of deaths occurring under one year of age per 1,000 births) was 47 : the rate for legitimate births was 48, and for illegitimate births, nil.

#### Maternal Deaths.

Three women died in consequence of childbirth :

Case No.

Cause.

- 1. Fulminating toxaemia of pregnancy.
- 2. Peritonitis due to salpingitis due to septic abortion.
- 3. Acute toxaemia due to acute pyelitis of pregnancy.

Twin pregnancy.

#### Maternal Mortality.

The Maternal Mortality Rate (i.e., the number of deaths of women in, or associated with childbirth, per 1,000 births, live and still) was:-

Puerperal Sepsis .... 0.66 Other Puerperal causes .... —

Total	Puerperal	mortality	 0.66
Non	Puerperal	causes	 1.32

Total Maternal Mortality Rate .... 1.98

Compara	tive	figures	for	the la	st 5	years				
		194	15	194	6	194	7	194	8	1949
Deaths		2		6		7		I		3
Rate		1.40		3.44		3.59		.61		1.98
Births		1,375		1,670		1,886		1,590		1,443

#### DOMICILIARY MIDWIFERY.

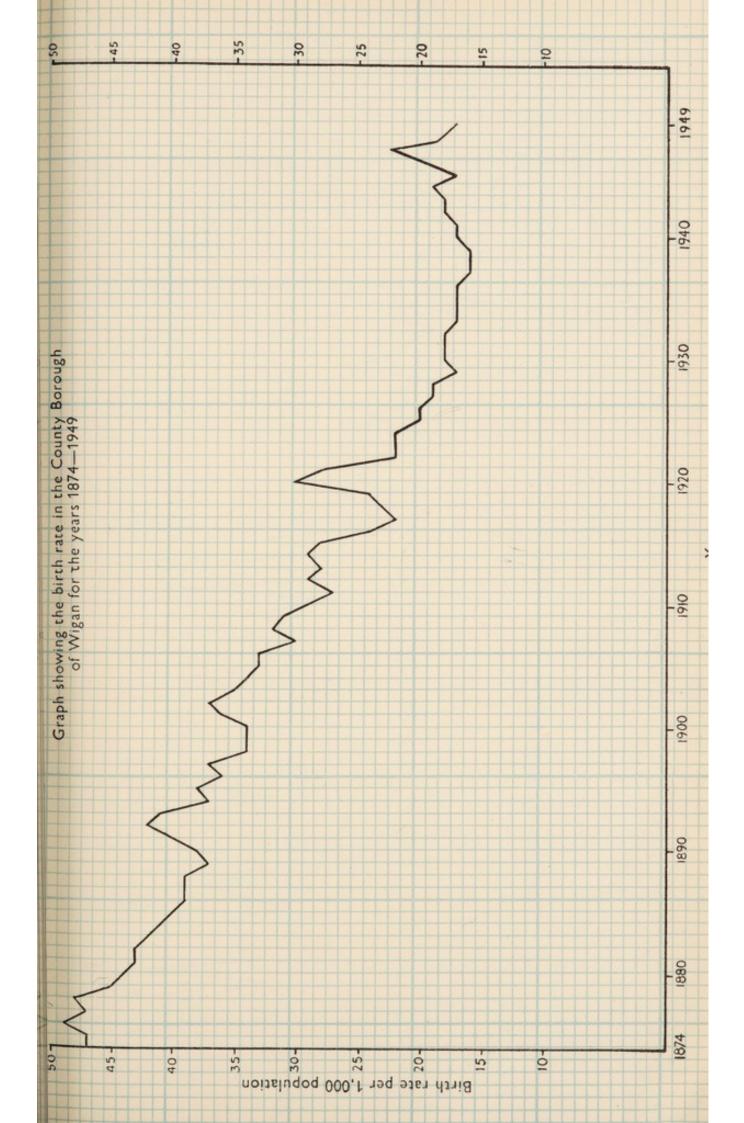
There were 23 midwives practising in the district on 31st December, 1949, of whom 15 were Municipal Midwives, 1 independent and 7 employed in Maternity Homes.

# MUNICIPAL MIDWIVES.

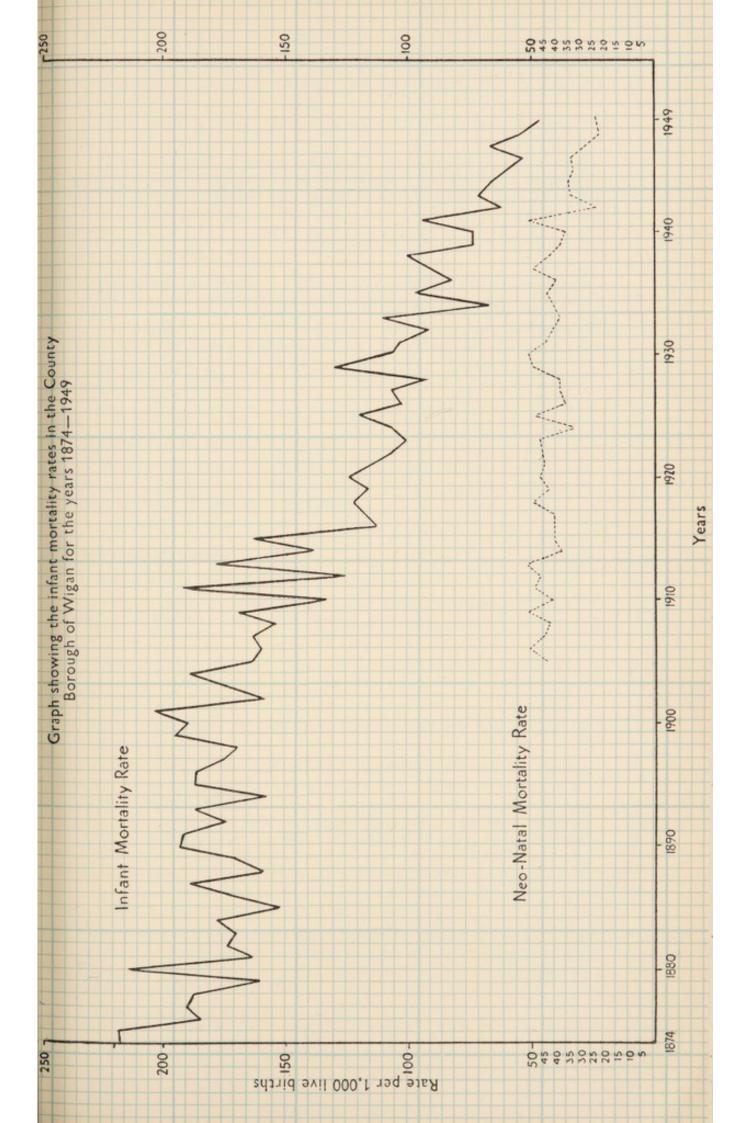
The Service consists of a Non-Medical Supervisor and 15 Midwives.

The number of cases attended by the Municipal Midwives during the year 1949, was 948.

The work of the Domiciliary Midwife has been adversely affected by the National Health Service Act, 1946, for many more patients now engage a doctor for the confinement. The result is that the midwife is acting as a maternity nurse more frequently than before.









The continued shortage of houses necessitates many mothers being confined in hospital and the pressure on the beds there frequently results in patients being discharged only five days after delivery. The domiciliary midwife takes over the home nursing of these cases.

# GAS AND AIR ANALGESIA.

A Gas and Air Analgesia Service is provided by the Department and all the municipal midwives are qualified to administer analgesia.

Five outfits are available and when required they are transported to and from the homes of the patients by the Ambulance Service.

During the year, Gas and Air Analgesia was administered in 160 cases.

The popularity of this service is increasing.

#### MATERNITY AND NURSING HOMES.

There were three Maternity and Nursing Homes within the Borough. The number of beds available was 13, and the number of births at these Homes in 1949 was 88.

One of the Homes closed down in the month of August.

#### OPHTHALMIA NEONATORUM.

No case was notified during the year.

Year.	No. Notifie	ed. A		ated : Hospi	Visio unimpa	Vision impair	Total Blindness.
1949	 			 	 -	 	 
1948	 4		2	 2	 4	 	 
1947	 2		I	 I	 2	 -	 
1946	 2		2	 	 2	 _	 
1045	Т			 I	 I	 	 

As a precaution the following instructions are carried out by Midwives :---

(1) As soon as the head is born, thoroughly cleanse the eyelids and eyelashes with clean swabs, and warm boracic lotion, using separate swabs for each eye.

(2) When the baby is born, put one drop of a 10 per cent. solution of Argyrol in the hollow between the nose and the eye, open the lids, and tilt the head and see that the fluid runs on to the surface of the eyeball. Repeat the same process with the other eye.

(3) Allow a few minutes to elapse and then swab with warm boracic lotion, using separate swabs as before.

Every case of Opthalmia Neonatorum is visited at once by the Supervisor of Midwives and a smear is taken of any discharge. This is examined for gonococci or other organisms and a report is made to the Medical Officer of Health.

Cases are visited until cured.

#### HEALTH VISITING.

#### SUMMARY OF VISITS DURING THE YEAR 1949.

N

primary	visits to	births						
visits to								7087
,,								4308
,,								3492
,,								2107
,,	infants of	over for	ur and	under	five	years		1797
,,	and the second							221
,,								8
,,								305
			ne year	r				57
								61
other visi	its							821
	visits to ,, ,, ,, ,, re	visits to infants u ,, infants o ,, infants o ,, infants o ,, infants o ,, expectan ,, cases of ,, re deaths u ,, Still Bir	visits to infants under o ,, infants over one ,, infants over two ,, infants over the ,, infants over the ,, infants over for ,, expectant moth ,, cases of abortio ,, re deaths under or ,, Still Births	visits to infants under one year ,, infants over one year a ,, infants over two and y infants over three and ,, infants over four and ,, expectant mothers ,, cases of abortion ,, re deaths under one year ,, Still Births	visits to infants under one year ,, infants over one year and under ,, infants over two and under t ,, infants over three and under ,, infants over four and under ,, expectant mothers ,, cases of abortion ,, cases of infectious disease ,, re deaths under one year ,, Still Births	visits to infants under one year ,, infants over one year and under tw infants over two and under three ,, infants over three and under four ,, infants over four and under five ,, expectant mothers ,, cases of abortion ,, cases of infectious disease ,, re deaths under one year ,, Still Births	visits to infants under one year ,, infants over one year and under two years infants over two and under three years ,, infants over three and under four years ,, infants over four and under five years ,, expectant mothers ,, cases of abortion ,, re deaths under one year ,, Still Births	visits to infants under one year ,, infants over one year and under two years ,, infants over two and under three years ,, infants over three and under four years ,, infants over four and under five years ,, expectant mothers ,, cases of abortion ,, re deaths under one year ,, Still Births

The number of Health Visitors was maintained at six during the year, advertisements for additional trained staff being unsuccessful.

One trained nurse and one assistant nurse continue to give parttime help at the Infants Clinics, the object being to release the Health Visitors so that as far as possible the number of regular home visits may be maintained.

Since July a Health Visitor has attended the Out-patient Paediatric Clinic held each week at the Royal Albert Edward Infirmary. By this means the Health Visitors are able to advise the specialist on the social and environmental aspects of cases and to help the mothers to carry out the recommended treatment, especially where matters of diet are involved.

During the year six student Health Visitors from the Bolton Training School received part of their practical training in the Department.

### CARE OF PREMATURE INFANTS.

With regard to premature infants, the Health Visitors, upon receiving notification of the births, visit each one daily if necessary showing the mother how to handle and tend the baby, and noting and reporting progress or otherwise. A special draught-proof cot complete with bedding has been provided for use in the homes where existing provision is inadequate. The experienced advice which the Health Visitor is able to give, and also the interest and care which she shows in the children's progress is much appreciated by the mothers.

# THE UNMARRIED MOTHER.

Special attention is given to the unmarried mother and her child and where the mother has to go out to work the Health Visitor ensures that suitable provision is made for the infant. When required she also advises the mother on how to obtain an affiliation order.

The Council continues to make a yearly grant to St. Margaret's Home, Wigan, where there are 17 adult beds and 10 cots.

# THE CHILDREN ACT, 1948.

The closest liaison is maintained with the Children's Department and co-operation on the lines of the Home Office Circular 193/49 is well established.

The Medical Officer of Health has been appointed medical adviser to the Children's Committee and is responsible for certain aspects of the medical care of children who are the responsibility of the Committee. This includes medical advice on administrative matters and in the planning and management of the nurseries, etc. Medical examination of children who are to be boarded out is undertaken by the Department and periodic visits are paid by an assistant medical officer of health to the nursery at the Social Welfare Home, where a number of children are at present housed whilst awaiting completion of their new residential nursery at The Elms.

Health Visitors are available to visit the homes of foster mothers, adoptions and where it is intended to place boarded out children. Reports of the conditions found are furnished to the Children's Officer.

# HOME NURSING.

Home Nursing is carried out by the Wigan Branch of the Queen's Institute of District Nursing under the general control of the Local Authority.

The nursing staff is comprised of a non-medical Superintendent (who is employed directly by the Corporation) and 10 district nurses (Queen's Nurses), including 1 male nurse.

The following figures are given for the year 1949 :---

No. of cases on the books on	Ist	January,	1949			136
No. of New cases during 1949						1,025
No. of visits paid by the nurses						34,391
No. of cases ceased to be visited	:					
Now convalescent					327	
Removed to hospital					102	
Deaths					141	
Other reasons					434	
						1,004
No. of cases remaining on the bo	oks	on the 31s	t Dece	mber,	1949	157

The work of the home nurses is increasing. The number of visits paid by the nurses during the year is something like three times the number paid during a similar period prior to July 1948.

# VACCINATION.

The Vaccination Acts 1867-1907, which made vaccination against smallpox compulsory, were rescinded when the National Health Service Act 1946 came into operation on the 5th July, 1948. The following vaccinations were carried out by medical practitioners during 1949 :---

			4 yrs. Iusive			Total	
Primary Re-vaccination	 	····	48				
Т	otals		 48	 8	 45	 101	

45 children under the age of one year were vaccinated during the year. Comparing this figure with the number of births during the same period, it will be seen that only 3.1 per cent of the children were vaccinated.

#### DIPHTHERIA IMMUNISATION.

Free preventive inoculation has been offered since December, 1936, for children of pre-school and school age.

Health Visitors bring to the notice of mothers the importance of immunisation on every possible occasion and especially at the infant welfare clinics and when visiting in the homes. If a child has uot previously been protected a birthday greeting card is sent on its first birthday advising immunisation. These cases are assiduously followed up.

At school medical inspection and also when school nurses are visiting in the homes, efforts are made to obtain the consent of parents to have their children immunised if this has not already been done, and advice is given regarding re-inforcing doses of the prophylactic.

Inoculations carried out during 1949 :---

	У		. School		
Primary					
Re-inoculation	1	0	903	32	941
Totals	:	835	1,649	195	2,670
					Total 0 - 14 yrs. nclusive.
Estimated present child pop tion immunised		49%	7	2%	63%

The total figure represents an increase on that for the previous twelve months which was 59%.

Table showing the number of primary inoculations carried out each year at various ages :---

-															
at of lation	1936	1937	1938	1939	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949	Totals
+	-	-	-	-	-	-	-		_	3	7	164	310	420	Total
+	_	31	16	5	12	87	176	471	448	437	582	616	551	365	aged under 5 on
+	-	39	22	10	16	118	197	301	134	113	213	107	117	95	31-12-49
+	1	31	22	10	7	91	138	320	73	55	114	65	61	49	
+	4	41	17	25	12	125	151	260	78	44	90	62	39	47	3,494
+	24	89	32	60	2	309	131	436	72	65	44	74	36	112	Total
+	28	137	16	97	2	336	117	332	43	44	29	56	16	95	aged 5–15 years on
+	14	122	18	101	1	272	73	277	13	33	20	42	22	101	31-12-49
+	6	131	6	76	-	236	89	241	25	42	12	35	14	105	
+	1	109	7	76	-	282	69	254	14	29	14	38	12	120	
+	-	100	3	70	-	248	88	245	7	24	10	35	14	91	
+	-	78	3	82	-	224	56	220	8	22	8	19	5	46	
+	-	37	4	89	-	238	40	175	6	35	3	24	9	20	
+	-	30	2	91	-	210	47	161	6	20	2	23	5	37	
t	-	10	5	31	-	76	9	31	-	1	-	3	3	23	8,628
÷	-	1	1	2	-	56	24	8	-	-	-	2	13	12	5,410
l ear	78	986	174	825	52	2908	1405	3732	927	967	1148	1365	1227	1738	17,532



# AMBULANCE SERVICE.

All the ambulance services of the County Borough were coordinated and placed under the control of the Health Committee on the 5th July, 1948.

The Health Department is directly responsible for the removal of cases of infectious disease.

The day-to-day management of the ambulance service for noninfectious cases is under the control of the Chief Fire Officer.

The ambulance service deals with all calls arising within the area of the County Borough and, by arrangement with the Lancashire County Council, serves also the following areas of the administrative County—Orrell, Aspull, Standish-with-Langtree, Upholland, Billinge and Wigan Rural District.

Two ambulances are used for the removal of infectious cases. One sitting-case car and 6 ambulances are used for the removal of non-infectious cases.

#### Statistical Report.

The Ambulance Service attended 11,541 calls during 1949:-

Contract Contractor Line	Infectiou Disease s	Accidents	Removals		Midwifery Apparatus	TOTAL
Wigan County Borough Lancashire County Council	$\begin{array}{c} 513\\137\end{array}$	$\begin{array}{c} 433\\144\end{array}$	8018 1889	83 59	265	$\begin{array}{c} 9312 \\ 2229 \end{array}$
	650	577	9907	142	265	11541

The mileage covered during the period was :---

		82,278
Wigan County Borough Lancashire County Council	 	 Miles. 51,098 31,180

The work of the non-infectious service is still increasing and this has accentuated the problem of maintaining the aged vehicles in running order. Two new Bedford ambulances with Lomas bodies have been ordered and one was delivered and put into service during the financial year 1949/50. By the acquisition of one new vehicle each year it should be possible to maintain a reliable fleet.

Consideration must be given to the purchase of an additional sitting-case car. The increasing use of this type of vehicle helps to relieve the ambulances for stretcher cases and is invaluable for outpatient work, especially at periods of peak load. From a functional point of view the present organisation of the service is satisfactory and during the period under review all calls have been met.

The provision of an ambulance depot would effect economies in man power and lead to greater efficiency of the service. At present the vehicles are housed in no less than four different garages, a factor which renders almost impossible the close supervision of vehicles and personnel which is necessary in this type of service.

# PREVENTION OF ILLNESS, CARE AND AFTER-CARE.

# HEALTH EDUCATION.

Each month 2,000 copies of the journal "Better Health" are distributed in the district.

Classes for mothers are held each week at the various Maternity and Child Welfare Centres.

Propaganda regarding Diphtheria immunisation has been carried out in conjunction with the National Campaign.

Efforts are being renewed to bring to the notice of the public, and especially to food handlers, the need for cleanliness and care in the preparation of food.

Measures for the dissemination of information to the public are being developed. They include publication of literature, display of posters, etc., and opportunities are taken to give lectures on various health subjects from time to time.

A subscription is paid each year by the Borough Council to the Central Council for Health Education. This enables us to receive from the Central Council much valuable help and information as to the best methods of approaching the public.

#### HEALTH PROPAGANDA CAMPAIGN

A new service, provided by The Central Council for Health Education, was introduced on the 1st May, 1949. This service is in the form of an educational exhibition stand and a succession of interchangeable topic material.

Each of the following topics were on show for a period of six weeks:--

 "Local Health Authority Services under Part III, National Health Service Act, 1946."

- 2. " The Food and Drink Infections."
- 3. " Sleep."
- 4. "Diphtheria Immunisation."

The exhibition stand has been on view periodically at the Central Clinic, Millgate, the North-Western Electricity Board's Showroom, Standishgate and the Ritz Cinema,, Station Road, Wigan. In he case of the last three topics on view, leaflets were placed in compartments on the stand and were available to the public for their further information.

In connection with the topic "Diphtheria Immunisation" sets of posters were displayed on hoardings in the town.

During the exhibition of the "Food and Drink Infections" topic posters, drawing attention to the need for cleanliness in the handling of food, were displayed on the Cleansing Department's vehicles and also posted up in the public market.

#### CONVALESCENCE.

Although the Health Authority have made no comprehensive scheme for the provision of convalescence under this section of the Act, individual cases, where it is considered that there is exceptional need or hardship, are brought to the notice of the Health Committee.

During the year one mother and her three children were sent to a convalescent home for a period of two weeks. This achieved two objects, the mother benefited by being relieved of household and family duties and the children thrived in the healthy environment which surrounded them.

#### VENEREAL DISEASE.

On the expiration of Defence Regulation 33B in December, 1947 the Health Committee continued their arrangements whereby the V.D. Orderly of the Royal Albert Edward Infirmary undertakes the duties of Almoner. Agreement has been reached with the Wigan and Leigh Hospital Management Committee for this service to continue.

Efforts are made to persuade persons who are a source of infection to attend for treatment at the centre. Contact is made with patients who fail to attend for treatment with a view to stressing the importance of continued attendance at the clinic. The work done by the Almoner has been found to produce satisfactory results.

The following is an extract from the Almoner's report for the year 1949 :---

Total number of contacts persuaded to attend were:-

Males 18. Females 25.

Patients failing to attend for treatment, etc., are the biggest problem and the following action has been taken to try and persuade them to attend.

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320 letters were sent to patients failing to attend.

163 reported for treatment, etc.

14 letters returned, address unknown.

5 left district, present address unknown.

1 transferred to H.M. Forces.

18 transferred to clinics near their present address.

21 letters received, patients too ill to attend.

2 patients died, information received from relatives.

Personal visits were made to the home addresses of 13 patients who failed to attend after several letters had been sent.

#### TUBERCULOSIS.

The transfer of responsibility for the diagnosis and treatment of Tuberculosis from the Local Authority to the Regional Hospital Board has left with the Health Authority the duty of providing the means of prevention and the "care and after care" of persons suffering from the disease. This divided responsibility may lead to neglect of the preventive aspect of Tuberculosis unless definite steps are taken to bridge the gap between the preventive and curative services.

Arrangements have been made in Wigan whereby the post of Chest Physician is a joint appointment with the Regional Hospital Board, and as the present holder of the post was previously the Deputy Medical Officer of Health, satisfactory liaison is established.

The Tuberculosis Visitor is a full-time member of the Local Authority Health Visiting Staff, the work of this health visitor being divided between attendance with the Chest Physician at the Dispensary and visiting patients in their homes.

During the year 1,163 home visits were paid by the tuberculosis health visitor.

The National Insurance Act of 1946 has necessitated the transfer of work in connection with assessment and allocation of allowances under Memorandum 266T from this Department to the National Assistance Board. Close liaison has been established and extra help is forthcoming where required through the good offices of the After-Care Committee.

- To provide extra nourishments, nursing utensils, wheel chairs, etc.
- To help in providing extra clothing needed by the patients, especially when they go into sanatorium and on their return home.
- 3. To visit and give friendly advice.
- To assist in educating public opinion in matters of health in regard to Tuberculosis.

The Chest Physician acts as an honorary Medical Officer to this Committee, which provides extra nourishment, etc., on his recommendation. During the year 19 cases of infectious tuberculosis were re-housed in accommodation which ensured adequate isolation.

#### MENTAL ILLNESS AND DEFECTIVENESS.

Details of work under this section are given under Mental Health Service, page 47.

#### OTHER ILLNESSES.

General practitioners are slow in taking advantage of the services available and few requests for after care have been made during the year.

# DOMESTIC HELP SERVICE.

Domestic help is provided where required for confinements and in any home where because of illness or incapacity help is needed.

Four helps are employed full-time and at the end of the year seven part-time helps were on the register.

During 1949, Domestic Help was provided in 179 cases—120 confinements, 59 domestic—compared with a total of 157 in 1948.

The Service is operating satisfactorily and along with the Home Nursing Service can play an important part in relieving the overstrained hospital services.

# MENTAL HEALTH.

Under the National Health Service Act, 1946, the Local Health Authority is responsible for the domiciliary Mental Health services.

The service includes :---

- The ascertainment of cases of mental ill-health and mental deficiency in the community.
- (ii) The initial proceedings for obtaining detention and reception orders and transferring persons of unsound mind to establishments administered by the Regional Hospital Board.
- (iii) The statutory supervision, guardianship, provision of after-care, etc., of mental defectives living in the community.
- (iv) The provision of occupational treatment for mental illness.
- (v) Preventive measures in connection with Mental Health.

# ADMINISTRATION.

- (a) The Health Committee is responsible for the control of this service and deals with all matters appertaining thereto. A special subcommittee has not been established.
- (b) The Medical Officer of Health is the Executive Officer.

The Medical Officer of Health, together with Dr. E. R. M. Wilson, Assistant Medical Officer, and Dr. D. Mather, are appointed as approved medical practitioners for the purpose of giving certificates of mental defect under Sections 3 and 5 of the Mental Deficiency Act, 1913.

The Medical Officer of Health is also approved for the purpose of making recommendations under Sections 1 (3) and 5 (3) of the Mental Treatment Act, 1930.

Two full-time authorised officers and mental health visitors (one male and one female) and also one full-time male authorised officer and clerk are employed.

The staff of the Occupation Centre consists of one supervisor (who holds a certificate of recognition as an experienced worker), an assistant, and one guide-help.

- (c) Co-ordination is maintained with Regional Hospital Boards and Hospital Management Committees, the local authority providing all appropriate reports.
- (d) The Local Health Authority undertake all duties, none being delegated to Voluntary Organisations.

(e) All Duly Authorised Officers have had courses on the management, etc., of mental deficiency. These courses were arranged at Calderstones Hospital.

# ACCOUNT OF WORK UNDERTAKEN IN THE COMMUNITY.

#### I. Under the Lunacy and Mental Treatment Acts.

Persons removed to Hospital under :--

Section 20 Lunacy Act, 1890	38
Section 21 Lunacy Act, 1890	52
Section 16 Lunacy Act, 1890 Wigan D.A.O. 7 County D.A.O. 30	37
Section 24 Criminal Justices Act, 1948	I
Section 1 Mental Treatment Act, 1930 (Volun- tary patients)	25
1946	45
In Mental Hospitals on 31st December, 1949	268
Discharged from Hospitals	77
Deaths	43

During the year, 94 visits were made under Section 28 of the National Health Service Act, 1946, and 18 special reports were made on behalf of Mental Hospitals.

# 2. Under the Mental Deficiency Acts, 1913-1938.

Notified under Sec. 57(3), Education Act	. 7
Placed under Statutory Supervision, Section 30	,
M.D. Act, 1913	. 7
Petitions presented, Sec. 5, M.D. Act, 1913	. 5
Admitted to M.D. Institutions, Sec. 6	. 5
Cases under training (Occupation Centre), Section	1
30, M.D. Act, 1913	. 15
Cases in Hospitals at 21st December 1040	50

Cases in Hospitals at 31st December, 1949	14
Cases under Guardianship, Sec. 6, M.D. Act, 1913	I
Cases under Statutory Supervision, Sec. 30	43
Cases under Voluntary Supervision	IO
Cases awaiting vacancies on 31st December, 1949	6

During the year 292 visits were made to homes and 46 visits were made to the Occupation Centre. 60 special reports were made on behalf of Hospitals.

# 3. Prevention, Care and After-Care.

The Duly Authorised Officers also act as case workers, concerning themselves with the after-care of patients discharged from psychiatric clinics and mental hospitals. Attempts are made to tackle the tremendous problem of the prevention of mental illness. At present, shortage of staff confines us to domiciliary visiting in a friendly capacity and arranging social contacts for unstable patients.

The case workers also liaise with the psychiatric out-patient clinics in the area and usually accompany patients to these clinics. Thus they are able to help the psychiatrist in the matter of the patient's social background and environment.

There is a vacancy on the establishment of the Department for a psychiatric social worker but so far our efforts to fill this appointment have been unrewarded.

#### OCCUPATION CENTRE.

On the 5th July, 1948, the Health Committee took over the administration of the Occupation Centre, which is housed in Hope Street school.

The Centre is open Monday to Friday each week, except during normal school holidays.

The children have been supplied with hot mid-day meals by arrangement with the school meals service. An Industrial class for older boys and girls is required but the present accommodation precludes this as a certain amount of fixed apparatus would be required, and the rooms at present in use in the Sunday School are used in the evenings and at week--ends for their original purpose.

The children in the two classes are graded according to physical characteristics, mental age and ability. Handwork, simple sewing, leathercraft, dancing, speech training, singing and percussion band are amongst the varied subjects attempted.

Free activity is very limited due to the complete lack of outdoor playground.

As in most buildings of this type, the toilet facilities, although perhaps adequate for occasional use, are unsatisfactory for our purposes. The Health Committee during the year have considered various sites and approved a provisional plan for a new Occupation Centre. It is hoped that permission to commence building the Centre will be obtained in the near future.

The following is an extract from the attendance register :---

Borough County Total

No. of children on the register at 1st Janua	ıry,			
No. of admissions during the year		2	 4	 6
No. of children who ceased to attend		13	 I	 14
No. of children remaining on the register	at			
31st December, 1949		15	 12	 27
Average daily attendance during the year		13	 9	 22

# Section IV

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# Welfare Services

#### ADMINISTRATION.

The Wigan County Borough Council administer their functions under the National Assistance Act, 1948, through the Welfare Services Committee, and the Medical Officer of Health is the Executive Officer for Welfare Services.

The services provided by the Council are as follows:-

1. The provision of :--

.

- (a) Residential accommodation for persons who by reason of age, infirmity or any other circumstances are in need of care and attention which is not otherwise available to them.
- (b) Temporary accommodation for persons who are in urgent need thereof owing to circumstances which could not reasonably have been foreseen.
- The organisation of welfare arrangements for the Blind, Deaf, Dumb and other handicapped persons, either directly or by giving assistance to voluntary organisations who provide such facilities.
- 3. The registration of charities for disabled persons.
- The registration and inspection of Homes for aged and disabled persons.
- The provision either directly or through voluntary organisations of recreation and meals for old people.
- The removal to suitable premises of persons in need of care and attention.
- The burial or cremation of the dead where no other suitable arrangements have been made.
- Protection of moveable property of persons admitted to hospital or to accommodation provided specifically under the Act.

In accordance with the instructions of the Minister, contained in the Ministry of Health Circular 87/48, the Council made proposals for the administration of their duties and powers under Sections 21 and 29 of the National Assistance Act, 1948, which were approved by the Minister of Health during the year under review. The proposals are reprinted in the appendix to this report.

#### **RESIDENTIAL ACCOMMODATION (Section 21).**

Residential accommodation for persons in need of care and attention is available at the Welfare Home, Frog Lane, Wigan, and in certain other local authorities' and voluntary bodies' establishments provided for this purpose. The following table shows the numbers and classes of persons provided with residential accommodation under Part III of the Act.

Provided with accom- modation under Part III of the Act :	Aged	Physic- ally or mentally infirm	Blind or Par- tially sighted	Deaf or Dumb	Epilep- tics	Crippled	Others	Total
On 31/12/1948	41	22	4	_	5	1	-	73
Admitted during period 31/12/48 to 31/12/49		22	5	_	2	9	2	112
Discharged during per- iod 31/12/48 to 31/12/49	60	35	3	_	2	1	_	101
In on 31/12/49	53	9	6	-	5	9	2	84

#### WELFARE ARRANGEMENTS (Section 29).

#### BLIND.

The Blind Persons Acts having previously placed a duty on Local Authorities to make arrangements for promoting the welfare of the Blind, little alteration was needed to bring the arrangements in existence on the appointed day into line with the new legislation.

During the year 1949, 20 persons were examined by an Ophthalmic Surgeon, 11 of these were certified as blind, 8 were placed on the observation register, and one certified not blind. 7 cases were transferred out of the area, and 5 cases transferred into the area. There were 14 deaths.

On the 31st December, 1949, there were 183 registered blind persons in the Borough, and 7 cases on the Observation Register.

Facilities for the employment of blind persons are provided at the Workshops for the Blind, Darlington Street East, Wigan.

These Workshops are maintained by the County Borough Council and the Lancashire County Council on a joint user basis, and are managed by a voluntary committee, which has adequate representation of members of the two authorities.

The types of employment and extent of provision available for Borough cases are as follows :---

Brush Making				Males	4	
Basket Making				Males	4	
Mat Making				Males	2	
Machine Knitting	and Ch	air Sea	ating	Females	4	
Piano Tuning				Males	I	

On the 31st December, 1949, there were 11 blind persons from the County Borough employed in the Workshops.

#### WELFARE OF THE DEAF AND DUMB.

Prior to the 5th July, 1948, the Local Authority was not empowered to provide for the welfare of the Deaf and Dumb, and for many years this work was in the hands of a local voluntary committee.

Steps were taken to liaise with the voluntary agency, and in view of the fact that the Chairman of the Welfare Services Committee (Alderman F. W. Roberts, J.P.) and the Vice-Chairman (Councillor J. T. Lynch) have been actively concerned with the work of the voluntary committee for the Deaf and Dumb, first hand information was available to assist in providing the Local Authority with a true perspective of the needs of this class of handicapped persons, and although no practical achievements can be recorded in the period under review, much valuable groundwork has been covered in the forming of an efficient scheme to provide for their welfare.

#### WELFARE OF HANDICAPPED PERSONS.

Towards the end of 1949, a social and handicrafts centre for the blind, deaf, dumb and other handicapped persons was opened. The main object of this venture is to give instruction in pastime occupations and recreational facilities to all persons to whom Section 29 of the National Assistance Act applies. The Centre shows every promise of becoming very popular and attendances have increased daily.

# CO-OPERATION WITH VOLUNTARY BODIES.

Co-operation is established with the Wigan, Leigh and District Society for the Blind and progress was made during the year towards complete co-ordination with the voluntary society dealing with the deaf and dumb. The local authority gives financial aid to both these societies to assist in the maintenance of their work.

#### REMOVAL OF PERSONS NEEDING CARE AND ATTENTION (Section 47).

It was not found necessary to take action under this section during 1949.

#### PROTECTION OF MOVEABLE PROPERTY (Section 48).

3 applications were received during the year requesting the authority to provide protection of the moveable property of persons removed to hospital or Part III accommodation. In 2 cases the property was stored in the Council's premises, and in one case the property remained in the applicant's house.

#### BURIAL OF THE DEAD (Section 50).

During the year there were 19 applications to the authority for action to be taken under Section 50 regarding persons dying in the Borough. The service was provided in 7 cases.

# Section V

# Sanitary Circumstances of the Area

# WATER SUPPLY.

The Borough is supplied with water for domestic and trade purposes from the Arley, Worthington and Pemberton Reservoirs, which have a total capacity of 278,000,000 gallons. Approximately 178,000,000 gallons of water was pumped during the year from Nicholson's Pit, Winstanley, and a further supply obtained from the Bispham Shaft, Billinge. The Corporation also own reservoirs at Adlington, Pemberton and Whitley, which are used only for compensation and trade purposes. A further source of compensation water is being developed at Newfoundland Shaft, Adlington.

The Catchment Area, from which the greater part of the water is obtained, is agricultural land. Constant supervision is therefore undertaken to ensure the prevention of pollution and energetic steps are taken when any danger of pollution arises. Local improvements are made from time to time at points of suspected pollution.

Chlorination plants are installed at Boars Head Pumping Station, Boars Head Water Tower (to deal with Thirlmere water), Edgewood (to deal with Pemberton Reservoirs) and at Bispham. This ensures that all water supplied to consumers, with the exception of unfiltered water for trade purposes, is chlorinated.

Enough chlorine is added to give a residual of 0.15 to 0.4 parts per 1,000,000 and constant tests are made to ensure this.

Tap samples are taken every month from four dwellings selected at random in the Borough, and are dispatched for chemical and bacteriological examination. Samples of raw and filtered waters are also obtained and tested.

Typical analyses of the Worthington and Thirlmere, and Pemberton and Nicholson's Pit mixed supplies are given on page 56.

A few adverse tap samples were reported during the year, but immediate local mains flushing and chlorination resulted in satisfactory analyses in later samples.

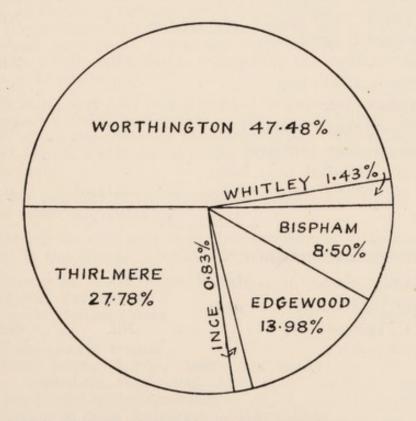
Apart from the local water supplies outlined above the Corporation obtain daily a further supply of 500,000 gallons per day from the Thirlmere Aqueduct of the Manchester Corporation, which quantity can be increased under agreement with the Manchester Corporation by a temporary supply of 400,000 gallons per day, if required.

Advantage had to be taken of the temporary additional supply from Manchester when the yield of the Corporation's own resources was severely diminished in the extraordinary drought of last year. In spite of this, it was found necessary to impose restrictions on the consumption of water in the Borough for 44 days. Serious consideration has been given to the acquisition of additional water resources to meet the growing consumption.

The approximate average daily consumption for domestic purposes is 1,878,000 gallons, representing approximately 22.0 gallons per head per day for a population of approximately 84,200.

Bulk supplies of water are made to the Orrell U.D.C., and the Billinge and Winstanley U.D.C., under agreements between the Corporation and the respective Councils. Several dwellings situated on the Borough boundaries are supplied with water by the Orrell U.D.C., and the Billinge and Winstanley U.D.C.

The following diagram showing the water supplied from various sources, is extracted from the report on Waterworks by Mr. D. M. McKellen, Borough and Water Engineer :



# WATER SUPPLIED FROM VARIOUS SOURCES, 1949-1950.

(Edgewood and Bispham quantities include water pumped from Nicholsons Pit)

# TYPICAL ANALYST'S REPORT OF WATER SAMPLES TAKEN IN 1949.

# PHYSICAL CHARACTERS

# WORTHINGTON- EDGEWOOD-THIRLMERE

NICHOLSON

Results expressed in parts per 100,000.)

p.H. 7.3

A clear and Colour- A clear and colourless water free from less water free from odour and deposit. odour and containing a mere trace of white deposit. p.H. 7.4

# ANALYTICAL REPORTS.

Total saline matter in solu	ition	 29.2	 44.8
Non volatile (mineral) so	olids.		
Loss on ignition (organic	and		
volatile matter)			
Matters in suspension		 Nil.	 Mere trace.
Nature of ditto.			
Total hardness		 16.0	 17.0
Temporary hardness		 6.0	 17.0
Permanent hardness		 10.0	 Nil.
Combined chlorine		 2.I	 2.9
Toxic metals		 Nil.	 Nil.
Ammoniacal nitrogen		 Nil.	 0.002
Alluminoid nitrogen		 0.008	 0.006
Nitrous nitrogen (nitrites)	)	 Nil.	 Nil.
Nitric nitrogen (nitrates)		 0.14	 0.10
Oxygen absorbed in 3 1	iours		
at 26.7° c		 0.113	 0.024

# BACTERIOLOGICAL REPORT.

Probable number of	col	iform		
bacilli MacConkey	2	days		
37° C. (per 100 Ml)			 Nil.	 Nil.

### RIVERS AND STREAMS.

The River Douglas and the streams running into it are the natural means of draining the Borough.

The River is badly polluted before entering the Borough and a certain amount of pollution occurs within.

The River Douglas is under the control of the River Douglas Catchment Board who are constantly engaged in work of dredging and straightening of the River. Considerable improvements in the course of the River have recently been made, particularly in the region between Adam Bridge and Martland Mill Bridge, which will reduce the risk of flooding in the lower lying parts of the Town.

The Catchment Board also clean the river, remove sludge, etc. from the bed, as required.

# DRAINAGE, SEWERAGE, SCAVENGING AND REFUSE DISPOSAL.

Practically the whole of the Borough is sewered and drained.

The sewage is conducted from the town by two main outfall sewers, 27 inches and 36 inches diameter, to the Sewage Disposal Works at Hoscar, which are seven miles distant. Before leaving the town the sewage passes through two detritus tanks and also through coarse and fine screens, and at this point the storm water is diverted from the outfall sewers and is conveyed to the storm water treatment works at Pemberton.

Alumino ferric and lime are added to the sewage at Hoscar which then passes through Preliminary and Secondary Settling Tanks and a battery of circular revolving percolating filters. The effluent from the filters before it is discharged to the River Douglas is passed through humus tanks.

I am indebted to the Borough Engineer, Mr. D. M. McKellen, for the following figures :--

During the year 1949, the following amounts of sewage have been treated at the Hoscar Moss and Pemberton Sewage Works :---

	299,979,000 1,108,132,273 358,657,493	,,
Total sewage treated Total solids, detritus tanks and screen	1,766,768,766	,,
chambers, Pemberton Total dried sludge recovered	2,909 2,508	
Weight of dried sludge per million gallons of sewage	1.43	,,
Rainfall for year	27.09	inches

# PUBLIC CLEANSING.

Mr. W. Smith, the Director of Public Cleansing, has supplied the following particulars :---

**Refuse Collection and Disposal.**—The collection of dry house refuse and trade refuse is carried out by both horse and mechanical transport, working as separate units, and by the Pagefield container system, and the percentage of refuse collected by each system is as follows :---

Horse	 	 20	per cent.
Pagefield container	 	 49	,,
Mechanical vehicles	 	 31	,,

78 per cent. of the refuse collected is disposed of by tipping.

Nightsoil and Pail Refuse.—The refuse (510 tons) is disposed of direct to farmers as manure. All pails are washed and disinfected after each collection.

**Trade Refuse.**—No fixed charges are made for the removal of this refuse, the shops and business premises in the town have a collection every day.

Gully Cleansing.—During the year 21,349 gullies were emptied.

**Public Conveniences.**—The following conveniences and urinals are maintained and cleansed by the department :—

2 public conveniences for ladies and gents, with attendants.

4 ,, ,, ,, without ,, 26 public urinals.

All urinals are cleansed and inspected twice per day, including Sundays.

**General.**—The quantity of refuse dealt with by destructors during the year 1949 was 5,555 tons, and the quantity tipped was 20,089 tons. The Corporation have certain powers which require the owners or occupiers of property to provide, under certain conditions, receptacles of an approved pattern for refuse, and up to the present, 24,156 ash bins have been provided.

123,835,000 square yards of street have been swept during the year.

# CLOSET ACCOMMODATION.

On March 31st, 1950, the estimated number of water closets in the Borough was 27,880, waste water closets 92, pail closets 51, and privy middens 39.

The majority of pail closets and privy middens are attached to

houses unfit for human habitation or premises where the drainage cannot be connected to the sewer.

On April 1st, 1926 the Local Authority inaugurated a scheme for the conversion of waste water closets to closets on the water carriage system with proper flushing apparatus and if this work was carried out to the satisfaction of the Local Authority a grant of  $\pounds 5$  was made towards the cost of each conversion. Since that date, 929 closets have been converted.

This scheme is still in operation and in all cases where notices have been served for foul or defective waste water closets the owner or agent has been advised to convert them to closets on the water carriage system. Advantage has not been taken of this scheme for some considerable time due no doubt to the rising cost of converting these closets and the fact that the grant of  $\pounds_5$  is now inadequate.

# SANITARY INSPECTION.

Mr. John Ashton, Chief Sanitary Inspector, submits the following remarks with a summary of work done by the Sanitary Inspectors :---

During the year under review the work of the sanitary section of the Department was carried on until the end of June with a full establishment of inspectors. On June 30th, Inspector Ormerod resigned his position to take up similar duties at Cambridge. He held the Smoke Inspector's Certificate and devoted a portion of his time to visiting and advising the owners of industrial premises on smoke abatement in addition to his duties as a district sanitary inspector. On November 1st, Inspector C. Jackson commenced duties in the Department and the full establishment of inspectors was restored.

The inspectorial staff consists of the Chief Sanitary Inspector, the Deputy Chief Sanitary Inspector, who is also in charge of a district, and seven other district inspectors.

On October 1st, 1949, the Milk and Dairies Regulations, 1949, the Milk (Special Designation) (Raw Milk) Regulations, 1949, and the Milk (Special Designation) (Pasteurised and Sterilised Milk) Regulations, 1949, came into force. These extended the licensing for the sale of designated milk to include Sterilised milk in addition to the transfer of the control of farms from the local authority to the Ministry of Agriculture and Fisheries. The local authorities still retain the right to take samples of milk on these farms.

In November, 1948, the Ministry of Food issued a circular to local authorities informing them of the presence of cysticercus bovis in home killed cattle and recommending methods of inspection to detect it. In the body of the report details are given of the number of cases discovered and the action taken during the present year.

It is gratifying to note that during the year a very satisfactory standard was maintained with regard to the samples of milk and other foods taken in the borough and submitted for analysis to the Public Analyst. Complaints of defects in houses, both statutory nuisances under the Public Health Act and others which do not come within this category, have continued to receive the attention of the inspectors. Although a large portion of these nuisances were abated after the service of statutory notices it was found necessary to take legal proceedings in several cases.

Many complaints have been received concerning the tipping of refuse on vacant land in the borough. This type of complaint is very difficult to deal with as in the majority of cases the material deposited on the land is such as not to constitute a statutory nuisance under the Public Health Act. The refuse usually consists of bricks, tins, etc., but if anything of a noxious or offensive character is deposited it is well nigh impossible to ascertain the name and address of person by whose act the nuisance arises, unless he or she has been observed by some person who can give the required information.

There is still much overcrowding in the borough and applicants for the tenancy of council houses, both on overcrowding and medical grounds, still attend at the Department to interview the Chief Sanitary Inspector.

The many other duties carried out by the inspectors are set out in the body of the report.

#### SUMMARY OF WORK UNDERTAKEN DURING THE YEAR

and complaints .... .... 2708 .... Re-visits to nuisances 9717 .... .... .... Other visits made .... 948 .... .... .... .... .... Visits to premises (testing of drainage) 120 .... .... Nuisances discovered .... .... 6886 .... .... ,,, abated 5705 .... .... .... .... Notices issued (preliminary) .... .... 1450 .... (formal) .... .... 1176 ..... ..... Letters issued re nuisances .... 1394 .... Visits re building licences 605 .... .... .... Visits to premises re Housing Act 85 .... .... .... Re-visits to premises re Housing Act .... 67 ..... .... Visits re infectious disease 306 ..... ..... .... Visits to slaughterhouses .... 1771 .... ..... .... Visits re offensive trades 0 .... ..... .... Visits to markets 77 .... .... .... .... butchers and other food shops 1600 ,, .... .... cowsheds 54 .... .. dairies .... 192 .... .... .... .... ... milkshops 378 .... .... .... ,, ice cream premises .... 189 .... .... .... ..

Houses and premises inspected and visited re nuisances

42 5
ne.
97
4 8
8
20
3
64
6
40
010
572
52
87
31
62
2
129
244
226
16
8
2 5 II II 4 2

#### SMOKE ABATEMENT.

The question of smoke abatement is still a problem in the borough and many visits have been paid to industrial premises with a view to advising the persons concerned as to the elimination as far as possible of the smoke nuisance. In spite of the fact that we have received every co-operation from many owners of premises the position is still far from satisfactory. At the end of June, Mr. Ormerod, who held the Smoke Inspector's Certificate, left the town to take up another appointment and it was not possible for a time to obtain the services of an inspector holding this certificate. At the end of the year one of the inspectors in the Department was successful in passing his examination and he is devoting a portion of his time to the question of smoke abatement in the town.

#### COMMON LODGING HOUSES AND HOUSES LET-IN-LODGINGS

Regular visits have been paid to the common lodging houses and houses let in lodgings. Generally speaking they have been kept in a satisfactory condition and on occasions when unclean conditions have been discovered informal action only on the part of the inspectors was found necessary.

## COMMON LODGING HOUSES.

No. of	commo	n lodging	g houses	in	the Borou	gh	 5
,,	lodgers	allowed	nightly				 220
,,	visits						 42
		House	S-LET-IN	1-L(	ODGINGS.		
No. of	houses	on regist	er				 3

....

....

....

....

5

#### OFFENSIVE TRADES.

....

visits

...

The offensive trade premises in the borough comprise : I fellmonger, I fat boiler, I gut scraper and fat boiler, I tripe boiler and I gut scraper.

The type of trade carried on at these premises, unless very stringent measures as regards cleanliness are maintained, can give rise to serious nuisances and it is a noteworthy fact that very few complaints are received by this Department. Routine visits to the premises have been paid during the year.

#### RAG FLOCK ACT, 1911-1928.

Two samples of rag flock, which is used in the manufacture of bedding, etc., were taken and submitted to the Public Analyst. His report stated that they had complied with the provisions of the above Act.

#### CANAL BOATS ACT, 1877 AND 1884, AND PUBLIC HEALTH ACT, 1936.

No. of	boats registered	at Wi	gan an	nd still	in use	or	
	available						24
,,	inspections						6
,,	letters sent out 7	e defee	cts				3

# FACTORIES ACT, 1937

Routine inspections have been made and if necessary notices and letters have been addressed to the owners to remedy certain defects existing at these premises. In some cases of minor defects only informal action was necessary. Sufficient sanitary accommodation, limewashing of premises and proper ventilation, etc., are very important in factories and the inspectors have given much attention to these matters. Certificates of means of escape in case of fire were issued to factories during the year and it is pleasant to record the close cooperation between ourselves and the Fire Service in this branch of our work.

No. of fa	ctories on reg	ister				 460
,, ba	kehouses on r	egister				 97
,, vi	sits to factorie	s				 297
,, vi	sits to bakehou	uses				 97
The follow	ing defects we	ere deal	lt with	ı :—		
Unsuitable	e exits or esca	pes in	case o	of fire		 10
Unsuitable	e or defective s	anitary	accon	nmodat	tion	 24
Require li	mewashing or	cleansi	ing			 6
Other offe	ences					 . 5
						45
No. of de	fects remedied					 13
,, no	otices received	from H	[.M. I	nspecto	or	 14
,, uı	iderground ba	kehous	es bei	ng use	d	 3

#### SHOPS ACTS, 1912-1926.

The shops in the borough, particularly the larger traders, still close in the evenings earlier than required by the Shops Act. Consequently it has not been found necessary to concentrate to any extent on this branch of our work. Particular attention has been paid to the sanitary accommodation, washing facilities, lighting, etc., and the exhibiting of various notices required by the act. Letters have been sent to various offenders, but it has only been found necessary to take informal action to secure compliance with the requirements of the acts and regulations.

Complaints have been received of offences under the Wigan Fish Frier's Weekly Half-Holiday Order, 1939, in relation to the half day closing, but it was found that a visit by an inspector to the premises usually had the desired effect.

As stated in the report for the year 1948, it is difficult to deal with persons carrying on the business of hairdressing, as persons entering the shop before the appointed hour for closing can receive attention. On receipt of complaints, inspectors have visited the premises and warned the persons concerned. This has been followed up by observa tions of the premises.

No. of	shops	on register	 	 	1608
,,	visits	and observations	 	 	380

#### REPORT OF OFFENCES.

Not exhibiting closing notices			3
" form" K"			I
,, assistants' half-holiday forms			1
Sanitary accommodation not separate for s	exes		4
Unclean condition of sanitary accommodation			I
Insufficient sanitary accommodation			3
Unsuitable or defective sanitary accommodati			6
Provision of suitable accommodation for meals			I
Provision of suitable washing facilities			5
Insufficient lighting			2
Cleanliness of shop premises			7
Provision of seating accommodation for fema		f	I
Defective structure of shop fabric			9
Letters sent out 1e contraventions			57

#### PHARMACY AND POISONS ACT, 1933.

No. of	" Listed Sellers " on register	·	 	135
	visits to registered premises		 	2
,,	letters sent out		 	4

#### PLACES OF ENTERTAINMENT.

There are 24 places of entertainment in the Borough and these have been visited by the inspectors. Before the annual renewal of licences takes place special visits are paid and any defects or deficiencies noted and the appropriate action taken.

# RODENT CONTROL.

The control of rats and mice infestation has been maintained during the year and a routine search continued in a similar manner to that of previous years. There have been many requests for disinfestation at private dwellings, business premises, schools and canteens.

The rodent operators report all rat infestation, where there is a possibility of defective drains being the cause of the infestation, to the district sanitary inspector, who carries out an inspection and test of the drain concerned. The Workable Area Committee representing Wigan and the surrounding districts still continues to function satisfactorily.

During the year, 120 premises were reported to be infested with rats and 23 were still under observation from complaints received in 1948. 21 premises were still under observation and 122 premises were reported as cleared at 31st December, 1949. 144 complaints of mice infestation were received during the year and on the 31st December, 1949, 116 premises had been cleared and 28 still under observation. Orders were signed by occupiers of infested premises to carry out prebaiting and poisoning and these, in the main, proved successful. Second orders were obtained if there was any sign of infestation after a first treatment. The estimated kill was 1,458 (bodies found 176) rodents : this includes trapping.

A survey of the sewers was carried out and manholes were treated twice during the year :

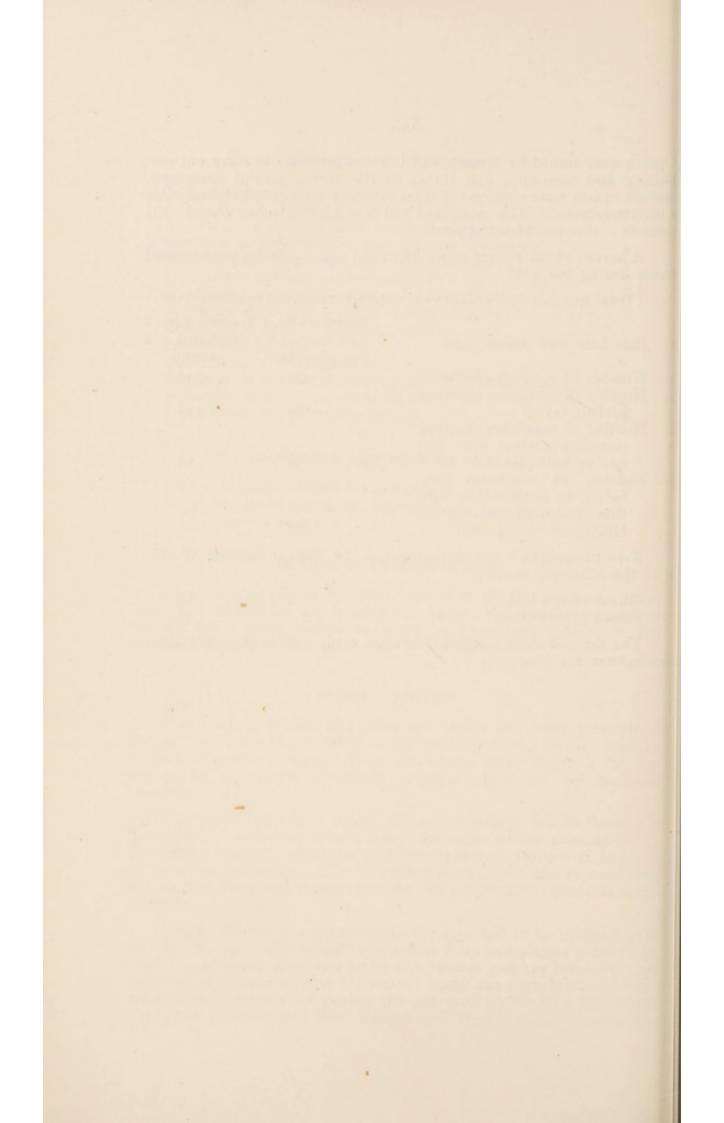
(Total number of manholes in foul and connected systems, 1185.)

Ι.	Bait base and poison used :	Sausa		Brea	tment No. 2 ad rusk and arsenic.	
	Number of manholes baited Number of manholes showing	 	464		533	
	prebait take	 	165		133	
4.	Number of manholes showing complete prebait take (on one or both days)		95		03	
5.	Number of manholes test- baited in conjunction with	 	95		9-	
	this treatment and not in- cluded in No. 2 above	 	186		-	

Two campaigns were carried out at the Hoscar Sewage Works, with the following results :---

Poison points		 	 	 85
Poison points	taken	 	 	 43

The three Rodent Control Operators made a total of 21,582 visits throughout the year.



# Section VI

# Housing

.

#### GENERAL.

Housing Accommodation, as at 31st December, 1949 :-	_
No. of dwelling houses	21,913 983
•	22,896

The housing situation in the Borough is still acute and in addition to the serious overcrowding problem to be dealt with, there are many dwellings which are unfit for human habitation and cannot be made fit at reasonable expense. This raises the question of re-housing the occupants of these insanitary dwellings which is very difficult at the present time and we have to resort to the less satisfactory method of requesting the owners to at least carry out repairs to render the houses weatherproof.

7 houses which were unfit for human habitation and could not be rendered fit at reasonable expense were reported to the Insanitary Houses Sub-Committee and the appropriate action taken.

#### INSPECTION OF DWELLING HOUSES DURING THE YEAR :

(1) (a) Total number of dwelling-houses inspected (for	
housing defects under Public Health or	
Housing Acts)	2627
(b) Number of re-inspections made	9676
(2) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	7
(3) Number of dwelling-houses (exclusive of those referred to under preceding sub-head) found not to	
be in all respects reasonably fit for human habitation	2511
EDY OF DEFECTS DURING THE YEAR WITHOUT SERVIC FORMAL NOTICE :	E OF
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or	
Number of defective dwelling-houses rendered fit in	1268
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or	1268
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1268 1213
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	
Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	1213

REM

#### CONTROL OF CIVIL BUILDING-DEFENCE REGULATION 56 A.

The raising of the "free limit" to £100 by which work can be carried out to any property without licence has greatly reduced the number of licences issued by this Department. The local authority are still only concerned with private dwellinghouses and applications for premises other than these are dealt with directly by the Ministry of Works.

No. of licences issued during the year .... 19

No. of certificates issued to obtain eavesgutter, floor boards, etc. .... .... .... 640

#### LEGAL PROCEEDINGS TAKEN DURING THE YEAR :

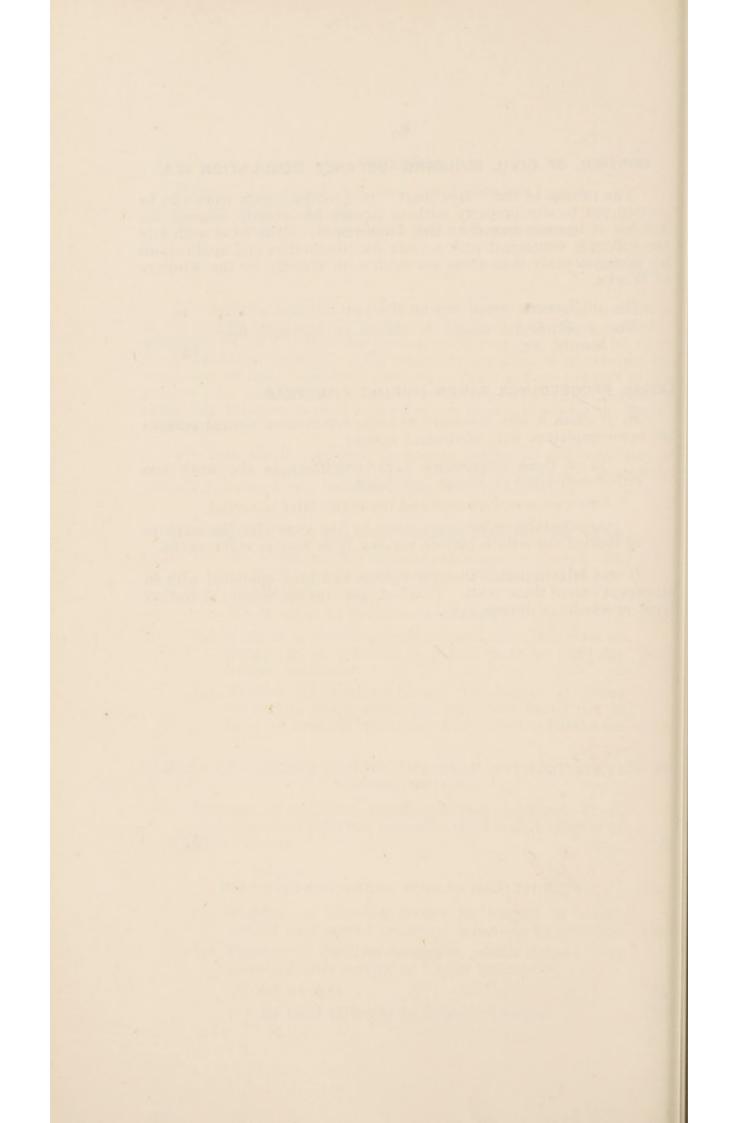
In 37 cases it was necessary to issue summonses against persons for non-compliance with abatement notices :

12 of these summonses were withdrawn as the work was either completed or almost completed.

One case was dismissed and the notice later re-served.

24 nuisance orders were made by the Court for the work to be carried out within periods varying from four to eight weeks.

It was later reported that the notices had been complied with in all except one of these cases. This last case was the subject of further legal proceedings during 1950.



Section VII

# Inspection and Supervision of Food

#### MILK SUPPLY.

# MILK SUPPLY : FOOD AND DRUGS ACT, 1938, AND MILK AND DAIRIES REGULATIONS, 1949.

The major portion of the milk supplied in this Borough is pasteurised and sold in sealed bottles, but there is still a small quantity of raw milk being retailed.

Routine visits have been carried out at farms, dairies and milkshops and samples of milk taken from carts on the streets, shops and at the point of delivery from farmers to dairies.

It is worthy of note that the Public Analyst has commented on the satisfactory standard maintained throughout the year. Reference is made earlier in this report to the fact that from October 1st, 1949, farms were no longer under the control of the local authority, but certain powers are still retained enabling us to take samples of milk at these premises.

There are five premises in the borough producing pasteurised milk and two samples from each of these plants are taken monthly and submitted to the Public Health Laboratory for bacteriological examination. These premises are visited regularly by the inspectors. The plants are checked and particular attention is paid to the general cleanliness of the premises. It has been found that the owners of these premises are very co-operative and helpful, particularly when the inspectors are making enquiries on the receipt of adverse reports from the Public Health Laboratory for the purpose of detecting any defect in the plant, or any other reason which may account for the unsatisfactory report.

,,dairies192,,milkshops378No. of persons licensed for the sale of sterilisedmilk210,,licensed for the sale of pasteurisedmilk126,,licensed for the sale and productionof pasteurised milk5,,licensed for the sale of accredited3,,licensed for the sale of accredited3,,licensed for the sale of tuberculin6	No.	of visits	to cowsheds	 	 54
No. of persons licensed for the sale of sterilised milk 210 ,, licensed for the sale of pasteurised milk 126 ,, licensed for the sale and production of pasteurised milk 5 ,, licensed for the sale of accredited milk 3 ,, licensed for the sale of tuberculin		,,	dairies	 	 192
milk 210 ,, licensed for the sale of pasteurised milk 126 ,, licensed for the sale and production of pasteurised milk 5 ,, licensed for the sale of accredited milk 3 ,, licensed for the sale of tuberculin		,,	milkshops	 	 378
milk 126 ,, licensed for the sale and production of pasteurised milk 5 ,, licensed for the sale of accredited milk 3 ,, licensed for the sale of tuberculin	No.	of persons	***		210
, licensed for the sale of accredited milk 3 , licensed for the sale of tuberculin		,,			126
, licensed for the sale of tuberculin		"			5
		••			3
		••			6

During the year 154 samples were taken for the purpose of testing the amount of foreign matter contained in milk intended for sale in the Borough.

#### BACTERIOLOGICAL EXAMINATION OF MILK.

133 samples of milk were submitted for bacteriological examination, and/or Methylene Blue Reduction Test and Phosphatase Test. 119 samples were pasteurised milk, 1 accredited milk, 10 sterilised milk and 2 tuberculin tested (pasteurised) milk. Two samples of pasteurised milk failed to pass the Methylene Blue Reduction Test.

3 samples of sterilised milk were submitted to the Turbidity Test and were found to be satisfactory.

5 samples of raw milk and 1 sample of Tuberculin Tested (Certified) milk were submitted for the T.B. Inoculation Test and the reports stated that T.B. bacilli were not found.

2 bottles were broken in transit.

8 samples of washings from milk churns were also submitted for examination, 4 of which were reported to be unsatisfactory.

#### ICE CREAM.

#### MANUFACTURERS AND PREMISES.

In recent years this branch of the work has become increasingly important and much attention has been paid particularly to the premises where ice cream is manufactured.

During the year, 55 samples were obtained and submitted for bacteriological examination to the Public Health Laboratory and graded as follows :—

Grade 1. 22 Grades 1 and 2, 30 samples, are recognised as Grade 2. 8 Grades 3 and 4, 25 samples are considered Grade 4. 13 Grades 3 and 4, 25 samples are considered unsatisfactory.

On the receipt of unsatisfactory reports the manufacturer was informed and further samples were taken, in some cases at various stages in the manufacture of the commodity.

There are six manufacturers operating heat-treatment plants and sterilizing units at their premises and one producing ice cream by use of a cold-mix preparation.

Certain of these premises maintain a good standard, both as regards plant and general cleanliness. In cases where the premises are considered sub-standard, the owners have been warned that action will have to be taken under Section 13 of the Food and Drugs Act, 1938. Inspectors visited these premises both in a supervisory and advisory capacity and suggestions have been put forward for their improvement. It should be emphasised again that the hygienic way of distributing this article of food is prepacked (wrapped by machine if possible and not by hand). This method of retailing ice cream is less subject to contamination than when the commodity is sold loose in the form of wafers, etc.

#### RETAILERS.

The number of premises registered for the sale of ice cream on 31st December, 1949, was 107.

Three samples of water were taken from ice-cream vehicles, with satisfactory results.

#### FRIED FISH SHOPS.

Fish frying is carried on at 89 shops in the Borough and it is a fact worth noting that the complaints received as to nuisances arising from these premises is practically nil. The standard of cleanliness is generally good. Routine visits to these premises are paid by the inspectors.

# REGISTRATION OF PURVEYORS OF MEAT AND PREMISES.

The number of premises registered is 91. Frequent visits are paid by the Inspectors and advice given where necessary. At many of these premises sausages, pressed beef, etc., are prepared for human consumption and it has been found necessary to pay particular attention to the cleanliness of walls, ceilings, floors, tables, etc. In some cases attention has had to be called to the unclean clothing worn by persons preparing food but usually informal action only has been necessary.

It has been particularly noticeable that many persons still carry meat from vans to shops without the use of head coverings and in cases where this has been observed informal action has been taken.

#### EXAMINATION OF WATER.

#### CHEMICAL ANALYSIS.

During the year 48 routine samples of water were sent to the Public Analyst for examination.

		A second property of the second property in the second property of t	termine the second s	
n allender stender som i Over attende som ärdes	Bispham and Nicholson's Pit	Edgewood and Nicholson's Pit	Thirlmere	Worthington and Thirlmere
	Parts per 100.000	Parts per 100.000	Parts per 100,000	Parts per 100,000
Temporary Hardness	16.41	16.21	1.70	5.94
Permanent Hardness	5.28	1.5	0.49	8.84
Total Hardness	20.95	16.96	2.19	14.78
Combined Chlorine	3.28	3.04	0.99	2.06
Ammoniacal Nitrogen	.0004	.0008	.0005	.0008
Albuminoid Nitrogen	.0021	.004	.0016	.0058
Nitrogen as Nitrites	_		-	_
Nitrogen as Nitrates	.143	.125	.046	.157
Oxygen absorbed				
(in 3 hrs. at 37°C.)	.029	.046	.056	.097
PH Value	7.08	7.39	7.68	7.36

The results of these examinations, expressed in averages, are given below :-- Parts per 100,000

2 other samples, taken from points of entry to reservoirs, were also submitted.

#### BACTERIOLOGICAL EXAMINATION.

During the year, 48 routine samples of water were sent to the Public Health Laboratory, Manchester, for examination. The results of 3 of these examinations were unsatisfactory, and, in consequence, 10 further samples were taken, only 2 of which failed to reach the usual standard.

9 other samples of water were taken at points of entry to the reservoirs.

There is no part of the Borough dependant upon standpipes for a supply.

#### MEAT INSPECTION.

There are still only six slaughterhouses in use in the borough; three in the Scholes area are used for the slaughter of cattle, sheep, pigs and calves and three for the slaughter of pigs only. It cannot be emphasised too often how inadequate the three slaughterhouses in the Scholes area are for the number of animals slaughtered there.

As stated in the report for the year 1948, efficient inspection is well nigh impossible in the limited space available. The only solution to the problem appears to be the erection of a public abattoir, and representations have already been made to the Ministry with this object in view.

Inspections at all the slaughterhouses are carried out daily. If there is reason to believe that meat slaughtered in other districts has not previously been inspected, examination is carried out on its arrival in the borough. Condemned meat is sent to a fat melter for manufacturing purposes only and this firm forward to the health department a schedule of quantities received.

The butchers shops and vans from which meat is sold are regularly inspected. It is necessary to stress that the sale from vans is a very unsatisfactory method of retailing meat as unecessary handling by customers, contamination from dust, flies, etc., is constantly taking place, but it is pleasing to note that the practice of retailing meat from vans appears to have diminished.

No.	of	visits to slaughterhouses		 1771
	,,	,, markets		 77
	,,	", butchers' and other food		 1606
	,,	certificates issued (condemned food	d)	 782

#### CARCASES EXAMINED DURING THE YEAR 1949.

	Cattle exc. Cows	Cows	Calves	Pigs	Sheep	Total
Carcases examined	4507	3376	2339	9466	26989	46677
Carcases totally condemned	39	98	57	45	33	272
Percentage totally condemned	0.87	2.90	2.44	0.47	0.12	0.58

	Whole					OF	FAL (	COND	EMNE	D.		
A Franked with	Whole Carcase and all Offal Con- iemned	Part of Carcase Con- demned		Lungs.	Livers.	Hearts.	Stomachs.	Spleens.	Skirts.	Kidneys.	Udders.	Mesen- teries.
Affected with Tuberculosis : Cattle exc. cows) Cows Calves Pigs Sheep Affected with other	80	29 109 35 —	227 490 356	959 1706 	598		33 138 46 	57 138 12 	70 214 5 	8 43 13 	4	8 34 29
Diseases, etc.: Cattle (exc. cows) Cows Calves Pigs Sheep	6 18 48 12 33		119 64 1 1 12	393 4 1109	2215 1557 2 54 1972	58 1 175	6 6 5	44 26 5 -	88 47 —	69 146 46 2	524 14	3 1 
	272	182	1270	5426	6982	555	234	282	424	327	545	78

The following meat and offal from the Ministry of Food slaughterhouses was surrendered and destroyed, or sold for manufacturing purposes, during the year 1949 :—

#### SUMMARY OF OTHER FOOD CONDEMNED, 1949.

Import	ed Mea	.t				800	lbs.
			or 1		 		
Other 1	Meat a:	nd O	ffal		 	 2,572	Ibs.
Sausag					 	 446	lbs.
Canned	l Meat				 ••••	 508	
					 	 7,091	lbs.
Canned	Fish				 ••••	 186	
					 	 9,516	lbs.
Canned					 	 520	
Vegeta					 	 13,450	lbs.
Canned	Veget	ables			 	 970	
Coffee					 	 388	lbs.
Rabbits	5				 	 1,039	
Flour					 	 2,280	lbs.
Canned					 	 1,502	
Canned					 	 551	
Packag					 	 1,130	
Other o	canned	or b	ottled	foods	 	 940	
Fowl					 	 13	

A large wholesale business in fish and other foodstuffs is carried on in and around the markets and the premises concerned are visited daily.

All food condemned, other than meat, is destroyed at the Frog Lane Depôt.

## FOOD AND DRUGS (ADULTERATION) ACT, 1938.

During the year, 241 samples of milk and various other foods obtained under the above act were submitted to the Public Analyst for examination.

Articles		Total Number Analysed	below standard complying with	ed as adulterated or otherwise no a the prescribed ements
			Number	Percentage
Butter		7		
Cake		4		
Cheese		6		
Coffee				
Condensed 1		7 2 3 1		
Cooking Fat		3	-	
Dried Egg				_
Ice Cream		8	-	
Jam		9 7 3 5	-	
Margarine		7		
Meat Paste		3		
Meat Pies	Lother.		—	-
Milk		154	* 9	5.8
Pepper		4		-
Salad Dressin	1g	1	-	
Sausage		777	.1	14.3
Tea				-
Vinegar		2	-	
Whisky		4	_	
TOTAL		241	10	4.2

#### SAMPLES TAKEN DURING 1949.

<sup>\*</sup>Three of these samples were reported by the Public Analyst to be naturally deficient in fat or non-fatty solids. Action taken in regard to the six adulterated samples is given on page 78.

Article	No. of	Sample	Extent of adulteration	Action taken
Article	Informal	Formal	aduiteration	Action taken
Milk		46	Deficient in fat to the extent of 10%.	Further sample taken which was found to be genuine.
Milk	61		Contained 7.2% extraneous water.	
Milk		65	Contained $9.4\%$ extraneous water.	Fined $£5$ on each of two charges and $15/-$ costs.
Milk		66	Contained 8.9% extraneous water.	
Milk	62		Deficient in fat to the extent of 6.6%	Formal sample taken which was found to be genuine
Milk		116	Deficient in fat to the extent of $70.3\%$	Fined $\pounds 20$ and costs.
Beef Sausage		162	Deficient in meat to the extent of $8\%$	Further sample taken which was found to be genuine.

### ACTION TAKEN IN REGARD TO ADULTERATED SAMPLES.

## FERTILISERS AND FEEDING STUFFS ACT, 1926.

7 samples of fertilisers and 8 samples of feeding stuffs were submitted to the Agricultural Analyst and he reported that they complied with the statutory statement within the Limits of Variation, except in the case of two samples to which reference is made in the Analyst's Report.

#### ANNUAL REPORT OF THE PUBLIC ANALYST.

The Borough Analyst, Mr. S. E. Melling, F.I.C., submits the following report of the work carried out during the year ending 31st December, 1949 :—

CHEMICAL LABORATORY,

359, The Cliff,

Higher Broughton,

Manchester, 7.

28th April, 1950.

The Public Analyst has the honour briefly to summarize the work for which he is responsible to the Health and Water Departments of the Corporation during the twelve months ended 31st December, 1949.

#### FOOD AND DRUGS ACT, 1938.

Total number of foods and drugs analysed		241
Number adulterated, below standard, or otherwise	not	
complying with prescribed requirements		10
Percentage so reported against		4.2

Of 154 milks, 9 were certified as follows : 3 were adulterated with at least 7.2, 8.9, and 9.4 per cent. respectively of added water ; 4 were deficient in fat to the extent of 3.3, 6.6, 10.0 and 70.3 per cent. repectively, whilst the remaining 2 were deficient in non-fatty solids to the extent of 3.5 per cent.

As to the quality of milk vended in the Borough throughout the year, it maintained the high level which has characterised the supply in the past. The addition of preservative and artificial colouring agents is a thing of the past. There has been no transgression of the governing regulations relating thereto for very many years.

The remaining sample reported against was a beef sausage containing less than the amount prescribed in "The Meat Products and Canned Meat (Control and Maximum Prices) Order, 1948," i.e., it was deficient in meat to the extent of 8 per cent.

There are few articles to which statutory obligations apply; for example, butter and margarine must not by law contain more than 16 per cent. of water, and further, the former is controlled by Public Health Regulations which prohibit the use of boron preservative. All samples analysed conformed with these conditions.

Again, all samples of whisky were sensibly above the legal alcoholic strength corresponding to 65 per cent, Proof Spirit, containing, as they did, 68.6, 69.2 (two samples) and 69.7 per cent. respectively.

Other fatty foods included 6 of cheese, all of which were of fullmeat type, derived from substantially whole milk and containing (on the dry solids) from 48 to 55 per cent. of true butter fat, with an average of 50.7 per cent. The Agricultural Produce (Grading and Marking) Acts require Cheshire and other recognised brands of cheese to contain a minimum of 45 per cent. butter fat when expressed on the dry solids.

Various fruits were represented in the jams examined and, having regard to the natural content of insoluble solids associated with the specific fruit and that found in the finished preserve—coupled with the absence of salicylic and benzoic preservatives or sulphur dioxide in amount beyond the limit laid down in Public Health Regulations the samples were certified as of normal commercial quality, containing the required fruit content.

From the 1st April this year, the Ministry of Food issued a directive to the effect that, on signing an undertaking that their ice cream will contain a minimum 2.5 per cent. fat-content, the ice cream manufacturers may acquire additional supplies of sugar and fats. It was made clear, of course, that this very low percentage must not be construed as, in any way, a "standard " and, therefore, in the absence of any statutory minimum, no legal proceedings could follow the sale of any impoverished ice cream or even a substantially fat-free substance or water-ice. The possibility of prescribing a legal standard of composition may follow the recommendations hereafter of the Food Standards Committee, but meanwhile the 8 ice cream samples contained from 2.0 to 10.3 per cent. of hardened vegetable oil, with an average content of 5.8 per cent.

A few specimens of sponge cake were sent in with the view of determining the presence of mineral oil (liquid or solid)—a component of so-called "extenders" used in confectionery, etc., which must be excluded (by the Mineral Oil in Food Order, 1949), from food intended for sale or sold for human consumption, subject to a tolerance of 0.2 per cent. by weight of the article. The samples were found to be satisfactory in this regard.

The remaining miscellaneous groceries, meat preparations of one sort or another, condiments, etc., were of sound quality and normal commercial composition.

#### FERTILISERS AND FEEDING STUFFS ACT, 1926.

During the period under review, 8 samples of feeding stuff and 7 samples of fertiliser were examined to check the statutory statements attached to the conditions of sale.

The former comprised 3 samples of national poultry food No. 1, and one each of fish meal, palm kernel meal, undecorticated cotton meal, No. 1 cattle meal and No. 1 pig meal. After applying the tolerance allowed, ("Limits of Variation") only one sample of national poultry food No. I was not in strict accord with the invoice, in that it contained 0.35 per cent. excess of oil. In other words, its value was rather enhanced than deteriorated.

The fertilisers were of the following types, viz. : potassic, potato No. 2, excelnitre, potato No. 1 and complete, and a sample of grass and grain manure and superior top-dressing manure complete the 7 samples analysed. Here again there was an insignificent divergence in the case of the grass and grain manure, since the Soluble Phosphoric Acid was 1 per cent. less and the Insoluble Phosphoric Acid 1.55 per cent. more than the corresponding figures given in the statutory statement. It will be noticed here that the sample as sold in fact contained 0.55 per cent. more Total Phosphoric Acid than was guaranteed.

#### RAG FLOCK ACT, 1912.

Two samples were submitted which fully complied with the official requirement as regards the limitation of "Combined Chlorine," index of contamination.

#### WATER SUPPLY.

Samples drawn from consumers' taps and representative of water from the four sources were subjected to complete chemical analysis each month. Certificates were issued on every occasion to either the Waterworks Engineer or the Medical Officer of Health and presented to the Water and Health Committees at their next meetings.

The Pit waters—Bispham and Nicholson's and Edgewood and Nicholson's—in their organic indices were found to vary within very narrow limits, and the character of such deep supplies is not influenced by the vagaries of the weather. There was fluctuation from time to time in mineral constitution, dependent upon the proportionate blending, but in all cases the result was a water of sound, potable purity and with attractive aesthetic qualities.

The Thirlmere water, of course, calls for no comment, and its pristine organic purity was consistently maintained throughout.

Water from the Worthington gathering ground at times carries a very sensible load of organic matter derived from vegetable sources. Until the bulk supply to Wigan itself can be augmented by water from a source or sources free from suspicion, sterilisation, as the last line of defence, must remain a clamant necessity and most critical factor in distribution, with a residual chlorine to guarantee immunity from, at least, the coliform organism.

> (Signed) S. ERNEST MELLING, Public Analyst.

(A Table expressing results of chemical analysis appears on page 74.)



Section VIII

Prevalence of and Control over Infectious Disease

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CASES NOTIFIED

	😤 South Pem.	0	70
	E Central Pem.	1911 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	152
	E North Pem.	11 132 1 23 - 5 1 6 1 11	72
	E West Pem.	10 10 10 10 10	35
	E All Saints	<u> </u>	21
ence	volniw2 a	14   4   4   6   18   1 0 2	81
Residence	work Andrew	30 30 10 10 10 10 10 10 10 10 10 10 10 10 10	121
	-i Victoria	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	23
Ward	∞ Poolstock	8   -   4   5   - 4	40
2	er St. Thomas	3 1 1 2 3 1 1 2 9	31
	- St. Patrick	230 10 7 1 3	59
	a St. Cath	10         10<	77
	vesbni. u	178     8/ 8/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/ 9/	55
	- St. George	0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	25
	65 and	0     4               -	11
	45 and	3       1   2   6   1   4     1	45
	25 and 25 and	8   6   4   5   3   3   3   3   3   3   3   3   3	68
s	15 and 15 and	0   1   1   1   1   1   1   1   1   1	40
Groups	10 and 10 and	4   -	24
Age G	5 and 5 and 10	68           31           1	143
A	3 and 3 and	338 338 338 338 338 338 338 338 338 338	198
	I and I and	16 13 13 153 153 153 153	266
	I nuqeı.	14         1         1         1         1	67
	At all ages	$\begin{array}{c} 146\\ 146\\ 12\\ 12\\ 12\\ 12\\ 12\\ 12\\ 12\\ 12\\ 12\\ 12$	862
		111 1111111, 11111	:
Notifiable Disease.		Smallpox Scarlet Fever Enteric Fever Diphtheria (including Membraneous Croup) Influenzal Pneumonia Erysipelas	TOTALS
Z		Smallpox Extert Fev Extert Fev Diphtheria Di	I

NOTIFICATIONS.

ANALYSIS (	OF NOTIF	ICATIONS, 1949.

Disease	Jan.	Feb.	Mar.	Apl.	May	June	July	Aug.	Sept.	Oct	Nov	Dec.	Totals
										0			
Acute Polioencephalitis	-	-	-	-	-	_	1	1	-	-	-	-	-
Acute Poliomyelitis	-	1		-	-	-	-	-	-	-	-	-	1
Cerebro Spinal Menigitis	-	-	-		1	-	-	-	-	-			T
Chicken Pox	-		-			-	-	-	-	-	-	-	-
Diphtheria and Memb. Croup	-		-	-	-	1	-	-		-			1
Dysentry		-		-	-	-	-	-	-	30	22	8	60
Encephalitis Lethargica	-	-	-		-	-		-		-	-	-	-
Enteric Fever	-	-	-	-	-	-	-	-	-		-	-	-
Erysipelas	-	-	2	1	2	1	-		1	3	3	1	14
Influenzal Pneumonia	-	-	-	-	-	-		-	-	-	-	-	-
Measles	159	48	73	24	4	3	-	5	1	1	3	-	321
Ophthalmia Neonatorum	-	-	-	-	-	-	-	-	-		-		-
Paratyphoid Fever		-	-		-	-	-	-	-	-	-	-	-
Pneumonia	6	8	12	4	5	10	1	4	2	4	7	10	73
Puerperal Pyrexia		-	-	-	1	-	1	1	-	-	1	-	4
Scarlet Fever	27	24	12	13	9	5	4	12	15	12	10	3	146
Smallpox	-	-	-	7	-	-	-	-	-	-	-	-	-
Tuberculosis : Pulmonary	1	3	5	6	16	6	4	8	5	6	6	6	72
Other Forms	1	4	-	-	1	1	-	2	2	-	1	-	12
Whooping Cough	11	20	18	41	29	13	8	12	1	2	2	-	157
												-	
	205	108	122	89	68	40	18	44	27	58	55	28	862

### COMPARATIVE NOTIFICATIONS FOR THE PAST TEN YEARS.

Disease	1940	1941	1942	1943	1944	1945	1946	1947	1948	1949
Acute Polioencephalitis Acute Poliomyelitis Cerebro Spinal Meningitis Chickenpox Diphtheria and Memb Croup Dysentry Encephalitis Lethargica Enteric Fever Erysipelas Influenzal Pneumonia Measles Ophthalmia Neonatorum Paratyphoid Fever Pneumonia Puerperal Pyrexia Scarlet Fever Smallpox Tuberculosis : Pulmonary Other Forms Whooping Cough	$\begin{array}{c} - \\ 14 \\ 79 \\ 235 \\ - \\ 4 \\ 31 \\ 16 \\ 1224 \\ 1 \\ 108 \\ 6 \\ 232 \\ - \\ 67 \\ 35 \\ 70 \\ 2122 \end{array}$	-6 $277$ $5$ $1102$ $1$ $-164$ $5$ $109$ $-61$ $466$ $197$	$ \begin{array}{c} 135\\150\\-\\-\\19\\8\\394\\5\\394\\5\\4\\106\\-\\89\\45\\60\end{array} $		$\begin{array}{c} 61 \\ 1 \\ - \\ 15 \\ 5 \\ 130 \\ 2 \\ - \\ 69 \\ 1 \\ 310 \\ - \\ 81 \\ 32 \\ 76 \\ \end{array}$	70   20 5		271 $-1$ $111$ $25100$ $2$ $-311$ $2532$ $-86$		$\begin{array}{c} -1 \\ 1 \\ 0 \\ -1 \\ 14 \\ 321 \\ -1 \\ 321 \\ -1 \\ 73 \\ 4 \\ 146 \\ -72 \\ 12 \\ 157 \\ 862 \\ \end{array}$

#### DIPHTHERIA.

The number of cases notified has gradually declined over the past thirteen years. Only one case was notified during 1949, and this was relatively mild, occurring in a young adult. He was admitted to hospital for treatment.

#### SCARLET FEVER.

146 cases were notified, 66 of which were removed to hospital. There was no death.

#### MEASLES.

321 cases were notified. 2 deaths were recorded.

#### CEREBRO SPINAL FEVER.

Only one case was notified. The case was treated at Whelley Hospital and was discharged recovered.

#### WHOOPING COUGH.

157 cases were notified, and there was no death.

#### ANTERIOR POLIOMYELITIS.

One case was notified from the Christopher Nursing Home, a school child aged 6 years. The child was later taken home but is still under treatment.

#### ERYSIPELAS.

14 cases were notified, and there was no death.

#### PUERPERAL PYREXIA.

4 cases were notified, one of which was removed to hospital. All the cases recovered.

#### DYSENTERY.

There were 60 notifications of Sonne Dysentery during the year. In addition information was received from the Public Health Laboratory concerning 28 bacteriologically positive specimens which were not notified, these being for the most part symptomless carriers. All the cases occurred during the latter part of the year and gave rise to what might be termed a small epidemic incidence.

During the week commencing 25th September, this office was informed that cases of sonne dysentery were occurring in the County areas to the south and east of the Borough. The first notification in the Borough was received on the 3rd October, and was quickly followed by reports of positive cases which showed a predominance in the Scholes and Swinley areas. Close co-operation was maintained with general practitioners and visits were made to cases and confirmed carriers by sanitary inspectors and health visitors. Hospital isolation was advised where necessary and patients and contacts were informed how best to avoid spreading the infection.

The majority of the early cases occurred in young children and their mothers. Thus attention was directed immediately to common factors such as milk and ice cream. On further investigation the common factor involved in several of the earlier cases proved to be ice cream which had been bought from an itinerant vendor. As this ice cream was manufactured outside the Borough the co-operation of the County health staff was enlisted and the vendor's family investigated. Although specimens of ice cream taken on the premises were negative, it was found that three members of the family gave samples of positive stools and manufacture of ice cream was voluntarily suspended on the 3rd October.

It appeared that the vendor only came into the County Borough on Sundays and this tallied with the evidence available from cases. Three cases gave a history of having consumed the suspected ice cream on Sunday, 25th September, and the onset of their illness was some four days later. On the following Sunday, the 2nd October, four more cases gave a history of buying the ice cream and in three of these the symptoms commenced with acute onset on the 4th October, whilst the fourth case, rather less acute in character, gave a history of onset round about the 7th October. The only other common factor was a milk supplier, but on investigation the milk proved to be either pasteurised or sterilised retailed in bottles.

Altogether 27 cases were associated with these outbreaks, although general practitioners and health visitors were aware of many cases of mild gastric upset and transient diarrhoea which occurred in the Scholes and Swinley areas during the months of October and November. It would seem that once established this protean disease became rather widely spread in a mild and transient form.

#### Sonne Dysentery-Royal Albert Edward Infirmary.

With cases of dysentery occurring with frequency in the county area and in parts of the borough it is hardly surprising that on the 28th November, the Department was notified that cases of the disease were suspected amongst children, patients, nursing staff and maids in the Royal Albert Edward Infirmary.

The first case, reporting sick with diarrhoea on the 20th November, was a maid employed in the doctors' and senior nursing staff dining rooms. Two days later a nursing sister employed on the children's ward suffered a sharp attack of diarrhoea and abdominal pain. It was established that this nurse had been back in hospital for about a week after some six weeks absence due to illness (? hepatitis). Her home address was in an area where several cases of dysentery had occurred. This nurse had previous to the 22nd, been employed for a few days in South Ward. On the 23rd, two patients in South Ward were noticed to have diarrhoea and on investigation gave positive stools. On the 25th and 26th, five children were noticed to have diarrhoea. Stools were taken and they proved positive (Sonne dysentery). On the 26th and 27th, a nurse on the children's ward, a kitchen maid and a cleaner complained of diarrhoea. On the following day the 28th, the Health Department was notified of these circumstances and the following action was taken :

All positive cases were transferred to Whelley Infectious Diseases Hospital for treatment. Steps were taken to prevent the spread of infection on wards, special care being taken with regard to personnel handling meals. Arrangements were made for crockery, cutlery, bed pans and urine bottles to be adequately sterilised after use. The help of the Monsall Public Health Laboratory was enlisted and faecal specimens were obtained from the kitchen staff and later from each member of the staff. After consultaion with the medical staff of the Public Health Laboratory it was considered that as cases were occurring amongst all grades of staff, the whole of the hospital staff, including as many part-time workers, professional and otherwise, as would accept, should be given a prophylactic course of 50 grammes of sulphasuxidine or its equivalent over a period of five days, check faecal examinations being taken on the 9th day from the start of the course.

Patients in wards where cases had occurred were investigated bacteriologically and the appropriate treatment and isolation given where positive results were discovered. The administration of the prophylactic and responsibility for collecting specimens of faeces was left with the senior resident medical officer. The staff, both full and part time, co-operated in whole-hearted fashion and after completion of the course of prophylactic treatment no further cases came to light. It would appear that this rather drastic measure achieved its object and brought a swift conclusion to an epidemic which might otherwise have smouldered for several weeks, disrupting the hospital service.

I must acknowledge the whole-hearted support which I received from the senior staff at the Royal Albert Edward Infirmary and Dr. Parker and the staff on the Monsall Public Health Laboratory during the course of these epidemics. My best thanks are due to the technicians who contributed materially to the results achieved.

# TUBERCULOSIS.

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#### NOTIFICATIONS 1949.

#### Formal Notifications.

			of ne	fnew								
Age periods.	0—	1-	5—	10—	15-	20-	25-	35-	45—	55—	65—	Total (all ages)
Pulmonary Males			1		4		7	8		-		
Pulmonary	-		1		4	-	1 '	0	11	5	-	36
Females		-			3	12	18	3	4	1		36
Non-pulmonary Males	_	1	1	_	-	1	1	-	_	1	_	5
Non-pulmonary Females	-	1	1	_	1	1	-	3	-	_	_	7

## Cases coming to the notice of the Medical Officer of Health Otherwise than by Formal Notification.

Source of Information			0—	1—	5—	10-	15—	20-	25 -	35-	45	55-	65—	To	tal
Death Returns from Local Registrars	Resp. Non- Resp.	M F M F		 			1111		1		1	2		$3 \\ 1 \\ 1$	A B C D
Death Returns from Registrar- General-Trans- ferable Deaths	Non-	F M	1111	1111						1111	1		1111	1	A B C D
Posthumous Notifications	Resp. Non- Resp.	F M	- - 1 -	1111			1	 	1	1111	1111	1111		$\frac{2}{2}$	A B C D
Transfers from other areas, excluding Transfer D'ths	Resp. Non- Resp.	M F M F	1111				1111			1111	1 	1	1111	33	A B C D
Other Sources	Resp. Non- Resp.	M F M F	1111		1111		1111	1111		1111			1111		A B C D

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#### Notifications in Wards.

Wards		Pulmonory Tuberculosis <sup>,</sup>	Other forms   of Tuberculosis	Totals
No. 1—St. George	2730	3		3
No. 2-Lindsay	4955	5	2	7
No. 3-St. Catharine	5762	6	1	7
No. 4-St. Patrick	6654	7	- 1	7
No. 5-St. Thomas	2711	3		8
No, 6-Poolstock	3903	4	-	4
No. 7-Victoria	3004	4	1	5
No. 8-St. Andrew	16988	7	5	12
No. 9-Swinley	10556	6	- 1	6
No, 10-All Saints	2271	6	- 1	6
No. 11-West Pemberton	3691	3	-	3
No. 12-North ,,	6768	5	1	6
No. 13-Central .,	9780	6	2	8
No. 14-South ,,	4997	7	-	7
Totals	84770	72	12	84

#### Deaths in Wards.

	War	rds			Pulmonary Tubercu- losis	Other forms of Tubercu- losis	Total
No.	1-St. George				 2	_	2
No.	2-Lindsay				 3		3
No.	3-St. Catharin	e			 6	1	7
No.	4-St. Patrick				 2		2
No.	5-St. Thomas				 6		6
No.	6-Poolstock	· · · ·			 4	-	4
No.	7-Victoria				 3	1	4
No.	8-St. Andrew				 5	2	47
No.	9-Swinley			·	 2	-	2
No.	10-All Saints				 1	- 1	1
No.	11-West Pembe	erton			 1	-	1
No.	12-North Pemb	ertor	1		 2	-	2
No.	13-Central Pem	berte	on		 4	2	6
No.	14—South Pemb	erton	1		 1	1	2
	Totals				 42	7	49

Age Periods.			Pulmo	New onary.		on- ouary.	Deaths Non Pulmonary. Pulmona			
			М.	F.	м.	F.	м.	F.	М.	F.
0	. '		 	-	_		_	-	1	-
1			 -		1	1			1	
5			   1	-	1	1			-	-
15			 19	31	2	5	7	15	3	1
45			 16	5	1	-	14	4	1	-
65 and upw	ard	ls	 -	-	-		2	-	-	-
Total			 36	36	. 5	7	23	19	6	1

#### NEW CASES AND MORTALITY DURING 1949.

The number of deaths from Pulmonary Tuberculosis was 42, against 35 in 1948, and 64 in 1947. The number of deaths from other tubercular affections is 7, against 5 in 1948 and 3 in 1947.

The rates are as follows :---

Pulmonary Tuberculosis - .... 0.49 per 1,000 of population. Other Tuberculous Diseases 0.08 ,, ,, ,,

If taken together as tuberculous affections, we have 49 deaths, or a rate of 0.57 per 1,000 of the population.

#### COMPARATIVE STATISTICS, 1945 TO 1949.

#### Cases Notified.

0.	1962 HOUTH	c.c			
	1945	1946	1947	1948	1949
Pulmonary	106	IOI	86	79	72
Other forms of Tuberculosis					
Total	142	123	113	103	84
	Deaths.				
	1945	1946	1947	1948	1949
Pulmonary	37	36	64	35	42
Other forms of Tuberculosis	9	3	3	5	7
Total	46	39	67	40	49
	Death Rate				
the second set is an an in the set	1045		1045	1040	1010

	1945	1946	1947	1948	1949
Pulmonary					
Total	0.58	0.47	0.79	0.47	0.57

#### REVISED DIAGNOSIS.

Notified.	Revised diagnosis.
I case of Scarlet Fever	Urticaria.
1 case of Pneumonia	Mastoid.

#### INFECTIOUS DISEASES PREVENTION.

A high-pressure disinfector is used for the purpose of the disinfection and disinfestation of clothing, bedding, and other articles.

No. of	houses disinfected	 		244
,,	rooms disinfected	 		424
,,	beds disinfected	 	·	154
	sheets and quilts disinfected	 *		636
,,	other articles disinfected	 		270
,,	library books disinfected	 		72
,,	schools disinfected	 		

#### DISINFECTION.

Two disinfectors deal with the disinfection of dwelling-houses.

All infected bedding and clothing is treated in a high-pressure steam disinfector on the Washington-Lyons principle, which is situated within the grounds of the Whelley Infectious Diseases Hospital.

Disinfection of rooms has been criticised, and in fact described as a useless procedure. Assuming that disinfection does not totally destroy the infecting organisms, it does impress the persons concerned of the necessity for cleanliness and care, and ensures a thorough scrubbing and cleansing of the rooms, which is doubtless of great hygienic value, especially in dirty houses.

There is no doubt that steam disinfection of bedding is a valuable preventive measure.

#### DISTRIBUTION OF DISINFECTANTS.

Disinfectants are provided free to the occupiers of houses where infectious disease has occurred, and in cases where there are exceptional circumstances. Other persons who desire supplies are charged a small amount to meet the cost of the disinfectant.

Information on the correct use of these agents is given by the sanitary inspectors.

# Section IX

# Other Diseases

#### BRONCHITIS.

	1945	1946	1947	1948	1949
Deaths	 79	 89	 97	 73	 IIO
Rates	 0.99	 1.07	 1.15	 0.87	 1.30

#### PNEUMONIA.

	1945	1946	1947	1948	1949
Deaths	 44	 48	 70	 49	 50
Rates	 0.55	 0.59	 0.83	 0.58	 0.59

#### OTHER DISEASES OF RESPIRATORY ORGANS.

	1945	1946	1947	1948	1949
Deaths	 8	 II	 12	 10	 13
Rates	 0.10	 0.13	 0.14	 0.12	 0.15

#### TOTAL OF THESE THREE RESPIRATORY DISEASES.

	1945	1946	1947	1948	1949
Deaths	 131	 148	 179	 132	 173
Ratés	 1.65	 1.79	 2.12	 1.57	 2.04

#### INFLUENZA.

	1945	1946	1947	1948	1949
Deaths	 23	 33	 27	 19	 33
Rates	 0.29	 0.39	 0.32	 0.23	 0.39

#### CANCER.

	1945	1946	1947	1948	1949
Deaths	 117	 121	 131	 129	 147
Rates	 1.48	 1.46	 1.56	 1.53	 1.74

#### Figures for Last 20 Years.

Year.	No. of Deat	hs.	Year.	No. of Deat	ths.
1930	 95	1	1940	 113	)
1931	 105		1941	 122	
1932	 107	519	1942	 117	<i>}</i> 605
1933	 102		1943	 124	
1934	 110	)	1944	 129	)
1935	 114	)	1945	 117	)
1936	 125		1946	 121	
1937	 127	- 587	1947	 131	645
1938	 113		1948	 129	
1939	 108	1	1949	 147	)

#### APPENDIX "A"

#### NATIONAL ASSISTANCE ACT, 1948—SCHEME FOR THE EXERCISE OF THE COUNCIL'S FUNCTIONS UNDER SECTION 21.

The Wigan County Borough Council, in exercise of their duty under Section 21 of the National Assistance Act, 1948, hereby make the following Scheme :—

#### Introductory.

1. The total estimated mid-1947 population of the area of the Council is 84,150.

2. The numbers of aged, infirm and handicapped persons in the area for whom accommodation is required are estimated to be as follows :—

(a)	Aged				 	200
(b)	Physically a	nd Me	ntally	Infirm	 	50
(c)	Blind and P	artiall	y-Sight	ed	 	30
(d)	Deaf or Dur	nb			 	25
(e)	Epileptics				 	20
(f)	Crippled				 	25

3. The estimates contained in the preceding Article have been arrived at as follows :---

	Aged	Physically and Ment- ally Infirm	Partially	Deaf or Dumb	Epileptics	Crippled
(a) Number of per- sons for whom accommodation is at present being provided	34	36	6	13	5	7
(b) Number of per- sons on present waiting lists	nil	nil	3	1	• 2	2
(c) Allowances for growing demand for accommodation	166	14	21	11	13	16
TOTAL	200	50	30	25	20	25

4. In so far as the Council do not provide accommodation in accordance with this Scheme in premises managed by them they may do so by arrangement with any other local authority for the purpose of Part III of the Act or with any voluntary organisation.

5. In addition to providing residential accommodation for persons who are ordinarily resident in the area of the Council and for other persons who are in urgent need thereof, the Council may exercise their powers under subsection (4) of Section 24 of the Act as respects persons ordinarily resident in the area of another local authority.

6. The Council shall continue to provide the accommodation and services specified in Part I of this Scheme and shall as soon as practicable modify, improve and develop them and provide further accommodation and services in accordance with Parts II and III of the Scheme.

7. Nothing in this Scheme shall preclude the Council from discontinuing the provision of accommodation in any establishment if and when they have made other and more suitable arrangements for the accommodation of the residents thereof.

#### PART I.

#### **Existing Service**

#### Particulars of Existing Accommodation.

8. Particulars of the residential and temporary accommodation now provided by the Council, and of the amenities provided therein, are contained in the Schedule to this Scheme.

#### Services, Amenities and Requisites.

9. Medical Attention. Where the accommodation referred to in Article 8 of this Scheme is provided in premises managed by the Council, the Council shall make adequate arrangements :---

- (i) for the accommodation and nursing of residents during illnesses of a kind which are ordinarily nursed at home:
- (ii) for enabling residents to obtain the benefit of any of the services provided under the National Health Service Act of which they may from time to time be in need, and
- (iii) for the supervision of the hygiene of their accommodation.

10. **Other Services, etc.** There shall be provided as part of any accommodation provided in premises managed by the Council such services, amenities and requisites as the Council may from time to time and in any particular case decide are necessary, including

- (i) board :
- (ii) recreational facilities such as reading matter, wireless, cinema and other entertainments and outings;
- (iii) where desired by residents, clothing suitable to their individual requirements;
- (iv) where desired by residents, extra comforts such as tobacco and sweets;
- (v) adequate opportunities for religious worship and for participation in activities in which residents are individually interested; and
- (vi) reasonable facilities for residents to move freely in and outside the establishments and to visit and be visited by their friends and relatives,

11. Arrangements made with any other local authority or with any voluntary organisation for the provision of accommodation on behalf of the Council shall be such as to ensure that the services, amenities and requisites available to residents in accommodation so provided are on the whole not less favourable than those enjoyed by residents in similar accommodation provided in premises managed by the Council.

#### PART II

#### Developments Contemplated During the Period to 31st March, 1950.

#### Provision of Residential Accommodation in Small Homes.

12. The Council shall take every practicable step to provide further residential accommodation to meet the needs of persons to whom Section 21 of the Act applies, including the need for accommodation in small homes for suitable persons resident in former poor law premises which are not capable of being satisfactorily improved in accordance with Article 18 of this Scheme.

13. The Council shall provide such further accommodation either by the acquisition and (where necessary) adaptation of existing premises, or, to such extent as the availability of building labour and materials permits and the Minister of Health approves, by the erection of new buildings. Except where the Council consider it necessary otherwise to provide accommodation for any class of persons in need of specialised accommodation and care, such further accommodation shall as far as may be practicable be provided in the form of homes for approximately 30-35 persons, and shall comprise bedroom accommodation for married couples, as many single bedrooms as possible and a dining room and sitting rooms for the use of residents. The Council shall provide as part of any further accommodation the services, amenities and requisites referred to in Articles 9 and 10 of this Scheme.

# 14. Accommodation provided by other local authorities and by voluntary organisations.

The Council shall, to such extent as may be necessary and expedient make arrangements with other local authorities and make further arrangements with voluntary organisations for the provision of further residential accommodation on behalf of the Council. In so doing the Council shall have particular regard to the needs of classes of persons requiring specialised accommodation and care not immediately available to them in premises managed by the Council. Article 11 of this Scheme shall apply to any arrangements extended or made in accordance with this Article.

#### 15. Accommodation in premises managed by the Council.

For the purpose of providing additional accommodation, the Council will endeavour, by 31st March, 1950, to provide one further establishment.

#### Provision of Temporary Accommodation.

16. The Council shall from time to time review the temporary accommodation provided under Part I of this Scheme and modify the provision so made in such manner as the Council may consider to be appropriate.

17. The Council shall make arrangements whereby they are enabled to hold in reserve the use of certain buildings to serve as temporary accommodation to meet exceptional circumstances, such as flooding, and to provide shelter for other persons in urgent need thereof in circumstances which could not reasonably have been foreseen or in such other circumstances as the Council may in any particular case determine. No establishments have been provisionally earmarked, but having regard to the Wartime Rest Centre service it is not anticipated that there would be any real difficulty in acquiring premises of this description to meet sudden and urgent need.

18. Reserve accommodation to serve as temporary accommodation to meet exceptional circumstances, shall, so far as the Council are able so to arrange, be continuously available and kept in order. The Council shall take steps to ensure that any stores and equipment necessary to bring such accommodation into use are available at short notice.

#### Improvement of Existing Establishments.

19. The Council shall, where necessary, and so far as building restrictions and other circumstances permit, improve establishments providing residential or temporary accommodation which are for the time being under their direct control, and shall continue to take all such steps as may be practicable to ensure the improvement of other establishments or parts thereof in which residential or temporary accommodation is provided by the Council. These improvements shall include the provision of additional services, amenities and requisites of the kind specified in Articles 9 and 10 of this Scheme. The Council shall furthermore carry out such other alterations to improve the general amenity of the Home as may be practicable and economical, such as exterior and interior decoration and the provision of more modern and comfortable furniture.

The Council recognising that the accommodation provided at the Social Welfare Home, Frog Lane, is entirely unsuited to modern requirements, will take steps to replace it in its entirety as soon as is practicable by new accommodation of a type envisaged in Article 13 of the Scheme. As an interim measure the Council is at the moment effecting certain improvements, e.g., to the layout of the main kitchen including its reflooring, and in the provision of new sanitary accommodation on the male side.

#### PART III

# Further Accommodation Contemplated after 31st March, 1950.

20. The Council shall keep under constant review the accommodation and services provided in accordance with this Scheme and shall continue to improve them and to provide further accommodation and services in the manner provided for by Part II of the Scheme. In particular they shall use their best endeavours to complete any necessary improvements of existing accommodation and services by the 31st March, 1954, and to make any further provision necessary by that date or as soon as may be thereafter. The Council shall as soon as is practicable and with the consent of the Minister erect and equip such hostels as are necessary to meet the total estimated needs of the area of the Council.

Providing that nothing in this section shall prevent the Council, with the consent of the Minister, from providing such additional accomodation as may be required by the acquisition and adaptation of existing buildings as outlined in Article 13 of this Scheme, should this course appear to the Council to be necessary due to lack of availability of suitable sites, building labour or materials.

#### SCHEDULE I.

#### PART I

#### Existing Services for Residential Accommodation for Old People, Infirm or Handicapped Persons, and Temporary Accommodation.

1. The County Borough provides and maintains an institution known as the Welfare Home which is situated in Frog Lane, Wigan.

The institution was erected in 1856.

The Home is utilised for the accommodation of aged, infirm, handicapped and temporarily homeless persons of both sexes.

The accommodation is of the old dormitory type as shown in the following table :--

Sex	18 bed	11 bed	10 bed	9 bed	8 bed	6 bed	3 bed	2 bed	Total Bed Accom.
Male	-	2	4	3	1	-	-	-	97
Female	1	-	-	-	-	2	1	1	35
TOTAL	1	2	4	3	1	2	1	1	132

There is no special accommodation for married couples.

In addition to the usual full domestic services, clothing is provided when necessary. Entertainment within the building is provided by putside voluntary organisations. To a limited extent free entrance to inemas and football matches is regularly available and two religious ervices are held each Sunday in the main dining hall of the institution. Recreational facilities are available to residents of the Welfare Home at the premises of the Wigan and District Old People's Welfare Committee Club, Wallgate, Wigan. Extra comforts in the form of tobacco and sweets are issued to the residents. Medical and nursing arrangements are provided through the interim arrangements made with the Regional Hospital Board in relation to the associated hospital section of the Welfare Home and supervision of the hygiene of the Welfare Home is undertaken by the medical staff of the Local Authority.

A total of 46 persons are at present employed under the supervision of a superintendent, certain members of the staff being utilised in the common services related to the Hospital section, e.g., kitchen, laundry and porter staff.

The standard charge at present fixed for accommodation is  $\pounds 2$  12s. 6d. per week.

2. No provision at the moment exists for the residential accommodation of old people through the agency of a voluntary organisation.

3. The Local Authority, as required, utilises the homes of various voluntary organisations for the accommodation of infirm or handicapped persons. At present handicapped persons are accommodated at

- (a) The North Regional Home for the Blind, Springhill, Nelson, Lancs.
- (b) The Maghull Home for Epileptics, Liverpool.

4. Under agreement with the Lancashire County Council, cases from outside the area of the county borough are accommodated at the Social Welfare Home, Wigan.

### IOI

#### APPENDIX "B"

#### NATIONAL INSURANCE ACT, 1948.

#### SCHEME FOR THE PROVISION OF WELFARE SERVICES.

The Wigan County Borough Council, in exercise of their powers under Sections 29 and 30 of the National Assistance Act, 1948, hereby make the following scheme under Section 29 of that Act :---

#### PART I. A.

#### Arrangements for promoting the Welfare of Blind Persons.

#### 1. Discharge of Functions.

The Council in so far as they do not directly discharge their functions under Section 29 of the National Assistance Act, 1948 (hereinafter referred to as "The Act of 1948") in relation to Blind persons in accordance with the provisions of this scheme may do so by arrangement with any other local authorities for the purposes of Part III of the Act or any voluntary organisation registered in accordance with Section 41 of the Act of 1948 (hereinafter referred to as a "registered voluntary organisation") on such terms (including terms as to the reimbursement of expenditure incurred by that local authority or voluntary organisation) as may be agreed.

#### 2. Blind Population.

The following table shows the number and sex of registered blind persons in the County Borough of Wigan on the 31st March, 1948 :---

Care	Age Groups									Tetal
Sex -	0 to 1	l to 5	5 to 16	16 to 21	21 to 40	40 to 50	50 to 65	65 to 70	70 and over	Tota
Male	_		-	3	9	7	21	9	33	82
Female	-	-	-	1	10	4	18	17	42	92
TOTAL			-	4	19	11	39	26	75	174

All the above are ordinarily resident in the area.

#### 3. Accounts.

The accounts relating to Welfare Services for blind persons which are provided by or on behalf of the Council shall be kept in such form as the Local Authority may desire and as is acceptable to the Minister of Health. In particular the accounts relating to Workshops for the Blind and to Home Workers, whether kept by the Council or by a registered voluntary organisation acting as agent for the Council, shall be kept in the forms suggested in Ministry of Health circular 262 dated 21st December, 1921, as amended by Part III of Circular 1306 dated 17th March, 1933, or such other forms as the Minister of Labour and National Service, after consultation with the Minister of Health, may direct.

#### 4. Registration of Blindness.

(i) The Council at their own expense shall make arrangements for the medical examination of all applicants for registration as blind persons and, subject to their certification as such in manner hereinafter provided, for their registration and classification. The register shall be kept in such form as the Minister may direct.

(ii) No person shall be added to the classified register of blind persons to be kept by the Council until he has been examined and certified to be a blind person by a registered medical practitioner with special xperience in ophthalmology.

(*iii*) The medical examination of applicants for registration of blindness shall be carried out by a medical practitioner as defined in paragraph 4 of Circular 1353 and Form BD. 8 will be utilised for the purposes of examination and certification.

(*iv*) If upon examination as aforesaid dispute arises on the part of the person examined or the registered medical practitioner as to whether or not the person should be certified as a blind person the case may be referred to a medical referee having the qualifications as defined in Circular 1353.

## 5. Blind Welfare Services to be provided immediately.

#### (1) Home Teachers.

The Local Authority shall recruit and employ such number of home teachers as are necessary to make adequate provision for the home training, in pastime occupations, of blind persons unable to utilise workshop facilities and who are considered suitable for such training and to visit blind persons in their own homes and elsewhere. The Local Authority will co-operate with the Regional Association for the Blind and the Local Education Authority in the provision of instruction for prospective home teachers. Home Teachers so employed shall as a minimum qualification hold the Home Teachers' Certificate of the College of Teachers for the Blind or such other qualifications as may by regulation be prescribed by the Minister of Health, and the salary range will be that considered appropriate to this or any higher standard as may be applied. The salary range at present in use is the National Joint Council for Local Authorities A.P.T. Grade 1, namely,  $f_{390}$ - $f_{435}$ . Nothing in the preceding sub-paragraph shall preclude the local authority from employing Home Teachers not holding the qualification referred to above, but who undertake an appointment to train for the purpose of so qualifying. Any such appointment shall not be continued beyond a period of two years after his appointment. The rate of remuneration of such an unqualified home teacher shall be determined by the Local Authority and the general conditions of service shall conform with the scheme of conditions of service of the National Joint Council for Local Authorities Administrative, Professional, Technical and Clerical Services, as from time to time amended and as adopted by the Council.

The duties of home teachers will in general include the following :-

- (a) To act as link between the blind person and the organisation dealing with Blind Welfare.
- (b) To discover and investigate cases.
- (c) To report to the proper Authority.
- (d) To keep card index and other records up to date or supply information which will enable them to be so kept.
- (e) To keep a record of visits along with the principal service rendered and the time spent in teaching.
- (f) To look after the material welfare of the blind.
  - (i) Financial—pensions and allowances.
  - (ii) Physical-personal and home hygiene.
- (g) To provide and give instruction in suitable pastime occupations.
- (h) To pay particular attention to those blind persons who are also suffering from some other handicap, the nature of which is such as to increase the disability of blindness, and in particular to teach the manual alphabet to the deaf-blind.
- (i) To teach Braille and Moon where required and arrange for a supply of books and periodicals.
- (j) To arrange for recreation by the organisation and conduct of Social Centres, Outings, Whist Drives, etc.
- (k) To endeavour to understand the individual temperament and to encourage latent interest or talent by making arrangements for congenial friendship or educational opportunities.

General: To act as the Blind Person's Friend and helper.

#### (2) Workshop Employment.

 (a) The Council shall continue to arrange for the provision of facilities for the employment of suitable blind persons in special workshops for the blind either directly or under arrangements made with any other local authority for the purposes of Part III of the Act or with a registered voluntary organisation. The existing workshops are situated at Darlington Street East, Wigan. (b) The types of employment and the extent of provision that will immediately be available are as follows :—

Brush Making				 Males	4.
Basket Making				 Males	4.
Mat Making				 Males	2.
Machine Knitting	and	Chair	Seating	 Females	4.
Piano Tuning				 Males	1.

and the types will be increased and the extent improved to meet future requirements as circumstances permit.

(c) Money payments shall be made to blind persons employed in workshops on such basis as the Council shall decide in consultation with any other bodies concerned, and on such other terms and conditions as from time to time the Council may decide.

#### (3) Home Employment.

(a) General.

No provision is made at present but it is intended where necessary to provide facilities under the supervision of the Council either directly through the services of the Council's own staff or in co-operation with appropriate registered voluntary organisations or any other local authority for the purposes of Part III of the Act for the training of blind persons in any suitable trade or occupation and generally to assist them whereby they may be enabled to engage in work on their own account.

In this scheme blind persons in this class are referred to as "home workers." A blind person shall not be admitted to participation in these arrangements unless he is capable of earning such minimum sum a week as may be agreed by or on behalf of the Council from time to time, and of maintaining an average of such earnings over such a period as the Council may approve from time to time.

#### (b) Remuneration.

Money payments shall be made to home workers provided that they are not in receipt of National Assistance grants on such basis as the Council shall decide in consultation with any other bodies concerned.

#### (4) Marketing of Produce.

Facilities through the medium of a retail shop, a sales-van and the workshops will continue to be available to assist in the disposal of produce of blind workers engaged either in workshops or home employment. In so far as these arrangements do not make provision for all the homeworkers concerned the Council shall directly or through the agency of any registered voluntary organisation provide the necessary assistance to enable such persons to dispose of their produce.

# (5) Hostels.

Arrangements will be made under which blind persons engaged in workshops, and other blind persons for whom work or training is provided in pursuance of the Disabled Persons (Employment) Act, 1944, shall be enabled to live in hostels made available by the Council either directly or through the agency of registered voluntary organisations or other local authorities for the purposes of Part III of the Act.

# (6) Employment in Open Industry.

- (a) The Council shall in consultation with the Ministry of Labour and National Service continue to take steps, in appropriate cases, to ensure that suitable work is found for blind persons in open industry, that is to say, under contracts of service or otherwise in places elsewhere than special workshops.
- (b) Where any blind person engaged in work in open industry which he is enabled to perform in consequence of anything done in pursuance of arrangements made under the Blind Persons Act, 1920 and 1938, or Section 29 (4) (d) of the Act of 1948 or under this Scheme, is unable, by reason of his handicap, to earn amounts comparable to those earned by sighted persons in the same occupation, and the Council are satisfied that there are special circumstances justifying such action, the Council may make a money payment to that blind person of such an amount and for such period as the Council may from time to time determine to be appropriate in the particular case.

# (7) General Social Welfare of the Blind.

The Council shall continue to promote the general social welfare of blind persons by the provision of all necessary services either directly or by arrangement with the County Association for the Blind or other registered voluntary organisations, as the Council may from time to time decide, including the taking of such steps as may be necessary to ensure that blind persons are assisted to obtain any general and preventative medical treatment, the provision of embossed literature, social and handicraft centres, facilities for holidays at holiday and rehabilitation homes or elsewhere, pastime occupations, concerts, recreational facilities and lectures and shall provide all such other lawful things whatsoever for the carrying into effect of this Scheme.

Such provision for the teaching of handicrafts, the holding of lectures, social functions, dances and other pastime occupations as are available at the workshops for the blind shall continue to be available pending the provision of a social centre.

# 6. Training Facilities for Blind Persons.

The Council shall continue to take such steps as may be necessary either directly or by arrangement with other local authorities for the purposes of Part III of the Act or registered voluntary organisations to ensure the provision of suitable training under the Education Act, 1944, or under the Disabled Persons (Employment) Act, 1944, for blind persons who are capable of benefitting from such training.

#### 7. Children.

The Council shall continue to take such steps as may be necessary to satisfy themselves that blind children are dealt with under the Education Act, 1944, the National Health Service Act, 1946, or Children Act, 1948, as may be appropriate.

#### 8. Further Development of Welfare Services for the Blind.

The Council, in consultation with registered voluntary organisations and other bodies concerned shall keep under review during the period ending on the 31st March, 1954, and thereafter from time to time examine, the services provided under Sections 29 and 30 of the Act in accordance with the provisions of this Scheme with a view to ascertaining in particular the need for extensions to workshops, the provision of hostel accommodation for blind workers, additional social clubs and recreational facilities and the employment of additional qualified Home Teachers.

In the light of such review or examination the Council shall, with the approval of the Minister of Health, make any adjustments to or extensions of the welfare services for blind persons (not being adjustments or extensions for which provision is made in this Scheme) which the Council may from time to time consider to be necessary or desirable.

#### 9. Blind Persons in Hospitals, etc.

Where a blind person in relation to whom the Council are exercising functions under Section 29 of the Act of 1948 enters a hospital, hostel, home managed by a voluntary organisation or any similar institution not under the management of the Council or any local authority for the purpose of Part III of the Act of 1948, the Council shall use their best endeavours to secure such arrangements with the body managing any such institution as may be considered necessary or expedient with a view to ensuring the continued promotion by the Council of the welfare of the person.

## 10. Scope.

This part of this Scheme shall apply to the Council in relation to the exercise of any of their functions under Section 29 or 30 of the Act of 1948 in accordance with the provisions of this Scheme as respects any blind person ordinarily resident in the area of the Council and to such extent as may be considered necessary or expedient in relation to the exercise of any such functions of the Council as respects any other blind person.

# PART I. B.

### Arrangements for promoting the Welfare of Partially-Sighted Persons.

## 11. Immediate Provision.

The services referred to in Article 13 and 14 shall be provided immediately in relation to partially-sighted persons ordinarily resident in the area of the Council and may be provided in relation to any other partially-sighted persons.

# 12. Definition of Partially Sighted Persons.

For the purposes of this Scheme the expression "partially-sighted person" means a person who is substantially and permanently handicapped by congenitally defective vision or in whose case illness or injury has caused defective vision of a substantial and permanently handicapping character.

# 13. Registration.

The Council shall establish and maintain in such form as is acceptable to the Minister of Health a register, to be known as the "Observation Register", in which partially-sighted persons may be registered and classified.

# 14. General Arrangements.

The Council shall either directly or by arrangement with other local authorities for the purposes of Part III of the Act or registered voluntary organisations, so far as may be practicable and to such extent as may be necessary or desirable regard being had to the particular needs of individual partially-sighted persons, extend to such persons ordinarily resident in the area of the Council, with the necessary modifications, the arrangements detailed in the following provisions of Part I ... A of this Scheme in relation to the provision of welfare services for blind persons :—

- (1) Registration of Partially-Sighted Persons : The provisions of Article 4.
- (2) Home Teachers: The provisions of paragraph (1) of Article 5.
- (3) Workshop Employment: The provisions of paragraphs (2) (a) and (c) or Article 5.
- (4) Home Employment: The provisions of paragraphs (3) (a) and (b) of Article 5.
- (5) Marketing of Produce: The provisions of paragraph (4) of Article 5.
- (6) Hostels: The provisions of paragraph (5) of Article 5.
- (7) Employment in Open Industry: The provisions of paragraph (6) of Article 5.
- (8) General Social Welfare: The provisions of paragraph (7) of Article 5.

- (9) Training Facilities : The provisions of Article 6.
- (10) Children : The provisions of Article 7.
- (11) Partially-Sighted Persons in Hospitals, etc. The provisions of Article 9.
- (12) Accounts : The provisions of Article 3.

## 15. Further Development of Welfare Services for the Partially-Sighted.

The Council shall keep under constant review the services provided in accordance with the preceding provisions of this Part of this Scheme, in consultation with any registered voluntary organisations or other bodies concerned, and shall, with the approval of the Minister of Health, make any adjustments to or extensions of the welfare services for partiallysighted persons (not being adjustments or extensions for which provision is made in this Scheme) which the Council may consider to be necessary or desirable.

# PART II

# Arrangements for promoting the Welfare of Handicapped Classes other than Blind or Partially-Sighted Persons.

16. The Council shall continue to carry out the survey now in progress of the needs of the area of the Council in relation to the provision of appropriate welfare services (including services similar to those provided for in Part I of this Scheme) for classes of handicapped persons, other than the blind and partially-sighted, to whom Section 29 of the Act applies. With a view to meeting these needs account shall be taken in such survey of the welfare services already available to other classes of persons, the results of discussions which have been opened with voluntary organisations and other bodies concerned and any suggestions which the Minister of Health may make to the Council in this connection.

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