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1962

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COUNTY BOROUGH OF WIGAN



*Report*  
on the  
*Health*  
of the  
*County Borough of Wigan*  
1962



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*Report*  
*on the*  
*Health*  
*of the*  
*County Borough of Wigan*  
*1962*

J. HAWORTH HILDITCH,  
Medical Officer of Health.  
Principal School Medical Officer.  
Medical Referee of the Borough Crematorium.



COUNTY BOROUGH OF WIGAN



Report  
on the  
Health  
of the  
County Borough of Wigan  
1962

J. HAZARDON, M.B., F.R.C.S.  
Medical Officer of Health  
Printed and Published by  
Robert Jackson of the Borough Council

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**HEALTH COMMITTEE, 1962****(Appointed 23rd May, 1962)**

Chairman	....	....	Councillor J. T. LYNCH, J.P.	
Vice-Chairman	....	....	Councillor J. BOWDEN	
The Mayor	....	....	Councillor T. MONKS, J.P.	
Alderman	....	....	H. DOWLING, J.P.	
Councillors	....	....	F. CONNOLLY	P. DONNELLY
			J. T. FARRIMOND	C. FOSTER
			MISS A. PEET	MRS. E. NAYLOR
			S. SHERRATT	J. RANKIN
			J. TABERNER	O. SOMERS
Co-opted Members	....		DR. D. W. JOHNSON	MR. J. HEGARTY
			MRS. B. G. HOUGHTON	MRS. C. RAYNOR, J.P.
			Councillor S. TAYLOR	

**STAFF, 1962**

Medical Officer of Health	....	J. HAWORTH HILDITCH, M.B., Ch.B. D.P.H. (Vict.) F.R.S.H.
Deputy Medical Officer of Health	....	*A. SIPPERT M.B., Ch.B., D.P.H.
Assistant Medical Officers		*R. McLEAN BAIN, M.B., Ch.B., D.P.H. *T. L. O'DONNELL, M.B., Ch.B., D.P.H.
Dental Officer	....	*C. F. L. PURSLOW, L.D.S., R.C.S., Eng.
Consultant Obstetric Surgeon		*R. L. HARTLEY, M.D., F.R.C.O.G., F.R.C.S. (E)
Chest Physician	....	*E. H. W. DEANE, M.B., B.S.
Consultant Venereologist	....	*PHILIP S. SILVER, M.R.C.S., L.R.C.P.
Orthopaedic Surgeon	....	*MISS M. F. JOHNSTONE, M.B., Ch.B.
Ophthalmic Surgeon	....	*V. T. LEES, M.B., Ch.B., D.O.M.S.

Public Analyst ..... \*J. GRAHAM SHERRATT, B.Sc., F.R.I.C.

Chief Public Health Inspector J. B. MARSH (*a*) (*b*) (*h*)

Deputy Chief Public Health  
Inspector ..... P. STRAFFORD (*a*) (*b*) (*h*)

Public Health Inspectors .... E. ASPIN (*a*) (*b*)

M. BAMBER (*a*) (from 1.12.62).

R. FARNWORTH (*a*) (*b*) (from 1.3.62).

E. HARRIS (*a*) (*b*) (*h*)

C. JACKSON (*a*) (*b*)

M. H. JAGASIA (*a*) (*b*)

L. J. JONES (*a*) (*b*) (to 31.1.62).

E. MARSDEN (*a*) (*b*) (*h*)

K. PARKIN (*a*) (*b*)

F. REYNOLDS (*a*) (*b*) (*h*)

Senior Health Visitor .... E. M. WRIGHT (*c*) (*d*) (*e*) (*g*)

Health Visitors ..... F. M. L. DAVIES (*c*) (*d*) (*e*) (comm. 3.9.62.)

\*B. I. HIGGINS (*c*) (*d*) (*e*)

K. HUXLEY (*c*) (*d*) (*e*)

C. JACKSON (*c*) (*d*) (*e*) (*g*)

C. V. KILCULLEN (*d*) (*e*) (to 31.7.62).

B. M. MIDDLEHURST (*c*) (*d*) (*e*) (from 1.8.62).

M. E. MILLS (*c*) (*d*) (*e*)

Z. M. VERNON (*c*) (*d*) (*e*) (*f*) (*g*)

M. J. WALMESLEY (*c*) (*d*) (*e*)

Tuberculosis Visitor .... E. CODY (*e*) (*d*)



Supervisor of Midwives	....	....	W. KAY (c) (d)
Midwives :			
E. V. BROWN (c) (d)			C. B. MONAGHAN (c) (d) (from 1.7.62).
M. C. DIX (c) (d)			F. O'DWYER (c) (d)
G. GREGORY (c) (d) (from 1.11.62).			M. QUINN (c) (d)
R. M. HALLIWELL (c) (d) (to 31.10.62)			C. RYDER (c) (d)
D. HITCHEN (c) (d)			L. TURTON (c) (d)
M. P. HURST (c) (d) (to 31.5.62).			P. WAITE (c) (d)
			M. WOODWARD (c)
Ellesmere Road Nursery Matron	....		M. F. LUCAS (d) (f)
Home Nursing Superintendent	....	....	L. MAHER (c) (d) (g)
Hope School Supervisor			J. HANSON
Marylebone Centre Senior Craft Instructor			E. HILTON
Lay Administrative Officer	....	....	G. CREE, D.M.A.
Mental Health Service :			
Senior Mental Welfare Officer	....	....	J. A. PIETRE, B.A.
Mental Welfare Officers	....	....	J. HOUGHTON (from 1.1.62 to 31.12.62).
			E. J. LONG, B.A. (to 30.9.62).
			M. O'DONNELL (to 31.1.62).
			E. I. SHORE (from 13.11.62).
			A. TAYLOR (from 1.3.62).
Welfare Services :			
Senior Assistant	....	....	A. SIMM
Ambulance Service :			
Ambulance Superintendent	....	....	J. MORT.

\* Part-Time Officers.

- (a) Public Health Inspectors Certificate.
- (b) Meat Inspectors Certificate.
- (c) Certificate, Central Midwives Board.
- (d) State Registered Nurse.
- (e) Health Visitors Certificate.
- (f) Registered Fever Nurse.
- (g) Queen's Nurse.
- (h) Smoke Inspectors Certificate.



## INTRODUCTION

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

“Health — a state of complete physical, mental and social well-being and not merely the absence of disease or infirmity.”

*Constitution of the World Health Organisation.*

The practice of public health is not now synonymous with the sanitary or preventive services which were erected to protect the population from the results of folly and lack of foresight during the first Industrial Revolution. It is social medicine in its fullest sense and must be energetically pursued if the population is to protect itself from the consequences of the present advances in Industrial Technology—the space age, the age of electronics—when more than ever before the machine dictates the pace of human endeavour. In this era of automation, pep pills and tranquilisers, growing concern must be felt for the increasing numbers of people suffering from social neurosis, the result of conflicting emotions and loyalties, the inability to use leisure time wisely and the loneliness of existence in an excessively urbanised community, especially in old age.

Medical science has ensured the survival of many who are destined to be handicapped, physically or mentally, for life. It is also ensuring the survival of the majority beyond the ancient concept of man's allotted span. It is the duty of the community to see that this life is meaningful and that the handicapped and the aged have a proper place where they can achieve fulfilment according to their needs and abilities. That this is possible within the framework of existing legislation will be seen from a perusal of the body of the report. Year by year the established services are improved in detail and extended in scope following the trends of advancement of knowledge in this and other countries. New services are planned to meet new situations and opportunity is taken to evaluate previous experiments and to cast out those which have not fulfilled their promise.

The Home Health Services continue to develop and the supportive domiciliary services, some of which are illustrated by photographs in this report, play an increasingly important part. Such an extensive range of health and welfare services are involved that it is not proposed to comment on them in detail in this introduction. Descriptions of the services, including recent developments, appear in the appropriate sections in the body of the report.

The reshaping of the hospital services envisaged in the Ten Year Plan will call for new supporting services or the extension of existing amenities. The availability of finance and trained staff will in the end determine priorities but during the year much thought has gone into the preparation of the local health authority's Ten Year Plan in an effort to ensure that the hospital and local authority services in this area are complementary to each other. Whilst this would be much simpler if the catchment area of the hospital and the boundaries of the local health authority were coterminous, the excellent liaison established at all levels tends to minimise difficulties which might otherwise arise. The points of contact between the services are many and like the well-fitting shoe and the foot which wears it only a degree of patient moulding is required to ensure freedom from friction and disharmony.



It is particularly pleasing to note that improved recruitment and re-organisation of duties of nursing staff has enabled us to attach both health visitors and midwives to certain general practitioners, thus helping to integrate the general practitioner services. We hope that this trend will continue and extend in other directions. We still find large differences in the take-up of local authority supporting services by different groups of general practitioners but no effort is spared to point out the ways in which the local health authority can help the busy practitioner in his day-to-day practice.

Points of interest from the statistical section include yet another increase in the birth rate to 16.59 (15.71), thus strengthening the comments in an earlier report. It is most gratifying to note that there has been a further spectacular fall in the infant mortality rate to 16.04 (21.77 in 1961, 28.42 in 1960) which for the first time is lower than the figure for England and Wales—20.7. Our jubilation must however be tempered by the sobering thought that there were 48 illegitimate babies born during the year, 3.67% of total live births, of which three died—an illegitimate infant mortality rate of 62.5 per thousand. This is not the place to comment upon standards of public morals; suffice it to say that all the services of the Local Authority which are available to married child-bearing women are also available to unmarried mothers-to-be, along with other special supporting services. Their full use would do much to improve the lot of illegitimate babies.

A substantial increase in the stillbirth rate 29.65 (20.54) suggested an investigation as to possible causal factors but beyond confirming that a considerable proportion were due either to ante-partum haemorrhage or gross deformities of the infant's central nervous system, no obvious cause could be put forward. No undue incidence of illness in pregnancy was noted nor was there evidence of exotic medication.

There were eight deaths due to road accidents, four of which involved persons over 65 years of age. The reactions of the elderly are slow and unsure and their eyesight often impaired and uncorrected. Because they do not move in groups at particular times they have no crossing patrols to help them, yet they are at a greater risk than children. Research into the problem of special old persons crossing places is perhaps overdue.

The Maternity and Child Welfare statistics show an increasing use of infant welfare clinics and of ante natal clinics. The special service for premature babies was particularly successful and all babies whose birth weight was over 3lbs. 4ozs. survived, irrespective of whether they were born at home or in hospital. A night rota system has been introduced to enable midwives to lead a more normal social life and to plan their leisure time well in advance. A disturbing feature of the service was the increasing number of early discharges of mother and baby from hospital; almost double the figure for 1961. In some cases discharge was as early as four days after parturition which greatly increases the burden of work for the domiciliary midwives and leaves the mother to spend the greater part of the puerperium at home without the benefit of the Home Confinement Grant. The conflict between the ability of the Boards and Management Committees to provide sufficient beds and the policy of the College of Obstetricians and Gynaecologists to institutionalise at least 70% of births remains to be resolved. Meanwhile the domiciliary services



must be geared to receive more and more early discharges. Some continental countries look upon three or four days as the maximum period of institutional care for the normal case and have ample statistics to prove that mother and child are at no disadvantage. In Holland it is exceptional for a mother to be admitted to hospital to have her baby. Compromise has always been a basic principle of the English way of life. Perhaps early discharge is an expression of this so far as obstetrics is concerned. Certainly, in England, midwifery is a unique example which comes to mind of hospital care being provided on a lavish scale for a normal physiological procedure, regardless of medical or social need.

The field of immunology was highlighted by the flutter of interest in smallpox vaccination which followed isolated outbreaks elsewhere in the country but even this did little to improve the lamentably low figure of those vaccinated. Conflicting stories reported in the daily press concerning the usefulness or otherwise and the degree of safety of the procedure tend to undermine the public confidence and undo years of patient campaigning. The considerable outbreak of poliomyelitis on the East Coast heralded the freeing of oral vaccine for use amongst certain groups of the population. Great importance was attached to this in the Department as it was considered to offer an unparalleled opportunity for an exercise in which the fullest co-operation of staff and public were required if a full coverage of the groups to be protected were to be achieved. The vaccine was offered in the first instance to all children under school leaving age and the response was most gratifying. There was a 90% acceptance rate for school children and the work was successfully completed in three groups of three days at monthly intervals. The success of the venture was due no less to the staff of the schools, from headteacher to caretaker, than to the personnel of the Health Department, almost every member being involved in some way, and I pay tribute to their zeal. No case of poliomyelitis occurred during the year.

We were fortunate in being able to secure the services of the Central Council for Health Education to run a short In-service Training Course on some aspects of health education. This was greatly appreciated by the staff who attended and the whole project was linked to a short anti-smoking campaign aimed particularly at school children but including an open public meeting which attracted attendance from leaders in the public and commercial life of the town. Latest medical research shows that most of the people who do not smoke come from non-smoking families. In view of this it is essential that parents set an example by giving up the habit or at least not smoking cigarettes when with the children. After hearing the facts concerning smoking and ill-health, particularly from bronchitis and lung cancer, many children are distressed when their parents persist in chain smoking and one rather unexpected result of the campaign was that some children asked their parents to stop smoking. All who have charge of children should set a good example and particularly young parents with young children.

The community mental health services continue to function in close collaboration with the general practitioner and hospital services. The Department was associated with a combined research project sponsored by the Manchester Regional Hospital Board and conducted by the Department of Social and Preventive Medicine of the University of Manchester. The Borough Mental Health Service was one of three in the North-west receiving special mention in the following terms :



“ ‘Community care’ is often used loosely to mean keeping out of hospital. In these three boroughs it means adequate facilities for daily care and training as well as other services and in such circumstances community care may be a real alternative to admission to hospital.”

The report of work in the Welfare Services Section needs little expansion. Care of the aged continues and the hostel system now contains 13 residents over 90 years of age. The average age of residents is 79 years. Short term care to relieve families looking after their aged relatives is increasing in popularity.

The decision, as revealed in the Hospital Ten Year Plan, not to increase the present overall number of geriatric beds in this area, is taken in the knowledge that during the next twenty years there will be a considerable increase in the number of aged persons in the population. The Local Authority's Ten Year Plan seeks to compensate for this with the provision of more hostel beds and units of single flatlet accommodation strategically situated and provided with common rooms and warden service.

The integration of the hospital and community services for the aged will depend largely on co-operation and co-ordination of effort between hospital geriatric and psychiatric services, the National Assistance Board and the Local Authority.

The Chief Public Health Inspector has reported in detail on the work of the environmental and sanitary services. As in previous years Clean Air and Slum Clearance have been major preoccupations. Few local authorities in the North-west have achieved so much as Wigan in the clearing of unfit houses and we are now in a position to see an end to our first slum clearance programme.

As an adjunct to the replacement of old houses with newly-built ones the Council has wisely embarked upon an extensive programme of house improvement. Three Improvement Areas have been designated and a start made on this work. It is pleasing to note that, unlike many other towns, there is now no problem in Wigan from houses in multiple occupation.

Continued up-grading of conditions in the private slaughterhouses in the Borough has persisted and all are now equipped with stunning pens. The maintenance of a full complement of meat inspectors has enabled us to continue a full service of inspection in the slaughterhouses and as in previous years 100% inspection of the carcasses slaughtered has been maintained.

In conclusion I must express my thanks to the staff for their loyal co-operation and for the good work which they have done throughout the year. Similarly to the Chief Officers and Technical Advisors of other Departments for their help from time to time and lastly to the Chairman and members of the Health Committee for the interest and enthusiasm with which they have received the many problems which have been brought to them throughout the year.

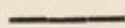
J. HAWORTH HILDITCH,

*Medical Officer of Health.*

HEALTH OFFICE,  
MUNICIPAL BUILDINGS,  
LIBRARY STREET,  
WIGAN.

JULY, 1963.

## Section I



# Natural and Social Conditions of the Area



## GENERAL

Area in acres	.....	5,083
Rateable Value of the Borough, 31st December, 1962	....	£994,064
Sum Represented by a Penny Rate	....	£4,050
Registrar General's estimated population on 1st July, 1962 (on which figure statistics in this report are based)	....	78,910
Number of inhabited houses on the 31st December, 1962 (according to the Rate books)	....	24,781
Number of marriages solemnised within the Borough during 1962		688

The Borough of Wigan forms a considerable part of the valley of the River Douglas. The river, which 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 above sea level. Water taken from the river feeds 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 nor 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 69 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 this 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 manufacture of coal mining equipment, iron and steel working, cotton spinning and weaving and the manufacture of clothing and telephone equipment.

More recently the Reed Corrugated Paper Group have opened an extensive factory for the production of paper board packing cases.

The development of the Lamberhead Green trading estate brought some light industry to the town but much more work of this sort is required. The

Ministry of Labour Remploy Factory caters for the disabled who are able to perform useful work.

The Continuance of a high level of productivity in the building industry and the very extensive civil engineering programme associated with the construction of the new motorway has ensured full employment in the associated trades.

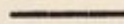
The number of elderly citizens in the community is increasing. Many young married people, particularly in Social Classes III and IV, are moving out to the less congested dormitory areas on the periphery of the town. From here many return daily to seek their living in Wigan and invariably they use the facilities available in the Borough for education, recreation and shopping.

If we are to continue to attract the younger element two services are essential—good housing and suitable work. The former is in the hands of the local authority and the progressive policy of building flats and houses including some houses for sale to the public should help considerably. Attracting new light industry is more difficult and may need the stimulus of direction from the Government Departments and Industrial Development Committees concerned.





## Section 11



## Statistics

## VITAL STATISTICS, 1961-62

	1961	1962
Area (acres) .....	5,083	5,083
Population (Estimated by Registrar General) ....	78,910	78,910
Live Births : Males 658	Total ..... 1,240	1,309
Females 651		
Rate per 1,000 population .....	15.71	16.59
Illegitimate Live Births per cent. of total live births ....	4.03	3.67
Stillbirths : Number .....	26	40
Rate per 1,000 total live and still births ....	20.54	29.65
Total Live and Still Births .....	1,266	1,349
Infant Deaths (Deaths under 1 year) .....	27	21
Infant Mortality Rates :		
Total Infant Deaths per 1,000 total live births ....	21.77	16.04
Legitimate Infant Deaths per 1,000 legitimate live births	21.85	14.27
Illegitimate Infant Deaths per 1,000 illegitimate live births .....	20.00	62.50
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births) ....	14.52	9.93
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births .....	12.10	8.40
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births ....	32.39	37.81
Maternal Mortality (including abortion) :		
Number of Deaths .....	—	—
Rate per 1,000 total live and still births .....	—	—
Adjusted Birth Rate per 1,000 Population (Area comparability factor 0.98) ....	15.40	16.26
Ratio of local adjusted rate to national rate .....	0.88	0.90
Birth Rate for England and Wales .....	17.4	18.0
Deaths of Infants under 1 day old .....	11	6
Ditto. 1 year (legitimate) .....	26	18
Ditto. 1 year (illegitimate) .....	1	3
Excess of Registered Births over Deaths .....	142	317
Deaths : Males 519	Total ..... 1098	992
Females 473		
Death Rate per 1,000 population .....	13.91	12.57
Adjusted Death Rate per 1,000 population (Area comparability factor 1.19) ....	16.55	14.96
Ratio of local adjusted rate to national rate .....	1.38	1.26
Death Rate for England and Wales .....	12.0	11.9
Infantile mortality rate per 1,000 births for England and Wales .....	21.4	20.7



### CAUSES OF DEATH WITH DEATH RATES, 1962

DISEASE							No. of Deaths	Rate
1.	Tuberculosis, Respiratory	...	...	...	...	...	5	.06
2.	Tuberculosis, Other	...	...	...	...	...	—	—
3.	Syphilitic Disease	...	...	...	...	...	1	.01
4.	Diphtheria	...	...	...	...	...	—	—
5.	Whooping Cough	...	...	...	...	...	—	—
6.	Meningococcal Infections	...	...	...	...	...	1	.01
7.	Acute Poliomyelitis	...	...	...	...	...	—	—
8.	Measles	...	...	...	...	...	—	—
9.	Other Infective and Parasitic Diseases	...	...	...	...	...	4	.05
10.	Malignant Neoplasm Stomach	...	...	...	...	...	21	.27
11.	„ „ Lung, Bronchus	...	...	...	...	...	22	.28
12.	„ „ Breast	...	...	...	...	...	12	.15
13.	„ „ Uterus	...	...	...	...	...	8	.10
14.	Other Malignant and Lymphatic Neoplasms	...	...	...	...	...	77	.98
15.	Leukaemia, Aleukaemia	...	...	...	...	...	6	.08
16.	Diabetes	...	...	...	...	...	1	.01
17.	Vascular Lesions of Nervous System	...	...	...	...	...	118	1.50
18.	Coronary Disease, Angina	...	...	...	...	...	185	2.34
19.	Hypertension with Heart Disease	...	...	...	...	...	14	.18
20.	Other Heart Disease	...	...	...	...	...	166	2.10
21.	Other Circulatory Disease	...	...	...	...	...	41	.52
22.	Influenza	...	...	...	...	...	2	.03
23.	Pneumonia	...	...	...	...	...	40	.51
24.	Bronchitis	...	...	...	...	...	82	1.04
25.	Other Diseases of Respiratory System	...	...	...	...	...	15	.19
26.	Ulcer of Stomach and Duodenum	...	...	...	...	...	5	.06
27.	Gastritis, Enteritis and Diarrhoea	...	...	...	...	...	3	.04
28.	Nephritis and Nephrosis	...	...	...	...	...	13	.17
29.	Hyperplasia of Prostate	...	...	...	...	...	7	.09
30.	Pregnancy, Childbirth, Abortion	...	...	...	...	...	—	—
31.	Congenital Malformations	...	...	...	...	...	5	.06
32.	Other Defined and Ill-Defined Diseases	...	...	...	...	...	99	1.25
33.	Motor Vehicle Accidents	...	...	...	...	...	8	.10
34.	All Other Accidents	...	...	...	...	...	21	.27
35.	Suicide	...	...	...	...	...	9	.11
36.	Homicide and Operations of War	...	...	...	...	...	1	.01
							992	12.57

# REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH, 1962

CAUSES	Sex	All Ages	0+	1+	5+	15+	25+	45+	65+	75+
ALL CAUSES ... ..	M. F.	519 473	8 13	2 3	2 2	3 2	31 14	154 88	159 147	160 204
1. Tuberculosis, Respiratory ...	M. F.	4 1	— —	— —	— —	— —	— 1	2 —	1 —	1 —
2. Tuberculosis, Other ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
3. Syphilitic Disease ... ..	M. F.	1 —	— —	— —	— —	— —	— —	— —	1 —	— —
4. Diphtheria ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
5. Whooping Cough ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
6. Meningococcal Infections ...	M. F.	1 —	1 —	— —	— —	— —	— —	— —	— —	— —
7. Acute Poliomyelitis ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
8. Measles ... ..	M. F.	— —	— —	— —	— —	— —	— —	— —	— —	— —
9. Other Infective and Parasitic Diseases ... ..	M. F.	2 2	1 1	1 —	— —	— —	— —	— —	— 1	— —
10. Malignant Neoplasm, Stomach	M. F.	12 9	— —	— —	— —	— —	— 1	3 2	6 3	3 3
11. Malignant Neoplasm, Lung, Bronchus... ..	M. F.	21 1	— —	— —	— —	— —	1 —	10 —	6 1	4 —
12. Malignant Neoplasm, Breast	F.	12	—	—	—	—	1	4	4	3
13. Malignant Neoplasm, Uterus	F.	8	—	—	—	—	—	3	2	3
14. Other Malignant and Lymphatic Neoplasms ...	M. F.	45 32	— —	— —	1 1	— —	4 2	11 11	16 15	13 3
15. Leukaemia, Aleukaemia ...	M. F.	5 1	— —	— —	— —	— —	1 —	1 1	1 —	2 —
16. Diabetes ... ..	M. F.	— 1	— —	— —	— —	— —	— —	— —	— 1	— —
17. Vascular Lesions of Nervous System ... ..	M. F.	51 67	— —	— —	— —	— —	— —	10 16	21 24	20 27
18. Coronary Disease, Angina ...	M. F.	119 66	— —	— —	— —	— —	8 1	57 13	36 31	18 21



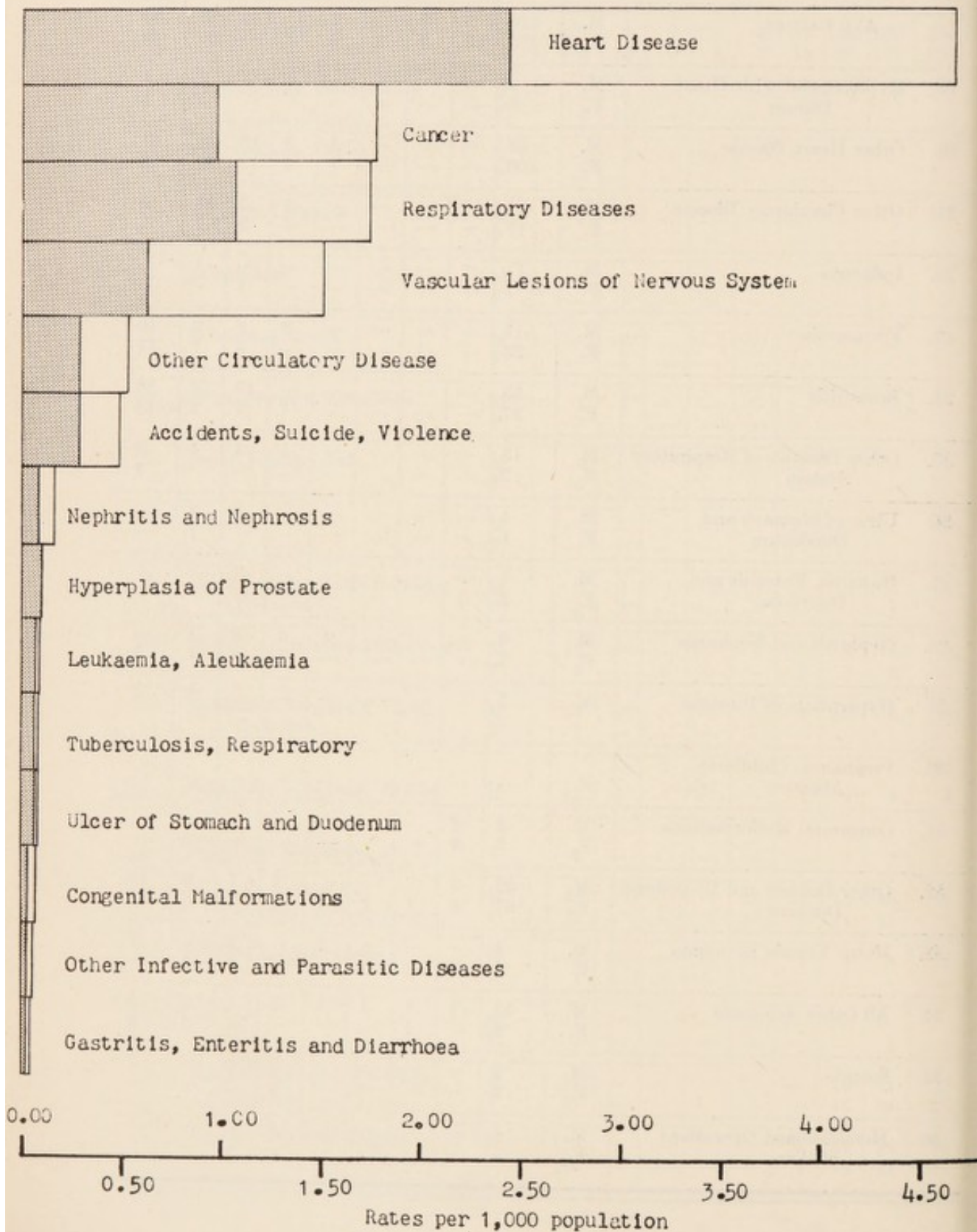
CAUSES				Sex	All Ages	0 +	1 +	5 +	15 +	25 +	45 +	65 +	75 +
ALL CAUSES ... ..				M. F.	519 473	8 13	2 3	2 2	3 2	31 14	154 88	159 147	160 204
19.	Hypertension with Heart Disease ... ..			M. F.	6 8	— —	— —	— —	— —	— —	1 —	— 7	5 1
20.	Other Heart Disease ... ..			M. F.	66 100	— —	— —	— —	1 1	3 3	16 12	15 22	31 62
21.	Other Circulatory Disease ... ..			M. F.	24 17	— —	— —	— —	— —	1 —	3 3	11 7	9 7
22.	Influenza ... ..			M. F.	1 1	— —	— —	— —	— —	— —	— 1	1 —	— —
23.	Pneumonia ... ..			M. F.	17 23	— —	— 1	— —	— —	2 —	2 4	3 7	10 11
24.	Bronchitis ... ..			M. F.	55 27	— —	— —	— —	— —	— 1	17 4	22 9	16 13
25.	Other Diseases of Respiratory System ... ..			M. F.	13 2	— —	— —	— —	— —	1 —	4 —	4 —	4 2
26.	Ulcer of Stomach and Duodenum ... ..			M. F.	4 1	— —	— —	— —	— —	— —	1 —	3 1	— —
27.	Gastritis, Enteritis and Diarrhoea ... ..			M. F.	1 2	— 1	— —	— —	— —	— —	1 1	— —	— —
28.	Nephritis and Nephrosis ... ..			M. F.	6 7	— —	— —	— —	1 —	1 1	3 2	1 1	— 3
29.	Hyperplasia of Prostate ... ..			M.	7	—	—	—	—	—	—	3	4
30.	Pregnancy, Childbirth, Abortion ... ..			F.	—	—	—	—	—	—	—	—	—
31.	Congenital Malformations ... ..			M. F.	2 3	2 3	— —	— —	— —	— —	— —	— —	— —
32.	Other Defined and Ill-Defined Diseases ... ..			M. F.	32 67	3 8	— 1	— 1	— 1	1 2	7 8	6 5	15 41
33.	Motor Vehicle Accidents ... ..			M. F.	4 4	— —	— —	— —	1 —	— —	2 1	— 3	1 —
34.	All Other Accidents ... ..			M. F.	13 8	1 —	1 1	1 —	— —	4 —	1 —	2 3	3 4
35.	Suicide ... ..			M. F.	6 3	— —	— —	— —	— —	3 1	2 2	— —	1 —
36.	Homicide and Operations of War ... ..			M. F.	1 —	— —	— —	— —	— —	1 —	— —	— —	— —



# **PRINCIPAL CAUSES OF DEATHS AT ALL AGES, 1962**

SHADED PORTION — MALES

UNSHADED PORTION — FEMALES



## Crude Death Rates for Wigan During the last Ten Years

1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
12.02	11.37	11.06	11.02	11.53	11.57	11.07	12.04	13.91	12.57

### INQUESTS AND UNCERTIFIED DEATHS (Wigan Residents Only)

The number of inquests held during 1962 was 74, and the following verdicts have been recorded :—

1. Natural Causes	....	....	....	....	....	....	....	....	36
2. Accidents :									
Road	....	....	....	....	....	....	....	....	8
Falls : Home	....	....	....	....	....	....	....	....	5
Hospital	....	....	....	....	....	....	....	....	1
Burns and Scalds	....	....	....	....	....	....	....	....	4
Colliery	....	....	....	....	....	....	....	....	1
Gas	....	....	....	....	....	....	....	....	1
Operation	....	....	....	....	....	....	....	....	1
Struck by stone causing tetanus	....	....	....	....	....	....	....	....	1
Crushed in excavator, due to fall of clay	....	....	....	....	....	....	....	....	1
Startled by dog, causing thrombosis	....	....	....	....	....	....	....	....	1
Fracture of skull, knocked down in fight	....	....	....	....	....	....	....	....	1
3. Suicide :									
Gas	....	....	....	....	....	....	....	....	5
Poisoning	....	....	....	....	....	....	....	....	2
Hanging	....	....	....	....	....	....	....	....	1
Electrocution	....	....	....	....	....	....	....	....	1
4. Open :									
Drowning	....	....	....	....	....	....	....	....	4
									<hr/> 74 <hr/>

There was no uncertified death in 1962.

**DEATHS FROM CERTAIN RESPIRATORY DISEASES**  
**Comparative Rates for the Past Five Years**

			<b>Bronchitis</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	88	88	69	101	82
Rates	....	....	1.08	1.09	0.85	1.28	1.04

			<b>Pneumonia</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	38	35	26	53	40
Rates	....	....	0.47	0.43	0.32	0.67	0.51

			<b>Pulmonary Tuberculosis</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	10	9	9	7	5
Rates	....	....	0.12	0.11	0.11	0.09	0.06

			<b>Cancer of the Lung, Bronchus</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	27	40	41	45	22
Rates	....	....	0.33	0.49	0.50	0.57	0.28

			<b>Other Diseases of Respiratory Organs</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	22	21	11	22	15
Rates	....	....	0.27	0.26	0.14	0.28	0.19

			<b>Total from All Respiratory Causes</b>				
			1958	1959	1960	1961	1962
Deaths	....	....	185	193	156	228	164
Rates	....	....	2.27	2.38	1.92	2.89	2.08

<b>CANCER</b>					
<b>Deaths 1896-1962</b>					
	No.	Rate		No.	Rate
1896—1900	137	0.44	1936—1940	586	1.42
1901—1905	179	0.53	1941—1945	609	1.54
1906—1910	223	0.49	1946—1950	669	1.59
1911—1915	276	0.61	1951—1955	717	1.72
1916—1920	308	0.72	1956—1960	743	1.82
1921—1925	347	0.76	Year 1961	149	1.89
1926—1930	410	0.93	Year 1962	140	1.78
1931—1935	538	1.28			



# CANCER

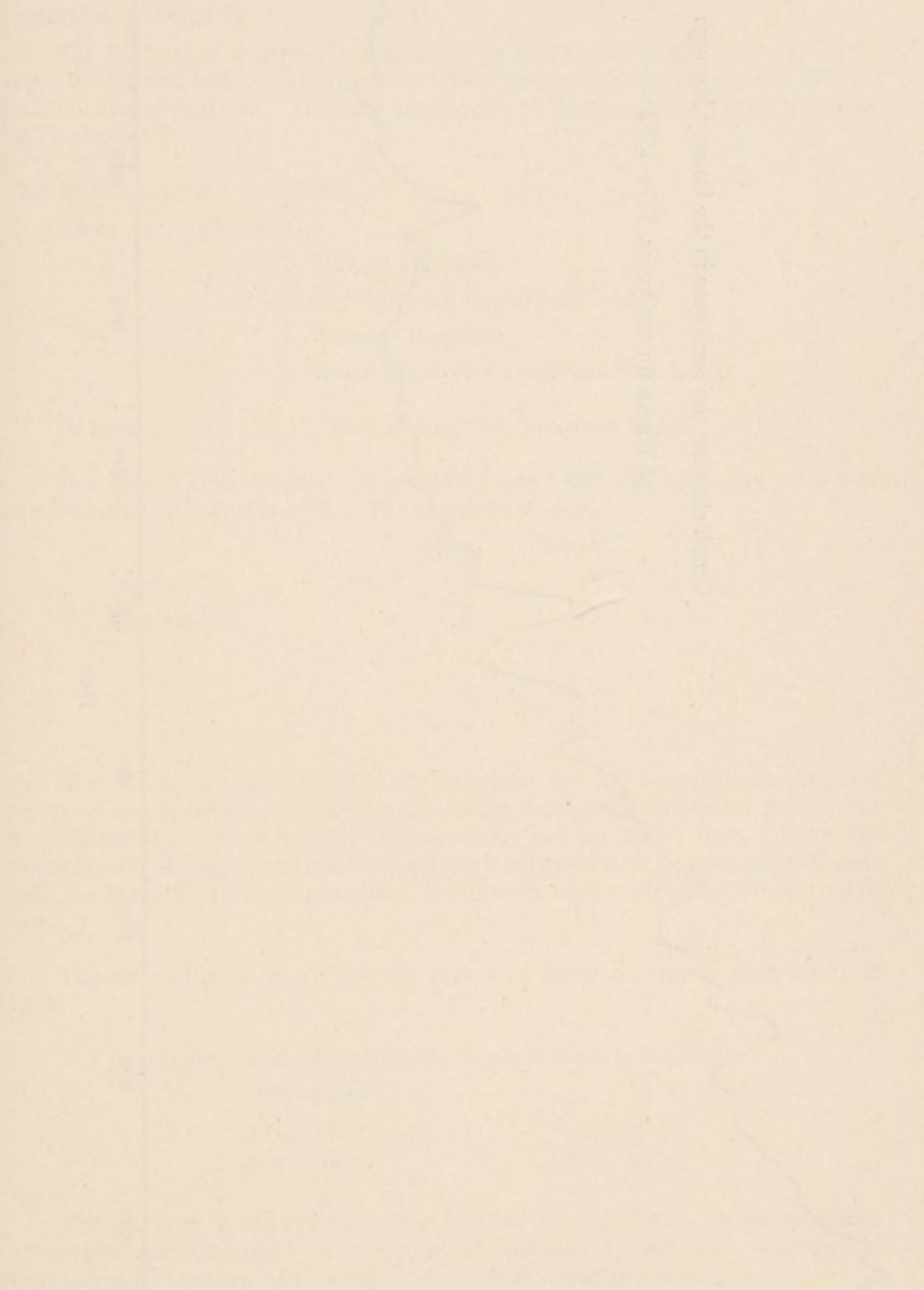
Localisation of Disease, Number of Deaths and Rate per 1,000  
Population Annually for the past Ten Years.

	1953		1954		1955		1956		1957		1958		1959		1960		1961		1962	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Uterus ...	9	.11	3	.04	5	.06	6	.07	6	.07	7	.09	6	.07	6	.07	4	.05	8	.10
Stomach and Duodenum ...	34	.41	28	.34	17	.21	30	.37	28	.34	33	.41	40	.49	29	.36	23	.29	21	.27
Breast ...	20	.24	14	.17	11	.13	17	.21	11	.13	14	.17	11	.14	14	.17	13	.17	12	.15
Lung, Bronchus	29	.35	20	.24	25	.30	27	.33	38	.47	27	.33	40	.49	41	.50	45	.57	22	.28
Other Sites...	64	.77	57	.69	71	.86	51	.62	52	.64	52	.64	85	1.05	72	.89	64	.81	77	.98
Total Deaths from Cancer ...	156	1.88	122	1.48	129	1.56	131	1.60	135	1.65	133	1.64	182	2.24	162	1.99	149	1.89	140	1.78
Total Deaths All Causes ...	1001	12.02	944	11.37	915	11.06	905	11.02	942	11.53	941	11.57	959	11.82	975	12.04	1098	13.91	992	12.57

## ANALYSIS OF LIVE PREMATURE BIRTHS, 1962

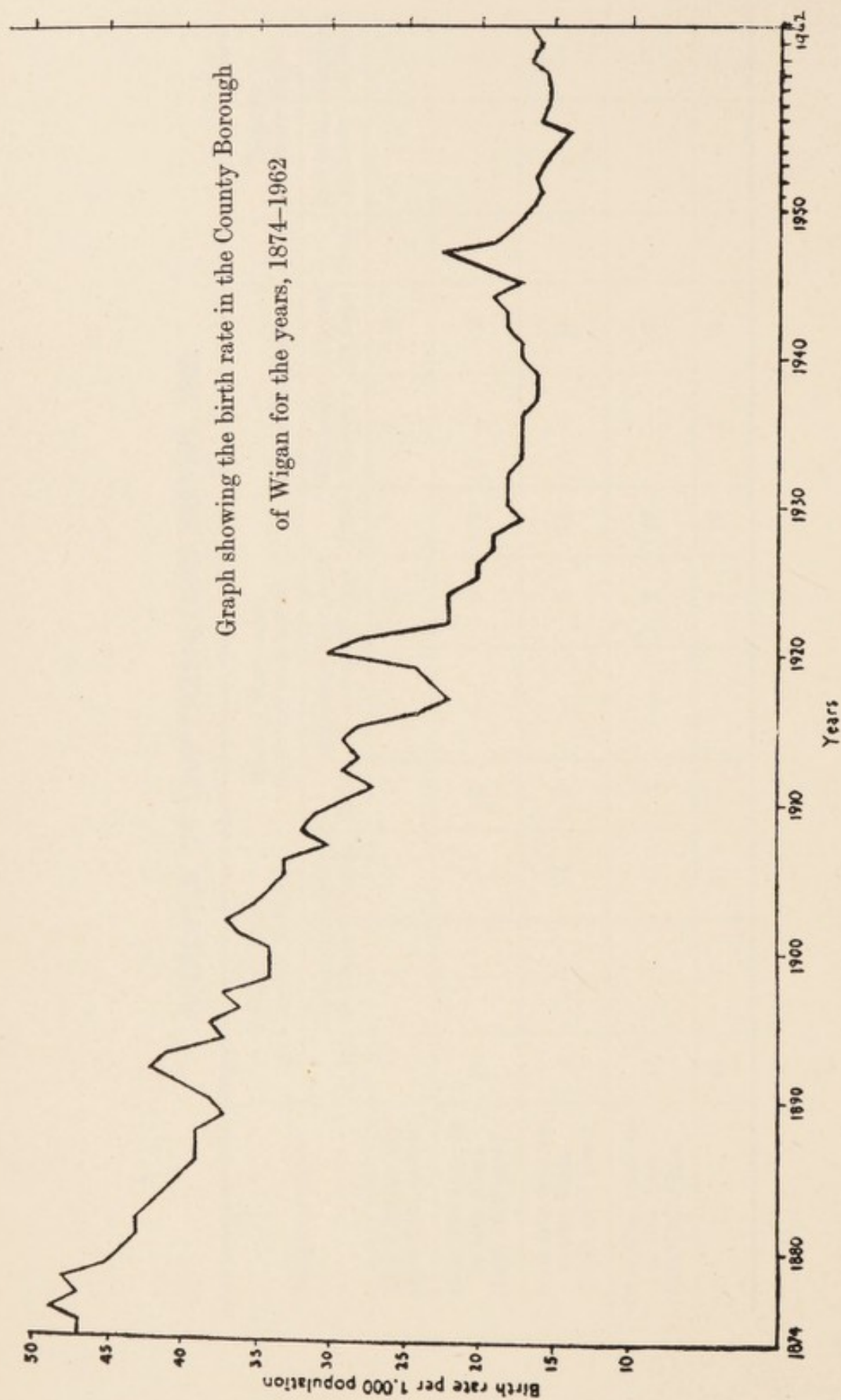
Weight at Birth	Born at Home and Nursed at Home			Born at Home and transferred to Hospital			Born in Hospital			Born in Maternity Home		
	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days	Total	died under 24 hours	survived 28 days
3lbs. 4 ozs. or less (1500 gms. or less)	1	1	—	1	—	1	7	2	3	—	—	—
Over 3lbs. 4ozs. up to 4lbs. 6 ozs. (1500-2000 gms.)	—	—	—	3	—	3	8	—	8	—	—	—
Over 4lbs. 6ozs. up to 4lbs. 15ozs. (2000-2250 gms.)	4	—	4	1	—	1	18	—	18	—	—	—
Over 4lbs. 15ozs. up to 5lbs. 8ozs. (2250-2500 gms.)	17	—	17	2	—	2	46	—	46	—	—	—
	22	1	21	7	—	7	79	2	75	—	—	—

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## INFANTILE AND MATERNAL MORTALITY

### Infantile Mortality

The number of deaths of children under one year was 21, a rate of 16.04 per 1,000 births, and of children over 1 year and under five years 5, or .06 per 1,000 of the population. (In 1961 there were 27 deaths under 1 year, a rate of 21.77 per 1,000).

The deaths occurred as follows :—

HOME :	HOSPITALS :
5	12 Billinge Hospital
	2 Royal Albert Edward Infirmary
	1 Whelley Hospital
	1 Royal Children's Hospital, Manchester

Of these, 11, *i.e.*, 52.4% died during the first week of life.

The NEO-NATAL DEATH RATE (deaths per 1,000 live births on or before the 28th day of life) was 9.93. The numbers were :—

	Male	Female	Total
Legitimate ....	3	7	10
Illegitimate ....	1	2	3
	<hr/>	<hr/>	<hr/>
	4	9	13
	<hr/>	<hr/>	<hr/>

The fall in the infant mortality rate and the neo-natal death rate is a result of the considerable decrease in deaths during the neo-natal period due to prematurity. Much of this improvement has no doubt been due to the closer liaison and co-operation between the local authority, general practitioners and the hospital which has resulted in an even higher standard of ante-natal care.

The STILL-BIRTH RATE for the year was 29.65 compared with 20.54 in 1961.

The average rates for the previous 30 years were as follows :—

1931-1940	....	51.5
1941-1950	....	37.2
1951-1960	....	31.24

The increase in the stillbirth rate in 1962 results from a higher incidence of severe malformations of the central nervous system and antepartum haemorrhage (unassociated with other factors such as toxæmia).

There is no apparent cause for the increase in central nervous system malformations. These do not appear to be related to the outbreak of Rubella in 1962. Only one stillbirth can be accounted for by the drug Thalidomide. There were two stillbirths due to severe Rh. incompatibility.

**INFANTILE AND MATERNAL MORTALITY—continued**

The PERINATAL RATE for the year was 37.81 compared with 32.39 in 1961.

The perinatal mortality rate has increased in 1962 due to the increase in the number of stillbirths.

The average rates for the previous 30 years were as follows :—

1931-1940	....	....	....	79.9
1941-1950	....	....	....	58.9
1951-1960	....	....	....	46.71

**Maternal Mortality**

There were no maternal deaths in the year.

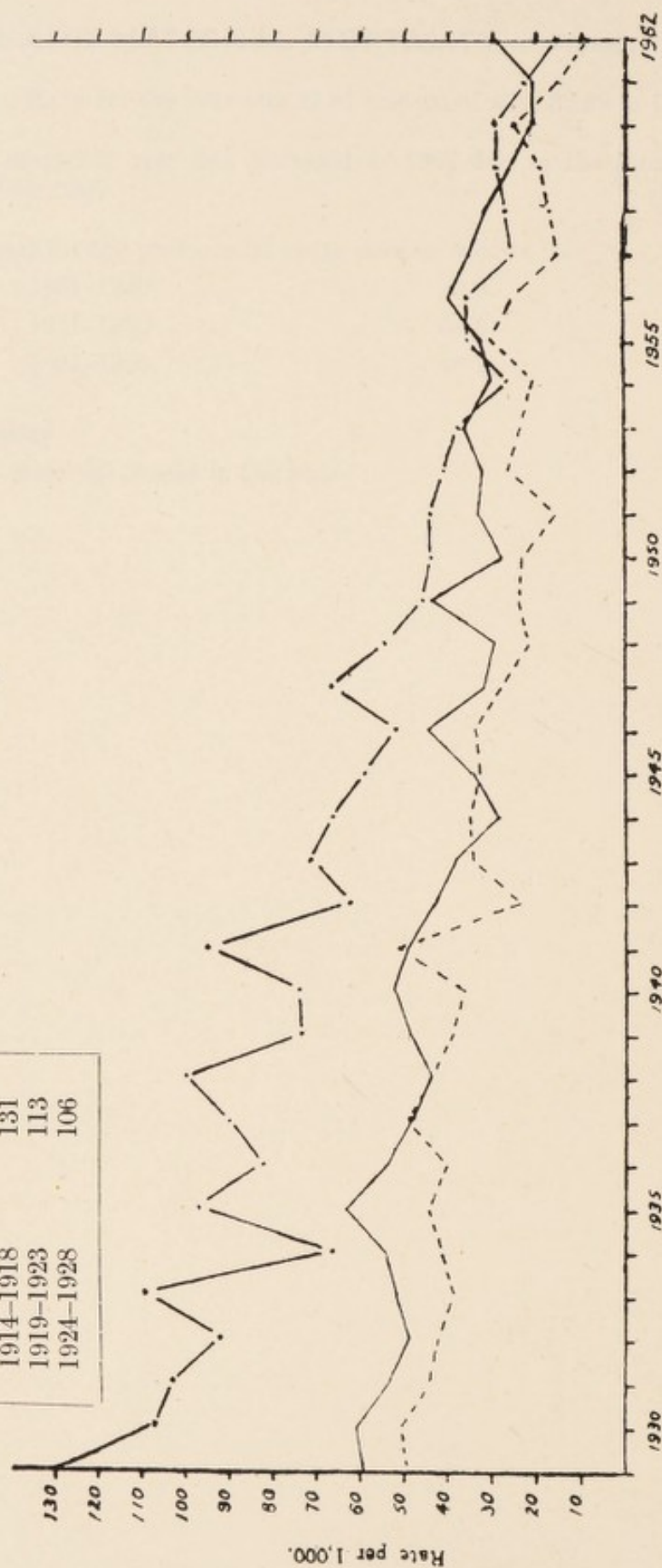




Infant Mortality Rate	
5-year periods, 1874-1928	
1874-1878	200
1879-1883	177
1884-1888	171
1889-1893	184
1894-1898	175
1899-1903	184
1904-1908	165
1909-1913	160
1914-1918	131
1919-1923	113
1924-1928	106

GRAPH showing the INFANT MORTALITY AND STILL BIRTH RATES in the County Borough of Wigan for the years 1929-1962

- . - . - Infant Mortality Rate (per 1,000 live births).  
 - - - - - Neo-Natal Rate (per 1,000 live births).  
 ——— Still Birth Rate (per 1,000 live and still births).



# **INFANT MORTALITY, 1962** Deaths under 1 year of age

No.	Sex	Age	Class No.	Cause of Death
1	M.	6 mths.	6	I (a) Meningococcal Septicaemia
2	M.	2 wks.	9	I (a) Toxaemia (b) Oral thrush
3	F.	1 mth.		I (a) Viral Encephalitis
4	F.	8 mths.	27	I (a) Acute Gastro-Enteritis
5	M.	15 mins.	31	I (a) Asphyxia Pallida (b) Congenital heart lesions.
6	F.	3 days		I (a) Congenital deformity (Spina Bifida)
7	F.	1 day		I (a) Foetal abnormality (b) Spina Bifida
8	M.	2 mths.		I (a) Hydrocephalus. II Spina Bifida Meningomyelocele
9	F.	1 wk.		I (a) Oesophageal Atresia
10	M.	12 hrs.	32	I (a) (a) Anoxia (Cerebral) (b) Labour difficulty (c) Prolapsed cord
11	F.	9 mths.		I (a) Bronchopneumonia (b) Fibrocystic disease of pancreas
12	F.	2 days		I (a) Prematurity
13	F.	18 hrs.		I (a) Prematurity
14	F.	5 mins.		I (a) Atelectasis (b) Prematurity
15	M.	2 days		I (a) Cerebral haemorrhage
16	F.	7 hrs.		I (a) Cerebral haemorrhage (b) Rapid labour
17	F.	35 mins.		I (a) Cerebral haemorrhage (b) Tentorial tear
18	M.	1 mth.		I (a) Hepatic failure (b) Galactosaemia
19	F.	1 day		I (a) Hyaline membrane disease
20	F.	2 mths.		I (a) Intracranial haemorrhage (b) Mala Syndrome
21	M.	3 mths.	34	I (a) Bronchopneumonia associated with a scald on forehead caused by boiling water from a kettle.

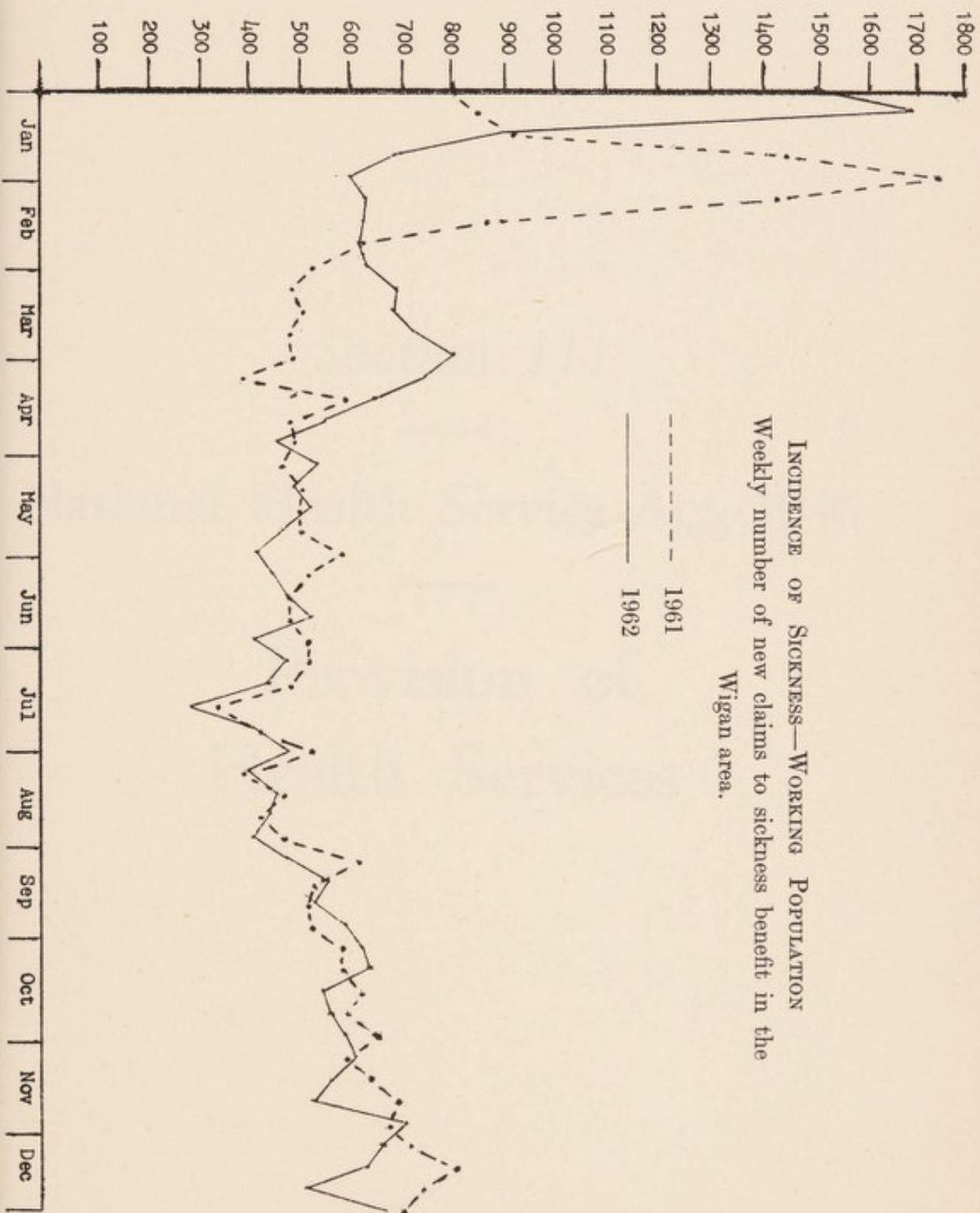


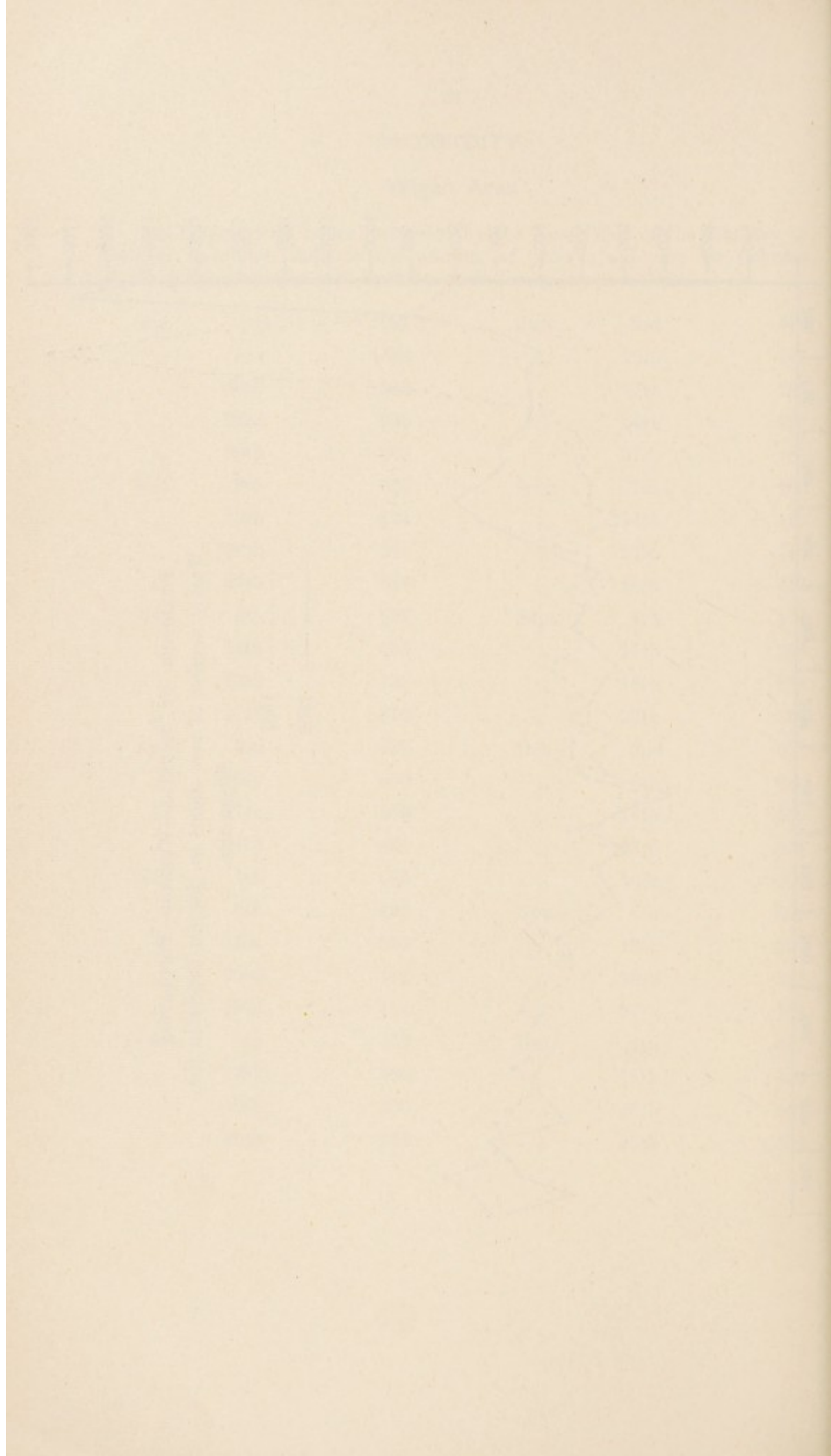
**MORBIDITY****Wigan Area**

The figures given below, compiled by the local office of the Ministry of National Insurance, indicate the number of persons applying for sickness benefit (first certificate only) week by week during the year 1962.

Jan.	2nd	....	1521	July	3rd	....	479
"	9th	....	1686	"	10th	....	448
"	16th	....	902	"	17th	....	297
"	23rd	....	693	"	24th	....	424
"	30th	....	608	"	31st	....	485
Feb.	6th	....	634	Aug.	7th	....	402
"	13th	....	631	"	14th	....	455
"	20th	....	624	"	21st	....	445
"	27th	....	647	"	28th	....	415
Mar.	6th	....	697	Sept.	4th	....	477
"	13th	....	693	"	11th	....	559
"	20th	....	735	"	18th	....	538
"	27th	....	810	"	25th	....	595
April	3rd	....	750	Oct.	2nd	....	621
"	10th	....	650	"	9th	....	630
"	17th	....	559	"	16th	....	550
"	24th	....	461	"	23rd	....	565
May	1st	....	545	"	30th	....	594
"	8th	....	498	Nov.	6th	....	609
"	15th	....	529	"	13th	....	559
"	22nd	....	471	"	20th	....	538
"	29th	....	418	"	27th	....	708
June	5th	....	452	Dec.	4th	....	667
"	12th	....	480	"	11th	....	636
"	19th	....	530	"	18th	....	507
"	26th	....	422	"	25th	....	668

INCIDENCE OF SICKNESS—WORKING POPULATION  
Weekly number of new claims to sickness benefit in the  
Wigan area.







*Section III*

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**National Health Service Act, 1946**

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**Provision of  
Health Services**

## CARE OF EXPECTANT AND NURSING MOTHERS AND CHILDREN UNDER SCHOOL AGE

The undermentioned Centres are open on the days and at the times stated :—

Centre	Days Open
WIGAN CENTRAL CLINIC, Health Centre, Millgate.	Infant and Young Children's Clinic : Wednesday afternoons 1-30 to 4-0 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 : On one Thursday each month at 2 p.m. Dental Clinic for expectant and nursing mothers and young children : Tuesday afternoon. Class for expectant mothers : Friday afternoons at 2 p.m.
PEMBERTON CLINIC : 15, Billinge Road.	Infant and Young Children's Clinic : Monday afternoons, 2 to 4 p.m. Toddler Clinic : Tuesday mornings, 9-45 to 10-30 a.m. Ante-Natal Clinic : Thursday afternoons at 2 p.m. A Consultant attends on one Thursday of each month.
SCHOLES CLINIC : St. Catharine's Mission, Platt Lane.	Infant and Young Children's Clinic : Friday afternoons, 2 to 4 p.m.
WORSLEY MESNES CLINIC : Methodist Church, Poolstock Lane.	Infant and Young Children's Clinic : Wednesday mornings, 10 a.m. to 12 noon.
SPRINGFIELD CLINIC : St. Andrew's Church House, Woodhouse Lane.	Infant and Young Children's Clinic : Tuesday afternoons, 2 to 4 p.m.
LAMBERHEAD GREEN CLINIC : Methodist Church, Fleet Street.	Infant and Young Children's Clinic : Thursday mornings, 9-30 to 11-30 a.m.
GOOSE GREEN CLINIC : Methodist Church, Northumberland Street.	Infant and Young Children's Clinic : Thursday afternoons, 2 to 4 p.m.
MARSH GREEN CLINIC : St. Barnabas Church, Marsh Green.	Infant and Young Children's Clinic : Wednesday afternoons, 1-30 to 3-30 p.m.
ORTHOPAEDIC CLINIC : Health Centre, Millgate.	Open each Monday, Wednesday, and Thursday. Surgeon attends twice monthly. Cases from Ince, Hindley, Standish Aspull, Haigh, Shevington and Platt Bridge also attend.



### Ante-Natal Care

General practitioners are now booked to undertake the ante-natal care of expectant mothers in more than 96% of home confinements. A changing pattern is emerging at the clinics where there is an increasing trend towards the more educational aspect of maternal welfare, including the instruction of mothers in matters relating to the health of themselves and their families and giving them other information designed to develop the best psychological approach to the actual delivery.

### Ante-Natal Clinics

Three ante-natal clinic sessions are held each week—two at the Central Clinic, Millgate, and one at Billinge Road, Pemberton. The Deputy Medical Officer of Health is present at the sessions and a Consultant attends at each centre one session per month.

	WIGAN CENTRE		PEMBERTON	
	Weekly Clinic	Consultant Clinic	Weekly Clinic	Consultant Clinic
Number of Primary Cases attending Clinic during year	468	4	153	48
Total number of attendances	2004	248	812	343

### Post-Natal Clinics

For post-natal care one session per month is held and this is attended by a Consultant. Domiciliary cases where no doctor was engaged and cases delivered in hospital may attend for examination. 107 new cases were examined during the year and there were 32 return cases, a total of 139 attendances.

### Care of Expectant Mothers

A mothercraft training and exercise class for expectant primiparae is held at the Central Clinic each week. It is conducted by the Health Visitors. 49 classes were held during the year 1962 and 1,154 attendances were made by mothers.

Chest X-ray of expectant mothers and the taking of blood samples for testing for the Rhesus factor, the Wasserman reaction and the haemoglobin content are all part of the ante-natal care undertaken at Clinics. Iron therapy in the form of Ferrous Gluconate tablets is available and a supply of welfare orange juice, vitamins and welfare foods may also be obtained. Maternity outfits are provided for domestic confinements and are under the charge of the non-medical supervisor of midwives. The midwife engaged is responsible for ensuring that each of the patients receives an outfit.

### Care of Unmarried Mothers

There is one residential home in Wigan for expectant and nursing unmarried mothers. It is under the control of the Liverpool Diocesan Church Council but is not restricted to Church of England members and the local authority pay a substantial amount yearly towards its maintenance. The local health authority clinics are available to those resident in the Home and advantage is taken of these facilities. Full ante-natal care is given to residents from the time of admission. The Home is visited regularly by a Health Visitor and this ensures liaison with the staff.



### Child Welfare Centres

The local authority has eight child welfare centres, at which one clinic is held each week. Each is in charge of a Health Visitor and an Assistant Medical Officer attends the clinic sessions. During the year the numbers of persons attending were as follows :—

CLINIC	Children			Total	Primary Cases	Cases examined by medical attendant	Mothers Attend'g
	under 1 year	over 1 and under 2	2 and under 5				
Central ... ..	2251	607	874	3732	496	839	2923
Scholes ... ..	1355	504	933	2792	181	647	2167
Pemberton ... ..	1372	279	585	2236	258	651	1810
Worsley Mesnes ... ..	807	204	262	1273	107	178	1124
Springfield ... ..	2057	529	981	3567	262	747	2880
Fleet Street ... ..	1043	233	453	1729	161	330	1488
Goose Green ... ..	488	140	199	827	75	170	714
Marsh Green ... ..	1172	341	587	2100	246	255	1677
	10545	2837	4874	18256	1786	3817	14783

#### Comparative attendances for the last 5 years :

INFANTS :	1958	1959	1960	1961	1962
Total Attendances ...	14456	15629	15833	16051	18256
Primary Attendances...	1056	994	1243	1468	1786

#### EXPECTANT MOTHERS :

##### Central :

Weekly Clinic ...	1744	2029	1813	1731	2004
Consultant Clinic ...	192	199	171	194	248

##### Pemberton :

Weekly Clinic ...	1299	1062	839	720	812
Consultant Clinic ...	197	316	241	263	343

No Consultant attends at the child welfare centres but cases are referred from them to the Paediatrician at the Royal Albert Edward Infirmary. A Health Visitor attends the Paediatric Clinic at the Infirmary weekly as liaison officer and adviser on the social aspects of the cases. Cases are also referred to the Infirmary for orthoptic treatment.

An Orthopaedic Surgeon attends the Central Clinic in Millgate alternate Mondays. Breathing exercises and other treatment are given on Monday, Wednesday and Thursday each week by the Physiotherapist.

The screening of vulnerable children for deafness is carried out weekly by a specially-trained Health Visitor. Children failing to pass the screening tests are referred to the Medical Officers, two of whom have attended a course on screening tests for deafness in young children at the Department of Education for the Deaf at Manchester University.

A Toddler Clinic is held each Tuesday morning at Billinge Road Clinic. An Assistant Medical Officer attends the session to which selected children are referred by Health Visitors. This is a very successful clinic.



## Child Guidance

Dr. A. Gage, Consultant Child Psychiatrist with the Manchester Regional Hospital Board, attends for two sessions each week at the Central Clinic, Millgate. In addition to Dr. Gage an educational psychologist and a psychiatric social worker are employed at the clinic. School and pre-school children from Wigan and the surrounding districts are seen and this is proving a very welcome additional service for the area. During the year three young Wigan children under school age were seen at the clinic.

## Distribution of Welfare Foods

Ministry of Health Welfare Foods are distributed from the Welfare Foods shop which is situated in the Municipal Buildings and from the various Maternity and Child Welfare clinics in the Borough. In addition proprietary branded milk foods and vitamin supplements are also sold. Details are given below.

### Ministry of Health Welfare Foods :

National Dried Milk	....	....	....	25,994 tins
Orange Juice	....	....	....	17,531 bottles
Cod Liver Oil	....	....	....	2,485 bottles
Vitamin A and D tablets	....	....	....	3,256 packets

### Proprietary brands of foods and vitamin supplements :

Proprietary milks	....	....	....	32,999 packs
Vitamin supplements	....	....	....	5,775 packs
Rose Hip Syrup	....	....	....	6,303 bottles
Cereals	....	....	....	6,310 packets
Malt Extract	....	....	....	1,153 packs

Only 25,994 bottles of orange juice were sold during the year compared with 51,593 in 1960, which was the last full year before the price was increased on the 1st June, 1961. Only 2,485 bottles of cod liver oil were sold in 1962, compared with 6,601 supplied free in 1960. 3,256 packets of vitamin A and D tablets were sold in 1962; 6,609 were supplied free in 1960. There has been no comparable increase in the sale of proprietary brand vitamin supplements and rose hip syrup. Are mothers and young children now being deprived of the vitamins they need?

## Dental Care and Treatment

I am indebted to the Principal School Dental Officer for the following summary of the dental work carried out during the year for the Maternity and Child Welfare Section :—

The arrangements for the dental examination and treatment of expectant mothers and children under school age, for the year under review, has been limited due to staff shortage.

One session each week, however, was allocated for this work and mothers attending the Ante-Natal Clinic were urged to attend for dental inspection. In some cases there was a reluctance to accept dental treatment but advice was given and in other instances there was a favourable response.

In addition to the inspection carried out at The Elms Nursery, children of pre-school age were referred for advice and treatment, by the Assistant Medical Officers and Health Visitors.

### Analysis of Priority Dental Care :

	Examined	Needing Treatment	Treated	Made Dentally Fit
Expectant and Nursing Mothers ...	116	52	31	28
Children under five ... ..	32	26	25	23



## Forms of Dental Treatment provided :—

	Sealings and Gum Treatmt	Filling	Silver Nitrate Treat- ment	Crowns or Inlays	Extrac- tions	General Anaes- thetics	Dentures provided		Radio graphs
							Full Up. or Lr.	Part Up. or Lr.	
Expectant and Nursing Mothers	15	22	—	—	13	—	—	—	—
Children under Five ... ..	5	6	7	—	14	—	—	—	—

In addition to the above 245, children under five years of age were inspected under the School Dental Service.

**DAY NURSERY**

There is accommodation for 67 children and the nursery is open Monday to Friday, 7 a.m. to 7 p.m. It is provided primarily for children of mothers who go out to work and also for children whose parents are temporarily unable to care for them.

An Assistant Medical Officer attends the nursery at regular intervals to supervise the health of the children.

Attendances fluctuate considerably and are particularly affected by outbreaks of infectious diseases. Another factor which has had some bearing on the number of children attending has been the unemployment position in the area. Over the whole year, however, the average daily attendance was 51 compared with 48 in the previous year.

**Nursery and Child Minder's Regulations Act, 1948**

Two new applications for registration as Child Minders were approved during the year. There were at the end of 1962 three registrations for a total of 20 children. Regular inspections are carried out by the departmental staff to ensure that the provisions of the Act are complied with.

**FAMILY PLANNING CLINIC**

The Authority was one of the pioneers in the dissemination of information regarding infertility and the spacing of families, and grants the use of the premises in Millgate to the Wigan Branch of the Family Planning Association. An evening session is held once each week and is well attended, the average attendances being 69 per session compared with 65 per session in 1961. This is the highest average attendance figure recorded since the Clinic opened in 1951. For lay staff the Clinic relies on voluntary workers from the Association. In addition specially trained women doctors and nurses are employed at each session. The service, although not in any way advertised in the public press is still increasing in popularity. There were 445 new patients during the year. There is no doubt that the clinic is contributing greatly to the sum of social medicine undertaken by the authority. The professional and voluntary workers deserve the highest praise for their efforts.



## DOMICILIARY MIDWIFERY

The staff employed at the end of the year was one non-medical Supervisor, 11 whole time municipal midwives, and one part-time midwife.

The total number of cases attended by them during the year was 538, compared with 550 in 1961. Although the doctor was engaged in 96% of the cases he was present at the delivery of only 7% of the cases engaged.

Booking for confinement in hospital is restricted to certain categories of patients, *i.e.*, where there is some obstetrical abnormality, for primiparae who seek admission, for cases where there is some associated medical condition and for those whose home conditions are unsuitable. The supervisor of midwives visits the homes of all who apply on social grounds and there is good co-operation in this direction between the hospital, the general practitioners and the clinics.

Home confinement continues to be the choice of many mothers and 38% of the births occurred in the patient's own home.

In 1962 a night rota system for midwives was introduced. Three midwives are on duty each night and attend all calls within the Borough. The team of three midwives remain on night duty for a whole week and can then expect no further night calls for three weeks. Calls during the night are made to the Ambulance Station and the Control Assistant contacts the appropriate midwife. The arrangements have worked very satisfactorily and they do enable midwives to enjoy a more normal home life for three weeks in four.

Besides attending the cases confined at home the midwives have been called upon to nurse where necessary cases of early discharge from hospital. There were 326 such cases during the year, some of which were discharged as early as 4 days after delivery.

Irrespective of whether the doctor is engaged the midwife must make regular ante-natal visits to her patients and 4,416 such visits were made in 1962. After delivery the midwife attends her patient for a minimum of 10 days and for a longer period if circumstances require it.

The midwives are on duty by rota at the ante-natal clinics. This helps to keep them up-to-date in modern methods and also gives them an opportunity of having their clinical findings confirmed.

Midwives working in domiciliary practice are now attending ante-natal clinics run by General Practitioners in their own surgeries. Owing to the pressure of work it has not been possible to extend this service to more than four General Practitioners. This scheme has been received with enthusiasm by the General Practitioners and midwives and it is hoped when staffing conditions permit to extend it further.

At the ante-natal clinics samples of blood were taken, 155 for Wasserman reaction, 275 for the Rhesus factor and 917 for haemoglobin estimation.

### Medical Aid

By the rules of the Central Midwives Board, midwives are required to send for medical aid under conditions and for reasons which are specified. Medical aid was summoned in 191 cases, 25 of which were for conditions arising during the ante-natal period. In 104 cases medical advice was sought for the mother alone, in 36 cases for child alone, and 51 cases for both mother and child. The general practitioner had been engaged in 168 cases.



### **Analgesia and Anaesthesia**

Both Gas and Air Analgesia and Trilene Analgesia are provided by the Department and all the municipal midwives are qualified to administer them.

The outfits are available at the Clinic and they are transported to and from the homes of the patients by the midwife if she has a car, or by the Ambulance Service.

During the year Gas and Air was administered in 317 cases and in 48 cases Trilene was used.

All the midwives are instructed in the use of Pethilorfan and it was administered in 317 cases during 1962.

Two midwives attended a refresher course during the year.

The Authority provides district training for pupil midwives taking Part II of the C.M.B. Course. 9 students received training during the year.

### **Emergency Obstetrical Unit**

By arrangement with the Wigan and Leigh Hospital Management Committee a mobile Obstetrical Unit based on Billinge Hospital is available for cases of obstetrical emergency occurring within the Borough. The unit, composed of an obstetrician and an experienced hospital nurse, along with equipment for blood transfusion, is transported to the home by the Ambulance Service. One call was made upon this service during the year, and had a satisfactory outcome.

### **Care of Premature Infants**

The number of premature infants (*i.e.*, weighing  $5\frac{1}{2}$  lbs. or less at birth) notified during the year was 108; of these 29 were born at home and 79 in hospital.

The early care of premature infants born at home is undertaken by the Supervisor and the midwife engaged for the confinement.

The arrangement is that on receiving information of the birth the Supervisor takes over responsibility for the case and the midwife works under her direction. Visits are paid daily or more often if necessary, special attention being given to the feeding and handling of the baby. Special equipment in the form of draught-proof cots with bedding and hot water bottles, an oxygen resuscitator and baby clothing are provided.

Daily record charts are made out for each infant and these are made available to the doctor attending the cases.

The intensive visiting is continued during the first month or until such time as the baby has attained normal standards. By these means the mother is given every opportunity of learning how to handle and tend the infant.

During the year 40 premature babies received this concentrated attention. The results are very good and fully justify the time devoted to them.

There is a premature baby unit at Billinge Hospital under the control of the Consultant Paediatrician. Close liaison is maintained with the Department, especially when babies are about to be discharged to home and specialised nursing is continued where necessary.

### **Retrolental Fibroplasia**

No case was reported during 1962.

### **Neo-Natal Cold Injury**

One case was reported during 1962. Each midwife is supplied with a thermometer registering to 70°F. to facilitate the diagnosis of this condition.

### **Ophthalmia Neonatorum**

No case has been notified during the year.

### **Transport of Midwives**

Car allowances are made to ten midwives who use their own motor cars whilst on approved duties. They travelled an aggregate of 13,836 miles in the year.

Midwives without motor transport use the Corporation's bus service or the ambulance service.

### **Maternity Homes**

The Christopher Home, administered by the Wigan and Leigh Hospital Management Committee, is the only Nursing or Maternity Home within the Borough. Six beds are available for maternity cases and during the year there were 53 Wigan births in the Home.



## HEALTH VISITING

Summary of visits during the year 1962 :—

No. of primary visits to births	1,332
„ visits to infants under one year	6,380
„ „ infants over one year and under two years	2,590
„ „ infants over two and under three years	2,157
„ „ infants over three and under four years	1,623
„ „ infants over four and under five years	1,388
„ „ expectant mothers	76
„ „ cases of infectious disease	16
„ „ <i>re</i> deaths under one year	23
„ „ still births	43
„ „ aged persons	468

The establishment of Health Visitors is 10, but only 8 full time and one part-time were in post at the 31st December, 1962.

Since February 1960, routine screening for phenylketonuria has been carried out by health visitors in child welfare clinics and in the home. Children born in the borough are given a simple test to detect phenylketonuria, which is known to be one of the causes of brain damage. 1044 children were tested during the year.

The work of these all-purpose social visitors continues to widen in scope and will inevitably increase with the continued increase in the aged population. Emphasis is now being placed on health education ; the problem of the aged, especially those living at home ; the prevention of break-up of families and the problems of pre-school handicapped children.

The importance of mothercraft is now being increasingly recognised and its teaching is one of the duties of the Health Visitor. During the year, besides the talks at clinics and in the homes a course of 6 lectures was given to the senior girls in five schools. These proved very successful.

A step towards greater collaboration with general practitioners was taken during the year when three Health Visitors began to work with them in their areas. The scheme is experimental but is progressing satisfactorily. The Health Visitor works under the direction of the doctor and visits cases selected by him. This is proving an extremely valuable link between the general practitioners and the Department.

The weekly Out-patient Paediatric Clinic at Wigan Infirmary is attended by a Health Visitor. (See page 30.)

## THE CHILDREN ACT, 1948

A close liaison exists between the Health Office and the staff of the Children's Department. Prior to the closing of the residential nursery weekly visits were made by Assistant Medical Officers of Health who are also available for consultation and medical examination of all children in the care of the authority.



## **CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES**

The local authority implemented the recommendations contained in circular 78/50 and designated the Medical Officer of Health, as the officer responsible for liaison and co-ordination in matters affecting children neglected or ill-treated in their own homes.

The Council also appointed the Chairmen and Vice-Chairmen of the Children's, Education, Estates and Health Committees to determine questions of a special nature on the subject of the circular at elected representative level.

During the year it has not been found necessary to call this Committee but many cases have been dealt with at officer level with encouraging results. In particular I would acknowledge the active co-operation of Mr. Hughes of the N.S.P.C.C. and the timely help of the W.V.S. who have assisted with the provision of clothes and bedding on many occasions.

## **PREVENTION OF BREAK-UP OF FAMILIES**

A working committee was set up in October, 1961 to deal with this problem. Officials representing all the Social Health and Welfare Services both Local Authority and voluntary attend. The meetings are held at intervals to co-ordinate policy and to minimise multiple visiting by social workers which can prove confusing to the family concerned. Liaison is maintained between the members of the committee to effect continued help to the families.

## **HOME NURSING**

The Home Nursing Service has continued to function from the Nurses Home, New Market Street, although we have been no more successful in recruiting resident nurses this year than in previous years. Only the Superintendent and her deputy have been resident during the year, and the deputy left on 31st December to take up an appointment with another authority.

Patients continue to be visited two or three times daily when necessary and a nurse is on duty 6 - 11 p.m. to give sedatives prescribed by the general practitioner and to make the patients comfortable for the night.

Advantage has been taken of the hospital scheme for admitting patients of long standing illness at regular intervals for a period of six weeks thus temporarily relieving relatives.

During the year disposable syringes have been used by the home nurses. These have proved to be extremely useful to the nurses, particularly in homes where facilities for sterilisation are virtually non-existent.

The extra services available, *i.e.*, loan of nursing equipment, laundry service, home help service and "Meals on Wheels" continue to be appreciated by many patients.

During the year the four Austin Seven cars covered 29,609 miles and the average consumption of petrol was 34.8 miles per gallon. Essential user car allowances were approved for two nurses who travelled a total of 4,448 miles on official journeys using their own vehicles.

At the end of the year the establishment was one Superintendent, one Deputy Superintendent, 11 whole-time nurses and one part-time nurse. Two of the whole-time staff are male nurses.

The following is a record of work done during 1962 :—

No. of cases on the books on 1st January, 1962	....	....	....	392
No. of new cases during 1962	....	....	....	1,572
No. of visits paid by the nurses	....	....	....	52,051

No. of cases ceased to be visited :—

Now convalescent	....	....	....	528
Removed to hospital	....	....	....	260
Deaths	....	....	....	161
Other reasons	....	....	....	608
			—	1,557

No. of cases remaining on the books on the 31st December, 1962 .... 407

A classification of cases attended during 1962 will be found on pages 39–42.



**Classification of Cases**  
**Table 1 — All Ages**

Tuberculosis of Respiratory System	16
Tuberculosis, other forms	2
Malignant Neoplasms	60
Benign and unspecified neoplasms	28
Diabetes mellitus	31
Vascular lesions affecting central nervous system	140
Cataract	1
Acute otitis media	8
Arteriosclerotic and degenerative heart disease	323
Other diseases of circulatory system	180
Tonsillitis	29
Tracheotomy	—
Infuenza	14
Pneumonia	46
Bronchitis	209
Quinsy	7
All other respiratory diseases	68
Appendicitis	9
Hernia of Abdominal Cavity	3
Laparotomy	5
Gastrectomy	2
Gastrostomy	1
Resection of Oesophagus	1
Cholecystectomy	5
Diseases of gall bladder and biliary ducts	23
Other diseases of digestive system	25
Diseases of genital organs	6
Prostatectomy	7
Supra-pubic drainage	1
Diseases of uterus	42
Hysterectomy	2
Complications of pregnancy	2
Post caesarian (from 7th day)	2
Post natal	5
Nephrectomy	4
Nephrotomy	2
Miscarriage	1

Cystotomy .....	2
Infections of the skin :	
Boils .....	11
Abscesses : Breast .....	5
Others .....	25
Cellulitis .....	3
Carbuncles .....	7
Eczema .....	3
Scabies .....	1
General Rashes .....	1
Arthritis and Rheumatism .....	58
Other conditions :	
Constipation, septic areas, bedsores, debility, etc. ....	310
Accidents :	
Fractures .....	7
Scalds .....	1
Burns .....	8
Injuries due to falling .....	5
Industrial Injuries .....	3
Senility.....	84
Preparation for X-ray .....	120
Patients dead on nurses' arrival .....	5

Table 11 — Aged 65 Years or Over

	1961			1962		
	Male	Female	Total	Male	Female	Total
Tuberculosis, respiratory .....	2	—	2	3	—	3
Tuberculosis, other forms .....	—	—	—	1	1	2
Malignant neoplasms .....	15	12	27	12	18	30
Benign and unspecified neoplasms ....	2	4	6	3	9	12
Diabetes Mellitus .....	5	20	25	3	14	17
Vascular lesions affecting central nervous system .....	25	37	62	35	22	57
Arteriosclerotic and degenerative heart disease .....	107	45	152	80	100	180
Other diseases of circulatory system .....	31	46	77	30	50	80
Diseases of digestive system .....	—	—	—	1	3	4
Pneumonia .....	9	2	11	8	6	14
Bronchitis .....	83	43	126	34	18	52
Other diseases of respiratory system	7	4	11	3	4	7
Rheumatism .....	—	4	4	1	7	8
Arthritis .....	13	11	24	5	16	21
Varicose ulcers .....	3	6	9	4	7	11
Phlebitis .....	—	—	—	1	1	2
General rashes on body .....	—	—	—	1	1	2
Scabies .....	—	—	—	1	—	1
Cellulitis .....	—	—	—	—	—	—
Abscesses, Boils, Carbuncles .....	6	4	10	1	3	4
Bedsore .....	2	1	3	2	2	4
Senility, Constipation, Debility, Neurasthenia .....	33	49	82	37	40	77
Injuries due to falls .....	—	1	1	1	—	1
Fractures .....	1	2	3	1	2	3
Burns .....	—	1	1	—	2	2
Scalds .....	—	1	1	—	—	—
Supra-pubic drainage.....	1	—	1	—	—	—
Prostatectomy .....	8	—	8	2	—	2
Gastrectomy .....	—	—	—	—	—	—
Hysterectomy .....	—	—	—	—	—	—
Cholecystectomy.....	2	6	8	1	—	1
Diseases of the uterus .....	—	42	42	—	24	24
Preparation for X-ray .....	18	18	36	25	16	41
Cataract .....	—	1	1	—	2	2
Herniotomy .....	2	—	2	—	2	2
Laparotomy .....	—	1	1	2	—	2



Table III (a) — Children Under 5 years

Abscesses	....	....	....	....	....	....	....	....	5
Anaemia	....	....	....	....	....	....	....	....	6
Bronchitis	....	....	....	....	....	....	....	....	14
Burns	....	....	....	....	....	....	....	....	1
Constipation and Colic	....	....	....	....	....	....	....	....	6
Otitis Media	....	....	....	....	....	....	....	....	1
Pneumonia—Bronchial	....	....	....	....	....	....	....	....	2
Thrush	....	....	....	....	....	....	....	....	1
Tonsillitis	....	....	....	....	....	....	....	....	1

Table III (b) — Schoolchildren

Anaemia	....	....	....	....	....	....	....	....	2
Appendicitis	....	....	....	....	....	....	....	....	2
Burns	....	....	....	....	....	....	....	....	1
Bronchitis	....	....	....	....	....	....	....	....	2
Constipation	....	....	....	....	....	....	....	....	5
Carcinoma Spine	....	....	....	....	....	....	....	....	1
Diabetes	....	....	....	....	....	....	....	....	1
Otitis Media	....	....	....	....	....	....	....	....	2
Pneumonia	....	....	....	....	....	....	....	....	1
Pleurisy	....	....	....	....	....	....	....	....	1
Tonsillitis	....	....	....	....	....	....	....	....	2
Septic knee, hands	....	....	....	....	....	....	....	....	3

Table IV — Injection Therapy, 1962

Asthma	Adrenalin, Silbephyeline	....	....	....	185
Anaemia	Anahaemin, Imferon, Examin, Hepastab,	}			12,850
Neuritis	Riboflavin, Campolon, Forte, Cytamen,				
Rheumatism	Neo-hepatex, Actha				
Bronchitis, Chest Infection	} Penicillin				2,507
Pneumonia, Catarrh					
Diabetes	Insulin	....	....	....	5,801
Cardiac	Mersalyl, Mercardon, Thiomerin	....	....	....	3,852
Cancer	Hormones	....	....	....	227
Tuberculosis	Streptomycin and Dimycin	....	....	....	1,228
Narcotics and } Sedatives	Morphia, Pethidine, Largactol, Omnipon, Scopolamine, Novocaine and other sedatives	....	....	....	1,391
Vaccines	....	....	....	....	52
Anti-Tetanus Serum	....	....	....	....	2
Others	....	....	....	....	152
					<hr/> 28,247 <hr/>

CARE OF THE HANDICAPPED



A LIFT ON THE WAY



CARE OF THE AGED



A REGULAR CALL



DINNER IS SERVED



## NURSING EQUIPMENT

The following equipment is available on loan at a nominal charge :—

Hospital Bedsteads	Lifting Poles
Air Beds	Bed Tables
Air Rings	Rubber Sheets
Backrests	Urinals
Bed cradles	Wheelchairs
Bedpans	Crutches
Eneuresis Alarms	Zimmer Lift

The service is in constant demand and is greatly appreciated.

### Bedding Loan Service

A service to loan certain articles of bedding for the use of bedfast incontinent persons is available.

The patient is supplied with clean bedding—sheets, drawsheets, pillow cases, pyjama jackets—as required.

The soiled articles are collected for laundering and replaced by clean bedding at regular intervals.

A charge of 6d. per week is made for the service.

No. of cases on 1st January, 1962	....	....	....	....	....	4
No. of new cases during the year	....	....	....	....	....	21
No. of cases ceased	....	....	....	....	....	20
No. of cases on 31st December, 1962.	....	....	....	....	....	5

## VACCINATION

### Small Pox

The following vaccinations were carried out during 1962.

	Under 1 year	1 year	2-4 yrs. inclusive	5-14 yrs. inclusive	Over 15yrs.	TOTAL
Primary ....	167	110	103	482	1494	2356
Re-vaccination	—	1	21	130	1206	1358
TOTALS ....	167	111	124	612	2700	3714

The figures show that there is still great apathy among parents to have their young children protected by vaccination. During the early part of the year when outbreaks of smallpox occurred in other parts of the country many adults besieged the department with requests for vaccination for themselves. This is reflected in the total of 2,700 vaccinations given to persons over 15 years of age.

There was a change of policy in infant vaccination following a recommendation of the Standing Medical Advisory Committee of the Ministry of Health. Where practicable infants are now vaccinated between the ages of one and two years. This accounts for a fall in the number of children under one year of age vaccinated but all the figures relating to infant vaccination still make very sorry reading.



## Poliomyelitis

Oral Poliomyelitis vaccine became available during the year. This was offered to all children under school leaving age. The response was most gratifying and there was a 90% acceptance rate for school children.

Details of vaccinations and re-inforcing doses given during the year were :

### SALK VACCINE :

(a) Persons completing a course of two injections :—

Children born 1943-1962	....	....	....	....	352
Young persons born 1933-42	....	....	....	....	40
Persons born before 1933	....	....	....	....	60
					<hr/> 452

(b) Number of persons receiving third injections.... 301

(c) Number of school children receiving fourth injections .... 32

### ORAL VACCINE :

(a) Persons completing a course of three doses :—

Children born 1943-1962	....	....	....	....	14,071
Young persons born 1933-1942	....	....	....	....	853
Persons born before 1933	....	....	....	....	1,405
					<hr/> 16,329

(b) Reinforcing doses given to persons who had previously completed a course with Salk vaccine .... 2,132

## B.C.G. Vaccination

Routine protection of thirteen-year-old school children :—

No. in 13 year age group	....	....	....	....	1,078
No. for whom consent was obtained	....	....	....	....	688
Percentage of acceptances	....	....	....	....	64%
No. of Mantoux-Negative	....	....	....	....	580
No. of Mantoux-Positive	....	....	....	....	108
Percentage Positive	....	....	....	....	15.7%
No. Vaccinated	....	....	....	....	580
No. who had Chest X-ray	....	....	....	....	95
No. where X-ray showed active tuberculosis	....	....	....	....	—
No. where X-ray showed lung abnormality requiring further observation	....	....	....	....	2

Advantage has been taken of the recent Ministry of Health ruling allowing whole classes to be dealt with, which greatly facilitates the administrative work. As a result a small percentage of the children were aged twelve or fourteen years.

The examination of the vaccination sites revealed no abnormalities. All of those submitted to a post-vaccination skin test had converted to the positive state.

This year's acceptance rate of 64.0% is similar to that for the previous year.

The figure for the positive Mantoux tests gives an indication of the extent to which children are being brought into contact with the germ of tuberculosis. Our percentage, 15.7 compares not unfavourably with that in other urban industrial areas.

The Chest Physician has supplied the following information regarding B.C.G. vaccination of Tuberculosis Contacts during 1962 :—

Children under 15 years of age :—

No. of Contacts			B.C.G.
skin patch tested	Positive	Negative	Vaccinated
135	56	79	86

96 children were patch tested after B.C.G.—all except one showed a positive skin reaction.

These figures do not include work carried out amongst hospital staff.

### IMMUNISATION

During 1961 the Standing Medical Advisory Committee of the Ministry of Health issued advice on two alternative schedules for the routine protection of children against infectious diseases. At the time one of the schedules (Schedule P) was adopted for use in the Department. Oral poliomyelitis vaccination has since been introduced and in November 1962 the Ministry of Health on the advice of the Standing Medical Advisory Committee issued a further suggestion regarding routine infant vaccination against smallpox. When practicable the following schedule is now followed in the Department.

Age	Visit	Vaccine	Injec- tion	Oral	Interval
1-6 months	1	Diphtheria, pertussis, tetanus	1		4-6 weeks
	2	Diphtheria, pertussis, tetanus	2		4-6 weeks
	3	Diphtheria, pertussis, tetanus	3		
7-10 months	4	Poliomyelitis		1	4 weeks
	5	Poliomyelitis		2	4 weeks
	6	Poliomyelitis		3	
1-2 years	7	Smallpox			
18-21 months	8	Diphtheria, pertussis, tetanus	4		
		Booster			
School entry		Diphtheria, tetanus Booster	5		
8-12 years		Diphtheria, tetanus Booster	6		
		Smallpox re-vaccination			
Over 12 years		B.C.G.	7		

Although the local health authority expend time and money in joining national advertising campaigns, the Health Visitor with her personal approach is the spearhead of the drive for a high level of primary protection against Diphtheria and Whooping Cough, while the school nurse is in a unique position to coax the reluctant parent of the primary school child to agree to the child receiving a booster dose of prophylactic.

Inoculations carried out during 1962 :—

Diphtheria	M. & C. W.		School Clinic	Private Doctors	TOTAL
	Clinic				
Primary	3		510	6	519
Re-inoculation	1		1018	1	1020
	4		1528	7	1539

### Combined Diphtheria, Whooping Cough and Tetanus

Primary	604	1	130	735
Re-inoculation	53	1	12	66
	657	2	142	801



Approximately 59% of the school and pre-school children in the Borough have been immunised against Diphtheria. This cannot be regarded as adequate and we must strive for a figure of at least 80%

Parental apathy is our greatest enemy. Young parents have never seen cases of diphtheria and so the wholesome fear which it engendered in the time of the greatest epidemic incidence has disappeared. Pre-occupation of the medical staff, who have been extensively engaged on other immunological procedures may be to some extent responsible for the relatively unsatisfactory figures in the lower age groups.

### AMBULANCE SERVICE

The service continues to expand and during the year, 51,446 patients were carried, an increase of 2,092 over 1961. The total annual vehicle mileage was 128,351. The table below gives a clear indication of the operational pattern for the service since 1956. The average number of miles travelled per patient has fallen from 3.6 to 2.5. This has been due to greater co-ordination, the use of radio-control and increased operational efficiency. The second Duple/Bedford Vehicle, designed to carry 15 sitting cases was put into service in March, replacing a six seater vehicle. These vehicles have proved invaluable for the conveyance of patients to and from Billinge Hospital and the Junior Training Centre.

Year	Average No. of patients carried per mile	Average mileage per patient
1956	0.27	3.6
1957	0.28	3.4
1958	0.33	3.0
1959	0.35	2.9
1960	0.35	2.8
1961	0.38	2.6
1962	0.40	2.5

### Ambulance Station

The new ambulance station in Pottery Road is proving very satisfactory. There have been no operational difficulties whatsoever, and the lecture room facilities have proved a great asset to the Ambulance Service and other sections of the Health Department.

### Personnel

The establishment of the service at the 31st December, 1962, was as follows :—

- 1 Superintendent.
- 1 Clerk/Day Control Assistant.
- 4 Control Assistants.
- 1 Leading Driver.
- 25 Driver Attendants
- 1 Handyman.

### Maintenance of Vehicles

All maintenance and repairs necessary to keep the fleet fully serviceable have been carried out satisfactorily.

#### AGE OF VEHICLES IN YEARS

Under one year	One to two years	Two to three years	Three to four years	Four to five years	Five to six years	Six to seven years	Seven to eight years	Eight to nine years	Nine to ten years	10 years and over
1	2	1	—	1	—	1	1	1	1	1

#### TOTAL MILEAGE RUN BY EACH VEHICLE

Registered No.	Year of Purchase	Make	Type	Mileage		Total Mileage Run
				1961	1962	
JP. 8800	1950	Bedford	Ambulance	9811	9375	111916
JP. 8879	1951	Bedford	Dual Pur.	13354	3133	182080
JP. 9609	1952	Bedford	Ambulance	10819	9119	169971
AEK. 432	1953	Bedford	Dual Pur.	15430	14438	152399
AJP. 500	1954	Daimler	Ambulance	9829	6655	87831
BJP. 947	1955	Bedford	Ambulance	16349	16092	102922
DEK. 828	1957	Bedford	Ambulance	17015	15900	62709
EJP. 800	1959	Bedford	Ambulance	12137	12525	40792
GJP. 564	1961	Morr. Oxf.	Car	17250	19021	36271
HEK. 999	1961	Bedford	Sitting Cases	7026	13934	20960
HJP. 804	1962	Bedford	Ambulance	—	8190	8190

#### Petrol and Oil Consumption

Vehicle	Make	Reg. No.	Mileage	CONSUMPTION		AVERAGE	
				Petrol Galls.	Oil Pints	M.P.G.	M.P.P.
1	Bedford	AEK 432	14,438	1061.9	70	13.6	206.2
2	Bedford	JP. 9609	9,119	691.2	11	13.2	829.0
3	Daimler	AJP. 500	6,655	894.6	55	7.4	125.0
4	Bedford	EJP 800	12,525	1022.8	65	12.2	192.7
5	Bedford	DEK 828	15,900	1199.5	133	13.2	112.0
6	Bedford	BJP 947	16,092	1276.0	46	12.6	350.0
7	Bedford	JP 8879	3,133	235.0	19	13.3	165.0
7	Bedford	HJP 804	8,190	826.6	27	9.9	303.0
8	Bedford	JP 8800	9,375	642.5	37	14.1	253.4
9	Bedford	HEK 999	13,934	1179.2	20	11.0	696.7
Car	Oxford	GJP 564	19,021	809.1	12	23.5	1586.0
TOTALS :			128,382	9838.4	495	13.4	259.3



### Summary of Work Undertaken During the Year 1962

CLASSIFICATION	MILES	PATIENTS
SECTION 27 PATIENTS :		
Street Accidents (including all road users) ... ..	978	269
Other Street Accidents ... ..	275	75
Works Accidents ... ..	364	90
Home Accidents ... ..	878	192
Recreation Accidents ... ..	739	177
Unclassified Injuries ... ..	595	153
Street Illnesses ... ..	488	144
Home Illnesses ... ..	522	119
Works Illnesses ... ..	163	45
Other Illnesses ... ..	214	60
Maternity ... ..	5,912	577
Authorised Officers ... ..	3,795	292
Infectious ... ..	77	6
Deceased ... ..	225	46
Admissions, Discharges, Transfers and Clinic Cases	92,000	28,383
Service and Fruitless ... ..	1,140	—
Psychiatric Unit, Billinge ... ..	2,209	1,632
SECTION 27 PATIENTS—RECOVERABLE :		
Lancashire County Council ... ..	85	12
Other Authorities ... ..	457	36
National Coal Board ... ..	84	13
OTHER RE-CHARGEABLE WORK :		
Welfare Services ... ..	2,172	1,048
Mentally Sub-normal Children ... ..	13,807	18,077
Midwives and Gas and Air Analgesia ... ..	1,111	—
Mental Health ... ..	54	—
District Nurses... ..	7	—
TOTALS ... ..	128,351	51,446

## **Radio Telecommunications**

The radio telephone equipment is working very satisfactorily. The main station is regularly serviced under a maintenance agreement whilst the mobile stations are given attention when required. These arrangements are proving to be very economical.

## **Civil Defence**

The Ambulance and First Aid Section of the division remains active but difficulty is experienced in attracting new members.



## PREVENTION OF ILLNESS, CARE AND AFTER-CARE

### Health Education

Classes for expectant mothers are held each week at the Central Clinic where talks and demonstrations are given on Mothercraft, general hygiene and allied subjects. Expectant mothers receive talks on pregnancy, childbirth and the post-natal period. Any relevant literature is distributed. The appropriate exercises are carried out by those attending the classes who also receive instruction in gas and air analgesia. The syllabus in fact prepares the inexperienced woman for the great experience of motherhood.

Mothercraft lectures have been given by health visitors at senior girls schools. These have been most popular with the pupils.

The efforts to inform the public of the dangers of smoking have continued, despite the hardening of opposition and general apathy.

An anti-smoking campaign late in the year was begun by the visit, lasting two days, of the Mobile Anti-Smoking Unit of the Central Council for Health Education.

After being welcomed by the Mayor, the graduates in charge lectured and gave a film show to a gathering of invited representatives of public and private bodies likely to be able to influence youth. Though the reception given to the facts about smoking was gratifying it was regrettable that many of those invited found themselves unable to attend. The rest of the Unit's stay was largely spent in visits to school where senior pupils were given the opportunity to hear the facts. Anti-smoking displays were exhibited at all clinics and some sections of the local press co-operated to the extent of reporting the Department's activities during the campaign.

The struggle for clean food goes on and there are encouraging signs that the education of the public and food handlers has not been without reward.

Each month a "Health Education" topic is selected for special emphasis. The topic usually has seasonal relevance e.g. Air Pollution in November, The Old Folks for December. During the month posters and displays relating to the topic of the month are distributed to the clinics and there is a permanent display in the Central Clinic. Doctors, nurses, midwives, health visitors, welfare officers and public health inspectors use the informal chat as a means of putting over some important factors of the current topic.

The Central Council for Health Education gave an In-service Training Course lasting two days to personnel drawn from all sections of the Department. The bulk of the course was devoted to methods of education but time was also given to discussions. It is hoped in the future to have such discussions between members of the various sections of the Department as a further means of co-ordinating Health Education activities.

### Convalescence

During the year 1962 no arrangements were made for short-term care under Section 28 of the National Health Service Act, 1946.



## Venereal Disease

The treatment of Venereal Diseases is the responsibility of the Hospital service, and in Wigan the Clinic is under the direction of Dr. Philip S. Silver, M.R.C.S., L.R.C.P.

NO. OF WIGAN CASES DEALT WITH FOR THE FIRST TIME AT THE V.D.

	TREATMENT CENTRES									
	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
Syphilis	4	11	12	7	8	7	3	5	3	10
Gonorrhoea	13	10	13	10	6	14	8	12	21	17
Other										
Conditions	59	36	39	37	31	43	32	54	49	59
TOTAL ....	76	57	64	54	45	64	43	71	73	86

The Health Committee have continued their arrangements whereby the V.D. Orderly of the Royal Albert Edward Infirmary undertakes the duties of Almoner.

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 1962 :—

All patients attending the special clinic are questioned regarding their source of infection. In all cases where necessary, a special contact card bearing the times and places of all special clinics held in the Manchester region is given to the patient to pass on to the contact. As a result the following patients attended :—

	Male	Female
Syphilis	7	7
Gonorrhoea	—	5
Non-Venereal	1	2

During 1962 three children born of mothers who had been treated for gonorrhoea were examined, blood-tested and found to be free from venereal disease.

Patients failing to attend for treatment are the biggest problem and 49 letters were sent to try and persuade them to attend. Of these 38 reported for further investigation and treatment. The total number of patients remaining on the register at 31st December, 1962 was 84, an increase of five over last year.

## Tuberculosis

Statistical information regarding the prevalence of and mortality from tuberculosis will be found in that section of the Report dealing with infectious diseases.

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

During the year, 2,052 home visits were paid by the tuberculosis health visitor.



The number of new contacts examined during the past three years was as follows :—

1960			1961			1962		
Adults	Children	Total	Adults	Children	Total	Adults	Children	Total
116	127	243	100	110	210	128	162	290
Contacts of positive cases under supervision, 31st December, 1962 ....								206
Contacts under supervision after B.C.G. inoculation ....								429

The average number of contacts per case of pulmonary T.B. is as follows :—

	1960	1961	1962
Tuberculosis Notifications : Pulmonary ....	50	34	25
Other forms ....	3	2	2
No. of contacts per case (pulmonary only) ....	4.9	6.2	8.2

All cases of death from respiratory tuberculosis which remained un-notified during life are the subject of special contact investigations.

The responsibility of the Council for providing care and after-care services at present is being discharged through a voluntary Care Committee. The aims of this Committee may be stated as follows :—

1. To provide extra nourishments, nursing utensils, wheel chairs, etc.
2. 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.
4. To assist in educating public opinion in matters of health in regard to Tuberculosis.
5. To give assistance in providing tools in cases where tuberculous persons entering into employment are not so assisted by the Ministry of Labour.

The Chest Physician acts as Honorary Medical Officer to this Committee.

During the year arrangements were continued for organised classes in all manner of light craft work and sewing. These were well attended, although we lack a suitable building where fixed equipment can be erected.

## Rehabilitation

Very few known sputum positive cases are actually employed in permanent positions, and constant supervision by the Tuberculosis Health Visitor ensures that these few do not become a danger to other susceptible groups.

Persons who are fit for light work are referred to the Disablement Re-settlement Officer with suitable recommendation.

Patients have been admitted for training and colonization at Barrowmore Hall, the local health authority undertaking part maintenance.

## **Bacille Calmette Guerin Vaccination**

Full information concerning B.C.G. vaccination of contacts and school leavers is given on page 44.

## **Mental Disorder**

Details of work under this section are given under Mental Health Service. Page 55.

## **Other Illnesses**

Close liaison between the health visitors and the social welfare officers engaged on work amongst the physically handicapped under the Council's scheme ensures that advice and help are readily available to those in need once their condition becomes known to the Department.

## **Meals on Wheels Service**

A Scheme (within the Council's proposals under Section 28 of the National Health Service Act, 1946) for the delivery of a mid-day meal to individuals unable, because of illness or physical disability to provide their own has been in operation since May, 1951.

The meals are prepared at the Welfare Home, Frog Lane.

The food is served in individual covered containers. The charge per meal is 1s. 4d. but in necessitous cases it is reduced to 1s.

13,551 meals were provided on 255 days during the year.

A maximum of three meals per week are provided in each case and the service is greatly appreciated.

Besides its value in preventing malnutrition, a regular visit by an interested voluntary worker and a member of the staff of the Department has a beneficial effect on the morale of the recipients who feel they are not forgotten and can ask for help if they require it. In this connection I must recognise the valuable work done by the members of the W.V.S., who regularly accompany the drivers and deliver the meals.



## DOMESTIC HELP SERVICE

There was a further extension of the Domestic Help Service during 1962. This is the service in which there has been the greatest development during the past decade. In 1952 a total equivalent of 14 full-time helps was employed; at the end of 1962 the total was 60 full-time equivalent home helps. The number of cases rose in the same period from 240 to 928. In 1962 help was provided for 49 maternity, 9 tuberculous, 850 chronic sick including aged and infirm, and 20 other cases.

These statistics only serve to show the trend of the developing service, which is helping many of the aged residents of the borough to lead independent lives in their own homes. Together with the Home Nursing, "Meals on Wheels" and the Bedding Loan Services, the Home Help Service helps to relieve pressure on Part III Accommodation and geriatric hospital beds. There is no doubt that expenditure on the domiciliary services is an overall economy on National Health Service funds.

### Charges for Service

The standard charge operating during the year was 4s. 2d. per hour but in very few cases was the recipient called upon to pay the full cost. All cases whose family income is such that they must ask for relief are assessed according to a scale agreed by the Health Committee. In almost all cases persons in receipt of National Assistance Benefit are entitled to the service free of charge. The aged and chronic sick form the bulk of the cases helped by the Service.

## MENTAL HEALTH SERVICES

The trend towards the informal admission of patients to hospital and greater emphasis on community care continued to develop and because of the co-operation between the General Practitioner, Hospital Services and the Local Health Authority very few difficulties are encountered.

Our proposals for the care and after-care of Mentally Disordered persons provide for these services under Section 28 of the National Health Service Act, 1946. An adequate number of Junior Training Centre places exists at Hope School but a large proportion of these are now occupied by trainees over 15 years of age. However, plans are well advanced for the construction of an adult training centre in Hunter Road, Wigan, and this should relieve the pressure on places at Hope School. This new centre, the building of which will commence during 1963, will also provide for the adult male trainees who are temporarily housed at Marylebone Training Centre. Further progress has also been made with the planning of a hostel to accommodate up to six persons and it is hoped to start building this during 1963. Another development of the service during 1962 was the introduction of a class for severely subnormal females. This is held at Billinge Road Clinic each week and affords some relief for the relatives. Mental Welfare Officers continue their normal case work and community care activities. These are services which must be encouraged to grow and develop gradually and every care is being taken to ensure that this takes place.

### Administration

The Health Committee is responsible for the control of this service and the Medical Officer of Health is the Executive Officer. The establishment provides for one Senior Mental Welfare Officer and three Mental Welfare Officers but unfortunately because of staff changes we were below strength for considerable periods during the year.

Five doctors are approved under Section 28(2) of the Mental Health Act, 1959, for the purpose of making medical recommendations in respect of mentally disordered patients. These are the Medical Officer of Health, Dr. A. Sippert, Dr. R. McL. Bain, Dr. H. Coates, and Dr. D. M. Mather.

### Mental Subnormality

At the end of the year a total of 116 mentally subnormal persons were under the care of the local authority. Regular home visits are made and in addition to giving advice to the families a great deal of effort is made by the Mental Welfare Officers to help seek employment in suitable cases.

During the year nine subnormal patients who were satisfactorily stabilised were discharged from community care. Two informal patients were discharged from hospital. Of these one was satisfactorily placed in employment and the other is living at home.



Difficulty in obtaining permanent care for severely subnormal children still exists but informal admission for three subnormal patients was arranged during the year. Short term care was provided for 11 patients during the year, in each case affording relief to the parents. Increasingly close co-operation with Brockhall Hospital is most helpful to the Department.

### **Mental Illness**

The department deals with all matters relating to prevention, care and after-care of persons suffering from mental illness.

Close contact is maintained with patients in hospital. Mental Welfare Officers visit patients in Billinge Hospital regularly and where necessary maintain contact with the home and see that the patient's domestic arrangements are properly protected. Many problems of housing, financial stress and marital difficulties are tackled whilst the patient is in hospital, thus easing his return to the community. This, together with the regular discussion regarding all aspects of the patients' welfare at the Case Conferences, has done much to bridge the gap between the patient in hospital and his after-care in the community. 265 visits were made to patients in hospital and 176 visits relating to the welfare of such patients.

A further development of the service was to arrange periods of temporary care for the aged mentally ill either in hospital or when suitable in Part III accommodation. This affords much needed relief to the relatives.

Mental Welfare Officers maintain a 24-hour "on call" service for arranging urgent admissions to hospital. The Senior Mental Welfare Officer attends the psychiatric clinic each week at Wigan Infirmary and obtains the social history in respect of all patients attending from the County Borough of Wigan. Where necessary a Mental Welfare Officer accompanies the patient to the clinic.

### **Prevention**

Many cases of potential breakdown are referred to the department and it has been found that a satisfactory solution of social problems has been instrumental in averting mental illness.

A close liaison exists between the medical practitioners and mental health staff in dealing with stresses and situations within the family at an early stage. Considerable success is being achieved without the need for admission to hospital and many patients continue to lead a useful life in the community whilst receiving out-patient treatment and supportive case-work from the mental health staff.

Every effort is made to secure the closest co-operation between the mental health staff and other social workers including welfare officers, health visitors, child care officers, probation officers and officers of the housing department.

Help has also been received from some voluntary associations, particularly the W.V.S. and the Soroptomist Club of Wigan. In addition to giving great help by the provision of clothing the W.V.S. members have undertaken some friendly visiting of selected patients. This has proved very successful.



## After Care

Close liaison is maintained with the hospitals and the mental health staff attend case conferences with the Consultant Psychiatrist to the Wigan area when all matters relating to the welfare of the patients are discussed. These sessions are held at Billinge Hospital, and have proved to be of particular benefit in formulating after-care measures at an early stage and thereby facilitating the return of the patient to the community.

All patients on discharge from hospital are visited by the case-worker, and every endeavour is made to obtain the co-operation of the relatives and help them to understand the patients' difficulties. Patients are encouraged to keep their appointments at the after-care clinics at Billinge Hospital and Wigan Infirmary. Where necessary the patients are escorted by a Mental Welfare Officer.

The department co-operates with the Ministry of Labour and employers in cases where the question of employment arises.

## Account of Work Undertaken in the Community

### MENTAL ILLNESS :

Patients notified as mentally ill	179
Dealt with as follows :	
Section 25, Mental Health Act, 1959	5
Section 26, Mental Health Act, 1959	4
Section 29, Mental Health Act, 1959	46
Informal admissions, Mental Health Act, 1959	109
Care and supervision in the Community	10
No action	5
Total number of visits to patients requiring care and supervision	73
Total number of visits to patients requiring after-care	994
Total number of patients requiring after-care	240

### MENTAL SUBNORMALITY :

Number of patients in hospital, including special hospital accommodation at 31.12.62.	95
Number of patients under Community Care at 31.12.62.	116
Number of patients at Junior Training Centre	47
Number of patients at Adult Training Centre	13
Number of patients at Special Care Unit	6
Number of patients awaiting admission to hospital at 31.12.62.	6

### COMMUNITY CARE AND OTHER WORK OF MENTAL WELFARE OFFICERS :

Total number of domiciliary visits during the year	2728
Total number of visits to Junior Training Centre	47
Total number of visits to Adult Training Centre	90
Total number of visits to Special Care Unit	52
Attendances at Billinge Hospital Case Conferences	55
Visits to patients in hospital	265
Visits relating to the welfare of patients in hospital	176
Attendances at Psychiatric Clinic	43
Special reports for hospitals regarding subnormal patients	19
Social Histories for hospitals and at psychiatric clinics	212
Patients accompanied to Psychiatric Clinics	128



## TRAINING OF THE MENTALLY HANDICAPPED

### TRAINING CENTRE, HOPE SCHOOL

This Training Centre, which was one of the first purpose built junior training centres to be erected after the passing of the National Health Service Act, 1946, opened in 1954. The staff consists of a Supervisor, Deputy Supervisor, four Assistant Supervisors, and two Trainee Assistant Supervisors. In September one of the trainees commenced a 12 months full-time Diploma course of the National Association for Mental Health. In addition, one full-time guide help and one part-time guide help are employed to assist with the care of the trainees both at the Centre and whilst travelling between the Centre and home.

The Centre has places for 69 trainees most of whom are residents of the Borough. The remainder, approximately  $\frac{1}{3}$  of those attending, are children from Lancashire County Health Division No. 8. Trainees from Wigan Borough and from the Standish area are conveyed to the Centre by ambulance but the others are brought in by coach. A mid-day meal is provided and all children under the age of 16 years receive  $\frac{1}{2}$  pint of pasteurised milk a day.

All trainees are examined on entry by a medical officer who also attends the Centre periodically for routine medical inspection. In appropriate cases the re-assessment of mental ability is carried out. Arrangements for dental treatment are made through the School Dental Service and a school nurse visits the Centre twice weekly to attend to minor ailments.

The classes are organised in junior, intermediate and senior groups.

Instruction has been given in the following subjects :—  
Speech training; sense training; percussion band; singing; music and movement; physical training; simple folk dancing; personal hygiene and habit training. Certain of the children are taught numbers, letters, telling the time and money values.

Shell craft is taught to the intermediate class and has proved very popular and helpful as it stimulates creative ability and improves manual dexterity. During the year the standard of handwork of this group has improved beyond all expectations.

The senior girls do needlework, country dancing and receive instruction in all domestic duties and housecraft. Some of these and a few of the intermediate group have learned to use both treadle and electric sewing machines. A high standard of work has been attained and various types of sewing are being undertaken. Unfortunately many of this senior group, of whom there are now 21 over the age of sixteen, have reached a stage where they need to progress to an adult training centre away from the atmosphere of school into one of work. This would undoubtedly help to make them more self-reliant.

## Other Activities

A visit to Chester Zoo in June proved a very happy and instructive occasion for the older children who showed great interest in all the animals. The infants and juniors enjoyed a day in Southport during July.

Once again we are indebted to Mr. H. Jackson, Coach Proprietor, of Spring View, Ince, who kindly provided transport for the children to tour Blackpool Illuminations.

## Training of Students

During the year two students from the National Association for Mental Health Training Course for Supervisors in Manchester have done practical training in the Centre.

The following is an extract from the attendance register :—

	Borough.	County.	Total.
No. of children on the register at 1st Jan., 1962	46	20	66
No. of admissions during the year	5	1	6
No. of children ceased to attend	3	1	4
No. of children remaining on the register at 31st December, 1962	48	20	68
Average daily attendance during the year	42	16	58



## MARYLEBONE TRAINING CENTRE

Marylebone Training Centre for Adult Male Trainees is housed in premises formerly known as Marylebone School to which certain adaptations had been carried out. There are now twenty senior trainees under the supervision of a Senior Craft Instructor and another Craft Instructor. The aim at Marylebone is to simulate as near as possible the conditions in open employment. The centre is open from 9 a.m. to 5 p.m. Monday to Friday inclusive and closes only on three weeks each year in addition to Public Holidays. Small payments are made to the trainees who receive the money each week in a wage packet.

In addition to carpentry, work is now being undertaken for the National Coal Board and a local engineering firm. We are extremely indebted to these concerns for the confidence which they have shown in the ability of the trainees to turn out first class work.

Initially all the trainees were transported to the centre but now four living within the Borough are allowed to make their own way by public transport.

A mid-day meal is usually provided through the School Meals Service but during holidays when this service is not available the meals are prepared at Douglas Bank House.

The centre is used by Borough and County Trainees and details of attendances during 1962 are given below.

	Borough.	County.	Total.
Number of trainees on register at 1st January,			
1962 ....	12	6	18
Number of admissions during 1962 ....	1	1	2
Number of trainees ceasing to attend ....	—	—	—
Number of trainees on register at 31st Dec., 1962	13	7	20
Average attendance during the year ....	12	6	18

## SPECIAL CARE UNIT

Facilities are provided at Scarisbrick Street Baptist Church to ease the burden of parents of severely sub-normal children who are too young or too low grade to benefit by instruction in the Training Centre and also to enable the mother to attend shopping and other outdoor matters.

The unit is open Monday, Tuesday, Wednesday and Thursday afternoons each week between 1-30 and 4-30. Between 6 and 7 children regularly attend and are under the care of two paid helpers. No charge is made to the parents of children attending.

## CO-ORDINATION OF HEALTH SERVICES

No changes have been found necessary during the year in the machinery for co-ordination of the three branches of the Health Services in this area.

There is plenty of good will at all levels and the Liaison Committee mentioned in my earlier reports has held regular meetings.

### Major Accident Organisation

In the event of a major catastrophe it is essential that all those officers and services who will inevitably be involved shall be aware of the resources, commitments and liabilities of each other and that pre-arranged conventions governing the alerting of the services shall be widely known. To achieve this the co-operation of ambulance, fire, hospital, police and welfare services, both statutory and voluntary, in the County Borough and the surrounding area have been obtained. The Department has published in booklet form, comprehensive schemes drawn up and co-ordinated by officers of the various authorities involved. These schemes are reviewed annually and amendments made in the light of experience.





*Section IV*

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**Prevalence of  
and  
Control over  
Infectious Disease**



## PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

There were 39 notified cases of measles during the year. Only a small number of cases had been expected after the very high figure of 1608 notified in 1961.

The number of cases of Pulmonary Tuberculosis notified was 25 compared with 34 in 1961.

1 case of Whooping Cough was notified.

6 cases of Scarlet Fever were notified.

For the tenth year in succession there was no notified case of Diphtheria.

No case of Paralytic Poliomyelitis was notified.

## NOTIFICATIONS

### CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1962

NOTIFIABLE DISEASE	At all Ages	CASES NOTIFIED								
		AGE GROUPS								
		under 1	1 and under 3	3 and under 5	5 and under 10	10 and under 15	15 and under 25	25 and under 45	45 and under 65	65 and over
Acute Encephalitis, Infective ...	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis : Paralytic	—	—	—	—	—	—	—	—	—	—
Non-Paralytic	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Croup ...	—	—	—	—	—	—	—	—	—	—
Dysentery ... ..	6	1	—	1	1	1	—	1	1	—
Enteric or Typhoid Fever ...	—	—	—	—	—	—	—	—	—	—
Erysipelas ... ..	—	—	—	—	—	—	—	—	—	—
Food Poisoning ... ..	4	1	—	—	—	—	—	3	—	—
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	—	—	—
Measles ... ..	39	3	13	11	10	2	—	—	—	—
Meningococcal Infection ...	5	2	1	1	1	—	—	—	—	—
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—
Pneumonia ... ..	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ... ..	1	—	—	—	—	—	—	1	—	—
Scarlet Fever ... ..	6	—	1	—	4	1	—	—	—	—
Tuberculosis : Pulmonary ...	25	—	—	—	—	—	4	9	8	4
Other Forms ... ..	2	—	—	—	—	—	—	2	—	—
Whooping Cough ... ..	1	—	—	1	—	—	—	—	—	—
TOTALS ... ..	89	7	15	14	16	4	4	16	9	4

## Analysis of Notifications by Months, 1962

DISEASE	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Acute Encephalitis : Infective ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Acute Poliomyelitis : Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Paralytic ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Croup ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery ...	1	2	1	1	—	1	—	—	—	—	—	—	6
Enteric or Typhoid Fever ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Erysipelas ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning ...	—	—	—	1	—	—	—	2	1	—	—	—	4
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles ...	4	—	1	—	4	3	1	3	3	—	3	17	39
Meningococcal Infection ...	—	1	2	1	—	—	—	—	1	—	—	—	5
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia ...	—	—	—	—	—	—	—	—	—	—	1	—	1
Scarlet Fever ...	1	1	—	—	—	3	—	—	—	—	—	1	6
Tuberculosis : Pulmonary ...	1	4	—	1	3	2	—	6	4	2	—	2	25
Other Forms ...	—	—	—	—	—	—	—	2	—	—	—	—	2
Whooping Cough ...	—	—	—	—	—	—	—	—	—	—	—	1	1
	7	8	4	4	7	9	1	13	9	2	4	21	89

## Comparative Notifications for the Past Ten Years

DISEASE	1953	1954	1955	1956	1957	1958	1959	1960	1961	1962
Acute Encephalitis : Infective ...	—	—	—	—	—	1	—	1	—	—
Acute Poliomyelitis : Paralytic ...	5	—	1	—	5	1	3	—	2	—
Non-Paralytic ...	1	—	2	3	1	1	—	—	—	—
Diphtheria and Memb. Croup ...	—	—	—	—	—	—	—	—	—	—
Dysentery ...	1	106	9	64	63	9	12	8	10	6
Enteric or Typhoid Fever ...	2	—	—	—	1	—	—	—	1	—
Erysipelas ...	8	5	4	3	—	3	1	2	1	—
Food Poisoning ...	3	1	3	14	8	6	4	—	2	4
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	1	—	—
Measles ...	1219	271	1400	96	721	582	488	41	1608	39
Meningococcal Infection ...	—	1	1	—	—	1	2	1	3	5
Ophthalmia Neonatorum ...	—	—	—	—	—	—	—	—	—	—
Pneumonia ...	28	24	19	12	14	13	48	2	4	—
Puerperal Pyrexia ...	—	2	2	1	4	—	—	—	—	1
Scarlet Fever ...	180	155	44	44	25	20	25	47	25	6
Tuberculosis : Pulmonary ...	67	81	55	46	61	36	56	50	34	25
Other Forms ...	16	7	12	7	2	9	9	3	2	2
Whooping Cough ...	278	55	89	133	38	10	63	20	—	1
	1808	708	1641	423	943	692	711	176	1692	89



[illegible][illegible]

### New Cases and Mortality During 1962

AGE PERIODS :	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0— ... ..	—	—	—	—	—	—	—	—
1— ... ..	—	—	—	—	—	—	—	—
5— ... ..	—	—	—	—	—	—	—	—
15— ... ..	2	2	—	—	—	—	—	—
25— ... ..	5	4	2	—	—	1	—	—
45— ... ..	6	2	—	—	2	—	—	—
65— ... ..	3	1	—	—	1	—	—	—
75— ... ..	—	—	—	—	1	—	—	—
TOTALS ... ..	16	9	2	—	4	1	—	—

The number of deaths from Pulmonary Tuberculosis was 5 compared with 7 in 1961, and 9 in 1960. No death from other tubercular infections occurred during the year, against 1 in 1961, and 0 in 1960.

### Comparative Statistics, 1958 to 1962

#### Cases Notified

	1958	1959	1960	1961	1962
Pulmonary ....	36	56	50	34	25
Other forms of tuberculosis	9	9	3	2	2
TOTALS ....	45	65	53	36	27

#### Deaths

	1958	1959	1960	1961	1962
Pulmonary ....	10	9	9	7	5
Other forms of tuberculosis	1	1	—	1	—
TOTALS ....	11	10	9	8	5

#### Death Rates

	1958	1959	1960	1961	1962
Pulmonary ....	0.12	0.11	0.11	0.09	0.06
Other forms of tuberculosis	0.01	0.01	0.00	0.01	0.00
TOTALS ....	0.13	0.12	0.11	0.10	0.06



## DISINFECTION

Arrangements have been made to use the old disinfestor at the Welfare Home, Frog Lane, for the disinfection of bedding, etc. which has been associated with cases of certain infectious diseases. The disinfestor at the Royal Albert Edward Infirmary is also available if required.

### Distribution of Disinfectants

Disinfestants and disinfectants of known potency are provided free to the occupiers of houses where infestation or 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 public health inspectors.

## Section V

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### National Assistance Act, 1948

#### *Part III*

### Welfare Services



## ADMINISTRATION

The Authority's Welfare Services, under the National Assistance Act, 1948, continue to be controlled by the Health Committee.

The total number of staff employed on Welfare Services at 31st December, 1962, was 95, made up as follows :—

Administrative and Clerical (including persons in charge of Homes)	16
Home Staffs (other than persons in charge) ....	75
Staff employed at Social and Handicraft Centres (including Occupational Therapist) ....	4
	—
	95
	—

## CARE OF THE AGED

In January of the year under review, the Ministry of Health issued Circular 2/62 to County and County Borough Councils asking them to review their Health and Welfare Services and to draw up a plan for developing these services over the next ten years. Accompanying the circular was a copy of Command Paper entitled "A Hospital Plan for England and Wales" which sets out a long-term plan for the development of the hospitals over the next decade.

The Hospital Plan appears to make no provision for additional geriatric beds in this area. With this in mind, a proportion of future residential accommodation might have to be planned on "Half Way House" principles. A start was made in this direction with the planning of "Springfield," where a special feature of the accommodation was the provision of three strategically sited double bedded rooms to be used for the retention of very infirm or confused residents who present psycho-geriatric problems.

Under the Council's Capital Expenditure programme, it is suggested that two 30-bed Homes should be built in association with flats and bungalows at Bottling Wood and Marsh Green. These Homes would deal with the general demand for hostel beds and replace accommodation at the Welfare Home. The Welfare Home provides the least satisfactory of our accommodation yet the cost of maintaining it is almost equal to the cost of maintaining beds in modern Homes, due to the expenditure of large sums of money on the dilapidated buildings and the higher staffing ratio required to compensate for the widespread layout of the remaining accommodation and ancillary services on the site. Given adequate specialist housing—flats with Welfare Warden, bungalows with wide doors and other special features, and with supporting domiciliary services, there should emerge a clearer picture of the further need for residential accommodation.

## RESIDENTIAL ACCOMMODATION

The following table shows the numbers of aged persons provided with residential accommodation as at the 31st December, 1962.

	Springfield		Douglas Bank		Norley Hall		Rockwood		(former P.A. Inst.) St. Stephen's	
AGE	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Over 90	2	4	2	2	1	2	—	—	—	—
85-90	1	2	1	3	2	4	—	1	—	1
80-85	3	10	1	6	5	2	—	1	6	4
75-80	3	10	—	6	3	2	2	2	4	2
70-75	10	6	1	4	2	3	2	3	6	5
65-70	3	2	1	1	2	5	3	3	1	—
60-65	1	1	1	2	2	—	1	—	1	5
Infirm	1	2	—	—	—	2	—	2	2	6
Average Ages	78		81		80		78		78	
Overall average age 79										

As in most other areas there is a waiting list, and it is noticed that the average age of the applicants and their degree of infirmity on application are steadily rising. There is a constant demand for ground floor accommodation, and staff in the Homes are being called upon to look after the infirm who need a lot of assistance, those who are temporarily ill and others requiring bed rest as a regular feature of care.

### Short Term Care

This is an extremely valuable service for it enables families and individuals who are devotedly caring for their aged relatives and friends to have a brief respite, perhaps to proceed on holiday. During the year "Short term care" was provided for 46 old persons as against 32 in the previous year.

During the year 1962 the number of admissions to Part III accommodation was as follows :—

	M.	F.
(1) From own homes, lodging houses, etc. (including "short stay")	38	63
(2) From hospitals	12	29

The numbers discharged from Part III accommodation were as follows :—

	M.	F.
(1) No. dying in Homes	7	8
(2) No. transferred to Hospital	30	23
(3) No. discharged elsewhere	8	12
(4) No. leaving after "short stay"	14	32

### Hostel for Men

In addition to the above, 24 men were accommodated in the former Institution. These men require less attention and their need for care arises principally from their lack of supervised accommodation and elementary comforts.



## Admission Arrangements

Cases for admission are brought to the notice of the department by personal application, by relatives, by general practitioners, members of the Council, Public Health Inspectors, Health Visitors and so on. There is always a considerable number of persons awaiting admission, and it will be obvious that to admit applicants on a "first come—first served" basis would be impracticable. Some cases are of a more urgent nature and the date of application is therefore ignored in assessing priority. All cases are visited frequently and as a vacancy arises it is allocated to an aged person in most urgent need of care.

Where hospital patients are fit for discharge but unable to return home for any reason, they are interviewed by a welfare officer and their names are entered on the waiting list. In this sphere, close liaison is maintained with the Consultant Geriatrician and the Almoners.

## Charges for Accommodation

The Standard Charges for the year were :—  
St. Stephen's House £6 0s. 9d., Douglas Bank House, Norley Hall, Rockwood and Springfield £6 2s. 6d. per week.

## DOMICILIARY VISITING

Aged Persons Living Alone in Wigan :—

Ward.	Men	Women.	Ward.	Men.	Women
St. George	12	40	Swinley	70	240
Lindsay	38	139	All Saints	13	70
St. Catherine	47	111	Pemberton West	32	60
St. Patrick	41	132	Pemberton North	76	169
St. Thomas	44	196	Pemberton Central	72	250
St. Andrew	96	329	Pemberton South	29	88

A register of these people is kept in the Department and the information includes particulars of relatives and friends with the frequency of visitation, the family doctor, nature of any disability, an indication of services provided, together with a resume of the social conditions and financial circumstances. Welfare Officers made 1,279 visits to aged people living in their own homes. Advice and guidance has been welcomed, and a pre-paid postcard was left with each person so that, in the event of their requiring any assistance, advice or welfare services in any way, they had only to post the card and a Welfare Officer would visit to render any assistance that might be required. The elderly appear to be bewildered by the complexity of the social services, and simple matters become, to them, problems of considerable difficulty. It is considered that the solution of these problems by the Welfare Officers made a difference to the mental contentment of the old persons concerned.

An interesting feature of the year was the "Old People's Week" held in September. This was initiated by the Rotary Club and organised by voluntary bodies in the town under the presidency of the Mayor and with the help and co-operation of the Health Committee.



The fundamental purpose of the "Week" was to emphasise the needs of old people, to indicate the responsibilities of the younger generation, and to bring to the notice of the general public, and to the old people themselves, the various statutory and voluntary services available to them for comforts, advice, help and assistance, financial or otherwise. It was particularly aimed at finding the lonely housebound. As a result of the "Week," more demands were made on the domiciliary services, e.g., Domestic Help and Meals on Wheels Service. Many housebound old people became known to the Department and are now being visited at regular intervals by social workers.

Excellent relationships exist between officers of the National Assistance Board and those of the Department. There is an interchange of information regarding old people for whose benefit the services of either Authority are being provided.

The continued growth of problems relating to the aged throws an increasing burden on the Welfare Officers. So far, they have been able to meet all demands made on them. If, however, there is to be no deterioration in the high standard of service which the inhabitants of the Borough have come to expect, I feel that the problem will have to be reviewed in the near future.

### **TEMPORARY ACCOMMODATION**

One of the biggest problems of the Department for many years was that of homeless and "problem" families. An attempt was made in 1954 to tackle this problem by providing 9 flatlets in the ex Poor Law institution and by using three sub-standard properties as "half-way" or intermediate accommodation. The scheme envisaged that after a successful period of rehabilitation, families would be transferred to the sub-standard accommodation and, after further rehabilitation, to permanent housing. By 1961, no sub-standard properties remained—these had already been dealt with under the demolition programme.

It therefore became necessary to have another look at this problem and the answer appeared to be that of attacking the problem at source—to try and stop these people from becoming homeless. Visits were made by welfare officers to every known home where an eviction was likely to take place. 78 cases were dealt with and only two families were actually admitted to the flatlets, which in itself speaks for the considerable effort, hard work and patience required by the social workers concerned.

Unfortunately, this work does not end with solving the eviction problem. Constant visits must be made to ensure that these families do not fall back into their old ways.

### **CHIROPODY SERVICE**

This service is provided on a voluntary basis by the Rotary "Inner Wheel" members and is available at Crompton Street Social Centre to aged persons who are unable, through limited means, to visit a chiropodist in the normal way. Neglected feet are a major cause of aged persons becoming non-ambulant and, when they cease to be ambulant, it becomes increasingly difficult to continue to keep them happy in their own homes. The need for residential care or the provision of extensive domiciliary services then becomes essential. In future, emphasis is to be placed on community care and I consider it essential that a comprehensive chiropody service should be established as soon as possible.



## OTHER SERVICES

### Holidays at Rockwood, Colwyn Bay

Holidays at the Council's Aged Persons' Home at Colwyn Bay were provided for aged persons who were in need of care and attention for a limited period, whose relatives or friends were themselves desirous of taking a holiday but who for the remainder of the year were prepared to care for them in their own homes.

### Section 47. Removal of Persons in Need of Care and Attention

It was not found necessary to take action under this Section during the year. Cases have arisen where Section 47 procedure might have been applied but has been avoided due to the satisfactory re-adjustment of the old persons' mode of life, habits, etc., made possible through the efforts of the officers of the Health and Welfare Department.

### Section 48. Protection of Moveable Property

No applications were received during the year requesting the Authority to provide protection of moveable property.

## BURIAL OF THE DEAD

### Section 50

Under this Section of the Act, Local Authorities must accept responsibility for the burial or cremation of the body of any person who had died or been found dead in their area, where it appears that no other person or organisation will do so. The decision of the Ministry of Health a few years ago, that the cost of burial of patients dying in hospital could be a proper charge on health service funds, has somewhat relieved the financial burden.

During the year the service was provided in 2 cases.

## WELFARE ARRANGEMENTS FOR HANDICAPPED PERSONS

### Section 29

#### Welfare of the Blind

The functions of the Authority are administered on an agency basis by the Wigan, Leigh and District Society for the Blind. Two Home Teachers are employed and seconded to the Society for duty. The Society provides sheltered employment and training for suitable blind persons, enabling them to engage in work in Workshops for the Blind.

The Home Teaching Service is operated by the Society and is available to all types of people who have become blind. Their needs vary considerably—financial assistance, education, training for employment, pastime occupations, handicrafts and cultural interests. In the course of their duties, the Home Teachers endeavour to establish a friendly contact between themselves and the blind persons, so as to inspire confidence and understanding in their association. Regular visiting in their homes is carried out and help given regarding housing, home-help service, etc. The Home Teachers also act as escorts to blind persons attending hospital.

The care of the Deaf Blind persons without speech is one of the most difficult problems confronting the Home Teacher. All Deaf Blind Persons must have regular visits and means of communication (e.g., The Manual Alphabet) must be taught and used.

The Society act as agents for the " British Wireless for the Blind " Fund and install and maintain all sets free of charge.

The Health Committee have purchased 10 Talking Book Machines which have been loaned to blind persons, and are much appreciated.

Extra amenities, such as trips to the seaside, holiday grants, Christmas grants and all kinds of social activities are provided by the Society from the Voluntary Fund and it is only by the generosity of the many donors to the Fund that the Society is able to provide these services to the Blind people of the area.

### CLASSIFICATION OF REGISTERED BLIND PERSONS BY AGE GROUPS

Age Group	31.12.62.			NEW CASES REGISTERED Jan. 1st, 1962 to Dec. 31st, 1962. Age at Registration.	
	M.	F.	TOTAL	M.	F.
0	—	—	—	—	—
1	—	1	1	—	1
2	—	—	—	—	—
3	—	—	—	—	—
4	—	—	—	—	—
5-10	1	2	3	—	—
11-15	1	1	2	—	—
16-20	1	—	1	1	—
21-30	1	—	1	—	—
31-39	4	5	9	2	1
40-49	8	6	14	—	—
50-59	4	5	9	—	—
60-64	10	5	15	1	—
65-69	9	4	13	—	—
70-79	13	35	48	2	3
80 and over	16	19	35	4	4
TOTALS	68	83	151	10	9



### AGES AT WHICH BLINDNESS OCCURRED

Age Group	Total Register			New Cases Registered during 1962		
	M.	F.	TOTAL	M.	F.	TOTAL
0	7	6	13	1	1	2
1	—	—	—	—	—	—
2	1	—	1	—	—	—
3	—	1	1	—	—	—
4	—	2	2	—	—	—
5-10	2	2	4	—	—	—
11-15	2	3	5	—	—	—
16-20	3	2	5	1	—	1
21-30	9	4	13	1	—	1
31-39	2	2	4	—	—	—
40-49	6	4	10	—	1	1
50-59	9	14	23	1	—	1
60-64	4	9	13	—	1	1
65-69	5	11	16	—	—	—
70-79	12	20	32	3	4	7
80 and over	6	3	9	3	2	5
	68	83	151	10	9	19

During the year ended 31st December, 1962, 19 names were added to the Register of Blind Persons and 23 names were removed. Details are shown in the following table :—

No. of registered blind persons at 31-12-61	....	155
No. registered 1st January to 31st December, 1962	19	
Transfers into Area	....	—
Re-certified	....	19
		174
Deaths	....	21
Removals out of Area	....	2
		23
Number on Register 31-12-62	....	151

The cause of blindness in the above cases was as follows :—

	Males	Females
Cataract	5	5
Glaucoma	1	1
Microphthalmos	—	1
Optic Atrophy	—	1
Bilateral Choroidal Degeneration	3	1
Senile Arterio Sclerosis Macular Degeneration	1	—

### Follow-up of Registered Blind Persons

(1) No. of cases registered as blind during the year 1962, in respect of which Sec. F. Para 1 of Forms B.D.8 recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retro-lental Fibro-plasia	Others
(a) No treatment ....	1	1	—	5
(b) Treatment (medical, surgical or optical) ....	5	2	—	5
(2) No. of cases at 1 (b) above, which on follow-up action, have received treatment ....	4	1	—	5
(3) No. of cases at (2)				
(a) Vision improved ....	3	—	—	—
(b) Sight restored ....	—	—	—	—
(c) Treatment continuing at end of year ....	2	1	—	4

### Follow-up of Registered Partially Sighted Persons

(1) No. of cases registered as partially sighted during the year 1962, in respect of which Sec. F. Para 1 of Forms B.D.8. recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retro-lental Fibro-plasia	Others
(a) No treatment ....	—	—	—	—
(b) Treatment (medical, surgical or optical) ....	4	—	—	1
(2) No. of cases at 1(b) above which on follow-up action, have received treatment ....	—	—	—	1
(3) No. of cases at (2)				
(a) Vision improved ....	—	—	—	—
(b) Sight restored ....	—	—	—	—
(c) Treatment continuing at end of year ....	—	—	—	1



### Register of Partially Sighted Persons

Age Group	Registered at 31-12-62			Registered during 1962		
	M.	F.	TOTAL	M.	F.	TOTAL
1	—	—	—	—	—	—
2	—	—	—	—	—	—
3	—	—	—	—	—	—
4	—	—	—	—	—	—
5-10	3	—	3	1	—	1
11-15	2	1	3	1	—	1
16-20	1	—	1	—	—	—
21-30	—	2	2	—	—	—
31-39	1	—	1	—	—	—
40-49	—	1	1	—	—	—
50-59	6	1	7	1	—	1
60-64	2	3	5	—	—	—
65-69	2	4	6	—	1	1
70-79	8	3	11	—	—	—
80 and over	5	4	9	—	3	3
	30	19	49	3	4	7

### Welfare of Blind Children

One partially sighted child, who has been ascertained under the Education Act (Handicapped Pupils and School Health Service Regulations), as being in need of special educational treatment, is being maintained by the Authority as follows :—

	M.	F.
Preston School for the Partially Sighted	1	—

### Workshop Employment

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

Brush making	5 males
Basket making	3 males
Machine knitters	2 females
Chair seating	1 female
Piano tuning	1 male
Salesman	1 male
Cleaner	1 female

On the 31st December, 1962, there were 14 blind persons from the County Borough of Wigan employed in the Workshops.

### Home Workers

There is no Home Workers Scheme in Wigan.

## Placement in Open Industry

The following arrangements have been made for carrying out the placement of blind persons in open industry.

- (1) Each case within the area of the Wigan County Borough be dealt with as it arises.
- (2) That the operation of the placement service be dealt with jointly by the Medical Officer of Health through the Welfare Services Section, the Voluntary Society for the Blind through the Superintendent, and the Local Disablement Re-settlement Officer.

## Welfare of the Deaf

The functions of the Authority are, in accordance with the Approved Scheme, administered on an agency basis by the Wigan and District Deaf and Dumb Society, acting as agents for the County Borough of Wigan.

### Deaf Register — Grouping

Children under 16 :	Male	Female
Attending Special School .....	9	1
Persons aged 16 and upwards :		
Employed .....	23	11
Unemployed but capable of and available for training for work .....	—	—
Incapable of or not available for work .....	10	16
	<hr/> 42	<hr/> 28

### Register of the Deaf defined as per Ministry of Health Circular 25/61

MALE	Under 16 yrs.	16-64 yrs.	65 yrs. and over
Deaf without speech ....	9	25	2
Deaf with speech ....	—	5	1
FEMALE :			
Deaf without speech ....	1	19	3
Deaf with speech ....	—	5	—

## Welfare

During the year a considerable amount of time was spent in placing deaf persons in employment and assisting school leavers to find jobs, in co-operation with the Youth Employment Officer. The Society stresses the importance of placing deaf persons in employment where he or she will be happy and contented.

Visits to deaf people in their own homes brings the human element very much to the fore; personal problems and family difficulties all need careful understanding and prompt attention. Interpretation, on the occasions when it is of prime necessity that everything is understood by the deaf, is another important aspect of the work which cannot be too strongly pressed.



## Social

Social life has followed very much the same pattern, with socials and events at the Institute for the members, bowls, football matches, hiking and camping being the outdoor pursuits.

Regular services were held in the Institute Chapel during the year.

## Welfare of the Hard-of-Hearing

There are 314 known hard-of-hearing persons in the Wigan Borough area.

During the year, help was provided through the local Society for the Deaf in obtaining and repair of Medresco Hearing Aids. Advice and assistance has also been given in individual cases. There is a local Hard of Hearing Fellowship which has a membership of 46.

## Handicapped Persons (General Classes)

### CLASSIFICATION OF GENERALLY HANDICAPPED PERSONS

HANDICAP	Adults		Children		TOTAL
	Male	Female	Male	Female	
Amputation	28	4	—	—	32
Arthritis and Rheumatism	12	9	1	—	22
Congenital Malformations	22	16	1	—	39
Diseases	55	22	1	—	78
Injuries	60	7	1	—	68
Organic Nervous Diseases	44	54	—	—	98
Other Nervous and Mental					
Deformities	21	14	—	—	35
T.B. (Respiratory)	7	5	1	—	13
T.B. (Non-Respiratory)	1	1	—	—	2
Other disorders (not specified above)	6	6	—	—	12
	<u>256</u>	<u>138</u>	<u>5</u>	<u>—</u>	<u>399</u>

## Handicapped Persons (Accommodation)

8 Handicapped Persons are in accommodation provided by other authorities, as follows :—

	Males	Females
Maghull Homes for Epileptics	1	3
Langho Epileptic Colony, Blackburn	1	—
Cripples' Help Society, Tan-y-Bryn, Abergele	—	1
St. Elizabeths' Home for Epileptics, Much Hadam	—	2
	<u>2</u>	<u>6</u>

## Adaptations

The Scheme authorises the Council to incur expenditure on alterations to the homes of handicapped persons so as to assist them to overcome the effects of their disability. Most of the applications arise as a result of the proposed issue of wheelchairs or invalid tricycles by the Ministry of Health, when there is a need for assistance towards the cost of making a pavement crossing or providing an access path to the storage shed. 5 handicapped people were helped in this way during the year.

## Handicrafts

Handicraft classes are held at the Social Centres in Crompton Street and Tunstall Lane, and visits are made to homebound handicapped persons.

During the year 288 classes were held and 169 visits made to the homebound.

Handicapped persons are taking advantage of the facilities offered at the Centres and have been encouraged to attend the handicraft classes provided. The types of work undertaken by the men are rug making, basketry, lampshades, tapestry, leatherwork; the main occupations of the women being crochet work, embroidery, hand and machine knitting, woodwork, lampshades, dressmaking, millinery and raffia work.

There appears to be a very happy atmosphere in the Classes and many new friendships have been made.

## Other Services

Holidays have been arranged for several blind and other severely disabled persons at the Aged Persons' Home at Colwyn Bay.

## VOLUNTARY ORGANISATIONS

Considerable help has been given by the Rotary Club, W.V.S., Old People's Welfare Committees, Welfare Services Comforts Fund Committee, Churches, Youth Organisations and Dramatic Societies in connection with the welfare of aged and handicapped persons. During the year, the following amenities were provided :—

- Outings for handicapped people.
- Transport of handicapped persons to and from employment.
- Food parcels and coal to needy and elderly persons.
- Books, magazines, etc. to Homes and Centres.
- Clothing for necessitous cases.
- Toys for children.
- Organising of garden parties and Christmas fairs.
- Visiting elderly persons.
- Complimentary tickets.



## CIVIL DEFENCE

### Rest Centres

The Medical Officer of Health is responsible for the planning of the Rest Centre Service, and during the year there has been maintained a list of 34 premises which have been earmarked for this purpose.

### Billeting

Further progress has been made during the year in compiling a register of accommodation in the Borough which could be made available for the billeting of the homeless in the event of war.

## Section VI

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# Sanitary Circumstances of the Area



## WATER SUPPLY

The responsibility for the supply of water to the Borough is vested in the Makerfield Water Board. During the year the sources of supply have remained substantially unchanged and have been satisfactory as regards quantity and quality. I am indebted to Mr. Round, Engineer and Manager of the Board, for the following information.

During the year samples of raw water and treated water were submitted for bacteriological examination. The following is a summary of the reports :—

		No. of results showing		Coliform bacilli	Bact. Coli (Type 1)
		Coliform bacilli absent		present	present
Raw Water	....	3		12	14
Treated Water	....	104		22	2

### Chemical Analysis

Representative results from each major source are shown in the table on page 100.

The waters have apparently shown no tendency towards plumbo-solvent action and no special precautions are taken apart from routine chemical analysis in regard to this.

Action taken in respect of any form of contamination is as follows :—

If contamination occurs above the treatment works, this is either combatted by temporarily increasing chlorination, or if the contamination is too serious for this to be practicable the supply in question is taken out of service temporarily.

In the case of contamination showing up in any "district" samples, immediate re-sampling is undertaken, and in the event of this confirming contamination, the main or service affected is disconnected and chlorinated after which a further series of samples are taken until the matter is cleared up.

The number of dwelling houses and the number of population supplied from public water mains direct to the houses are as follows :—

Dwelling houses	....	24,365
Population	....	78,910

No houses are supplied by means of standpipes.

## SEWERAGE AND SEWAGE DISPOSAL

Practically the whole of the Borough is sewered and drained. The sewage is conducted from the town by two main outfall sewers (27ins. and 36 ins. in diameter) to the Sewage Disposal Works at Hoscar—which are seven miles distant. Before leaving the Town the sewage is passed through detritus tanks and fine screens, where grit and gross solid matters are removed mechanically. At this point storm water flows in excess of 3 dry weather flow and up to a maximum of 6 dry weather flow are treated in the storm water tanks. During storms of high intensity, flows in excess of 6 dry weather flow pass direct into the River Douglas.



The main treatment works at Hoscar provides full treatment for five million gallons per day, dry weather flow, of sewage and trade effluent. One million gallons of this is trade effluent from a food factory.

The sewage flow enters the Hoscar Works via the outfall Pumping Station, designed to increase the carrying capacity of the outfall sewers. Preliminary settlement is carried out in four radial flow tanks equipped with electrically operated desludging gear. The settled sewage gravitates to four batteries of biological filters designed to operate as either single, alternate double, or re-circulation filters. Two automatic pumping stations controlled by flow recorders provide accurate proportioning of the re-circulated effluents. Before passing forward to the River Douglas the filtered effluents receive adequate settlement for removal of filter solids. The combined sludges from the sedimentary processes are treated in single stage heated digestion tanks prior to de-watering on sludge drying beds. Three dual fuel engine generating sets, designed to operate on diesel oil, or on methane gas evolved during digestion of the sludge, have been installed. These provide the whole of the power requirements in respect of pumping, lighting and heating on the new works.

During the year 1961-62 (April, 1961 to March, 1962) the following amounts of sewage have been treated at the Hoscar Moss and Pemberton Sewage Works :—

Pemberton Storm Water Works	....	....	272,475,000 gallons
Hoscar Works	....	....	2,324,300,000 ,,
<b>TOTAL SEWAGE TREATED</b>	....	....	<b>2,596,775,000 ,,</b>

Total solids removed, detritus tanks and screen chambers,

Pemberton	....	....	....	....	3,297 tons
Total solids removed, Hoscar Works	....	....	....	....	50,623 ,,
Total dried sludge recovered, Hoscar Works (Dry solids)	....	....	....	....	1,452 ,,
Weight of dried solids per million gallons of sewage	....	....	....	....	0.625 ,,
Rainfall for year	....	....	....	....	35.45 inches (Hoscar).

## PUBLIC BATHS

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

The Wigan Corporation Baths comprises two Indoor Swimming Pools, one Ladies, one Gents, 16 Slipper Baths, one Cabinet Vapour Bath and one Establishment Laundry.

The Ladies Plunge Bath is 18 yards long by 9 yards wide and has a capacity of 40,000 gallons. The Gentlemen's Plunge Bath is 25 yards long by 10 yards wide and has a capacity of 60,000 gallons.



The Filtration Plant consists of two by 10 ft. Royles Type Vertical Filters complete with Chemical Dosage Plant and the filtered water is sterilized by means of chlorinated water.

The contents of the Ladies Plunge Bath are circulated through the Filtration Plant once every  $2\frac{1}{2}$  hours and the water in the Gentlemen's Plunge Bath once every four hours.

Tests for alkalinity and chlorine content are taken frequently each day and every attempt is made to ensure that the water conforms with the standards laid down by the Ministry of Health. Samples of water are taken, periodically, from the Swimming Baths for bacteriological examination and chemical tests, and indicate that the condition of the water is satisfactory.

#### Bathers :

Male Plunge Baths	....	....	....	....	....	....	89,342
Male Private Baths	....	....	....	....	....	....	13,412
Female Plunge Baths	....	....	....	....	....	....	44,673
Female Private Baths	....	....	....	....	....	....	6,706
Mixed Bathing : Adults and Juniors	....	....	....	....	....	....	7,596
Contracts, Free Passes, Season Tickets, etc.	....	....	....	....	....	....	3,547
							<hr/> 165,276 <hr/>

Number of Bathers during the past five years ....  
Year ended 31st March :

1959	....	....	....	....	....	....	216,607
1960	....	....	....	....	....	....	200,519
1961	....	....	....	....	....	....	216,135
1962	....	....	....	....	....	....	183,118
1963	....	....	....	....	....	....	165,276

The figures show a decrease on the previous year due to unfavourable weather.

It is gratifying to record that the Ministry of Housing and Local Government have now given permission to proceed with the erection of new baths and it is hoped that the New Super Plunge Baths will be completed within a period of twenty one months from the 1st May, 1963, after which the existing Swimming Baths will be partly demolished and modernised to tone with the New Baths. When the whole of the work is completed many more schools in the district will no doubt take advantage of the extra bathing facilities offered.

## 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 entirely by mechanical transport. 78 per cent. of the refuse collected is disposed of by tipping.

**NIGHTSOIL AND PAIL REFUSE.**—The refuse (450 tons) is disposed of direct to farmers as manure. All pails are washed and disinfected after each collection.

**Trade Refuse.**—Fixed charges were introduced on November 1st, 1950, for the removal of this refuse. The shops and business premises in the town centre have a daily collection.

1,800 tons of trade refuse was delivered at the tipping site by private traders and contractors.

A scale of charges, in accordance with vehicle capacity, is operated.

**Gully Cleansing.**—During the year, 17,390 gullies were emptied.

**Public Convenience.**—The following conveniences and urinals are maintained and cleansed by the Department :—

1 public convenience for ladies and gents, with attendants.

7 public conveniences for ladies and gents, without attendants.

14 public urinals.

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

**General.**—The quantity of refuse dealt with by the Refuse Disposal Plant during the year 1962 was 6,221 tons, and the quantity tipped was 21,644 tons. In April, 1950, the Corporation introduced a Dust Bin Renewal Scheme, as a direct rate charge.

During the year, 1,114 bins were renewed and 460 sold to private properties not included in the scheme.

123,500,000 square yards of street have been swept during the year.

## CREMATION

The Medical Officer of Health and an Assistant Medical Officer on the Health Department staff act as medical referees to the Corporation Crematorium. During the year under review 642 certificates for cremation were issued.



## PUBLIC HEALTH INSPECTION

Mr. John B. Marsh, Chief Public Health Inspector, reports :

Apart from one small break a full complement of inspectors was maintained during the year and indeed the establishment was increased by an additional inspector. This increase was due to the Council's decision to undertake full-scale improvement of older property. As the problem of improvement is so closely allied to slum clearance the work was delegated to the inspectorate.

Some 425 families comprising 1,340 persons were re-housed during the year from unfit property. 456 houses were demolished, including 78 of the Council's temporary prefabricated bungalows. Only 40 of these prefabs remain.

Two Smoke Control Areas at Worsley Mesnes came into operation on the 1st July and the 1st December. It is probably too early to obtain the full impact on the residents of these areas at the present time but only a few complaints regarding smokeless fuels and their use have reached the office.

Public interest was maintained in hygienic food preparation and complaints were received at the office, two of which resulted in successful prosecutions. Another prosecution against the owner of hamburger stalls resulted in what must be a local record fine. In this case the action was justified, although normally one prefers persuasion to prosecution.

Sampling of foodstuffs and water for chemical and bacteriological purposes has been carried out and in addition samples of filling materials, animal feeding stuffs and fertilizers have been taken. The position on the whole is satisfactory.

# Summary of Work Undertaken During the Year

Houses and premises inspected and visited <i>re</i> nuisances and complaints	1975
Re-visits to nuisances	4502
Other visits made	835
Visits to premises (testing of drainage)	428
Nuisances discovered	1908
Nuisances abated	1473
Notices issued (preliminary)	534
Notices issued (formal)	271
Letters issued <i>re</i> Nuisances	473
Visits to premises <i>re</i> Housing Acts	1044
Re-visits to premises <i>re</i> Housing Acts	939
Visits <i>re</i> Certificates of Disrepair	34
„ Infectious diseases and food poisoning	149
Visits to slaughterhouses	2859
Visits <i>re</i> Offensive trades	12
Visits to markets	34
„ butcher's shops	76
„ food preparers	72
„ caterers	32
„ other food shops	349
„ dairies	53
„ milkshops	13
„ ice-cream manufacturers	89
„ ice-cream shops	37
„ bakehouses	24
„ houses let-in lodgings	18
„ common lodging houses	2
„ factories—power	77
„ factories—non-power	4
„ offices	1
„ cinemas	8
„ places of entertainment	7
„ caravans	105
„ <i>re</i> rats and mice—dwellings	2110
„ „ other premises	1010
„ smoke abatement	3444
No. of shops observations	22
Visits to shops under Shops Act	22
Visits <i>re</i> Poisons Act	7
Visits to premises <i>re</i> applications for tenancy of Council houses	5
„ verminous premises	62
Reports to Borough Engineer <i>re</i> dangerous structures	30
Watercourse Inspections	17
Visits to Licensed Premises	293
„ <i>re</i> Standard Grants	191
„ canal boats	3
„ Improvement Grants	3
„ Noise abatement	6



### Samples Obtained

Food and Drugs	....	....	....	....	....	....	....	219
Water (for chemical analysis)	....	....	....	....	....	....	....	15
Water, Milk and Ice-cream (for bacteriological examination)	....	....	....	....	....	....	....	344
Fertilisers and Feeding stuffs	....	....	....	....	....	....	....	14
Rag flock	....	....	....	....	....	....	....	5

### ATMOSPHERIC POLLUTION

The figures below indicate the extent of atmospheric pollution in terms of air borne grit. There are two measuring stations located at Ellesmere Road Nursery and Christopher Home. Each station comprises a daily smoke filter and volumetric sulphur dioxide apparatus, a deopsit gauge and a lead peroxide apparatus. There is a further control point consisting of a lead peroxide apparatus at Gidlow Secondary Modern School. It is hoped that the continued effort towards atmospheric pollution will soon be reflected in these readings.

A full complement of inspectors has enabled great progress to be made during the year towards the reduction of pollution rather than the measurement of it as in previous years.

#### DEPOSIT GAUGE AT WIGAN INFIRMARY

	Jan.	Feb.	Mar.	Apr.	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Month-ly Av.
Total Solids (tons/sq. mile)	28.89	16.76	26.08	11.35	11.85	7.31	11.88	17.32	10.68	9.80	10.20	19.97	15.17
Insoluble Solids (tons/sq. mile)	8.97	4.06	7.32	2.82	6.11	3.14	5.82	3.42	3.16	4.06	3.15	4.03	4.67

### Domestic Pollution

The first smoke control area came into operation on the 1st July and the second on the 1st December, 1962. It is perhaps too early to judge the impact over such a short period of time. As expected the measuring equipment shows no evidence of any reduction in pollution. At the end of the year work was almost completed on the third smoke control area which is in Marsh Green and is expected to cover some 1,600 houses.

### Operative Smoke Control Areas.

	Acres	Dwellings	Factories	Other Premises	Date of operation
No. 1	97	870	1	24	1st July, 1962.
No. 2	609	621	3	35	1st December, 1962.

## **Industrial Pollution**

As the industrial fuel users become aware that the deadline for the plea that their plant is old and inefficient is July 1963, increased activity has taken place.

During the year fifteen industrial and commercial firms have introduced modern boilers or have replaced old fuel firing arrangements. Many visits have been carried out which have resulted in new firing techniques being adopted with subsequent reduction of smoke emission. Furthermore many factory owners have indicated their intention to replace antiquated boiler plant within the very near future.

## **Chimney Heights**

Plans were received involving the construction of four new chimneys. In each case an increased height was agreed upon and the plans subsequently passed. In two other cases industrial undertakings agreed after consultation to increase the heights of existing chimneys.

## **Prior Approval of Boiler Plant**

Ten applications were received from installers of new boiler equipment and after consultation all applications were recommended.

## **Smoke Offences**

During the year one notice was served under Sec. 1 and four notices under Sec. 16 of the Clean Air Act, 1956. No legal action was necessary as these notices had the desired effect.

## **Offensive Trades**

The offensive trade premises in the Borough comprise: 1 fell-monger, 1 fat boiler, 1 gut scraper and fat boiler and 1 gut scraper.

Visits have been paid to these premises and no cause for complaint has been found.

## **The Rag Flock and Other Filling Materials Regulations, 1951**

Five samples were taken during the year and the results of the examinations were satisfactory.



### Factories Acts

81 routine visits were made to factories in the area and the tables below show the conditions found and action taken.

PREMISES	Number on Register	Number of		
		Inspections	Written notices	Occupiers prosecuted
(i) Factories in which Sections 1, 2, 3, 4 and 6 are to be enforced by Local Authorities.	12	4	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	335	77	8	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	29	2	—	—
TOTAL ... ..	376	83	8	—

PARTICULARS	Number of cases in which defects were found				Number of cases in which prosecutions were instituted
	Found	Remedied	Referred To H.M. Inspector	By H.M. Inspector	
Want of cleanliness (S.1.) ...	1	1	—	1	—
Overcrowding (S.2.) ...	—	—	—	—	—
Unreasonable temp. (S.3.) ...	—	—	—	—	—
Inadequate ventilation (S.4.) ...	—	—	—	—	—
Ineffective drainage of floors (S.6.) ... ..	—	—	—	—	—
Sanitary Conveniences (S.7.) ...	—	—	—	—	—
(a) Insufficient ... ..	—	—	—	—	—
(b) Unsuitable or defective ...	3	3	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work). ... ..	8	5	—	7	—
TOTAL ... ..	12	9	—	8	—

### Outworkers

Two lists of outworkers were received and these reveal that three persons are engaged in the making of wearing apparel. Although the manufacture of wash leathers does not appear to be one of the occupations applying to outworkers for a number of years now returns indicate that this type of outwork is being carried on. Lists indicate that 14 persons are so engaged.





# SHORT ACT

The first scene is set in a room in a house in London. A man, Mr. Jones, is sitting at a table, writing. A woman, Mrs. Jones, is standing by the door, looking at him. She is holding a letter in her hand. She is looking at the letter and then at Mr. Jones. She is looking at the letter and then at Mr. Jones. She is looking at the letter and then at Mr. Jones.

Mr. Jones is looking at the letter. Mrs. Jones is looking at the letter. Mr. Jones is looking at the letter. Mrs. Jones is looking at the letter.

## CHAPTER AND PLOT OF THE ACT

The second scene is set in a room in a house in London. A man, Mr. Jones, is sitting at a table, writing. A woman, Mrs. Jones, is standing by the door, looking at him. She is holding a letter in her hand. She is looking at the letter and then at Mr. Jones. She is looking at the letter and then at Mr. Jones.

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## Section VII

# Housing



## SLUM CLEARANCE

During the year the Council declared its first post war clearance area which became a compulsory purchase order. The order covered 60 private dwellings in Canal Street, Holt Street and Woodhouse Lane. Up to this time all unfit houses had been dealt with by the "individual" procedure. No confirmation of the order had been received by the end of the year although the public enquiry had been held without objectors appearing in September.

The Council made a determined effort to tackle the problem of its own temporary prefabricated bungalows. As the first batch were demolished traditional houses were built on the cleared site for the residents of the next batch of prefabs to be demolished. In all 78 out of a total of 118 "prefabs" were demolished.

## DEMOLITION AND RE-HOUSING

### Houses Demolished (Not in clearance areas)

	No. of houses	Displaced during year Persons	Families
As a result of formal and informal procedures under Section 16 or 17 of the Housing Act, 1957	361	976	340
Local Authority owned houses certified unfit by Medical Officer of Health	95	330	76
<b>Houses Closed</b>	9	38	9

## HOUSE IMPROVEMENT

157 applications for Standard Grants were received during the year for the provision of some or all of the five amenities.

Towards the close of the year the Council decided to declare three Improvement Areas each comprising approximately 100 houses. Discretionary grants will be offered to the owners of the houses and if necessary loans will be made so that the whole of the cost of the improvement will be covered. Should owners fail to take advantage of this then the Council will consider compulsory purchase.

## HOUSING ACCOMMODATION

No. of dwelling houses erected in 1962 :—

By Local Authority	420
By Private Enterprise	141

Unfit houses made fit and houses in which defects were remedied :—

After informal action by local authority	771
After formal notice (a) Public Health Acts	380
(b) Sec. 9 and 16 Housing Act, 1957	9

Housing accommodation as at 31st December, 1962 :—

No. of dwelling houses	24,365
„ business premises with living accommodation	866
„ licensed premises with living accommodation	138
	<hr/> 25,369 <hr/>

No. of common lodging houses in the Borough	....	....	....	1
„ lodgers allowed nightly	....	....	....	63
„ visits	....	....	....	2

The worst of the houses let-in-lodgings were in two groups, namely 11-17 Queen Street and 69-75 Poolstock. These were Victorian type, three-storey dwellings that had seen much better times. After detailed inspection of these properties costs were arrived at for the repair and the provision of additional amenities. All the owners of the properties were interviewed and after much discussion they agreed that the costs were too high and they all signed undertakings to demolish the properties when they became vacated. Most of the families in 69-75 Poolstock were re-housed by the Council and demolition was complete at the end of the year. It is anticipated that 11-17 Queen Street will be demolished early in the ensuing year. This action virtually erases the problem which is so acute in some other areas.

[illegible]



## LEGAL PROCEEDINGS TAKEN DURING THE YEAR

In no case was it necessary to institute legal proceedings against the owner of property for non-compliance with a Formal Notice.

### RENT ACT, 1957

During the year 13 applications were received for Certificates of Disrepair. In 7 cases the landlords gave undertakings to carry out the necessary work within six months. 6 Certificates were issued.

3 applications for the revocation of certificates were received. None of the tenants objected to the cancellation of certificates. 3 certificates were cancelled.

3 applications were received for certificates as to the remedying of defects—2 from a landlord and 1 from a tenant. All were granted.

There has again been a further reduction in both applications for certificates of disrepair and applications for cancellation of certificates.

## Section VIII

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# Inspection and Supervision of Food



## EXAMINATION OF WATER

### Chemical Analysis

During the year 15 routine samples of water were sent to the Public Analyst for examination.

The results of these examinations, expressed in averages, are given below :—

	Bispham and Nicholson's Pit	Edgewood and Nicholson's Pit	Worthington & Thirlmere
	Parts per 100,000	Parts per 100,000	Parts per 100,000
Temporary Hardness .....	12.7	7.2	3.8
Permanent Hardness .....	12.2	5.8	4.2
Total Hardness .....	24.9	13.0	8.0
Alkalinity .....	12.7	7.2	3.8
Combined Chlorine .....	2.6	1.95	1.5
Ammoniacal Nitrogen .....	Negl.	—	0.002
Albuminoid Nitrogen .....	0.0004	0.0003	0.002
Nitrogen as Nitrites .....	—	—	Negl.
Nitrogen as Nitrates .....	0.175	0.12	0.13
Oxygen absorbed in 4 hrs. at 27° C. ....	0.075	0.08	0.13
PH Value .....	6.84	6.98	7.1

### Bacteriological Examination

During the year 57 routine samples of water were sent to the Public Health Laboratory, Manchester, for examination. All were satisfactory.

## MILK SUPPLY

The borough and surrounding urban and rural areas have comprised a Specified Area since 1959. This in effect makes it an offence for any person to retail milk other than Tuberculin Tested, Tuberculin Tested Pasteurised, Pasteurised and Sterilised Milk. Therefore the public receives milk which has been subjected to heat treatment or has been derived from a herd which is regularly examined and subjected to the tuberculin test.

There are three licensed pasteurising plants in the borough and these are visited regularly. Time/temperature checks are made on the plant and samples are taken at all stages of heat treatment and distribution for both chemical and bacteriological purposes.

No. of visits to dairies	.....	53
„ milkshops	.....	13
No. of dealers licensed for the sale of sterilised milk	....	323
„ licensed for the sale of pasteurised milk	....	137
„ licensed for the sale of tuberculin tested milk	....	63
No. of dealer (pasteuriser's) licences	....	3
„ persons registered as distributors of milk	....	331
„ premises registered as dairies	....	3

### Bacteriological Examination of Milk

145 samples of milk were submitted for bacteriological examination :—

PASTEURISED :	95	All samples passed the Phosphatase and the Methylene Blue Tests.
TUBERCULIN TESTED : (pasteurised)	16	All samples passed the Phosphatase and Methylene Blue Tests.
TUBERCULIN TESTED : (Farm Bottled)	8	7 samples passed the Methylene Blue Test.
STERILISED :	26	In all cases the Turbidity Test was negative.

### Chemical Examination of Milk

53 Samples of milk were taken for chemical analysis and the Public Analyst reported adversely on 1 of these. This was genuinely substandard and therefore no action was taken.

### ICE CREAM

There are three registered manufacturers of ice cream in the borough. Control over the manufacture and sale was maintained. The rapid growth of a company involved in the production of soft ice-cream was noted. Each of the twenty vehicles belonging to the company is equipped with a beater freezer to which is added a pre-packed pasteurised mix. Whilst the vehicles are well appointed it was felt that a measure of control must be exercised in the handling of the mix, its storage and the subsequent cleansing of the equipment. Certain codes of practice have been suggested to the company concerned.



142 samples were taken and subjected to the methylene blue reduction test. This is a colour reduction test and the results are expressed as Grades 1-4. A comparison of the last two years' results shows the improvement taking place. 140 results are shown for 1962. No results were obtained from two samples because of atmospheric conditions.

	1961	1962	
Grades 1	83	101	} satisfactory
„ 2	14	25	
„ 3	2	7	} unsatisfactory
„ 4	3	7	

7 samples of ice-cream were also taken under the Food and Drugs Act and submitted to the Public Analyst. These were reported as satisfactory.

### Retailers

The number of premises registered under Section 34 of the Wigan Corporation Act, 1933 for the sale of ice-cream on 31st December, 1962 was 351.

## FOOD PREMISES

Number of food premises in the Borough :—

' Purveyor of Meat ' premises	....	....	....	....	....	86
Restaurants, cafes and snack bars	....	....	....	....	....	42
Fried Fish shops	....	....	....	....	....	61
Grocery shops	....	....	....	....	....	371
Greengrocery shops	....	....	....	....	....	55
Bakehouses	....	....	....	....	....	46
Ice-cream premises	....	....	....	....	....	351
Dairies	....	....	....	....	....	3

### Inspection of Food Premises

The following is a summary of the defects discovered at food premises upon inspection :—

Insufficient washing facilities	....	....	....	....	....	16
Insufficient personal washing facilities	....	....	....	....	....	70
Lack of cleanliness of ceilings	....	....	....	....	....	18
Lack of cleanliness of walls	....	....	....	....	....	24
Lack of cleanliness of floors	....	....	....	....	....	17
Lack of cleanliness of working surfaces	....	....	....	....	....	14
Lack of cleanliness of vehicles	....	....	....	....	....	32
Lack of cleanliness of equipment	....	....	....	....	....	5
Defective floor and/or covering	....	....	....	....	....	29
Defective walls	....	....	....	....	....	17
Defective ceilings	....	....	....	....	....	18
No first aid kit	....	....	....	....	....	14
No clothing cupboard or locker	....	....	....	....	....	5
Insufficient cover for food	....	....	....	....	....	6
Insufficient lighting	....	....	....	....	....	5
Wash your hands notice not displayed	....	....	....	....	....	1
Inadequate refuse collection and/or storage	....	....	....	....	....	7
Unsatisfactory toilets	....	....	....	....	....	15
Dirty and unsatisfactory storage	....	....	....	....	....	8
Inadequate ventilation	....	....	....	....	....	5



## **Education**

Education of shopkeepers in connection with 'clean food' has been carried out by means of individual talks on the premises and by the distribution of suitable pamphlets.

## **Food Hygiene**

The task of bringing all food premises up to the prescribed structural requirements has almost been completed but by far the greatest problem is the education of the food handler. It is a long painstaking task undertaken by the public health inspectors whilst the food handler is at his task. A great deal of patience, tact and time is required, and only when this problem is overcome can the Food Hygiene Regulations be said to be effective. To support these visits striking posters from the Central Council for Health Education are liberally distributed, and there is no doubt that these posters do have a considerable impact.

## **MARKET HALL**

The Market Hall contains in one unit the main market, the fish market, the wholesale and retail fruit markets. Frequent visits are made and the conditions are satisfactory.

## **CLUBS AND LICENSED PREMISES**

Due to the Licensing Act, 1961, many visits have been paid to clubs with a view to obtaining reports for the guidance of the licensing Bench. The method of inspection has been to apply fully the Food Hygiene Regulations and also to insist on separate toilet facilities. During the year some 293 visits were made.

## MEAT INSPECTION

The town's slaughtering facilities are contained in three bacon factories and six general slaughterhouses, all privately owned. Although the Construction Regulations do not yet apply, good standards of hygiene were maintained and as usual 100% meat inspection was achieved.

All six general slaughterhouses are now provided with stunning pens. These are used for the stunning of adult cattle and by restricting movement and vision greatly decrease the possibility of cruelty.

The striking reduction in the incidence of bovine tuberculosis still continues as the percentages below indicate.

	Cattle (excluding cows)					Cows
1959	....	....	....	....	....	3.2%
1960	....	....	....	....	....	25.5%
1961	....	....	....	....	....	1.4%
1962	....	....	....	....	....	0.1%
						0.03%

No. of visits to slaughterhouses	....	....	....	....	....	2859
„ markets	....	....	....	....	....	34
„ butcher's shops	....	....	....	....	....	76
No. of certificates issued (condemned food)	....	....	....	....	....	942



### Carcases Examined During the Year 1962

	Cattle exc. Cows	Cows	Calves	Pigs	Sheep	TOTAL
Carcases examined ....	3849	11452	251	13289	28060	56901
Carcases totally condemned ....	1	7	7	16	44	75
Percentage totally condemned ....	0.03	0.06	2.79	0.12	0.16	0.13

### Carcases and Offal Inspected and Condemned in Whole or in Part

	Cattle excluding Cows	Cows	Calves	Pigs	Sheep	Horses
Number killed ... ..	3849	11452	251	13289	28060	—
Number inspected ... ..	3849	11452	251	13289	28060	—
<b>ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI :</b>						
Whole carcases condemned ...	—	7	7	16	44	—
Carcase of which some part or organ was condemned ... ..	324	5475	1	1627	1285	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	8.4	47.9	3.2	12.4	4.7	—
<b>TUBERCULOSIS ONLY :</b>						
Whole carcases condemned ...	1	—	—	—	—	—
Carcases of which some part or organ was condemned ... ..	—	2	—	153	—	—
Percentage of the number inspect- ed affected with tuberculosis ...	0.03	0.02	—	1.15	—	—
<b>CYSTICERCOSIS :</b>						
Carcases of which some part or organ was condemned ... ..	29	67	—	—	—	—
Carcases submitted to treatment by refrigeration ... ..	2	2	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

The following meat and offal from the slaughterhouses was surrendered and destroyed, or sold for manufacturing purposes, during the year 1962.

		Whole carcase and all Offal Con- demned	Part of Carcase Con- demned	OFFAL CONDEMNED								
				Heads	Lungs	Livers	Hearts	Stomachs	Spleens	Skirts	Kidneys	Udders
Affected with												
Tuberculosis :												
Cattle (exc. Cows)	...	1	—	—	—	—	—	—	—	—	—	—
Cows	... ..	—	—	—	2	—	—	—	—	—	—	—
Calves	... ..	—	—	—	—	—	—	—	—	—	—	—
Pigs	... ..	—	—	151	2	9	2	—	—	—	—	1
Sheep	... ..	—	—	—	—	—	—	—	—	—	—	—
Affected with												
Cysticercosis :												
Cattle (exc. Cows)	...	—	—	17	—	—	14	—	—	1	—	—
Cows	... ..	—	—	46	1	—	24	—	—	5	—	—
Calves	... ..	—	—	—	—	—	—	—	—	—	—	—
Pigs	... ..	—	—	—	—	—	—	—	—	—	—	—
Sheep	... ..	—	—	—	—	—	—	—	—	—	—	—
Affected with other												
Diseases :												
Cattle (exc. Cows)	...	—	—	3	125	253	—	—	14	1	13	—
Cows	... ..	7	2	23	1629	5318	38	7	260	31	326	55
Calves	... ..	7	—	—	1	—	—	—	—	—	—	—
Pigs	... ..	16	2	29	1448	500	335	1	105	4	24	1
Sheep	... ..	44	—	4	7	1280	1	—	—	—	1	—
		75	4	273	3215	7360	414	8	379	42	364	56

### Summary of other Food Condemned, 1962

Meat	197 lbs.
Canned Meat	676
Fish	2156 lbs.
Canned Fish	166
Fruit	333 lbs.
Canned Fruit	1455
Vegetables	3028 lbs.
Canned Vegetables	677
Canned Milk	125
Canned Jam	23
Canned Soup	120
Packages of Other Food	5206
Other canned or bottled foods	291
Fowls	202
Cooked Meat	20 lbs.
Bacon	379 lbs.
Butter	30 lbs.
Margarine	30 lbs.
Eggs	18
Ice-Cream	1 gall.

All food condemned, other than meat, is destroyed at the Frog Lane Depot of the Corporation Cleansing Department.



# **FOOD AND DRUGS ACT, 1955 — SAMPLING**

During the year 219 samples of milk and various other foods obtained under the above Act were submitted to the Public Analyst for examination.

## SAMPLES TAKEN DURING 1962 :—

ARTICLES	Total Number analysed	Samples regarded as adulterated below standard or otherwise not complying with the prescribed requirements		ARTICLES	Total Number analysed	Samples regarded as adulterated below standard or otherwise not complying with the prescribed requirements	
		Number	%			Number	%
Apricots (dried) ...	1	—	—	Margarine .....	3	—	—
Arrowroot.....	1	—	—	Marmalade .....	3	—	—
Barm Cake and Butter .....	2	2	100	Meat Paste .....	2	—	—
Beef (potted) .....	1	—	—	Meat Pies .....	4	1	25
Beer .....	1	—	—	Milk .....	53	1	2
Black Puddings ...	3	—	—	Milk Pudding .....	2	—	—
Brandy .....	1	—	—	Mince meat .....	2	—	—
Brawn .....	1	—	—	Oatmeal .....	1	—	—
Bread .....	3	—	—	Peas (Dried) .....	1	1	100
Butter .....	4	—	—	Pea Preparation ...	1	1	100
Cake .....	6	1	17	Pepper .....	3	—	—
Cherries (Glaze) ...	1	—	—	Pickles .....	2	—	—
Chicken (Minced)...	1	—	—	Plum Pudding ...	1	—	—
Chutney .....	2	—	—	Raisins .....	1	—	—
Cocoa .....	1	—	—	Rum .....	1	—	—
Coffee (Essence) ...	1	—	—	Salmon (Potted) ...	1	—	—
Coffee (Ground) ...	2	—	—	Sardines .....	1	—	—
Coffee (Instant) ...	2	—	—	Sausage .....	2	—	—
Cornflour .....	2	—	—	Semolina .....	2	—	—
Crab Paste .....	2	—	—	Shrimps (Potted)...	1	—	—
Croquettes .....	4	—	—	Soft drink .....	3	—	—
Currants .....	1	—	—	Soft drink pwd. ...	1	—	—
Curry Powder .....	1	—	—	Soup .....	1	—	—
Custard Powder ...	2	—	—	Soup Powder .....	1	—	—
Dripping .....	4	—	—	Spice .....	1	—	—
Eggs (scotch) .....	1	—	—	Steak .....	1	—	—
Fish cakes .....	2	—	—	Suet .....	1	—	—
Fish paste.....	7	1	14	Sugar.....	3	—	—
Flour .....	2	—	—	Sulphur & Yeast Tablets .....	1	—	—
Gelatine .....	1	—	—	Sultanas .....	1	—	—
Gin .....	1	—	—	Sweets .....	6	—	—
Grapes .....	1	—	—	Tablet jellies .....	2	—	—
Gravy Browning ...	3	—	—	Tapioca .....	1	—	—
Honey .....	4	—	—	Tea .....	4	—	—
Ice Cream .....	7	—	—	Tinned Milk .....	1	—	—
Ice Lolly .....	3	—	—	Tomato Juice .....	1	—	—
Jam .....	5	—	—	Tonic Water.....	1	—	—
Lard .....	3	—	—	Treacle .....	2	—	—
Lemon Curd .....	3	—	—	Vinegar, (Raspberry) .....	1	—	—
Lentils .....	3	—	—	Whisky .....	1	—	—
Limmits .....	1	—	—				
Macaroni .....	1	—	—				
Action taken in regard to unsatisfactory samples is given on Page 109.					219	8	3.65

# SAMPLES NOT UP TO SATISFACTORY STANDARDS

ARTICLE	No. of Sample		REPORT	REMARKS
	Informal	Formal		
Dried Peas	16		Dried peas containing 3.5% of discoloured or defective peas.	Warning letter sent to packer/retailer.
Custard Tart	31		Portion of custard tart containing two glass fragments.	Legal proceedings taken under Sec. 2 Food and Drugs Act, 1955, for selling food not of the substance demanded. Fined £10 and £7-10-0 costs.
Portion of Meat pie	32		Portion of meat pie containing part of a cockroach.	Legal proceedings taken under Sec. 2 Food and Drugs Act, 1955. Fined £10 and £8-10-0 costs.
Pea Preparation	191		The sample consisted of food colouring not conforming to Article 7 (3) of the Colouring Matter in Food Regulations.	Warning letter sent.
Milk	197		Sub-standard but genuine milk deficient in solids-not-fat to the extent of 1.1%.	No action taken.
Lobster Spread	202		Deficient in fish to the extent of 7.1%.	Formal sample taken.
Barm Cake & Butter	206		Barm cake spread with margarine.	Formal sample No. 218 taken.
Buttered Barm Cake		218	Barm cake spread with margarine.	Case dismissed.



## ANNUAL REPORT OF THE PUBLIC ANALYST

I am indebted to the Borough Analyst, Mr. J. Graham Sherratt, B.Sc. F.R.I.C. for the following remarks on the work carried out on behalf of the Corporation during the 12 months ended 31st December, 1962.

### Food and Drugs Act, 1955

Number of samples of Foods and Drugs analysed	....	....	219
Number of samples regarded as sub-standard or otherwise unsatisfactory	....	....	8
Percentage unsatisfactory	....	....	3.65

The above total of 219 samples included 53 samples of liquid milk and 166 samples of miscellaneous foods and drinks. The samples classified as sub-standard or otherwise unsatisfactory comprised two samples of buttered barm cakes, and one sample each of liquid milk, custard tart, meat pie, pea preparation, dried peas and lobster spread. Some information about these samples is given below.

### Buttered Barm Cakes:

Two samples were submitted for analysis described as "Buttered Barm Cakes." Both samples consisted of barm cakes spread with margarine.

### Milk:

One sample of milk contained less than the presumptive minimum of 8.5 per cent of solids-not-fat, established for genuine milk by the Sale of Milk Regulations, 1939. The freezing point of the sample was normal, thus indicating that the deficiency in solids-not-fat was not caused by the presence of extraneous water.

### Custard Tart:

A portion of custard tart was found to contain two fragments of glass, weighing 0.0012 g. and 0.014 g. respectively. The pieces of glass were extremely sharp, and the sample was unsafe for human consumption.

### Meat Pie:

Examination of a portion of meat pie submitted for analysis revealed that it contained part of a cockroach.

### Pea Preparation (Colouring Matter):

Article 7(3) of the Colouring Matter in Food Regulations requires that a food colouring matter should contain a label stating "This Food Colour conforms to the statutory requirements of the United Kingdom." The declaration contained on the label of a bottle of Pea Preparation did not conform to this requirement. The sample contained the permitted colours Tartrazine and Blue VRS.

### Dried Peas :

One sample of dried peas contained 3.5 per cent of discoloured or defective peas.

### Lobster Spread :

The Food Standards (Fish Paste) Order, 1951, prescribes a minimum of 70 per cent of fish pastes and fish spreads. One sample of lobster spread contained only 65 per cent of lobster meat, i.e. it was deficient in lobster meat to the extent of 7.1 per cent.

Samples not listed above were of satisfactory commercial quality. Samples for which there are legal, or otherwise generally accepted standards of composition, conformed to official requirements, and no contravention of the various Regulations governing colouring matter (except the one referred to above), preservatives, antioxidants or metallic contamination in food occurred.

### Composition of Milk Samples

The following is the average composition of samples of milk received during the year :—

Average fat ....	3.63 per cent.
Average solids-not-fat ....	8.77 per cent.
Average water ....	87.60 per cent.

## FERTILISERS AND FEEDING STUFFS ACT

Six samples of fertilisers and eight samples of feeding stuffs were received for analysis during the year. These samples were all submitted for routine check of composition and were not taken specially to investigate complaints.

One sample of fertiliser contained 3.3 per cent more potash than the amount declared. The excess of potash was 2.55 per cent outside the limits of variation permitted by the Fertilisers and Feeding Stuffs Regulations, 1960. The remaining five samples of fertilisers were satisfactory.

The feeding stuffs samples comprised one sample of Fish Meal and seven compound feeding stuffs. All of the samples were in satisfactory agreement with the statements contained in the copies of the Statutory Statements which accompanied them, after appropriate allowances had been made for the official limits of variation permitted by the Fertilisers and Feeding Stuffs Regulations, 1960.

## WATERS

Fifteen samples of drinking water were analysed during 1962. The organic condition of these samples was uniformly satisfactory, and none of the samples contained any poisonous metals.

J GRAHAM SHERRATT,

*Public Analyst.*



## LEGAL PROCEEDINGS

During the year it was necessary to institute proceedings in four instances.

1. 202 turkeys were seized under the provision of Sec. 9 of the Food and Drugs Act, 1955, because of extensive decomposition. Condemnation and destruction were authorised by a Justice of the Peace. Subsequent proceedings brought under Sec. 8 of the Act resulted in a fine of £50 with £7-7-0 costs.
2. Following a complaint from a member of the public that she had cut her mouth after eating a custard containing glass, legal proceedings were taken against the partners of the bakery. A successful prosecution under Sec. 2 of the Act alleging that the custard was not of the substance demanded resulted in a fine of £10 and £7-10-0 costs.
3. Another complaint from a member of the public concerning a cockroach in the pastry of a meat pie resulted in a prosecution under Sec. 2 of the Act, alleging that the pie was not of the substance demanded by the purchaser. A fine of £10 with £8-10-0 costs was imposed.
4. Whilst investigating a complaint regarding the condition of a hamburger stall, it was discovered that a firm based in another town had taken over an earth-floored garage in which hamburgers were being stored and partly cooked before being taken to the stall. Unfit hamburgers were seized under the provision of Sec. 9 of the 1955 Act. The owner was fined £40. Fourteen other offences against the Food Hygiene Regulations Nos. 5, 6, 15, 16, 17, 19, 20, 23, 24, 26 and 28 resulted in further fines totalling £135 plus £4-4-0 costs. Imprisonment was the alternative to the fines.

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