

[Report 1963] / Medical Officer of Health, Wigan County Borough.

Contributors

Wigan (England). County Borough Council.

Publication/Creation

1963

Persistent URL

<https://wellcomecollection.org/works/frawe3b2>

License and attribution

You have permission to make copies of this work under a Creative Commons, Attribution license.

This licence permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited. See the Legal Code for further information.

Image source should be attributed as specified in the full catalogue record. If no source is given the image should be attributed to Wellcome Collection.



Wellcome Collection
183 Euston Road
London NW1 2BE UK
T +44 (0)20 7611 8722
E library@wellcomecollection.org
<https://wellcomecollection.org>

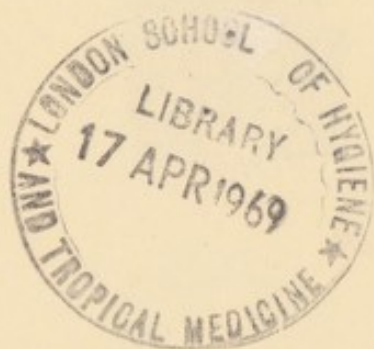
II

COUNTY BOROUGH OF WIGAN



Report
on the
Health
of the
County Borough of Wigan
1963

0544




COUNTY BOROUGH OF WIGAN



Report
on the
Health
of the
County Borough of Wigan
1963

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



Digitized by the Internet Archive
in 2018 with funding from
Wellcome Library

HOUSE OF MISCHIEF

ACCIDENTS DON'T JUST HAPPEN
THEY ARE CAUSED



GUARD AGAINST
BURNS and SCALDS

Fix FIREGUARDS to ALL Fires.
Use FLAME RESISTANT FABRICS especially for night wear and party dresses.
Keep MIRRORS and CLOCKS away from the mantelpiece.
NEVER use PARAFFIN or PETROL to light a fire.
MATCHES should be kept out of reach of children.
Turn PAN HANDLES and KETTLE SPOUTS away from children.
WRAP HOT WATER BOTTLES in thick covers.

GUARD AGAINST POISONING

Have GAS appliances regularly inspected by the GAS BOARD.
Keep DRUGS in locked cupboards - children may mistake them for sweets.
DETERGENTS and BLEACHES must be kept in a safe place.
NEVER use kerosene burners for any dangerous purpose.
Warn children against touching or eating POISONOUS BERRIES and FUNGI.

IS YOUR HOME SAFE
THIS ONE IS NOT - CAN YOU
SEE THE DANGER SPOTS?

GUARD AGAINST FALLS

STAIRCASES should be well lit and free from obstructions.
Use and fasten STAIR RODS or CLIPS.
Worn or wrinkled CARPETS are dangerous.
Do not polish under MATS.
Keep the home TIDY. TOYS and CLEANING APPARATUS should be put away when not in use.
Keep DOORWAYS free from obstructions.
Use a STEP LADDER for reaching high shelves or hanging curtains.

GUARD AGAINST ELECTRICAL ACCIDENTS

Avoid trailing WIRES.
FRAYED FLEX, DAMAGED SOCKETS AND BROKEN PLUGS should be replaced.
NEVER take portable electric appliances into the bath room.

CONTENTS

COMMITTEE	.....	2
STAFF	.....	2
INTRODUCTION	.....	5
Section 1. NATURAL AND SOCIAL CONDITIONS OF THE AREA	.....	9
Section 2. STATISTICS	.....	13
Section 3. PROVISION OF HEALTH SERVICES	.....	27
Section 4. PREVALENCE OF AND CONTROL OVER INFECTIOUS DISEASE	.....	63
Section 5. WELFARE SERVICES	.....	69
Section 6. SANITARY CIRCUMSTANCES OF THE AREA	.....	81
Section 7. HOUSING	.....	93
Section 8. INSPECTION AND SUPERVISION OF FOOD	.....	97
INDEX	.....	111

HEALTH COMMITTEE 1963
(Appointed 22nd May 1963)

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

STAFF, 1963

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., (to 31.10.63) *T. L. O'DONNELL, M.B., Ch.B., D.P.H. (from 1.11.63)
Assistant Medical Officers		*R. McLEAN BAIN, M.B., Ch.B., D.P.H. *T. L. O'DONNELL, M.B., Ch.B., D.P.H. (to 31.10.63) *A. F. HOWARTH, M.B., B.Ch. (from 18.11.63)
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. (to 31.7.63) *EDWARD W. KNOWLES, M.Ch. (Orth) F.R.C.S. (Ed) (from 1.8.63)
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 (<i>a</i>) (<i>b</i>) (<i>h</i>)
Deputy Chief Public Health Inspector	.....	P. STRAFFORD (<i>a</i>) (<i>b</i>) (<i>h</i>)
Public Health Inspectors	....	E. ASPIN (<i>a</i>) (<i>b</i>) (to 12.5.63)
		M. BAMBER (<i>a</i>) (<i>b</i>)
		R. FARNWORTH (<i>a</i>) (<i>b</i>)
		E. HARRIS (<i>a</i>) (<i>b</i>) (<i>h</i>)
		J. INESON (<i>a</i>) (<i>b</i>) (<i>h</i>) (from 1.4.63)
		C. JACKSON (<i>a</i>) (<i>b</i>) (to 31.3.63)
		M. H. JAGASIA (<i>a</i>) (<i>b</i>) (to 31.1.63)
		E. MARSDEN (<i>a</i>) (<i>b</i>) (<i>h</i>)
		K. PARKIN (<i>a</i>) (<i>b</i>)
		F. REYNOLDS (<i>a</i>) (<i>b</i>) (<i>h</i>) (to 31.8.63)
		J. G. THOMAS (<i>a</i>) (<i>b</i>) (from 1.11.63)
		L. WOOTTEN (<i>a</i>) (<i>b</i>) (from 1.9.63)
Senior Health Visitor	....	E. M. WRIGHT (<i>c</i>) (<i>d</i>) (<i>e</i>) (<i>g</i>)
Health Visitors	.....	F. M. L. DAVIES (<i>c</i>) (<i>d</i>) (<i>e</i>)
		*B. I. HIGGINS (<i>c</i>) (<i>d</i>) (<i>e</i>)
		K. HUXLEY (<i>c</i>) (<i>d</i>) (<i>e</i>) (to 30.9.63)
		C. JACKSON (<i>c</i>) (<i>d</i>) (<i>e</i>) (<i>g</i>)
		B. M. MIDDLEHURST (<i>c</i>) (<i>d</i>) (<i>e</i>) (to 31.8.63)
		M. E. MILLS (<i>c</i>) (<i>d</i>) (<i>e</i>)
		Z. M. VERNON (<i>c</i>) (<i>d</i>) (<i>e</i>) (<i>f</i>) (<i>g</i>)
		M. J. WALMESLEY (<i>c</i>) (<i>d</i>) (<i>e</i>)
Tuberculosis Visitor	....	E. CODY (<i>c</i>) (<i>d</i>)

Supervisor of Midwives	.....	.....	W. KAY (c) (d)
Midwives :			
E. V. BROWN (c) (d)			F. O'DWYER (c) (d)
M. C. DIX (c) (d)			M. QUINN (c) (d)
G. GREGORY (c) (d)			C. RYDER (c) (d)
D. HITCHEN (c) (d)			L. TURTON (c) (d)
C. B. MORAN (c) (d)			P. WAITE (c) (d)
			M. WOODWARD (c)
Day Nursery Matron	.....	.....	M. F. LUCAS (d) (f)
Home Nursing Superintendent	.....	.....	L. MAHER (c) (d) (g) (to 22.5.63)
			E. WILSON (d) (g) (from 23.5.63)
District Nurses :			
D. AUGURIO (d)			ARTHUR HALL (d) (g)
L. BANKS (d) (g)			M. E. LEATHERBARROW (d)
J. BURNS (d)			M. MOLLOY (d)
*M. CHAMPION (d)			A. REIGATE (c) (d) (g)
W. M. DOHERTY (e) (d)			B. RYLANCE (d)
E. M. GARDNER (d) (g)			JOHN M. WALKER (d) (g)
Junior Training Centre Supervisor	.....		J. HANSON
Senior Training Centre			
Senior Craft Instructor	.....	.....	E. HILTON
Mental Health Service :			
Senior Mental Welfare Officer	.....		J. A. PIETRE, B.A.
Mental Welfare Officers	.....	.....	F. DANDY (from 1.5.63)
			E. I. SHORE
			A. TAYLOR
Welfare Services :			
Senior Assistant	.....	.....	A. SIMM
Welfare Officers	.....	.....	H. A. SPEAKMAN
			B. T. WATT
Ambulance Service :			
Ambulance Superintendent	.....	.....	J. MORT
Lay Administrative Officer	.....	.....	G. CREE, D.M.A.

* 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.

“The great majority of those who speak of perfectibility as a dream, do so because they feel that it is one which would afford them no pleasure if it were realised.”

John Stuart Mill, 1828

The year under review opened with some of the most severe weather which this country has experienced within living memory and naturally there were fears in the department for its impact upon the very young and the very old. In an effort to guard against “cold injury” in the new-born every mother was specifically warned and advised on how to overcome the dangers. There were no deaths directly attributable to cold injury.

Potentially the worst sufferers were the aged with fixed incomes who required extra food and fuel. The Welfare Services Section stepped up their visiting schedules and much material help was obtained from voluntary agencies in the town.

Looking over the general figures of morbidity which are given on page 26 it is remarkable that there was in fact no epidemic prevalence of disease amongst the adult population. There were 700 cases of measles in children spread evenly over the age range 0—10 years, and occurring with monotonous regularity throughout the year, although the months of highest prevalence were April to July inclusive. There were 82 cases of whooping cough notified, the greatest number since 1956. Bearing in mind the undoubted fact that many cases are not notified due to difficulties in diagnosis, the mild nature of the disease and the ease of treatment of the majority of cases in older children with modern drugs, it does appear that the epidemic was fairly widespread.

Our records show that the majority of the cases occurred in unimmunised children.

For the fifteenth year in succession we have been free from diphtheria—a record only achieved by constant exhortation to parents to have their children protected. A special campaign to encourage reluctant parents was organised during March. The results were not encouraging. I am often perplexed and distressed by the number of times I hear of a family going to considerable trouble and paying three guineas to have the recently-acquired puppy immunised against hard-pad and distemper and yet resisting all the department's and the general practitioner's efforts to protect the baby free of charge against diphtheria, tetanus, whooping cough and poliomyelitis. Truly we are a nation of dog lovers.

The number of deaths of infants under one year of age, 39, was in excess of the phenomenally low figure for the previous year (21) and was probably influenced to some extent by the decrease in the number of stillbirths 31 (40). Of the 39 deaths 21 infants died in the first month of life, 16 in the first week. Congenital abnormality was given as a cause of death in 18 cases, prematurity in 10. The peri-natal mortality rate, 34.46, was in fact lower than the previous year (37.81). There was one death attributed to child-bearing.

The various personal and environmental health services of the Borough continued to function and to evolve along the lines of the policy laid down by the Council in its Ten Year Development Plan and a perusal of the individual sections of the report will show in detail what was achieved, which was not perhaps as much as we had hoped in some directions. We were fairly confident, for instance, that after various ministerial statements and the considerable volume of evidence now accumulated in favour of Fluoridation of the water supply, some progress would have been made in this field. Unfortunately an unreasonable measure of doubt was thrown on the project by a national voluntary association whose members themselves being adults stand to gain little or nothing by the implementation of fluoridation. In view of the intense emotions stirred nationally the Council wisely decided to defer fluoridation for the time being. Meanwhile hardly a month passes without news that yet another large community in the western world is protecting its children's teeth by adjusting the fluoride content of the water supply.

Progress towards smokeless air in the town suffered a serious set-back when after receiving a great many complaints the Health Committee thought it advisable to refer the matter of the quality and price of solid smokeless fuel to the Association of Municipal Corporations. There is no doubt that many things militate against the smooth implementation of a clean air policy, not the least of these being the apparent absence of any constructive long term national fuel policy. I am particularly happy to report that industrialists in the town have co-operated magnificently and it is exceptional to see smoke issuing from industrial chimneys.

In contrast to the optimistic comment in my last report, the department's efforts in the field of slum clearance were slowed up considerably in the latter half of the year when the provision of new houses to let fell short of the intended programme and we found that tenants were having to stay for many months in houses which were the subject of demolition orders.

The special problems associated with the maternity services in the area, the shortage of beds and midwives, have continued and the report records the very considerable number of mothers who in full consultation with the Hospital authorities were accepted for intensive domiciliary care following early discharge from Billinge Hospital. The extra duty, whilst not as rewarding professionally, has been cheerfully accepted by the domiciliary midwives.

A large part of the future of the health services lies in the field of Health Education, a subject about which it is easy to talk but in which it is much more difficult to operate without the help of staff specially trained in the increasingly complex techniques of the use of mass media and advertising expertise.

In November however with great daring we launched a full scale "Health Week", the focal point of which was an extensive exhibition and by dint of excellent planning and hard work on the part of almost every member of the staff the result was a resounding success which drew many visitors from out of town as well as more than we ever expected from the borough itself. Particularly rewarding was the great interest of the many groups of school children and their teachers who kept the exhibition staff busy answering questions.

Details of the work of the Welfare Services Section are recorded under the appropriate headings. During the year the Council's schemes for the partially sighted under section 29 of the National Assistance Act, 1948, were amended. The steadily increasing numbers of aged persons in the Borough who are really unable to lead independent lives is putting a strain on the available hostel places. The situation is being contained only by intensive case work and the provision of the department's many domiciliary services. In this respect the Home Help Service is of paramount importance and is often the means, for as little as 13/3 a week, of enabling the aged person to remain at home.

The Chief Public Health Inspector has reported to me in detail on the work of the environmental and sanitary services and his report is included for your perusal. The staffing of the section has not been easy. Four mature and experienced inspectors left the department to be replaced after some difficulty by two young inspectors. The movement of staff in the past year or two has clearly shown that the salary structure is inadequate to retain the experienced man on whom the stability of the unit relies. Frequent changes of the inspectorate lead to a lack of continuity and unnecessary duplication of work.

There have been other changes amongst the senior staff. Dr. Alan Sippert, Deputy Medical Officer of Health since 1961, resigned on obtaining an appointment with the Leeds Regional Hospital Board and I would like to take this opportunity to thank him and to wish him well in his new post. Dr. T. L. O'Donnell, Assistant Medical Officer of Health, was promoted to take his place and we welcome Dr. Aileen F. Howarth, who joined the staff as Assistant Medical Officer of Health, in November. Miss L. Maher, Home Nursing Superintendent, retired in May after holding this office for 15 years. During this period she upheld the fine traditions of the Queen's Nurses and a great many borough residents are indebted to her loyalty and efficiency. We wish her a long and happy retirement. We were fortunate indeed to recruit Mrs. E. Wilson to take her place.

In conclusion I must express my thanks to the staff for their loyal co-operation and for the good work which they have done in all sections throughout the year. Similarly to the chief officers and technical staff 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.

JUNE, 1964.

Section I



**Natural and
Social Conditions
of the Area**

GENERAL

Area in acres	5,083
Rateable Value of the Borough, 31st December, 1963	£2,749,412
Sum Represented by a Penny Rate	£10,900
Registrar Generals' estimated population on 1st July, 1963 (on which figure statistics in this report are based)	78,780
Number of inhabited houses on the 31st December, 1963 (according to the Rate books)	24,788
Number of marriages solemnised within the Borough during 1963	646

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

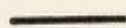
Ministry of Labour Remploy Factory caters for the disabled who are able to perform useful work.

In the latter part of the year the Ordnance factory at Beech Hill which has been unused for many years was re-opened by Tupperware, a plastic moulding firm of international repute.

In addition the availability of female labour in the town has prompted the opening of more small factories for the machining of garments.

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.

Section II



Statistics

VITAL STATISTICS, 1962-63

	1962	1963
Area (acres)	5,083	5,083
Population (Estimated by Registrar General)	78,910	78,780
Live Births : Males 664 } Total	1,309	1,333
Females 669 }		
Rate per 1,000 population	16.59	13.92
Illegitimate Live Births per cent. of total live births	3.67	4.57
Stillbirths : Number	40	31
Rate per 1,000 total live and still births	29.65	22.73
Total Live and Still Births	1,349	1,364
Infant Deaths (Deaths under 1 year)	21	39
Infant Mortality Rates :		
Total Infant Deaths per 1,000 total live births	16.04	29.26
Legitimate Infant Deaths per 1,000 legitimate live births	14.27	28.30
Illegitimate Infant Deaths per 1,000 illegitimate live births	62.50	49.18
Neo-natal Mortality Rate (deaths under 4 weeks per 1,000 total live births)	9.93	15.75
Early Neo-natal Mortality Rate (deaths under 1 week per 1,000 total live births	8.40	12.00
Perinatal Mortality Rate (stillbirths and deaths under 1 week combined per 1,000 total live and still births	37.81	34.46
Maternal Mortality (including abortion) :		
Number of Deaths	—	1
Rate per 1,000 total live and still births	—	0.73
Adjusted Birth Rate per 1,000 Population (Area comparability factor 1.05)	16.26	17.77
Ratio of local adjusted rate to national rate	0.90	0.98
Birth Rate for England and Wales	18.0	18.2
Deaths of Infants under 1 day old	6	5
Ditto. 1 year (legitimate)	18	36
Ditto. 1 year (illegitimate)	3	3
Excess of Registered Births over Deaths	317	288
Deaths : Males 573 } Total	992	1,045
Females 472 }		
Rate per 1,000 population	12.57	13.26
Adjusted Death Rate per 1,000 population	14.96	14.98
(Area comparability factor 1.13)		
Ratio of local adjusted rate to national rate	1.26	1.23
Death Rate for England and Wales	11.9	12.2
Infantile mortality rate per 1,000 births for England and Wales	20.7	20.9

CAUSES OF DEATH WITH DEATH RATES, 1963

	DISEASE	No. of Deaths	Rate
1.	Tuberculosis, Respiratory	3	.04
2.	Tuberculosis, Other	1	.01
3.	Syphilitic Disease	2	.03
4.	Diphtheria	—	—
5.	Whooping Cough	—	—
5.	Meningococcal Infections	—	—
7.	Acute Poliomyelitis	—	—
8.	Measles	—	—
9.	Other Infective and Parasitic Diseases	2	.03
10.	Malignant Neoplasm Stomach	27	.34
11.	„ „ Lung, Bronchus	46	.58
12.	„ „ Breast	17	.22
13.	„ „ Uterus	12	.15
14.	Other Malignant and Lymphatic Neoplasms	79	1.00
15.	Leukaemia, Aleukaemia	5	.06
16.	Diabetes	6	.08
17.	Vascular Lesions of Nervous System	119	1.51
18.	Coronary Disease, Angina	206	2.61
19.	Hypertension with Heart Disease	16	.20
20.	Other Heart Disease... ..	142	1.80
21.	Other Circulatory Disease	60	.76
22.	Influenza	3	.04
23.	Pneumonia	45	.57
24.	Bronchitis	80	1.01
25.	Other Diseases of Respiratory System	14	.18
26.	Ulcer of Stomach and Duodenum	7	.09
27.	Gastritis, Enteritis and Diarrhoea	4	.05
28.	Nephritis and Nephrosis	7	.09
29.	Hyperplasia of Prostate	6	.08
30.	Pregnancy, Childbirth, Abortion	1	.01
31.	Congenital Malformations	12	.15
32.	Other Defined and Ill-Defined Diseases	90	1.14
33.	Motor Vehicle Accidents	8	.10
34.	All Other Accidents	17	.22
35.	Suicide	6	.08
36.	Homicide and Operations of War	2	.03
		1045	13.26

**REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH,
1963**

CAUSES	Sex	All Ages	Under 4 wks.		AGE IN YEARS									
			4 wks. to 1 yr.	1-	5-	15-	25-	35-	45-	55-	65-	75-		
ALL CAUSES ...	M.	573	14	12	2	1	7	4	20	48	117	179	169	
	F.	472	7	6	—	1	2	3	16	42	70	116	209	
1 Tuberculosis, Respiratory	M.	1	—	—	—	—	—	—	—	—	—	1	—	
	F.	2	—	—	—	—	—	—	1	—	1	—	—	
2 Tuberculosis, Other ...	M.	1	—	—	—	—	—	—	—	—	1	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
3 Syphilitic Disease ...	M.	1	—	—	—	—	—	—	—	—	—	—	1	
	F.	1	—	—	—	—	—	—	—	—	—	1	—	
4 Diphtheria ...	M.	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
5 Whooping Cough...	M.	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
6 Meningococcal Infections	M.	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
7 Acute Poliomyelitis ...	M.	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
8 Measles ...	M.	—	—	—	—	—	—	—	—	—	—	—	—	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
9 Other Infective and Parasitic Diseases ...	M.	2	—	—	1	—	—	—	—	—	—	—	1	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
10 Malignant Neoplasm, Stomach ...	M.	15	—	—	—	—	—	—	1	1	5	5	3	
	F.	12	—	—	—	—	—	1	1	1	2	4	3	
11 Malignant Neoplasm, Lung, Bronchus ...	M.	33	—	—	—	—	—	1	1	3	16	10	2	
	F.	13	—	—	—	—	—	1	—	5	3	2	2	
12 Malignant Neoplasm, Breast ...	F.	17	—	—	—	—	—	—	—	9	4	1	3	
13 Malignant Neoplasm, Uterus ...	F.	12	—	—	—	—	—	—	2	5	4	1	—	
14 Other Malignant and Lymphatic Neoplasms	M.	44	1	—	—	—	1	—	—	3	9	17	13	
	F.	35	—	—	—	—	1	—	1	2	7	11	13	
15 Leukaemia, Aleukaemia	M.	5	—	—	—	—	1	—	—	—	1	1	2	
	F.	—	—	—	—	—	—	—	—	—	—	—	—	
16 Diabetes ...	M.	1	—	—	—	—	—	—	—	—	—	—	1	
	F.	5	—	—	—	—	—	—	1	—	1	1	2	
17 Vascular Lesions of Nervous System ...	M.	62	—	1	—	—	—	—	2	4	13	19	23	
	F.	57	—	—	—	—	—	1	1	2	7	20	26	
18 Coronary Disease, Angina ...	M.	141	—	—	—	—	—	2	9	19	41	47	23	
	F.	65	—	—	—	—	—	—	2	2	11	25	25	

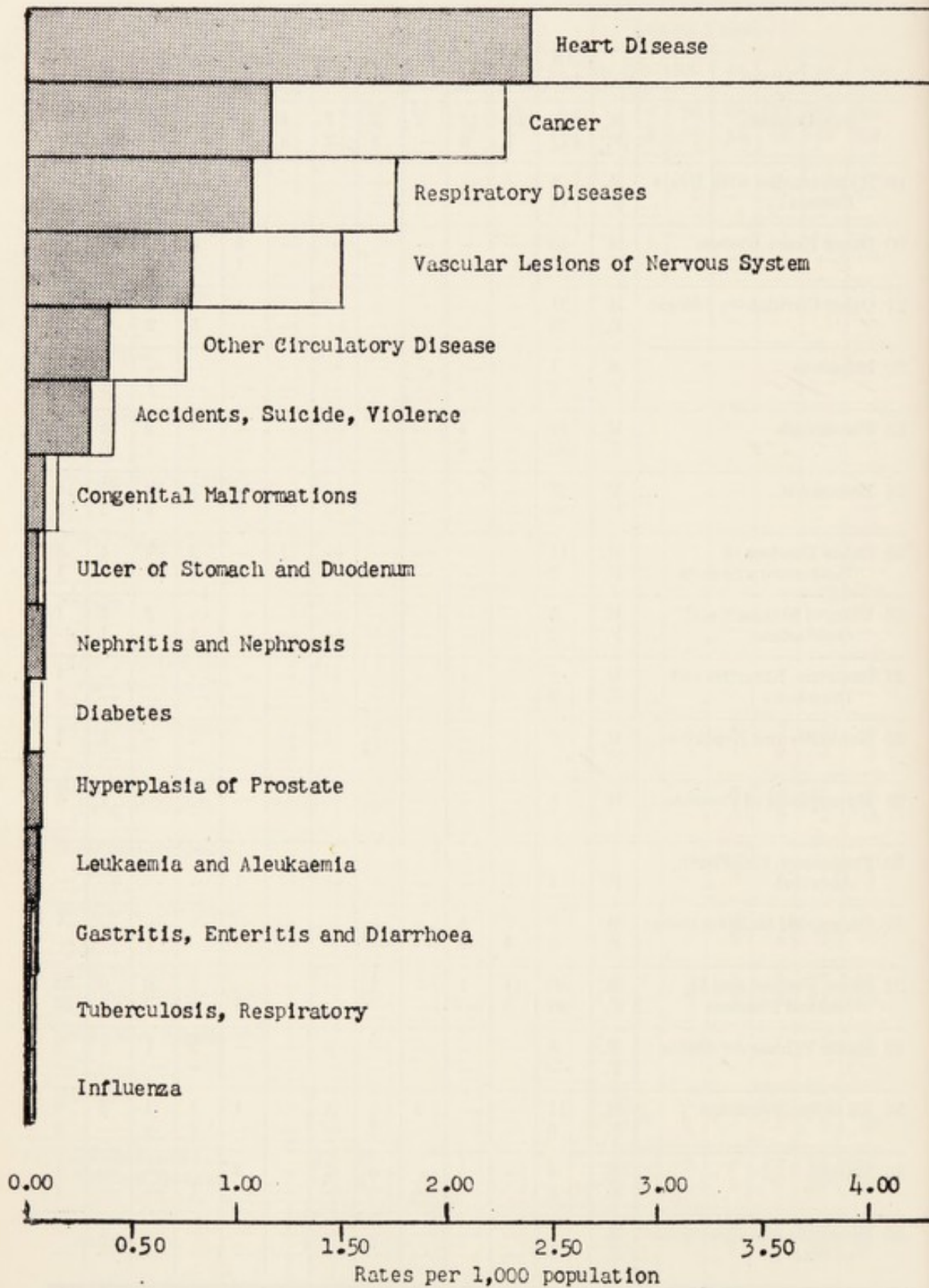
REGISTRAR GENERAL'S SHORT LIST OF CAUSES OF DEATH
1963—continued

CAUSES	Sex	All Ages	Under 4 wks.	4 wks. to 1 yr.	AGE IN YEARS										
					1-	5-	15-	25-	35-	45-	55-	65-	75-		
ALL CAUSES	M.	573	14	12	2	1	7	4	20	48	117	179	169		
	F.	472	7	6	—	1	2	3	16	42	70	116	209		
19 Hypertension with Heart Disease	M.	4	—	—	—	—	—	—	—	1	1	2	—		
	F.	12	—	—	—	—	—	—	1	—	2	4	5		
20 Other Heart Disease	M.	45	—	—	—	—	—	—	3	3	2	19	18		
	F.	97	—	—	—	—	—	—	1	5	11	22	58		
21 Other Circulatory Disease	M.	31	—	—	—	—	—	—	1	2	1	13	14		
	F.	29	—	—	—	—	—	—	—	1	2	6	20		
22 Influenza	M.	1	—	—	—	—	—	—	—	—	—	1	—		
	F.	2	—	—	—	—	—	—	—	—	1	1	—		
23 Pneumonia	M.	19	—	4	—	—	—	—	—	—	3	4	8		
	F.	26	—	5	—	—	1	—	—	2	1	6	11		
24 Bronchitis... ..	M.	55	—	—	—	—	—	—	—	3	14	20	18		
	F.	25	—	—	—	—	—	—	2	—	4	7	12		
25 Other Diseases of Respiratory System ...	M.	11	—	—	—	—	—	1	—	3	—	4	3		
	F.	3	—	—	—	—	—	—	1	1	—	—	1		
26 Ulcer of Stomach and Duodenum	M.	5	—	—	—	—	—	—	—	—	2	2	1		
	F.	2	—	—	—	—	—	—	—	1	—	1	—		
27 Gastritis, Enteritis and Diarrhoea	M.	2	—	1	—	—	—	—	—	—	—	—	1		
	F.	2	—	1	—	—	—	—	—	—	—	—	1		
28 Nephritis and Nephrosis	M.	7	—	—	—	—	1	—	—	2	—	3	1		
	F.	—	—	—	—	—	—	—	—	—	—	—	—		
29 Hyperplasia of Prostate ...	M.	6	—	—	—	—	—	—	—	—	—	1	5		
30 Pregnancy, Childbirth, Abortion	F.	1	—	—	—	—	—	—	1	—	—	—	—		
31 Congenital Malformations	M.	7	2	5	—	—	—	—	—	—	—	—	—		
	F.	5	4	—	—	—	—	—	—	—	1	—	—		
32 Other Defined and Ill-Defined Diseases ...	M.	50	11	1	—	1	—	—	—	1	6	6	24		
	F.	40	3	—	—	—	—	—	1	3	8	3	22		
33 Motor Vehicle Accidents	M.	8	—	—	—	—	2	—	—	2	1	1	2		
	F.	—	—	—	—	—	—	—	—	—	—	—	—		
34 All Other Accidents	M.	11	—	—	1	—	1	—	1	1	1	2	4		
	F.	6	—	—	—	1	—	—	—	1	—	—	4		
35 Suicide	M.	4	—	—	—	—	1	—	2	—	—	—	1		
	F.	2	—	—	—	—	—	—	—	1	—	—	1		
36 Homicide and Operations of War	M.	1	—	—	—	—	—	—	—	—	—	1	—		
	F.	1	—	—	—	—	—	—	—	—	1	—	—		

PRINCIPAL CAUSES OF DEATHS AT ALL AGES, 1963

SHADED PORTION — MALES

UNSHADED PORTION — FEMALES



Crude Death Rates for Wigan During the last Ten Years

1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
11.37	11.06	11.02	11.53	11.57	11.07	12.04	13.91	12.57	13.26

INQUESTS AND UNCERTIFIED DEATHS (Wigan Residents Only)

The number of inquests held during 1963 was 67, and the following verdicts have been recorded :—

Natural Causes	....	....	....	....	....	....	....	....	....	36
Accidents :										
Road	....	....	....	....	....	....	....	....	....	9
Falls : Home	....	....	....	....	....	....	....	....	....	4
Works	....	....	....	....	....	....	....	....	....	1
Burns and Scalds	....	....	....	....	....	....	....	....	....	1
Fire in Home	....	....	....	....	....	....	....	....	....	1
Gas	....	....	....	....	....	....	....	....	....	2
Operation	....	....	....	....	....	....	....	....	....	1
Struck by falling stone	....	....	....	....	....	....	....	....	....	1
Drowning	....	....	....	....	....	....	....	....	....	1
Impaction of dentures in the glottis	....	....	....	....	....	....	....	....	....	1
Fractures of skull	....	....	....	....	....	....	....	....	....	2
Suicide :										
Gas	....	....	....	....	....	....	....	....	....	5
War Service....	....	....	....	....	....	....	....	....	....	1
Murder	....	....	....	....	....	....	....	....	....	1
										—
										67
										—

There was no uncertified death in 1963.

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

		Bronchitis				
		1959	1960	1961	1962	1963
Deaths ....	....	88	69	101	82	80
Rates ....	....	1.09	0.85	1.28	1.04	1.01

		Pneumonia				
		1959	1960	1961	1962	1963
Deaths ....	....	35	26	53	40	45
Rates ....	....	0.43	0.32	0.67	0.51	0.57

		Pulmonary Tuberculosis				
		1959	1960	1961	1962	1963
Deaths .....	....	9	9	7	5	3
Rates .....	....	0.11	0.11	0.09	0.06	0.04

		Cancer of the Lung, Bronchus				
		1959	1960	1961	1962	1963
Deaths ....	....	40	41	45	22	46
Rates ....	....	0.49	0.50	0.57	0.28	0.58

		Other Diseases of Respiratory Organs				
		1959	1960	1961	1962	1963
Deaths ....	....	21	11	22	15	14
Rates .....	....	0.26	0.14	0.28	0.19	0.18

		Total from All Respiratory Causes				
		1959	1960	1961	1962	1963
Deaths ....	....	193	156	228	164	188
Rates ....	....	2.38	1.92	2.89	2.08	2.38

CANCER

Deaths 1896-1963

	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	Year 1963	181	2.29

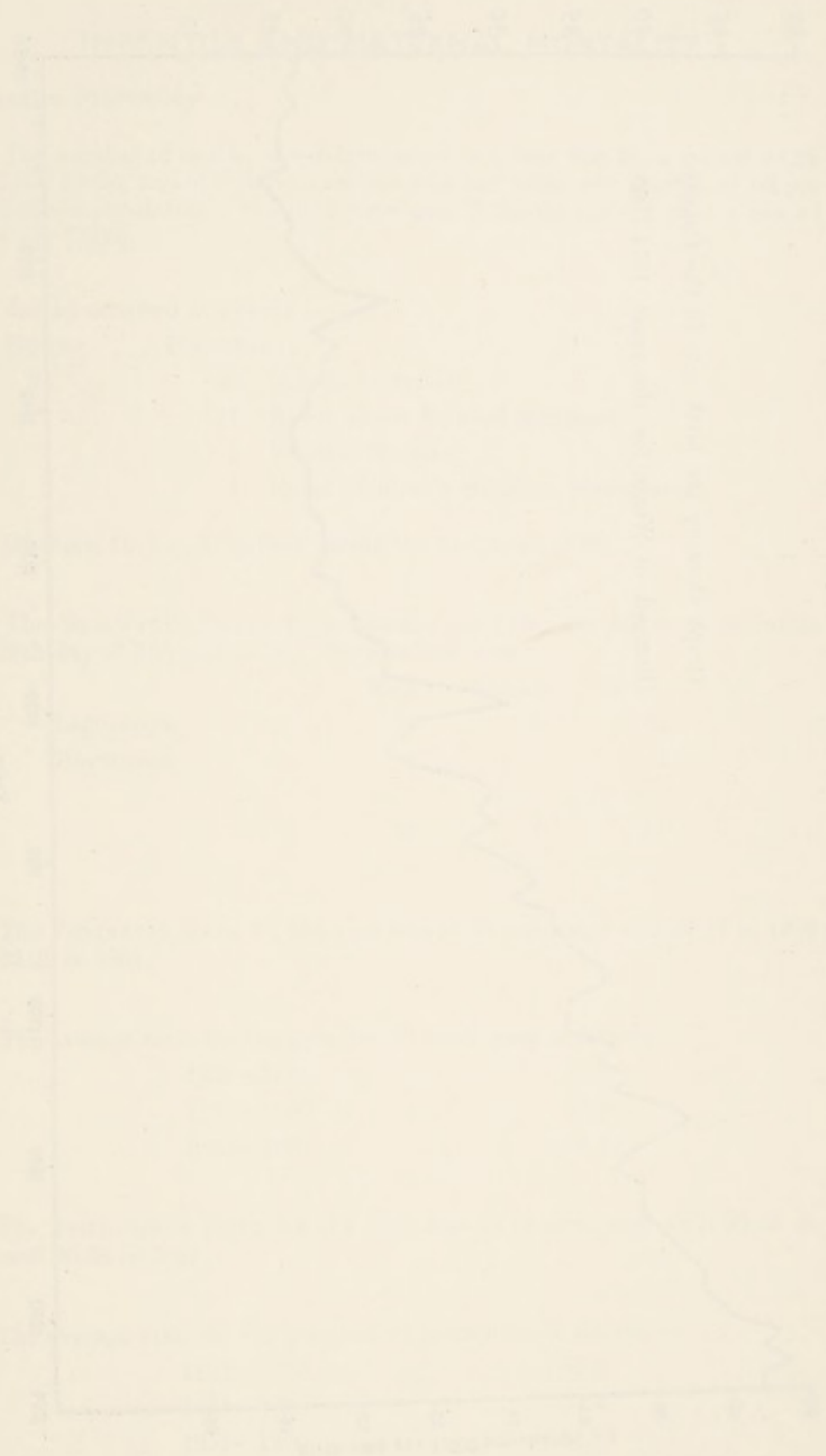
C A N C E R

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

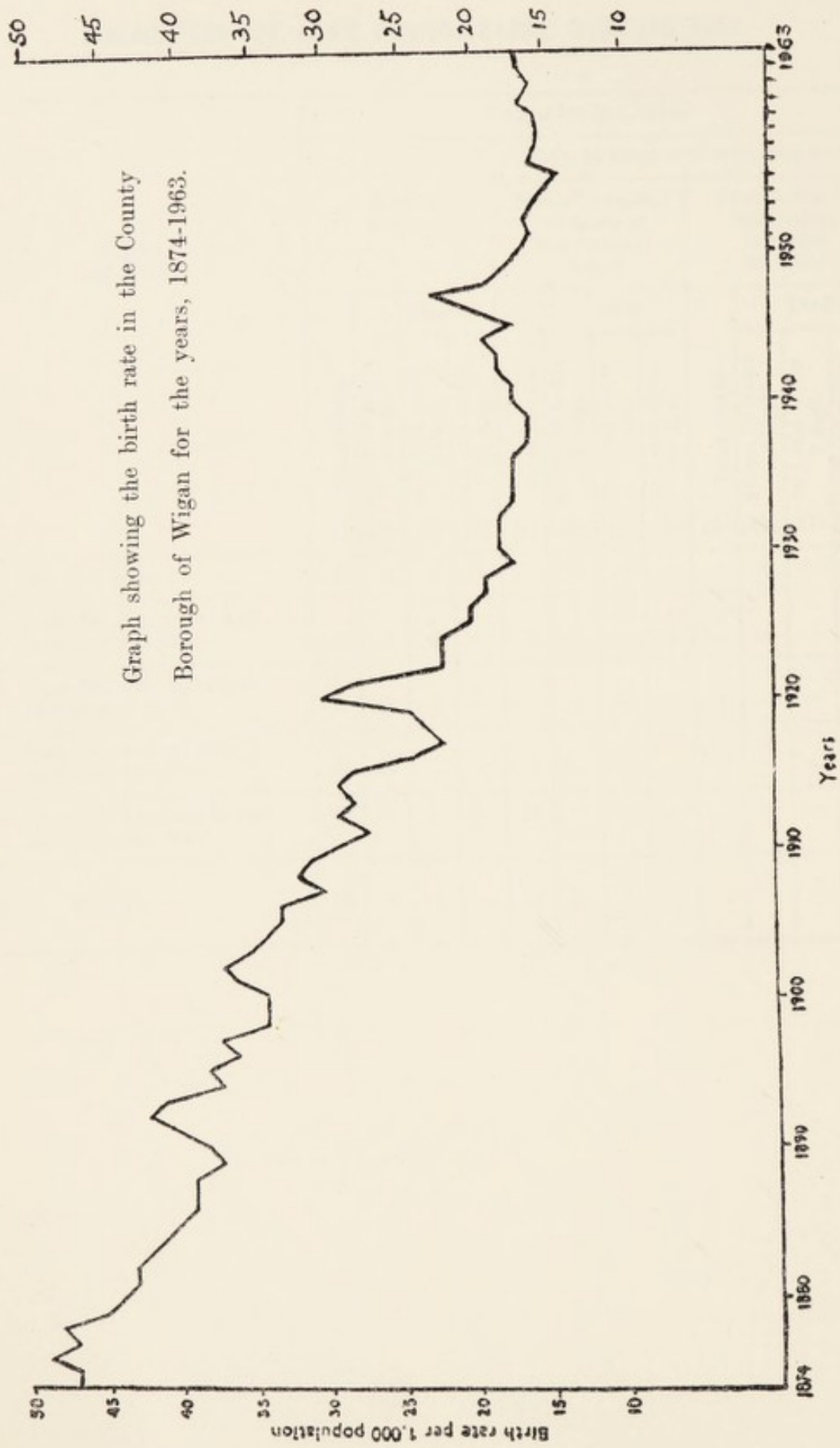
	1954		1955		1956		1957		1958		1959		1960		1961		1962		1963	
	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate	No.	Rate
Uterus	3	.04	5	.06	6	.07	6	.07	7	.09	6	.07	6	.07	4	.05	8	.10	12	.15
Stomach and Duodenum ...	28	.34	17	.21	30	.37	28	.34	33	.41	40	.49	29	.36	23	.29	21	.27	27	.34
Breast	14	.17	11	.13	17	.21	11	.13	14	.17	11	.14	14	.17	13	.17	12	.15	17	.22
Lung, Bronchus ...	20	.24	25	.30	27	.33	38	.47	27	.33	40	.49	41	.50	45	.57	22	.28	46	.58
Other Sites	57	.69	71	.86	51	.62	52	.64	52	.64	85	1.05	72	.89	64	.81	77	.98	79	1.00
Total Deaths from Cancer ...	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	181	2.29
Total Deaths All Causes ...	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	1045	13.26

ANALYSIS OF LIVE PREMATURE BIRTHS 1963

Weight at birth	Premature live births											
	Born in hospital				Born at home or in a nursing home							
					Nursed, entirely at home or in a nursing home				Transferred to hospital on or before 28th day			
	Total Births	Died			Total Births	Died			Total Births	Died		
within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	within 24 hours of birth		in 1 and under 7 days	in 7 and under 28 days	
(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)	(9)	(10)	(11)	(12)	
1 2lb. 3oz. or less	5	4	1	—	—	—	—	—	—	—	—	—
2 Over 2lb. 3oz. up to and including 3lb. 4oz.	6	2	1	—	—	—	—	—	—	—	—	—
3 Over 3lb. 4oz. up to and including 4lb. 6oz.	21	1	1	—	—	—	—	1	—	—	—	—
4 Over 4lb. 6oz. up to and including 4lb. 15oz.	18	—	—	—	1	—	—	3	1	—	—	—
5 Over 4lb. 15oz. up to and including 5lb. 8oz.	42	—	—	—	11	—	—	1	—	—	—	—
6 TOTAL	92	7	3	—	12	—	—	5	1	—	—	—



Graph showing the birth rate in the County
Borough of Wigan for the years, 1874-1963.



INFANTILE AND MATERNAL MORTALITY

Infantile Mortality

The number of deaths of children under one year was 39, a rate of 29.26 per 1,000 births, and of children over one year and under five years 2, or .03 per 1,000 of the population. (In 1962 there were 21 deaths under 1 year, a rate of 16.04 per 1,000).

The deaths occurred as follows :—

HOME :	HOSPITALS :
2	20 Billinge Hospital
	11 Royal Albert Edward Infirmary
	5 Whelley Hospital
	1 Royal Children's Hospital, Manchester

Of these, 16, *i.e.*, 41% 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 15.75 The numbers were :—

	Male	Female	Total
Legitimate	12	7	19
Illegitimate	2	—	2
	—	—	—
	14	7	21
	==	==	==

The PERINATAL RATE for the year was 34.46 compared with 37.81 in 1962 and 32.39 in 1961.

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

1931—1940	79.9
1941—1950	58.9
1951—1960	46.71

The STILL-BIRTH RATE for the year was 22.73 compared with 29.65 in 1962 and 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

INFANTILE AND MATERNAL MORTALITY—*continued*

These figures demonstrate once again the importance of congenital malformations in infant deaths. Ten infant deaths were due to abnormalities which were incompatible with long survival.

Seven children died from respiratory infections, a reminder that antibiotics have not entirely conquered such illnesses. Only seven deaths were directly attributable to prematurity. When this is considered with the stillbirth rate it gives an indication of the high standard of ante-natal care in the borough.

Maternal Mortality

The one maternal death serves as a sad reminder of the importance of ante-natal care. At a critical period in her pregnancy this woman failed to notice a deterioration in her condition and by the time her medical attendant was given the opportunity to recognise and treat a pre-eclamptic toxæmia the prospect of uneventful delivery and puerperium was remote.



Vertical axis of line

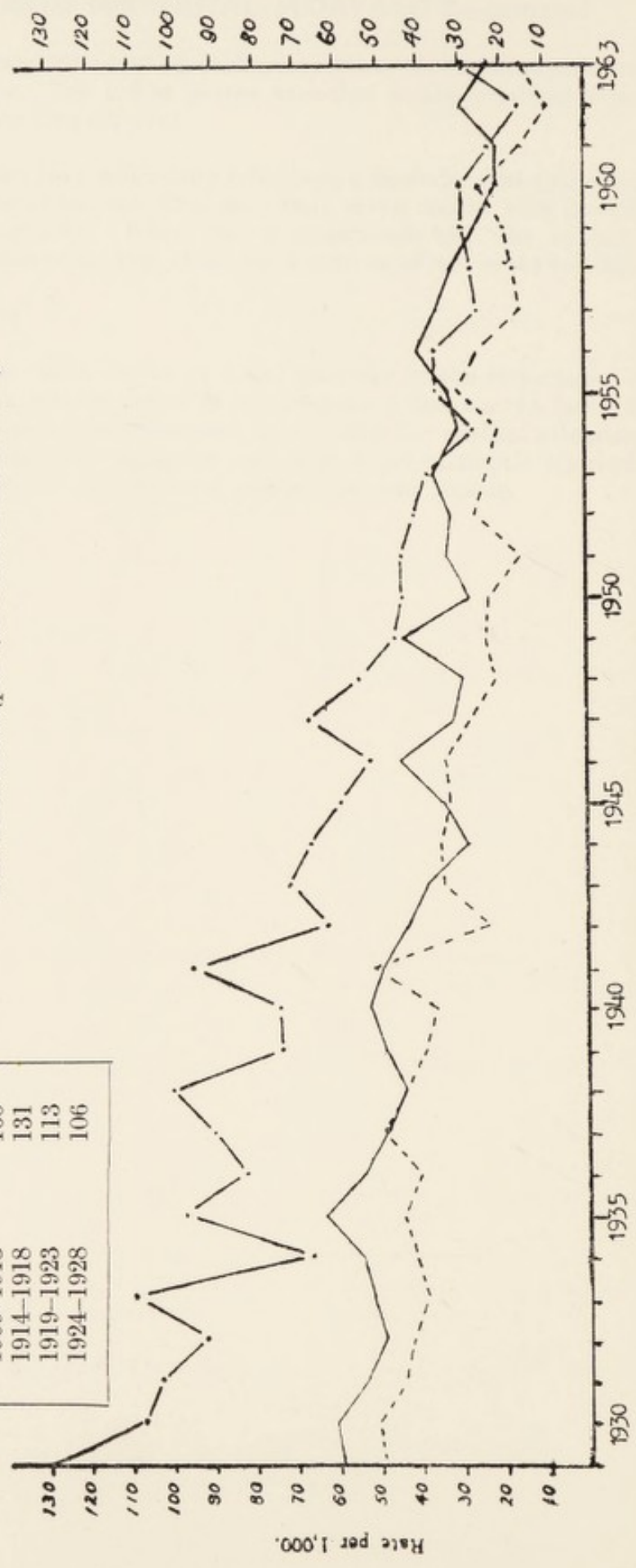
Horizontal axis of line

Line graph showing the relationship between the two variables.

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 1929-1963

- . - . - 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, 1963

Number of Deaths from Stated Causes at Various Periods

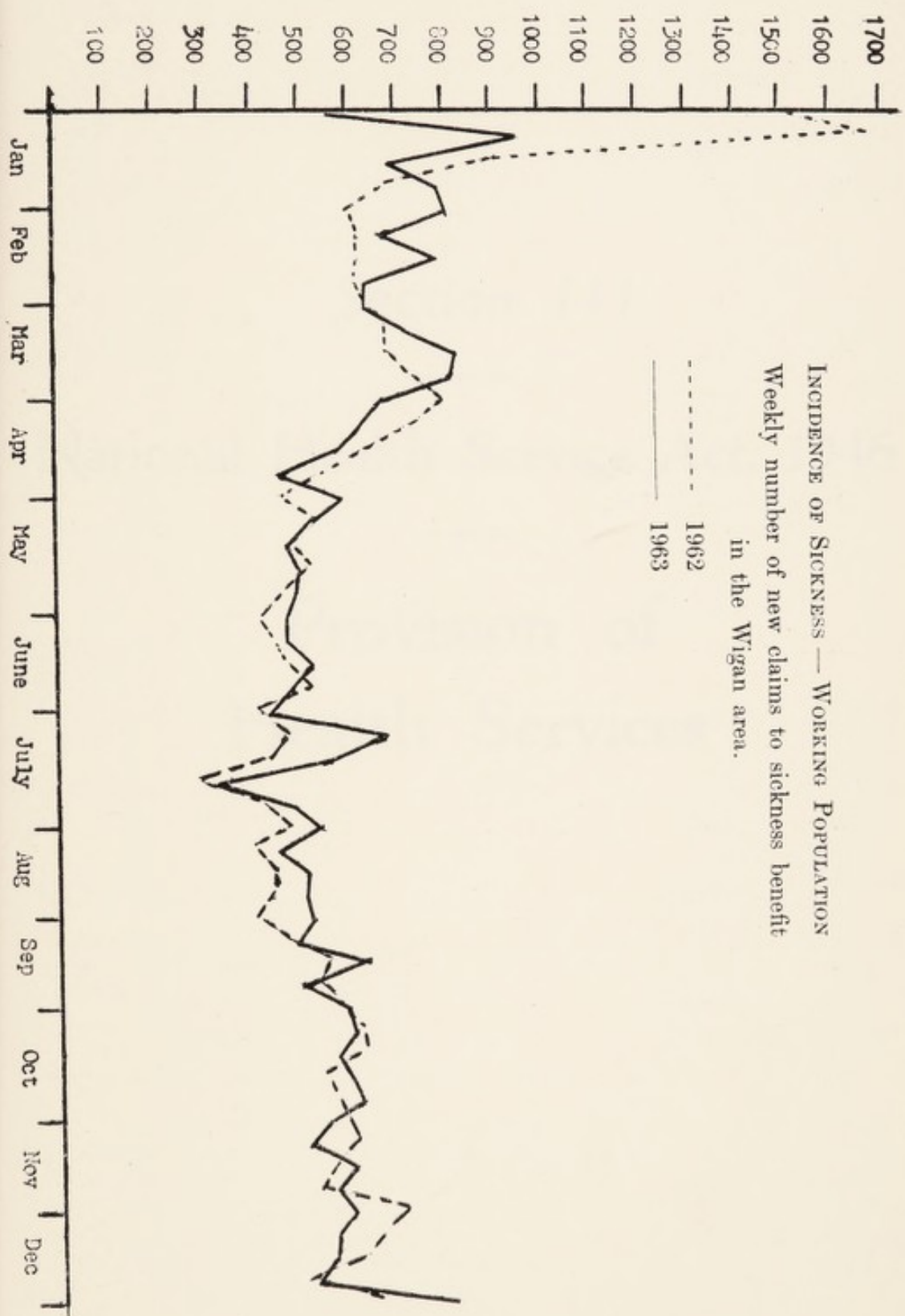
Under 1 Year of Age

CAUSE OF DEATH	Class No.	Un-1 day	1 day	2 Days	3 Days	4 Days	5 Days	6 Days	7-13 days	14-20 days	21-28 days	28 days -2 mths	2 mths	3 mths	4 mths	5 mths	6 mths	7 mths	8 mths	9 mths	10 mths	11 mths	Total under 1 yr.	
Hepatic tumour	14		1																				1	
Broncho-pneumonia	23											2	2		1									5
with acute bronchitis																								2
congenital heart disease																								2
Gastro-Enteritis	27												1											1
Congenital Heart disease	31								1			1												3
Spina Bifida									1															1
Multiple abnormalities with prematurity																								1
Foetal abnormality with anencephaly and spina bifida		1																						1
Hydrocephalus with myelomeningocele																								1
Hydrocephalus									1															2
Prematurity	32		4	3																		1		10
Cystic fibrosis													2											2
Cerebral haemorrhage			1						1															3
Gangrenous hernia with volvulus											1													1
Acute renal failure with urinary infection and toxic hepatitis												1												1
Peripheral circulatory failure with intesteno-cutaneous fistula															1									1
Haemolytic disease of newborn						1																		1
		5	6	3		1	1	1	4		1	4	5		5		1				1	1		39

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 1963.

Jan.	1st	....	602	July	2nd	....	683
„	8th	....	961	„	9th	....	563
„	15th	....	699	„	16th	....	335
„	22nd	....	800	„	23rd	....	481
„	29th	....	815	„	30th	....	548
Feb.	5th	....	676	Aug.	6th	....	451
„	12th	....	798	„	13th	....	516
„	19th	....	651	„	20th	....	508
„	26th	....	649	„	27th	....	525
Mar.	5th	....	733	Sept.	3rd	....	492
„	12th	....	837	„	10th	....	636
„	19th	....	824	„	17th	....	502
„	26th	....	666	„	24th	....	599
April	2nd	....	632	Oct.	1st	....	606
„	9th	....	589	„	8th	....	577
„	16th	....	458	„	15th	....	604
„	23rd	....	596	„	22nd	....	628
„	30th	....	526	„	29th	....	555
May	7th	....	483	Nov.	5th	....	514
„	14th	....	502	„	12th	....	605
„	21st	....	494	„	19th	....	574
„	28th	....	472	„	26th	....	610
June	4th	....	479	Dec.	3rd	....	569
„	11th	....	535	„	10th	....	560
„	18th	....	481	„	17th	....	530
„	25th	....	441	„	24th	....	820
				„	31st	....	585



1915
1916
1917
1918
1919
1920
1921
1922
1923
1924
1925
1926
1927
1928
1929
1930

Amount of rainfall (inches) at [location]
during the year [year]



Section III

National Health Service Act, 1946

**Provision of
Health Services**

MATERNAL AND CHILD HEALTH

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 afternoons.
PEMBERTON CLINIC : 15, Billinge Road.	Class for expectant mothers : Friday afternoons at 2 p.m. 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. Andrews' 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 mon- thly. Cases from Ince, Hindley, Standish Aspull, Haigh, Shevington and Platt Bridge also attend.

CARE OF EXPECTANT AND NURSING MOTHERS

Ante-Natal Care

General practitioners are now booked to undertake the ante-natal care of expectant mothers in more than 95% of home confinements. At the clinics 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.

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.

	WIGAN CENTRE		PEMBERTON	
	Weekly Consultant Clinic	Weekly Consultant Clinic	Weekly Consultant Clinic	Weekly Consultant Clinic
Number of Primary Cases attending Clinic during year	523	2	117	33
Total number of attendances	2277	248	758	291

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. 129 new cases were examined during the year and there were 16 return cases, a total of 145 attendances.

Health Education for Expectant Mothers

A mothercraft training and exercise class for expectant primiparae is held at the Central Clinic each week. There are 16 classes in each series. Expectant mothers join in group discussions on mothercraft, diet, pregnancy, labour and general care of the infant. Relaxation exercises are taught and reassurance given to allay any fears which may exist. The classes are conducted by Health Visitors. During 1963 there were 50 classes at which 789 attendances were made by expectant mothers. Arrangements were also made during the year for the showing of the film "To Janet a Son" which deals with all aspects of pregnancy and childbirth. This was greatly appreciated by those who were able to attend.

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 staff.

CARE OF CHILDREN UNDER SCHOOL AGE

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	2391	382	592	3365	320	931	2855
Scholes	1264	296	401	1961	163	597	1610
Pemberton	1563	257	354	2174	192	703	1843
Worsley Mesnes	650	191	131	972	74	155	856
Springfield	1706	334	535	2575	223	733	2151
Fleet Street	1112	198	197	1507	134	446	1345
Goose Green	482	89	122	693	69	98	602
Marsh Green	1189	307	376	1872	139	354	1563
	10357	2054	2708	15119	1314	4017	12825

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 by a specially-trained Health Visitor. Children failing to pass the screening tests are referred to the Medical Officers, who have special experience in the field of audiometry.

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.

Child Guidance

The Wigan Child Guidance Clinic ceased to function in its complete form in September, when Dr. A. Gage, Consultant Child Psychiatrist, left to take up an appointment elsewhere. However, the clinic continued to operate with Mr. D. Labon, Educational Psychologist, working one weekly session and Miss S. M. Hall, Psychiatric Social Worker, undertaking two sessions each week, partly to provide continuity but also for continuing diagnostic and advisory work.

School and pre-school children from Wigan and the surrounding districts attend 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	....	....	....	24,861	tins
Orange Juice	....	....	....	20,340	bottles
Cod Liver Oil	....	....	....	2,333	bottles
Vitamin A and D tablets	....	....	....	2,719	packets

Proprietary brands of foods and vitamin supplements :

Proprietary milks	....	....	....	36,874	packs
Vitamin supplements	....	....	....	8,382	packs
Rose Hip Syrup	....	....	....	8,582	bottles
Cereals	....	....	....	6,640	packets
Malt Extract	....	....	....	968	packs

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, 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 ...	115	55	38	29
Children under five	25	22	21	20

Forms of Dental Treatment provided :—

	Scalings and Gum Treatmt	Filling	Silver Nitrate Treatment	Crowns or Inlays	Extractions	General Anaesthetics	Dentures provided		Radio graphs
							Full Up. or Lr.	Part Up. or Lr.	
Expectant and Nursing Mothers	12	18	—	—	9	—	—	—	—
Children under Five	4	6	2	—	19	—	—	—	—

In addition to the above 274 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. However during the past two years there has been a gradual increase in the numbers of children attending. In 1963 the average daily attendance was 53 compared with 51 in 1962 and 48 in 1961.

Nurseries and Child Minder's Regulation Act, 1948

There were at the end of 1963 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

The Council 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 71 per session compared with 69 per session in 1962. 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 483 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 two part-time midwives.

The total number of cases attended by them during the year was 558 compared with 538 in 1962. This represents 39% of the total Wigan births during the year. The general practitioner was engaged in 95% of the cases but although notified at the commencement of labour was present at the delivery of only 4%. Irrespective of whether or not the doctor is engaged the midwife must make regular ante-natal visits to her patients and 5210 such visits were made in 1963. After delivery the midwife attends her patient for a minimum of ten days and for a longer period if circumstances require it.

During the year a scheme was inaugurated whereby certain expectant mothers who were considered to be "at risk" were admitted to hospital for their confinement on the understanding that they would be discharged 48 hours after the birth of the baby, provided that there were no contra-indications. This arrangement only applied where there was full prior agreement between the hospital, the general practitioner and the midwife. In addition to these 48-hour discharges many other mothers were discharged from hospital before the tenth day because of the shortage of hospital beds. There were 476 early discharges during 1963, some of whom left hospital as early as one day after delivery.

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.

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.

The midwives are on duty by rota at the ante-natal clinics. In addition to providing the opportunity to have their clinical findings confirmed, the midwives also meet mothers who they may possibly deliver because of the night rota system.

At the ante-natal clinics samples of blood were taken, 123 for Wasserman reaction, 260 for the Rhesus factor and 1005 for haemoglobin estimation

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 doctors. 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.

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 182 cases, 19 of which were for conditions arising during the ante-natal period. In 112 cases medical advice was sought for the mother alone, in 46 cases for child alone, and 24 cases for both mother and child. The general practitioner had been engaged in 163 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 Ambulance Station 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 337 cases and in 48 cases Trilene was used. All the midwives are instructed in the use of Pethilorfan and it was administered in 346 cases during 1963.

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. Twelve calls were made upon this service during the year.

Care of Premature Infants

The number of premature infants (*i.e.*, weighing 5½ lbs. or less at birth) notified during the year was 109; of these 17 were born at home and 92 in hospital.

The early care of premature infants born at home is undertaken by the Supervisor and the midwife engaged for the confinement. 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 22 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 1963.

Neo-Natal Cold Injury

Three cases were reported during 1963. Each midwife is supplied with a thermometer registering to 70°F. to facilitate the diagnosis of this condition.

Ophthalmia Neonatorum

No case was notified during the year.

Transport of Midwives

Car allowances are made to midwives who use their own motor cars whilst on approved duties. Ten midwives travelled an aggregate of 20,088 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 57 Wigan births in the Home.

Training of Midwives

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

Maternity Liaison Committee

In December 1963 the Ministry of Health circulated a note to Local Health Authorities and Hospital Authorities on the organisation of the Maternity Services. This was prompted by the continuing rise in the birth-rate and it suggested that difficulties which might arise should be discussed by a local Maternity Liaison Committee comprised of representatives of the three branches of the service. Such a committee was already in existence in this area.

The committee meets periodically and during 1963 topics discussed included Co-operation Record Cards; appointments system for Hospital Ante-natal Clinics; early discharge of maternity patients from hospital; discharge of hospital patients at weekends; and a cytological diagnosis clinic. The discussions have greatly helped to co-ordinate the work of the maternity services.

HEALTH VISITING

Summary of visits during the year 1963 :—

No. of primary visits to births	1,425
„ visits to infants under one year	5,675
„ „ infants over one year and under two years	2,793
„ „ infants over two and under five years	5,638
„ „ expectant mothers	225
„ „ cases of infectious disease	135
„ „ <i>re</i> deaths under one year	30
„ „ still births	42
„ „ aged persons	709

The establishment of Health Visitors is 10 but only six full-time and one part-time were in post on the 31st December, 1963.

Problems of recruitment are becoming more and more acute. Despite numerous advertisements no Health Visitor was appointed during the year and the staffing position was aggravated by two resignations. The Authority operates a generous scheme whereby nurses are sponsored for training as health visitors but no student has been recruited since 1961.

Staff shortages have prevented any extension of the scheme introduced in 1962 whereby health visitors collaborate with general practitioners by working with them in their areas. The scheme continues with three health visitors each of whom works under the direction of a doctor and visits cases selected by him. This is proving an extremely valuable link between the general practitioners and the Department.

In order to use the depleted staff to the best advantage a "Risk" register has been established and more selective visiting is now undertaken. The register contains details of infants who are known to have handicapping conditions and those known to be specially "at risk" by reason of unfavourable family history, adverse environment before, during or after birth, or who show suspicious symptoms in the first months or years of life. The health visitor concentrates more on these children than on the normal child whose background does not appear to be unfavourable.

Routine screening for phenylketonuria is 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. 1130 children were tested during the year.

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 six lectures was given to the senior girls in five schools. These proved very successful.

One health visitor attends weekly at the Paediatric Clinic at Wigan Infirmary and brings to the notice of the Consultant the social background and environment of the children from the borough who are attending. She arranges to visit the home when necessary and is available to advise the parents as to the best way of carrying out the treatment indicated by the Paediatrician.

The work of these all-purpose social visitors is not restricted to children. It continues to widen in scope and will inevitably grow with the continued increase in the aged population. Emphasis is now being placed on health education; the problems of the aged especially those living at home; the prevention of break-up of families and the problems of pre-school handicapped children.

THE CHILDREN ACT, 1948

A close liaison exists between the Health Office and the staff of the Children's Department. Assistant Medical Officers of Health are available for consultation and medical examination of all children in the care of the authority.

CHILDREN NEGLECTED OR ILL-TREATED IN THEIR OWN HOMES

Following a joint circular issued in 1950 by the Home Office, Ministry of Health and Ministry of Education, regarding Children Neglected or Ill-treated in their Own Homes, the Medical Officer of Health was designated as co-ordinating officer to secure full co-operation among all the local services, statutory and voluntary, in the borough. It is the duty of the co-ordinating officer to convene meetings of representatives of the various interested bodies to consider significant cases of child neglect and all cases of ill-treatment of children. This Co-ordinating Committee has continued to meet at intervals.

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.

On the 1st October, 1963, Section 1 of the Children and Young Persons Act, 1963, was brought into operation and this extends the powers and duties of Local Authorities to promote the welfare of children. This section is not intended to upset the arrangements already in existence for the performance and co-ordination of preventive work. It does however provide statutory authority to perform welfare work and meet any consequent expenditure relating to families where children are likely to need care.

These new powers are of great assistance to the Co-ordinating Committee, particularly in their preventive case work.

The Committee has representatives of the Health, Education, Children's and Housing Departments of the Local Authority, the National Assistance Board, Probation Service, N.S.P.C.C. and the Wigan and District Moral Welfare Association. It meets at bi-monthly intervals to co-ordinate policy and to minimise multiple visiting by social workers which can prove confusing to the family concerned. Liaison is maintained amongst the Committee members to effect continued help to the families between meetings. A number of voluntary agencies who are not represented at the meetings give timely help in the provision of goods, services and monetary grants and this assistance is greatly appreciated.

HOME NURSING

There was a major change in the Home Nursing Service when the Nurses' Home ceased to have resident staff. Since the 13th May the service has functioned on a non-resident basis.

The Nurses' Home, 9 New Market Street, is staffed on weekdays from 8-30 a.m. to 7-30 p.m. and between these hours messages are accepted at the Home. At all other times requests for a Home Nurse may be left at the Ambulance Station where a member of the control staff is always on duty.

Each night a duty nurse leaves the Nurses' Home at 7-30 to carry out a limited number of evening calls and before going off duty she telephones the Ambulance Station to ascertain if any emergency calls have been received. Full co-operation from general practitioners and hospitals has ensured that the arrangements have worked very satisfactorily.

Nurses have continued to visit patients as in previous years and when necessary two or even three visits daily have been made in extreme cases.

During the year an extensive field trial was begun with the use of incontinence pads for selected patients being attended by Home Nurses. Early results are encouraging but no final decision on the future use of the pads will be made until the full results of the trial have been evaluated.

Four new Austin Seven cars were purchased in September, the old vehicles being taken in part exchange. During the year the cars covered 29,251 miles. Essential User car allowances were granted to two Home Nurses who travelled 8,993 miles on official journeys. In addition the Superintendent received a casual user allowance for using her vehicle visiting nurses on the district.

At the end of the year the Superintendent, 11 whole-time nurses (two of them male nurses) and one part-time nurse were employed.

The following is a record of work done during 1963 :—

No. of cases on the books on 1st January, 1963	....	....	....	407
No. of new cases during 1963	....	....	....	1,467
No. of visits paid by the nurses	....	....	....	52,997

No. of cases ceased to be visited :—

Now convalescent	....	....	....	668
Removed to hospital	....	....	....	272
Deaths	....	....	....	156
Other reasons	....	....	....	321
			—	1,417

No. of cases remaining on the books on the 31st December, 1963 457

A classification of cases attended during 1963 will be found on pages 39-42

Table 11 — Aged 65 Years or Over

	1962			1963		
	Male	Female	Total	Male	Female	Total
Tuberculosis, respiratory	3	—	3	—	—	—
Tuberculosis, other forms	1	1	2	—	—	—
Malignant neoplasms	12	18	30	21	16	37
Benign and unspecified neoplasms	3	9	12	6	5	11
Diabetes Mellitus	3	14	17	4	13	17
Vascular lesions affecting central nervous system	35	22	57	29	39	68
Arteriosclerotic and degenerative heart disease	80	100	180	85	80	165
Other diseases of circulatory system	30	50	80	32	90	122
Diseases of digestive system	1	3	4	—	—	—
Pneumonia	8	6	14	6	5	11
Bronchitis	34	18	52	61	47	108
Other diseases of respiratory system	3	4	7	2	2	4
Rheumatism	1	7	8	—	—	—
Arthritis	5	16	21	16	23	39
Varicose ulcers	4	7	11	6	11	17
Phlebitis	1	1	2	1	1	2
General rashes on body	1	1	2	—	1	1
Scabies	1	—	1	—	—	—
Cellulitis	—	—	—	—	—	—
Abscesses, Boils, Carbuncles	1	3	4	2	2	4
Bedsores	2	2	4	2	2	4
Senility, Constipation, Debility, Neurasthenia	37	40	77	45	55	100
Injuries due to falls	1	—	1	—	1	1
Fractures	1	2	3	—	6	6
Burns	—	2	2	—	—	—
Scalds	—	—	—	—	—	—
Supra-pubic drainage.....	—	—	—	1	—	1
Prostatectomy	2	—	2	4	—	4
Gastrectomy	—	—	—	1	—	1
Hysterectomy	—	—	—	—	—	—
Cholecystectomy.....	1	—	1	1	2	3
Diseases of the uterus	—	24	24	—	45	45
Preparation for X-ray	25	16	41	26	17	43
Cataract	—	2	2	—	1	1
Herniotomy	—	2	2	3	1	4
Laparotomy	2	—	2	1	1	2

Table 111 (a) — Children Under 5 years

Abscesses	.....	4
Anaemia	.....	1
Bronchitis	.....	13
Burns	.....	3
Constipation and Colic	.....	3
Otitis Media	.....	3
Pneumonia—Bronchial	.....	4
Thrush	.....	3
Tonsillitis	.....	2
Others	.....	6

Table 111 (b) — Schoolchildren

Anaemia	.....	1
Appendicitis	.....	6
Burns	.....	1
Bronchitis	.....	3
Constipation	.....	5
Carcinoma Spine	.....	—
Diabetes	.....	1
Otitis Media	.....	—
Pneumonia	.....	—
Pleurisy	.....	1
Tonsillitis	.....	3
Septic knee, hands	.....	1
Others	.....	4

Table IV — Injection Therapy, 1963

Asthma	Adrenalin, Silbephyeline	.....	127
Anaemia	Anahaemin, Imferon, Examin, Hepastab,	}	13,484
Neuritis	Riboflavin, Campolon, Forte, Cytamen,		
Rheumatism	Neo-hepatex, Actha		
Bronchitis, Chest Infection	} Penicillin	.....	2,930
Pneumonia, Catarrh		.....	6,732
Diabetes	Insulin	.....	3,460
Cardiac	Mersalyl, Mercardon, Thiomerin	.....	157
Cancer	Hormones	.....	1,381
Tuberculosis	Streptomycin and Dimycin	.....	972
Narcotics and Sedatives	} Morphia, Pethidine, Largactol, Omnipon, Scopolamine, Novocaine and other sedatives	.....	82
Vaccines		.....	1
Anti-Tetanus Serum	.....	.....	100
Others	.....	.....	29,426

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
Enuresis Alarms	Zimmer Lifts

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, 1963	5
No. of new cases during the year	16
No. of cases ceased	18
No. of cases on 31st December, 1963	3

VACCINATION AND IMMUNISATION

Wherever practicable, Schedule P is now followed in the Department for the protection of children against infectious diseases.

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	
18-12 months	7	Diphtheria, pertussis, tetanus Booster	4		
Smallpox during first 2 years but preferably at 4 to 5 months.					
School entry		Diphtheria, tetanus Booster	5		
8-12 years		Diphtheria, tetanus Booster	6		
Over 12 years		Smallpox re-vaccination B.C.G.	7		

Smallpox Vaccination

The table below gives details of vaccinations carried out during 1963. It was not until late in the year that departmental policy was changed to revert to the former practice of offering vaccination to infants during the first six months. This accounts to some extent for the low number of vaccinations under one year of age but the pitiful total of 161 vaccinations under two years of age is a sad reflection on the general attitude of Wigan parents towards

vaccination. The help of general practitioners has been sought in an endeavour to improve the position. In addition, smallpox vaccination is now offered at every infant welfare clinic session in the borough and members of the medical and nursing staff take every opportunity to encourage parents to have their children protected.

	Under 1 year	1 year	2-4 yrs. inclusive	5-14 yrs. inclusive	Over 15 years.	TOTAL
Primary	87	74	21	23	62	267
Re-vaccination	—	—	4	11	90	105
TOTALS	87	74	25	34	152	372

Poliomyelitis Vaccination

The remarkable acceptance of oral poliomyelitis vaccination in 1962 has ensured a high percentage of protected persons in the borough for a number of years to come. However the following details indicate that parents of young children are still very willing to accept this form of protection.

SALK VACCINE :

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

Children born 1943-1963	17
Young persons born 1933-42	—
Persons born before 1933	2
	<u>19</u>

(b) Number of persons receiving third injections 51

(c) Number of school children receiving fourth injections 5

ORAL VACCINE :

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

Children born 1943-1963	1119
Young persons born 1933-1942	337
Persons born before 1933	148
	<u>1604</u>

(b) Reinforcing doses given to persons who had previously completed a course with Salk vaccine 63

B.C.G. Vaccination

Although B.C.G. vaccination is offered generally to the 13 year age group the Ministry of Health ruling allows whole classes to be dealt with. This greatly facilitates the administrative work but as a result a small percentage of the children were aged 12 or 14 years. This year's acceptance rate of 72% was somewhat higher than that for the previous year.

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

No. in 13 year age group	1,360
No. for whom consent was obtained	986
Percentage of acceptances	72%
No. of Mantoux-Negative	889
No. of Mantoux-Positive	97
Percentage Positive	9.8%
No. Vaccinated	889
No. who had Chest X-ray	94
No. where X-ray showed active tuberculosis	—
No. where X-ray showed lung abnormality requiring further observation	—

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, 9.8 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 1963 :—

Children under 15 years of age :—

No. of Contacts skin patch tested	Positive	Negative	B.C.G. Vaccinated
203	61	142	143

145 children were patch tested after B.C.G.—all except four showed a positive skin reaction. These four were re-vaccinated.

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

Diphtheria, Whooping Cough and Tetanus Immunisation

The Health Visitor with her personal approach is the spearhead of the drive for a high level of primary protection against Diphtheria, Whooping Cough and Tetanus, while the school nurse is in a unique position to coax the reluctant parents of the primary school child to agree to the child receiving a booster dose of prophylactic.

During 1963 two special campaigns were held. In the first campaign from 25th to 29th March widespread general publicity in the form of special articles in the local press, advertisements, poster displays and the distribution of leaflets throughout the borough had little effect in increasing the acceptance rate. Later in the year during Health Week from 2nd to 9th November individual letters were sent to parents inviting them to bring their children for vaccination and immunisation. There was also considerable press publicity and poster displays but the results were far from encouraging. Details of inoculations carried out during 1963 are given below.

Diphtheria	M. & C.W. Clinic	School Clinic	Private Doctors	TOTAL
Primary	—	8	—	8
Re-inoculation	—	935	1	936
	—	943	1	944

Combined Diphtheria, Whooping Cough and Tetanus

Primary	663	—	123	786
Re-inoculation	190	1	33	224
	853	1	156	1010

Combined Diphtheria and Tetanus

Primary	11	153	1	165
Re-inoculation	3	291	15	309
	14	444	16	474

AMBULANCE SERVICE

There has been a further expansion in the service, 55,415 patients being carried, compared with 51,446 during the previous year. The table below clearly indicates the continuing upward trend in the number of patients carried, together with a fall in the average mileage per patient.

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
1963	0.41	2.4

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

During the year an additional driver/attendant was recruited and the establishment of the service at the 31st December, 1963, was as follows:—

- 1 Superintendent.
- 1 Clerk/Day Control Assistant.
- 4 Control Assistants.
- 1 Leading Driver.
- 26 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	1	2	1	—	1	—	1	1	1	1

TOTAL MILEAGE RUN BY EACH VEHICLE

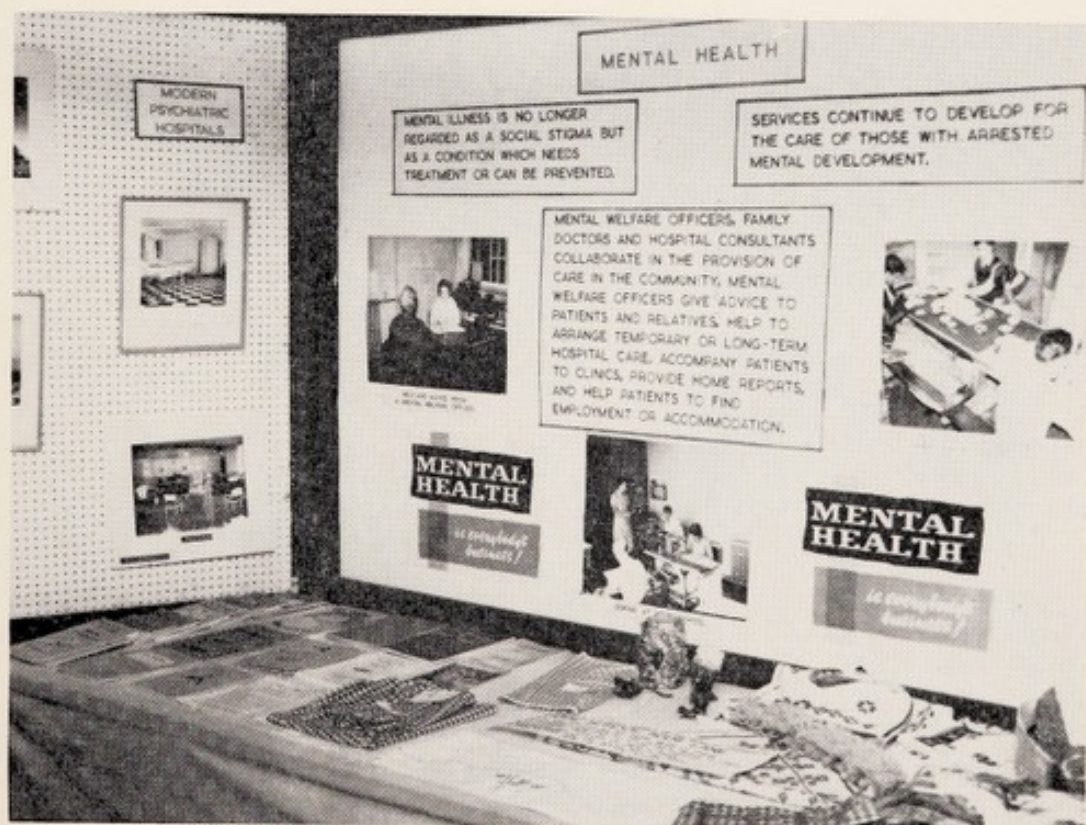
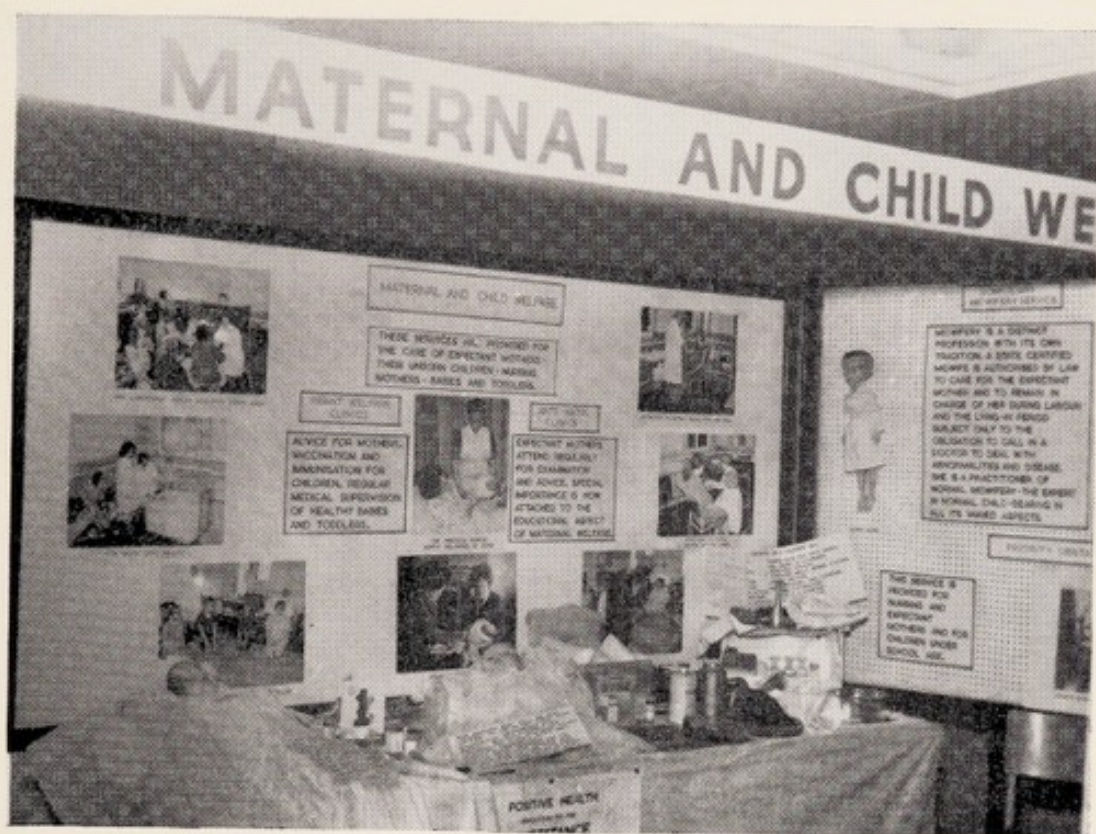
Registered No.	Year of Purchase	Make	Type	Mileage		Total Mileage Run
				1963	1962	
JP. 8800	1950	Bedford	Ambulance	516	9375	112432
JP. 8879	1951	Bedford	Dual Pur.	3712	3133	185792
JP. 9609	1952	Bedford	Ambulance	7498	9119	177469
AEK. 432	1953	Bedford	Dual Pur.	14776	14438	167175
AJP. 500	1954	Daimler	Ambulance	5389	6655	93220
BJP. 947	1955	Bedford	Ambulance	13957	16092	116879
DEK. 828	1957	Bedford	Ambulance	16789	15900	79498
EJP. 800	1959	Bedford	Ambulance	13976	12525	54768
GJP. 564	1961	Morr. Oxf.	Car	21410	19021	57681
HEK. 999	1961	Bedford	Sitting Cases	14352	13934	35312
HJP. 804	1962	Bedford	Ambulance	7859	8190	16049
JJP. 711	1963	Bedford	Ambulance	15209	—	15209

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	14,776	1121.6	91	13.1	128.1
2	Bedford	JP 9609	7,498	601.6	15	12.4	499.8
3	Daimier	AJP 500	5,389	729.0	37	6.2	145.6
4	Bedford	EJP 800	13,976	1160.8	73	12.0	91.4
5	Bedford	DEK 828	16,789	1233.6	61	13.5	275.2
6	Bedford	BJP 947	13,957	1116.3	75	12.5	186.1
7	Bedford	HJP 804	7,859	799.2	22	9.2	357.2
8	Bedford	JJP 711	15,209	1156.5	42	12.9	362.1
9	Bedford	HEK 999	14,352	1309.5	26	11.0	552.0
Car	Morris	GJP 564	21,410	757.3	25	28.2	856.0
	Bedford	JP 8879	3,712	401.9	14	9.2	265.1
	Bedford	JP 8800	516	35.9	3	14.4	172.0
TOTALS :			135,443	10423.2	484	13.0	279.8

Summary of Work Undertaken During the Year 1963

CLASSIFICATION	MILES	PATIENTS
SECTION 27 PATIENTS :		
Street Accidents (including all road users)	959	282
Other Street Accidents	375	97
Work Accidents	449	115
Home Accidents	966	215
Recreation Accidents	674	153
Unclassified Injuries	680	180
Street Illnesses... ..	428	119
Home Illnesses	542	118
Works Illnesses	116	33
Other Illnesses	462	123
Maternity	6,064	600
Mental Welfare Officers	5,591	490
Infectious	133	21
Deceased	299	55
Admissions, Discharges, Transfers and Clinic Cases	87,447	25,821
Service and Fruitless	1,527	—
Psychiatric Unit, Billinge	11,790	8,223
SECTION 27 PATIENTS—RECOVERABLE :		
Lancashire County Council	167	16
Other Authorities	804	73
National Coal Board	50	8
OTHER RE-CHARGEABLE WORK :		
Welfare Services	2,260	1,124
Mentally Sub-normal Children	12,837	17,541
Midwives and Gas and Air Analgesia... ..	620	—
Mental Health	130	—
Miscellaneous	73	8
TOTALS	135,443	55,415



HEALTH EXHIBITION

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. Advanced first aid instruction is now being given.

PREVENTION OF ILLNESS, CARE AND AFTER-CARE

Health Education

Health Education activities, which have been developing in recent years, reached a new peak in November when the whole Department co-operated in "Health Week". Earlier in the year another major event was a Home Safety display at the Wigan Summer Show on 30th and 31st August. This annual show attracts many visitors from surrounding areas as well as from the borough itself. A large proportion are children and it was to these our efforts were chiefly directed. A frontless model house was arranged with dolls and furniture to demonstrate the more common causes of home accidents. Signs announced the theme of avoidable injuries and invited the visitor to spot the hazards in the house. Simple in design and execution though it was, the house proved a great attraction to children and adults alike.

"Health Week" from the 2nd to 9th November was a major operation in which almost every member of the Health Department staff was engaged. During the whole of the week an exhibition, which aimed to show as many of the facets of the work of the department as possible, was open at the showrooms of the North Western Gas Board. With the aid of models, specimens, photographs and placards, staff of each section of the Department demonstrated their particular role in the Health Services of Wigan. Through the co-operation of the Royal Air Force the Ambulance Service stand included a demonstration of breaking into crashed aircraft and the making safe of ejector seats used by the NATO Air Forces. This was a great attraction to small boys, though the girls were more to be seen around the stands of the Home Nurses, Health Visitors and Midwives.

Art students of Wigan Technical College designed posters on Home Safety which were featured at the exhibition. On the same theme two competitions were organised during Health Week—one for school children and the other for adults. It was both instructive and pleasing to note how many entries in the school children's competition were obviously inspired by the model house exhibited at the Summer Show. A number of local firms donated prizes for the competitions. More than 2,000 people visited the exhibition. The local press featured a series of articles on the Health of Wigan, whilst advertisements, posters and car stickers publicised the events of "Health Week." Films on Home Safety and the dangers of smoking were shown to school children and various organisations, such as the Army Cadet Force. Open days were held at all departmental establishments and to close the week a demonstration and film show was held at the Ambulance Station, after which the Chairman of the Health Committee presented the prizes to the competition winners.

Apart from these two special events normal activities continued throughout the year. The staff had a group discussion on "Clean Air and the Aged". One member of each section gave a short talk on the subject as it affected his or her section. This was most stimulating and the ensuing discussion helped remind members of the staff that they were all part of a team.

Health Education topics of seasonal relevance are publicised by posters and displays at the clinics. The uphill struggle against smoking continues. Apathy and bad example are the main enemies, as ignorance of the facts can

no longer be advanced as a reason for smoking. The health visitors again gave their popular mothercraft talks to pupils at the senior girls' schools. Public Health Inspectors are unceasing in their efforts to educate the public and the food handlers regarding clean food and once again there are encouraging signs that these efforts are not in vain.

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. It is without doubt one of the most gratifying parts of Health Education to see knowledge, contentment and eager anticipation grow in the expectant mother and replace ignorance and fear.

Convalescence

During the year 1963 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.

The number of new patients in Wigan was 73, a decrease of 13 compared with the previous year. Attendances at the Wigan Clinic fell from 1671 (1097 male, 574 female) in 1962 to 1316 (800 male, 516 female) in 1963.

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

	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Syphilis	11	12	7	8	7	3	5	3	10	2
Gonorrhoea	10	13	10	6	14	8	12	21	17	15
Other Conditions	36	39	37	31	43	32	54	49	59	56
TOTAL	57	64	54	45	64	43	71	73	86	73

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 1963 :—

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	2	2
Gonorrhoea	—	3
Non-Venereal	1	1

During 1963 three children born of mothers who had been treated for syphilis were examined, blood-tested and found to be free from venereal disease.

Patients failing to attend for treatment are the biggest problem and 40 letters were sent to try and persuade them to attend. Of these 33 reported for further investigation and treatment. The total number of patients remaining on the register at 31st December, 1963 was 80, a decrease of four 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, 2,019 home visits were paid by the tuberculosis health visitor.

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

1961			1962			1963		
Adults	Children	Total	Adults	Children	Total	Adults	Children	Total
100	110	210	128	162	290	120	237	357
Contacts of positive cases under supervision, 31st December, 1963								190
Contacts under supervision after B.C.G. inoculation								493
The average number of contacts per case of pulmonary T.B. is as follows :—								
						1961	1962	1963
Tuberculosis Notifications : Pulmonary						34	25	38
Other forms						2	2	3
No. of contacts per case (pulmonary only)						6.2	8.2	9.4

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 ensure 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.

Other Illnesses

Close liaison between the health visitor 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.

14,081 meals were provided on 255 days during the year. This represents the maximum capacity of the present vehicles and equipment.

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

Whilst the sheer food value of the meal has great value in preventing malnutrition amongst a group which is widely recognised as being especially vulnerable, the actual presentation of the meal leaves much to be desired. This is dictated by the limitations imposed by the equipment used and nothing short of a major technical advance in this direction will suffice to prevent a rather sad luke warm meal at the end of the run. In an effort to obviate this as far as possible with present equipment, arrangements have been made for each vehicle to be charged twice with completed containers during the period 11-45 a.m.—1-45 p.m.

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 expansion of the Domestic Help Service during 1963. 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 1963 the total was 61 full-time equivalent home helps. The number of cases rose in the same period from 240 to 1001. In 1963 help was provided for 31 maternity, 6 mentally disordered, 86 chronic sick and tuberculous, 850 aged and 28 others.

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. Unfortunately it appears at first sight to be met largely out of the local rate fund but one should not forget that the exchequer grant is weighted to allow for the disproportionate number of aged persons living in the Borough.

Charges for Service

The standard charge operating at the end of the year was 4s. 5d. 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.

MENTAL HEALTH SERVICES

There has been a further expansion of the service, particularly in relation to "Community Care" and this has resulted in increased demands being made on the Mental Welfare Officers. The ever-growing needs of the service will preclude Community Care being provided at the present level with our existing staff. The role of the Mental Welfare Officer has changed considerably in recent years. He is now responsible for helping people to resolve a wide range of personal problems, both emotional and material. He works as part of a team with the hospital psychiatrist, the family doctor and other social workers. Considerable skill and knowledge are required to carry out these duties. The recruitment of trained mental welfare officers is a national problem which is not likely to ease in the near future. However the position in the Borough is constantly under review and any possible steps to alleviate difficulties which might arise will be taken.

The trend toward informal admission has continued, together with a still greater emphasis on prevention and after care in the field of mental illness. Close co-operation between general practitioners, the hospitals and the Local Health Authority exists and few difficulties are encountered except in the provision of accommodation for aged psychiatric patients.

The new Adult Training Centre at Marsh Green, on which building was begun during the year, will play a substantial part in the scheme for community care of the mentally subnormal. An adequate number of places exists at the Junior Training Centre and it is hoped to expand further the facilities at the Special Care Unit for the severely subnormal unfit for the Training Centres. Plans for the building of a hostel are well advanced and it is hoped to complete this in 1964.

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 a considerable period during the year.

Four 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. R. McL. Bain, Dr. H. Coates, and Dr. D. M. Mather.

Mental Subnormality

By the end of 1963 109 patients were receiving community care with regular visiting from the Mental Welfare Officers, who dealt with various problems as they arose.

Temporary care, which affords great relief to the family, was provided for all cases where it was required.

The waiting list for permanent care was further reduced so that by the end of the year only one severely subnormal girl aged 4 was awaiting admission to hospital. Close co-operation with Brockhall Hospital has been of great help and has included discussion with the Consultant Psychiatrist there regarding problems connected with subnormal patients.

Efforts have been made to secure notification of the pre-school age subnormal child so that help may be given to parents at the earliest possible stage.

Increasingly close co-operation with Dr. R. M. Forrester, Consultant Paediatrician at Wigan Infirmary, has been most helpful in certain special cases. One can envisage the growing importance of this liaison as research into mental retardation is seen increasingly to hinge on biochemistry and chromosome investigation.

Mental Illness

It is this field that the greatest increase in work has taken place over the years in all aspects relating to prevention, care and after care which are undertaken by the Department.

Mental Welfare Officers maintain a 24-hour "on call" service for urgent hospital admissions. The number of emergency admissions over the year has been reduced which it is felt is one of the results of intensive after care. Although the number of informal admissions has increased by 62 or 57%, it is thought that some of these may be attributed to premature discharge from hospital. In ten cases patients had been discharged from hospital less than one month before re-admission became necessary and in 41 cases discharge had taken place less than twelve months before the patient was re-admitted. Close contact is made with patients in hospital who are regularly visited by the Mental Welfare Officers. Regular meetings and discussion of patients' problems with the Consultant Psychiatrist and hospital staff has proved to be of great help in dealing with difficult cases and many social problems contributing to a patient's breakdown are tackled prior to discharge. All patients are visited on discharge from hospital and any help necessary towards easing their return to the community is given.

There was also an increase in the number of cases referred to the department by general practitioners who considered that help with social problems could prevent admission to hospital. In many cases this was achieved and serious breakdown averted. Problems of housing, marital stress, financial difficulty, strain in family relationships and loneliness are dealt with by the case workers. There is close liaison with other social workers, particularly Health Visitors, Welfare Officers, Child Care Officers, and the Housing Department. The Ministry of Labour have also been of help in obtaining work for individual patients about whom they have been approached. Certain private employers have also assisted in this respect. Help has also been obtained from voluntary associations, particularly the W.V.S., the Salvation Army, the Soroptimist Club and certain voluntary benevolent funds.

The Senior Mental Welfare Officer attends the weekly out-patient Psychiatric Clinic at Wigan Infirmary and obtains Social Histories of all patients attending from Wigan Borough. Mental Welfare Officers also provide Social Histories of all patients admitted to hospital. Where necessary patients are accompanied to clinics by a Mental Welfare Officer.

Account of Work Undertaken in the Community

MENTAL ILLNESS :

Patients notified as mentally ill	246
Dealt with as follows :	
Section 25, Mental Health Act, 1959	11
Section 26, Mental Health Act, 1959	4
Section 29, Mental Health Act, 1959	31
Section 60, Mental Health Act, 1959	1
Detained during H.M. pleasure	1
Informal admissions, Mental Health Act, 1959	171
Care and supervision in the Community	24
No action....	3
Total number of visits to patients requiring care and supervision	117
Total number of visits to patients requiring after care	1620
Total number of patients requiring after care	336

MENTAL SUBNORMALITY :

Number of patients under Community Care at 31-12-63	109
Number of patients at Adult Training Centre	20
Number of patients at Junior Training Centre	45
Number of patients at Special Care Unit	6
Number of admissions to hospital during the year :	
Temporary care	16
Informal admissions	12
Section 25, Mental Health Act, 1959	—
Section 26, Mental Health Act, 1959	2
Section 29, Mental Health Act, 1959	—
Number of patients awaiting admission to hospital at 31-12-63	1

COMMUNITY CARE AND OTHER WORK OF MENTAL WELFARE OFFICERS :

Total number of domiciliary visits during the year	3593
Total number of visits to Junior Training Centre	66
Total number of visits to Adult Training Centre	94
Total number of visits to Special Care Unit	56
Attendances at Billinge Hospital Case Conferences	24
Visits to patients in hospital	141
Visits relating to the welfare of patients in hospital	242
Attendances at Psychiatric Clinic	46
Special reports for hospitals regarding subnormal patients....	29
Social Histories for hospitals and at psychiatric clinics	225
Patients accompanied to Psychiatric Clinics	174

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 one Trainee Assistant Supervisor. One Trainee, who recently successfully completed the National Association for Mental Health Diploma Course, is also retained at the Centre as a temporary additional member of the staff. A 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 one fifth 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. 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 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.

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.

The progress made by most trainees at the Centre since its inception is most encouraging. It gives some indication of the contribution which can be made towards a higher standard of work by the provision of a modern building and adequate outdoor playing facilities.

Other Activities

In September the trainees were taken to a matinee performance at the Tower Circus, Blackpool. Mr. H. Jackson, coach proprietor, of Spring View, Ince, once again provided transport for the outing, which included a tour of the Illuminations.

Hindley and District Rotary Club members arranged for the trainees to visit their headquarters at Farnworth for a performance by a number of circus acts which had been specially engaged.

During the Health Week in November the Centre was open to the public on three days. An evening film show was also arranged. One of the films "There was a Door" included scenes filmed at Hope School showing the children dancing and joining in games in the playground.

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., 1963	48	20	68
No. of admissions during the year	8	1	9
No. of children ceased to attend	7	9	16
No. of children remaining on the register at 31st December, 1963	49	12	61
Average daily attendance during the year	42	13	55

SENIOR 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-seven 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, a local engineering firm and a manufacturer of sound reproducing equipment. 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 nine 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 1963 are given below.

	Borough.	County.	Total.
Number of trainees on register at 1st January, 1963	13	7	20
Number of admissions during 1963	8	1	9
Number of trainees ceasing to attend	1	1	2
Number of trainees on register at 31st Dec., 1963	20	7	27
Average attendance during the year	13	7	20

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 retarded 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

The machinery existing in this area for co-ordination of the three branches of the Health Service has continued to function satisfactorily. There is abundant goodwill at all levels.

In March the Ministry of Health issued a circular 3/63 regarding arrangements for aftercare of patients discharged from hospital. It was suggested that local authorities should designate an officer to be responsible for mobilising the community services for discharged patients. All requests for community care are made through this Department and difficulties are minimal because of the unified control over Health and Welfare Services.

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.

CO-ORDINATION OF HEALTH SERVICES

The first step in the co-ordination of health services is the identification of the various agencies and organizations that are involved in the delivery of health care. This includes the hospital, the local health department, the state health department, and the federal government. It is important to have a clear understanding of the roles and responsibilities of each of these agencies and organizations.

Once the agencies and organizations have been identified, the next step is to establish a system of communication and coordination. This can be done through the formation of a health care coalition or a health care advisory committee. These groups can help to identify the needs of the community and to develop strategies to meet those needs. They can also help to coordinate the efforts of the various agencies and organizations involved in the delivery of health care.

Another important step in the co-ordination of health services is the development of a system of data collection and analysis. This can be done through the use of health status surveys, health care utilization surveys, and other types of data collection systems. These systems can help to identify the needs of the community and to evaluate the effectiveness of health care services. They can also help to identify areas where health care services are needed most.

Finally, it is important to have a system of evaluation and feedback. This can be done through the use of health care audits, health care quality improvement programs, and other types of evaluation systems. These systems can help to identify areas where health care services need to be improved and to develop strategies to meet those needs. They can also help to ensure that health care services are delivered in a cost-effective and efficient manner.

Section IV



**Prevalence of
and
Control over
Infectious Disease**

PREVALENCE AND CONTROL OF INFECTIOUS DISEASES

There were 700 notified cases of measles during the year. A high number of cases had been expected after the very low figure of 39 notified in 1962.

The number of cases of Pulmonary Tuberculosis notified was 38 compared with 25 in 1962.

82 cases of Whooping Cough were notified.

8 cases of Scarlet Fever were notified.

For the fifteenth year in succession there was no confirmed case of Diphtheria.

No case of Paralytic Poliomyelitis was notified.

NOTIFICATIONS

CASES OF INFECTIOUS DISEASE NOTIFIED DURING THE YEAR 1963

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 ...	1	—	—	—	1	—	—	—	—	—
Acute Poliomyelitis : Paralytic...	—	—	—	—	—	—	—	—	—	—
Non-Paralytic ...	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Croup ...	—	—	—	—	—	—	—	—	—	—
Dysentery	8	1	3	2	—	—	1	—	1	—
Enteric or Typhoid Fever ...	1	—	—	—	—	—	1	—	—	—
Erysipelas	—	—	—	—	—	—	—	—	—	—
Food Poisoning	16	7	2	—	—	—	2	5	—	—
Malaria (contracted abroad) ...	—	—	—	—	—	—	—	—	—	—
Measles	700	47	222	214	213	4	—	—	—	—
Meningococcal Infection	3	1	1	1	—	—	—	—	—	—
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—
Pneumonia	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	8	—	1	3	2	2	—	—	—	—
Tuberculosis : Pulmonary	38	—	1	—	3	2	4	11	11	6
Other Forms	3	—	—	—	1	—	—	—	1	1
Whooping Cough	82	19	28	23	7	4	1	—	—	—
TOTALS	860	75	258	243	227	12	9	16	13	7

Analysis of Notifications by Months, 1963

DISEASE	Jan.	Feb.	Mar.	April	May	June	July	Aug.	Sept.	Oct.	Nov.	Dec.	Totals
Acute Encephalitis : Inefective	—	—	—	—	—	—	—	—	1	—	—	—	1
Acute Poliomyelitis : Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—
Non-Paralytic	—	—	—	—	—	—	—	—	—	—	—	—	—
Diphtheria and Memb. Croup	—	—	—	—	—	—	—	—	—	—	—	—	—
Dysentery	—	1	—	—	2	2	—	—	1	2	—	—	8
Enteric or Typhoid Fever	—	—	—	—	—	—	—	—	—	—	1	—	1
Erysipelas	—	—	—	—	—	—	—	—	—	—	—	—	—
Food Poisoning	—	—	6	—	—	1	1	3	3	—	—	2	16
Malaria (contracted abroad)	—	—	—	—	—	—	—	—	—	—	—	—	—
Measles	24	25	40	92	95	173	95	47	25	34	26	24	700
Meningococcal Infection	—	1	—	—	—	2	—	—	—	—	—	—	3
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—	—	—	—
Pneumonia	—	—	—	—	—	—	—	—	—	—	—	—	—
Puerperal Pyrexia	—	—	—	—	—	—	—	—	—	—	—	—	—
Scarlet Fever	1	1	—	—	—	1	—	2	—	—	1	2	8
Tuberculosis : Pulmonary	4	6	4	2	3	4	3	4	2	1	4	1	38
Other Forms	2	—	—	—	—	1	—	—	—	—	—	—	3
Whooping Cough	—	—	9	8	5	9	6	9	12	2	8	14	82
	31	34	59	102	105	193	105	65	44	39	40	43	860

Comparative Notifications for the Past Ten Years

DISEASE	1954	1955	1956	1957	1958	1959	1960	1961	1962	1963
Acute Encephalitis : Infective	—	—	—	—	1	—	1	—	—	1
Acute Poliomyelitis : Paralytic	—	1	—	5	1	3	—	2	—	—
Non-Paralytic	—	2	3	1	1	—	—	—	—	—
Diphtheria and Memb. Croup	—	—	—	—	—	—	—	—	—	—
Dysentery	106	9	64	63	9	12	8	10	6	8
Enteric or Typhoid Fever	—	—	—	1	—	—	—	1	—	1
Erysipelas	5	4	3	—	3	1	2	1	—	—
Food Poisoning	1	3	14	8	6	4	—	2	4	16
Malaria (contracted abroad)	—	—	—	—	—	—	1	—	—	—
Measles	271	1400	96	721	582	488	41	1608	39	700
Meningococcal Infection	1	1	—	—	1	2	1	3	5	3
Ophthalmia Neonatorum	—	—	—	—	—	—	—	—	—	—
Pneumonia	24	19	12	14	13	48	2	4	—	—
Puerperal Pyrexia	2	2	1	4	—	—	—	—	1	—
Scarlet Fever	155	44	44	25	20	25	47	25	6	8
Tuberculosis : Pulmonary	81	55	46	61	36	56	50	34	25	38
Other Forms	7	12	7	2	9	9	3	2	2	3
Whooping Cough	55	89	133	38	10	63	20	—	1	82
	708	1641	423	943	692	711	176	1692	89	860

New Cases and Mortality During 1963

AGE PERIODS :	NEW CASES				DEATHS			
	Respiratory		Non-Respiratory		Respiratory		Non-Respiratory	
	M.	F.	M.	F.	M.	F.	M.	F.
0—	—	—	—	—	—	—	—	—
1—	—	1	—	—	—	—	—	—
5—	3	2	1	—	—	—	—	—
15—	2	2	—	—	—	—	—	—
25—	6	5	—	—	—	—	—	—
45—	9	1	—	1	—	1	—	—
65—	5	—	—	1	2	—	—	—
75—	1	—	—	—	—	—	—	—
TOTALS	26	11	1	2	2	1	—	—

The number of deaths from Pulmonary Tuberculosis was 3 compared with 5 in 1962, and 7 in 1961. No death from other tubercular infections occurred during the year, against 0 in 1962 and 1 in 1961.

Comparative Statistics, 1958 to 1963

Cases Notified

	1959	1960	1961	1962	1963
Pulmonary	56	50	34	25	38
Other forms of tuberculosis	9	3	2	2	3
TOTALS	65	53	36	27	41

Deaths

	1959	1960	1961	1962	1963
Pulmonary	9	9	7	5	3
Other forms of tuberculosis	1	—	1	—	—
TOTALS	10	9	8	5	3

Death Rates

	1959	1960	1961	1962	1963
Pulmonary	0.11	0.11	0.09	0.06	0.04
Other forms of tuberculosis	0.01	0.00	0.01	0.00	0.00
TOTALS	0.12	0.11	0.10	0.06	0.04

DISINFECTION

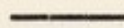
Arrangements have been made to use the old disinfestor at the Welfare Home, Frog Lane, for the disinfection of bedding, etc. which has been associated with cases of certain infectious diseases. The disinfestor at the Royal Albert Edward Infirmary is also available if required.

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



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, 1963, 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

RESIDENTIAL ACCOMMODATION

The following table shows the numbers of aged persons provided with residential accommodation as at the 31st December, 1963.

Age	Springfield		Douglas Bank		Norley Hall		Rockwood		(former P.A. Inst.) St. Stephen's	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.
Over 90	2	4	1	2	—	1	—	—	—	—
85-90	1	1	2	2	3	4	—	1	1	1
80-85	2	13	2	8	5	3	2	2	5	5
75-80	4	9	—	1	5	3	—	1	4	4
70-75	8	7	1	5	4	6	1	2	4	2
65-70	1	2	1	3	1	2	2	2	2	1
60-65	1	2	—	1	—	—	2	—	1	4
Infirm	1	2	—	—	—	2	—	3	3	6
Average Ages	78		79		77		75		78	

Overall average age 78

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 50 old persons as against 46 in the previous year.

During the year 1963 the number of admissions to Part III accommodation was as follows :—

	M.	F.
(1) From own homes, lodging houses, etc. (including short stay")	27	66
(2) From hospitals	12	29
The numbers discharged from Part III accommodation were as follows :—		
(1) No. dying in Homes	5	4
(2) No. transferred to Hospital	19	37
(3) No. discharged elsewhere	6	12
(4) No. leaving after "short stay"	14	36

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. 16. 6d., Douglas Bank House, Norley Hall, Rockwood and Springfield £6. 4. 10d. per week.

DOMICILIARY VISITING

AGED PERSONS LIVING ALONE IN WIGAN :—

WARD	Men	Women	WARD	Men	Women
St. George	13	40	Swinley	60	248
Lindsay	30	152	All Saints	11	73
St. Catharine	40	127	Pemberton West	22	71
St. Patrick	38	150	Pemberton North	66	208
St. Thomas	44	191	Pemberton Central	68	270
St. Andrew	86	388	Pemberton South	26	97

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 1,855 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.

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. 84 cases were dealt with and only 2 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 become essential. In future, emphasis is to be placed on community care and a comprehensive Municipal chiropody service will be established in the near future.

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 Movable Property

No applications were received during the year requesting the Authority to provide protection of movable 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 6 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	TOTAL REGISTER 31-12-63			NEW CASES REGISTERED DURING 1963	
	M.	F.	TOTAL	Age at Registration	
				M.	F.
0	—	—	—	—	—
1	—	—	—	—	—
2	—	1	1	—	—
3	1	—	1	1	—
4	1	—	1	1	—
5-10	1	1	2	—	—
11-15	2	1	3	—	—
16-20	1	—	1	—	—
21-30	1	—	1	—	—
31-39	4	4	8	1	—
40-49	8	5	13	—	—
50-59	3	4	7	—	—
60-64	7	7	14	—	2
65-69	8	7	15	—	3
70-79	19	23	42	3	2
80 and over	16	25	41	3	1
TOTALS	72	78	150	9	8

Ages at which Blindness Occurred

Age Group	Total Register		TOTAL	New Cases Registered during 1963		
	M.	F.		M.	F.	TOTAL
0	10	7	17	2	—	2
1	—	—	—	—	—	—
2	1	—	1	—	—	—
3	—	1	1	—	—	—
4	—	1	1	—	—	—
5-10	3	—	3	—	—	—
11-15	2	2	4	—	—	—
16-20	2	1	3	—	—	—
21-30	10	4	14	1	—	1
31-39	3	2	5	—	—	—
40-49	5	3	8	—	—	—
50-59	8	11	19	—	—	—
60-64	5	10	15	—	2	2
65-69	3	12	15	1	3	4
70-79	14	19	33	3	2	5
80 and over	6	5	11	2	1	3
	<u>72</u>	<u>78</u>	<u>150</u>	<u>9</u>	<u>8</u>	<u>17</u>

During the year ended 31st December, 1963, 19 names were added to the Register of Blind Persons and 20 names were removed. Details are shown in the following table :—

No. of registered blind persons at 31-12-62....	.....	151
No. registered 1st January to 31st December, 1963	17	
Transfers into Area	2	
Re-certified	—	19
	-----	-----
		170
Deaths	17	
Removals out of Area....	3	
	-----	-----
		20

Number on Register, 31-12-63	.....	150

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

	Males	Females
Cataract	—	6
Glaucoma	1	—
Microphthalmias	1	—
Optic Atrophy	1	—
Bilateral Choroidal Degeneration	—	1
Senile Macular Degeneration	2	—
Congenital Defect	2	—
High Myopia	—	1
Cerebral Vascular Disease	—	1
Glycosuria	1	—
Choroidal Arterio Sclerosis	1	—
Bilateral Corneal Nebulae	—	1

Follow-up of Registered Blind Persons

(1) No. of cases registered as blind during the year 1963, in respect of which Sec. F. Para. 1 of Forms B.D.S. recommends :—	Cause of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	2	—	—	4
(b) Treatment (medical, surgical or optical)	6	—	—	5
(2) No. of cases at (1) (b) above, which on follow-up action, have received treatment	5	—	—	4
(3) No. of cases at (2)				
(a) Vision improved	1	—	—	1
(b) Sight restored	—	—	—	—
(c) Treatment continuing at end of year	4	—	—	4

Follow-up of Registered Partially Sighted Persons

(1) No. of cases registered as partially sighted during the year 1963, in respect of which Sec. F. Para. 1 of Forms B.D.S. recommends :—	Causes of Disability			
	Cataract	Glaucoma	Retrolental Fibroplasia	Others
(a) No treatment	2	—	—	—
(b) Treatment (medical, surgical or optical)	5	1	—	1
(2) No. of cases at (1) (b) above which on follow-up action, have received treatment	2	1	—	1
(3) No. of cases at (2)				
(a) Vision improved	—	—	—	—
(b) Sight restored	—	—	—	—
(c) Treatment continuing at end of year	2	1	—	1

Register of Partially Sighted Persons

Age Group	Registered at 31-12-63.			Registered during 1963		
	M.	F.	TOTAL	M.	F.	TOTAL
1	—	—	—	—	—	—
2	—	1	1	—	1	1
3	—	—	—	—	—	—
4	—	—	—	—	—	—
5-10	3	—	3	—	—	—
11-15	2	1	3	—	—	—
16-20	1	—	1	—	—	—
21-30	—	2	2	—	—	—
31-39	1	—	1	—	—	—
40-49	—	—	—	—	—	—
50-59	5	1	6	—	—	—
60-64	3	3	6	1	1	2
65-69	3	3	6	—	—	—
70-79	4	6	10	—	3	3
80 and over	3	4	7	1	2	3
	25	21	46	2	7	9

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

On the 31st December, 1963, there were 12 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

	Male	Female
Children under 16 :		
Attending Special School	8	1
Persons aged 16 and upwards:		
Employed	24	9
Unemployed but capable of and available for training for work	—	—
Incapable of or not available for work	10	16
	42	26
	—	—

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

	MALE		
	Under 16 yrs.	16-64 yrs.	65 yrs. and over
Deaf without speech	8	20	6
Deaf with speech	—	6	2
	FEMALE		
Deaf without speech	1	18	2
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 298 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....	11	9	1	—	21
Congenital Malformations	22	17	1	—	40
Diseases	56	21	1	—	78
Injuries	61	7	1	—	69
Organic Nervous Diseases....	48	54	—	—	102
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	7	—	—	13
	261	139	5	—	405

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. Elizabeth's Home for Epileptics, Much Hadam	—	2
	<hr/>	<hr/>
	2	6
	<hr/>	<hr/>

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. Two 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 287 classes were held and 173 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, 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.

Visiting elderly persons.

Complimentary tickets for social events.

CIVIL DEFENCE

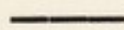
Rest Centres

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



**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 absent	Coliform bacilli present	Bact. Coli (Type 1) present
Raw Water	....	0	40	37
Treated Water	....	159	19	1

All treated water samples in which Coliform Bacilli were present were found to be negative when cover samples were taken.

Chemical Analysis

Representative results from each major source are shown in the table on page 98.

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	....	....	....	....	78,780

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 Hoscarr—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 dewatering 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 1962-1963 (April, 1962 to March, 1963) the following amounts of sewage have been treated at the Hoscar Moss and Pemberton Sewage Works :—

Pemberton Storm Water Works	....	....	217,755,000	gallons
Hoscar Works	....	....	2,350,190,000	„
TOTAL SEWAGE TREATED	....	....	2,567,945,000	„

Total solids removed, detritus tanks and screen chambers, Pemberton	....	....	....	....	3303	tons
Total solids removed, Hoscar Works	....	....	....	....	52,313	„
Total dried sludge recovered, Hoscar Works (Dry solids)	....	....	....	....	1,371	„
Weight of dried solids per million gallons of sewage	....	....	....	....	0.625	„
Rainfall for year (Hoscar Works)	....	....	....	....	25.94	inches

PUBLIC BATHS

The Baths Manager, Mr. T. E. Millar, 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 an Establishment Laundry.

One pool is 56 feet long by 21 feet wide and has a capacity of 33,000 gallons. The large pool is 75 feet long by 25 feet wide and has a capacity of 67,000 gallons.

The Filtration and Chlorination plants were installed in 1935. These plants consist of two 10ft. diameter Royles Type Vertical Filters, chemical tanks and a Wallace and Tiernan Chlorinator. This installation gives a complete change of heated, chlorinated, filtered water every $2\frac{1}{2}$ hours to the small pool, and every 4 hours to the larger pool. Frequent tests of the water are made during each day and the water is maintained at the standard recommended by the Ministry of Health. Frequent samples of water taken from the Pools for bacteriological examination and chemical tests indicate that the condition of the water is satisfactory.

BATHERS

Swimming	....	....	....	....	....	....	....	....	121,500
Education Department (Children under instruction)	....	....	....	....	....	....	....	....	32,153
Private Baths	....	....	....	....	....	....	....	....	16,702
									<u>170,355</u>

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

1960	....	....	....	....	....	....	....	....	200,519
1961	....	....	....	....	....	....	....	....	216,135
1962	....	....	....	....	....	....	....	....	183,118
1963	....	....	....	....	....	....	....	....	196,576
1964	....	....	....	....	....	....	....	....	170,355

The construction of the New Wigan Baths is now progressing and it is hoped to be completed early in 1965. There will be an Olympic size Swimming Pool 165 ft. x 42 ft., a Russian Vapour Bath, Slipper and Shower Baths in addition to the two existing pools. When complete the New Baths will be the largest single establishment in the country. Every effort has been made to ensure that the Swimming Pool water will be at all times sterile. Fully automatic chlorination and chemical dosing equipment will be installed.

PUBLIC CLEANSING

Mr. E. Cox, 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 (350 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, 18,882 gullies were emptied.

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

1 public convenience for ladies and gents, with attendants.

6 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 1963 was 5,858 tons, and the quantity tipped was 20,359 tons. In April, 1950, the Corporation introduced a Dust Bin Renewal Scheme, as a direct rate charge.

During the year, 779 bins were renewed and 398 sold to private properties not included in the scheme.

124,000,000 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 728 certificates for cremation were issued.

PUBLIC HEALTH INSPECTION

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

Some 250 families comprising 796 persons were re-housed from unfit property during the year. This was a much slower rate than in previous years but it is expected that a new impetus in house building for slum clearance will soon show effect. 235 houses were demolished and four unfit houses closed.

A third smoke control area located in the Marsh Green district came into operation on the 1st December 1963. Although no formal objection was made during the statutory period it became evident that considerable resistance from residents, especially council tenants, was to be expected. Lengthy petitions against smokeless fuel were lodged months before the order became operative.

The Meat Inspection Regulations have added a great deal of work to the lot of the Public Health Inspector. Whilst the standardised inspection and meat marking were welcomed it is regretted that by merely lodging a notice of intention to slaughter the inspectors can be called to duty from 7 a.m. to 7 p.m. seven days a week. Attendance at the emergency slaughter of casualty animals is accepted but surely with modern chilling and refrigeration equipment the routine slaughtering of animals can be confined to six or even five days. At the end of the year two general purpose slaughterhouses were opening each Sunday.

Food hygiene was ever to the fore and public interest grows each year. This was greatly in evidence at the Health Exhibition.

Samples of foods, drugs and water for chemical and bacteriological analysis was carried out. The position concerning the composition and labelling of food was regarded as satisfactory. In addition samples of animal feeding stuffs, fertilisers and filling materials for upholstery etc. were also taken and found to be satisfactory.

Summary of Work Undertaken During the Year

Houses and premises inspected and visited <i>re</i> nuisances and complaints	2253
Re-visits to nuisances	4048
Other visits made	803
Visits to premises (testing of drainage)	355
Nuisances discovered	1759
Nuisances abated	1395
Notices issued (preliminary)	752
Notices issued (formal)	263
Letters issued <i>re</i> Nuisances	410
Visits to premises <i>re</i> Housing Acts	529
Re-visits to premises <i>re</i> Housing Acts	683
Visits <i>re</i> Certificates of Disrepair	7
„ Infectious diseases and food poisoning	116
Visits to slaughterhouses	2976
Visits <i>re</i> Offensive trades	12
Visits to markets	21
„ butcher's shops	58
„ food preparers	115
„ caterers	82
„ other food shops	351
„ food vehicles	27
„ dairies	105
„ milkshops	63
„ ice-cream manufacturers	66
„ ice-cream shops	64
„ bakehouses	70
„ houses let-in lodgings	15
„ common lodging houses	2
„ factories—power	42
„ factories—non-power	6
„ offices	2
„ cinemas	6
„ places of entertainment	17
„ caravans	38
„ <i>re</i> rats and mice—dwellings	1687
„ „ other premises	731
„ smoke abatement....	4747
No. of shops observations	60
Visits to shops under Shops Act	60
Visits <i>re</i> Poisons Act	7
Visits to premises <i>re</i> applications for tenancy of Council houses	13
„ verminous premises	34
Reports to Borough Engineer <i>re</i> dangerous structures	17
Watercourse Inspections	2
Visits to Licensed Premises	74
„ <i>re</i> Standard Grants	368
„ conversions	11
„ Improvement Grants	1189
„ Noise abatement	8
„ Merchandise Marks Act	57
„ Rag Flock Act	2

Samples Obtained

Food and Drugs	.....	217
Water (for chemical analysis)	.....	16
Water, Milk and Ice-cream (for bacteriological examination)	.....	373
Fertilisers and Feeding stuffs	.....	15
Rag flock	.....	4

ATMOSPHERIC POLLUTION

The measurement of pollution is carried out by means of deposit gauges whose contents are analysed monthly, and daily smoke filter and volumetric sulphur dioxide apparatus. The equipment is standard and designed by the Fuel Research Station of the Department of Scientific and Industrial Research to which station all measurements are transmitted. National pollution figures are produced from the results obtained from all co-operating bodies. The instruments only give a reading applicable to the site of the instruments. Various factors such as fog and high winds especially affect deposit gauges but nevertheless the readings do indicate the pollution figures for a particular set of conditions during that particular month.

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)	12.98	*	21.92	8.39	9.26	9.26	8.62	11.81	11.45	5.20	14.98	8.36	11.11
Insoluble Solids (tons/sq. mile)	2.21	1.61	11.78	1.88	3.22	2.48	2.28	3.02	2.45	1.58	2.24	3.29	3.17

* Insufficient sample for complete analysis. This figure unobtainable owing to exceptionally dry conditions.

It will be noted that the average monthly grit fall out was substantially lower than for the previous year when the average total solid fall out in tons per square mile was 15.17 and the insoluble solids in tons per square mile was 4.67.

Domestic Pollution

The third smoke control area located at Marsh Green came into operation on the 1st December. Considerable resistance both before and after the coming into operation had been experienced. Complaints related to poor quality fuel, inadequacy of existing appliances in the council houses and cost of fuel. At the end of the year it was agreed to meet the residents of this area.

During December the Minister changed the basis of the calculation of grants for appliances. Previously grants could only be based on the "all-night burner" type of appliance. He indicated that he was now prepared to allow grants to be made for "closed stove appliances" and equivalent gas or electrical appliances. The closed stove appliance is considerably better than the open burner because of a great degree of control over burning rate and because a greater range of smokeless fuels including the cheaper hard cokes can be used.

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.
No. 3	550	1501	2	18	1st December, 1963.

Industrial Pollution

Up to July 1963 it was a defence in cases of emission of dark smoke to show that the plant was outmoded. Industrial and commercial interests have gone a long way in installing new and converting old plant. A great reduction in smoke emission has been achieved by these measures.

Chimney Heights

Plans were received involving the construction of two 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

Two applications were received from installers of new boiler equipment and after consultation both applications were recommended.

Smoke Offences

During the year two notices were served under Sec. 1 and two 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

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

Factories Acts

48 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.	9	6	—	—
(ii) Factories not included in (i) in which Section 7 is enforced by the Local Authority.	328	42	6	—
(iii) Other premises in which Section 7 is enforced by the Local Authority (excluding out-workers' premises).	29	—	—	—
TOTAL	366	48	6	—

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.) ...	3	3	—	1	—
Overcrowding (S.2.)	—	—	—	—	—
Unreasonable temp. (S.3.) ...	—	—	—	—	—
Inadequate ventilation (S.4.) ...	—	—	—	—	—
Ineffective drainage of floors (S.6.)	—	—	—	—	—
Sanitary Conveniences (S.7.) ...					
(a) Insufficient	3	1	—	—	—
(b) Unsuitable or defective ...	1	1	—	—	—
(c) Not separate for sexes ...	—	—	—	—	—
Other offences against the Act (not including offences relating to Out-work).	3	3	—	1	—
TOTAL	10	8	—	2	—

Outworkers

From the lists received 30 persons were engaged on outwork—24 in basket making, 5 wearing apparel and 1 on knitted garments. Although the manufacture of washleathers does not appear to be one of the occupations applying to outworkers for a number of years returns indicate that this type of work is being carried on. Lists indicate that 13 persons are so engaged.

Section VII



Housing

SLUM CLEARANCE

During the year two Clearance Area Compulsory Purchase Orders became operative, i.e. the Canal Street/Holt Street and Horsfield Street Orders. They comprised 60 and 22 houses respectively. In addition action continued on individual dwellings which were unfit for human habitation.

DEMOLITION AND RE-HOUSING

	No. of houses	Displaced	
		Persons	Families
Houses Demolished in Clearance Areas	20	140	35
Houses Demolished as result of action under Sec. 16 and 17 of Housing Act	215	641	211
Unfit houses closed	4	15	4

HOUSE IMPROVEMENT

150 applications for Standard Grants were received during the year for some or all of the five amenities. 125 applications for payment of grant were received from owners of houses where work had been completed.

Many enquiries were received for the Discretionary Grant and all were investigated. This resulted in 51 formal applications being made and approved. At the end of the year 19 houses had been fully improved and many were in the process of being improved.

HOUSING ACCOMMODATION

No. of dwelling houses erected in 1963 :—

By Local Authority	308
By Private Enterprise	161

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

After informal action by local authority	982
After formal notice (a) Public Health Acts	231
(b) Sec. 9 and 16 Housing Act, 1957	—

Housing accommodation as at 31st December, 1963 :—

No. of dwelling houses	24,568
„ business premises with living accommodation	683
„ licensed premises with living accommodation	138
	<hr/>
	25,389
	<hr/>

COMMON LODGING HOUSES

Only one common lodging house now remains in the borough and under a proposed comprehensive development plan it would appear that its life is limited indeed. The demand over the years for this type of accommodation has fallen drastically and the present lodging house is occupied to a little over half its capacity.

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

HOUSES IN MULTIPLE OCCUPATION

The major problem with regard to these properties was resolved when 11-17 Queen Street, formerly occupied by 12 families, were demolished. The remaining houses in this category are reasonably well-maintained and managed.

No. of visits	15
---------------	------	------	------	------	------	------	------	------	------	----

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 5 applications were received for Certificates of Disrepair. In 1 case the landlord gave an undertaking to carry out the necessary work within six months. 4 Certificates were issued.

2 applications for the revocation of certificates were received. None of the tenants objected to the cancellation of certificates. 2 certificates were cancelled.

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

Section VIII



**Inspection and
Supervision of Food**

EXAMINATION OF WATER

Chemical Analysis

During the year 16 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 Nicholsons	Edgewood and Nicholsons	Thirlmere	Worthington and Thirlmere	Worthington	Bispham, Thirlmere and Worthington
	Parts per 100,000	Parts per 100,000	Parts per 100,000	Parts per 100,000	Parts per 100,000	Parts per 100,000
Temporary Hardness ...	19.1	8.1	1.2	3.0	5.4	12.8
Permanent Hardness ...	0.8	0.4	0.6	3.7	8.2	17.0
Total Hardness	19.9	8.5	1.8	6.7	13.6	29.8
Alkalinity	27.0	8.4	1.2	3.0	5.4	12.8
Combined Chlorine	3.2	1.7	0.9	1.4	2.1	3.3
Ammoniacal Nitrogen ...	.001	.003	.004	.002	.00	.00
Albuminoid Nitrogen ...	.002	.009	.004	.005	.05	.00
Nitrogen as Nitrites	Nil	Neg.	Nil	trace	Nil	Nil
Nitrogen as Nitrates .....	.1	trace	less than .1	.04	.21	.26
Oxygen absorbed in 4 hrs. at 27° C. ....	.06	.1	.08	.11	.11	.03
PH Value	7.3	7.2	7.05	7.3	7.55	6.65

Bacteriological Examination

During the year 73 routine samples of water were sent to the Public Health Laboratory, Manchester, for examination. All except one were satisfactory.

MILK SUPPLY

Only milk which has been heat treated to prescribed standards or raw milk which comes from tuberculin tested herds is available to the public.

There are three licensed pasteurising plants in the borough and these are visited regularly. Time/temperature checks are made on the machinery and samples are taken at various stages in production for bacteriological and chemical purposes.

No. of visits to dairies	.....	105
„ milkshops	.....	63
No. of dealers licensed for the sale of sterilised milk	.....	324
„ licensed for the sale of pasteurised milk	.....	137
„ licensed for the sale of tuberculin tested milk	.....	64
No. of dealer (pasteuriser's) licences	.....	4
„ persons registered as distributors of milk	.....	332
„ premises registered as dairies	.....	4

Bacteriological Examination of Milk

150 samples of milk were submitted for bacteriological examination :—

PASTEURISED :	90	89 samples passed the Phosphatase and 88 the Methylene Blue Tests. (One Methylene Blue Test void due to accident)
TUBERCULIN TESTED : (pasteurised)	18	All samples passed the Phosphatase and Methylene Blue Tests.
TUBERCULIN TESTED : (Farm Bottled)	16	15 samples passed the Methylene Blue Test.
STERILISED :	26	In all cases the Turbidity Test was negative.

18 samples of milk were submitted for the Brucella Ring Test. 7 were returned positive but all the milk was intended for pasteurisation. As the milk originated in the County area the appropriate authorities were informed.

Chemical Examination of Milk

69 Samples of milk were taken for chemical analysis and the Public Analyst reported adversely on 11 of these. Details of these and of the action taken are given on P. 107.

ICE CREAM

There are three registered manufacturers operating ice-cream pasteurising plant. Of course there are many vehicles and premises following the current trend of manufacturing soft ice cream for which no registration is required. This soft ice cream is a pre-packed pasteurised mix which is whipped and frozen just prior to sale in machines usually located in a vehicle or shop.

110 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 that improvement is being maintained. 109 results are shown for 1963. No result was obtained from one sample because of an accident at the laboratory.

	1962	1963	
Grade 1	101	82	} satisfactory.
„ 2	25	17	
„ 3	7	6	} unsatisfactory
„ 4	7	4	

Five samples of ice cream were also taken for chemical analysis by the public analyst. All complied with the statutory standards laid down.

Retailers

The number of premises registered under Section 34 of the Wigan Corporation Act, 1933 for the sale of ice-cream on 31st December, 1963 was 354.

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 74 visits were made.

MEAT INSPECTION

The town's slaughtering facilities comprise three bacon factories and six general-purpose slaughterhouses, all privately owned. It became obvious during the year that the two new slaughterhouses to be provided in lieu of two to be demolished for redevelopment purposes would not be ready. Therefore the Council decided to delay the application of the Construction Regulations for a further three months, i.e. to 1st April, 1964.

From 1st October the Meat Inspection Regulations became operative. The main provisions of the regulations are that carcasses must not be removed from the place of slaughter until inspected and if passed fit for human consumption marked with a stamp which identifies the authority and the meat inspector. With certain exceptions a minimum period of 24 hours notice of intention to slaughter must be given to the local authority. Criteria as to the manner in which inspectors are to carry out inspection and the circumstances in which the fitness of meat is to be regarded is laid down.

The Regulations also allow the Local Authority to apply a scale of charges for the inspection of each. The following scale of charges, the maximum allowable, was adopted :

- 2/6d. per adult bovine animal.
- 9d. per pig or calf.
- 6d. per sheep.

The scale applicable from 1st October to the end of the year produced £903-2-3d.

No. of visits to slaughterhouses	....	....	....	....	....	2976
„ markets	....	....	....	....	....	21
„ butcher's shops	....	....	....	....	....	58
No. of certificates issued (condemned food)	....	....	....	....	....	522

Carcases Examined During the Year 1963.

	Cattle exc. Cows	Cows	Calves	Pigs	Sheep	TOTAL
Carcases examined	3599	11265	167	12418	27158	54607
Carcases totally condemned	1	11	4	6	3	25
Percentage totally condemned	0.03	0.1	2.4	0.05	0.01	0.05

Carcases and Offal Inspected and Condemned in Whole or in Part

	Cattle excluding Cows	Cows	Calves	Pigs	Sheep	Horses
Number killed	3599	11265	167	12418	27158	—
Number inspected	3599	11265	167	12418	27158	—
ALL DISEASES EXCEPT TUBERCULOSIS AND CYSTICERCI:						
Whole carcases condemned	1	11	4	5	3	—
Carcases of which some part or organ was condemned	360	5275	2	1557	1754	—
Percentage of the number inspected affected with disease other than tuberculosis and cysticerci ...	10.0	46.9	3.6	12.6	6.5	—
TUBERCULOSIS ONLY:						
Whole carcases condemned	—	—	—	1	—	—
Carcases of which some part or organ was condemned	2	—	—	118	—	—
Percentage of the number inspect- ed affected with tuberculosis ...	0.06	—	—	0.96	—	—
CYSTICERCOSIS:						
Carcases of which some part or organ was condemned	23	52	—	—	—	—
Carcases submitted to treatment by refrigeration	3	7	—	—	—	—
Generalised and totally condemned	—	—	—	—	—	—

The following meat and offal from the slaughterhouses was surrendered and destroyed, or sold for manufacturing purposes, during the year 1963.

	Whole carcass and all Offal Condemned	Part of Carcass Condemned	OFFAL CONDEMNED									
			Heads	Lungs	Livers	Hearts	Stomachs	Spleens	Skirts	Kidneys	Udders	Mesenteries
Affected with												
Tuberculosis :												
Cattle (exc. Cows) ...	—	—	1	1	1	—	—	—	—	—	—	—
Cows	—	—	—	—	—	—	—	—	—	—	—	—
Calves	—	—	—	—	—	—	—	—	—	—	—	—
Pigs	1	—	114	4	4	1	1	1	—	—	—	2
Sheep	—	—	—	—	—	—	—	—	—	—	—	—
Affected with												
Cysticercosis :												
Cattle (exc. Cows) ...	—	—	13	2	—	12	—	—	—	3	—	—
Cows	—	—	32	—	2	27	—	—	—	10	—	—
Calves	—	—	—	—	—	—	—	—	—	—	—	—
Pigs	—	—	—	—	—	—	—	—	—	—	—	—
Sheep	—	—	—	—	—	—	—	—	—	—	—	—
Affected with other												
Diseases :												
Cattle (exc. Cows) ...	1	—	—	68	327	3	—	14	—	6	—	—
Cows	11	3	23	1209	5197	37	27	173	25	243	234	38
Calves	4	—	—	—	—	—	—	—	—	4	—	—
Pigs	5	1	29	1450	356	346	24	59	—	42	10	33
Sheep	3	—	—	25	1741	3	—	—	—	4	—	—
	25	4	212	2759	7628	429	52	247	38	299	244	73

Summary of other Food Condemned, 1963

Meat	517 lbs.
Canned Meat	833
Fish	14 lbs.
Canned Fish	104
Fruit	40 lbs.
Canned Fruit	1145
Vegetables	264 lbs.
Canned Vegetables	602
Canned Milk	111
Canned Jam	39
Canned Soup	138
Packages of Other Food	1007
Other canned or bottled foods	436
Rabbits	21
Bacon	94 lbs.
Butter	7 lbs.
Margarine	7 lbs.
Lard	11 lbs.
Tea	4 lbs.
Eggs	12

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

SAMPLES TAKEN DURING 1963 :—

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	%
Almonds (ground)	1	—	—	Lentils	1	—	—
Apples	1	—	—	Macaroni	2	—	—
Apricots (dried) ...	1	—	—	Margarine	2	—	—
Baking Powder ...	2	—	—	Marmalade	3	—	—
Barley	2	—	—	Meat Paste	1	—	—
Beef (corned)	1	—	—	Meat Pies	2	—	—
Beer	1	—	—	Milk	69	11	16
Black Puddings ...	2	—	—	Milk Powder	1	—	—
Blancmange				Mince-meat	1	—	—
Powder	1	—	—	Olive Oil	1	—	—
Brandy	2	—	—	Onions	1	—	—
Brandy Butter ...	1	—	—	Pepper	3	—	—
Brawn	1	—	—	Pickles	5	—	—
Bread	2	—	—	Pilchards	1	—	—
Butter	2	—	—	Plum Pudding	1	—	—
Cake	7	1	14	Prunes	1	—	—
Cake Mixture	2	—	—	Rennet	1	—	—
Cheese	2	—	—	Rice (creamed) ...	1	—	—
Chicken (Minced)...	1	—	—	Rum	1	—	—
Chocolate Coating	1	—	—	Saccharin	1	—	—
Cocoa	1	—	—	Sardines	1	—	—
Coffee (Ground) ...	1	—	—	Sauce.....	2	—	—
Coffee (Instant) ...	2	—	—	Semolina	1	—	—
Cornflour	1	—	—	Shrimps (Potted)...	1	—	—
Corn Oil	1	—	—	Soft drink	4	1	25
Crab Paste	1	1	100	Soft drink pwd. ...	2	—	—
Cream	1	—	—	Soup	1	—	—
Curry Powder	2	—	—	Soup Powder	3	—	—
Dessert	1	—	—	Spice	1	—	—
Dripping	2	—	—	Steak	3	—	—
Fish cakes	1	—	—	Sugar.....	3	—	—
Fish paste	5	1	20	Sultanas	1	—	—
Fruit Salad	1	—	—	Sweets	4	—	—
Gelatine	1	—	—	Table jellies	1	—	—
Gin	1	—	—	Tapioca	1	—	—
Glucose Drink	1	—	—	Tartar (Cream of) ..	1	—	—
Grapefruit Juice ...	1	—	—	Tea	1	—	—
Gravy Browning ...	4	—	—	Tinned Milk	2	—	—
Honey	1	—	—	Tomato Juice	2	—	—
Ice Cream	5	—	—	Tomatoes (Tinned)	1	—	—
Ice Lolly	1	—	—	Tonic Water	1	—	—
Jam	4	—	—	Vegetable Juice ...	1	—	—
Lard	4	—	—	Vinegar	1	—	—
Lemon Curd	2	—	—	Whisky	1	—	—
Action taken in regard to unsatisfactory samples is given on Page 107.					217	15	6.9

SAMPLES NOT UP TO SATISFACTORY STANDARDS

ARTICLE	No. of Sample		REPORT	REMARKS
	Informal	Formal		
Lobster spread		1	Deficient in lobster to the extent of 8.6%	Summons dismissed
Dressed crab	35		Crab with added fat and cereal. The amount of cereal is excessive for dressed crab.	Warning letter sent
Jam/Cream sponge sandwich	57		Cake containing artificial cream filler	No action taken. Notice displayed in window.
Milk	66		Deficient in fat to the extent of 16.6%	} Formal samples Nos. 74, 75 and 76 taken
Milk	67		Deficient in fat to the extent of 23.3%	
Milk	68		Deficient in fat to the extent of 10.0%	
Milk	69		Deficient in fat to the extent of 3.3%	} Average fat content of all samples was 3.38%
Milk	70		Deficient in fat to the extent of 3.3%	
Milk		74	Deficient in fat to the extent of 30%	} "Appeal to Cow" samples Nos. 77-80 taken
Milk		75	Deficient in fat to the extent of 20% and solids-not-fat to the extent of 1.1%	
Milk		76	Deficient in fat to the extent of 23.3%, and solids-not-fat to the extent of 2.3%	
Milk		77	Deficient in solids-not-fat to the extent of 3.5%	
Milk		79	Deficient in fat to the extent of 26.6%	
Milk		80	Deficient in fat to the extent of 10.0%	
Lemon Squash	165		Deficient in lemon juice to the extent of 28%	Formal sample taken.

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, 1963.

Food and Drugs Act, 1955

Number of samples of Foods and Drugs analysed	219
Number of samples regarded as sub-standard or otherwise unsatisfactory	15
Percentage unsatisfactory	6.84

The above total of 219 samples included 71 samples of liquid milk and 148 samples of miscellaneous foods and drinks. The samples classified as sub-standard or otherwise unsatisfactory comprised 11 samples of liquid milk, and one sample each of lobster spread, dressed crab with butter, jam cream sponge sandwich and lemon squash. Some information about these samples is given below.

Milk

Five informal samples of milk were found to be deficient in fat in amounts ranging from 3.3 per cent to 23.3 per cent. Three formal 'follow-up' samples were submitted for analysis; one was found to be deficient in fat to the extent of 30 per cent., and the other two were deficient in fat to the extents of 20 per cent and 23.3 per cent respectively, and were also slightly deficient in solids-not-fat. The "Appeal to Cow" samples showed that one was deficient in solids-not-fat to the extent of 3.5 per cent., and two samples were deficient in fat to the extents of 10.0 per cent and 26.6 per cent respectively.

Lobster Paste

Under the Food Standards (Fish Paste) Order, 1951, the minimum quantity of lobster in lobster spread should be 70 per cent. This sample, which was a follow-up on paste of the same manufacture reported against at the end of 1962, contained only 64 per cent of lobster, corresponding with a deficiency of 8.6 per cent.

Dressed Crab with Butter

This sample contained 8 per cent of cereal, which was regarded as excessive. There is no legal standard for cereal in dressed crab, but many samples do not contain any cereal at all and it is considered that a reasonable maximum should be 3 per cent.

Jam Sponge Sandwich

It is an offence under Section 47 of the Food and Drugs Act to sell any article of food containing a substance which resembles cream, but is not cream. The filler in this sample consisted of artificial cream.

Lemon Squash

The Food Standards (Soft Drinks) Order prescribe a minimum of 25 per cent of lemon juice for lemon squash. This sample of lemon squash contained only 18 per cent of lemon juice, i.e. a deficiency of 28 per cent.

The samples not listed individually above were all of satisfactory quality ; those for which official standards are prescribed conformed in all respects, and no contravention of Regulations governing Preservatives in Food, Antioxidants in Food, and Colouring Matters in Food, was detected. Following the procedure that has applied during the last few years, samples of fresh fruit were examined for pesticide spray residues, but the results were entirely negative. Foods contained in sealed cans were also examined for metallic contamination but no instance of any quantity of metal was detected.

Composition of Milk Samples

The following is the average composition of samples of milk (excluding sub-standard samples) received during the year.

Average fat ....	.....	.....	.....	.....	.....	.....	3.70%
Average solids-not-fat	.....	.....	.....	.....	.....	.....	8.70%
Average water	.....	.....	.....	.....	.....	.....	87.60%

Fertilisers and Feeding Stuffs Act

Fifteen samples, comprising seven fertilisers and eight feeding stuffs, were examined under this Act. One sample of fertiliser contained 4.0 per cent more soluble phosphoric acid and 5.2 per cent more potash than the amounts declared in the statutory statement. These excesses were not to the prejudice of the purchaser who was, in fact, getting more plant nutrient than he paid for. One sample of pig food contained 1.7 per cent more protein than the amount declared. This excess, which was not to the prejudice of the purchaser, was slightly outside the limits of variation prescribed by the Fertilisers and Feeding Stuffs Regulations. All the other samples conformed in composition to the statutory statements.

Waters

Sixteen samples of drinking water were analysed during 1963. The organic condition of the samples was uniformly satisfactory, and none of the samples contained any poisonous metals.

J. GRAHAM SHERRATT

Public Analyst.

LEGAL PROCEEDINGS

Two successful prosecutions took place during the year.

1. The owner of an ice-cream vehicle was fined on each of six breaches of the Food Hygiene Regulations, 1956, relating to the condition of the vehicle. The allegation that the wooden spatula for the serving of ice cream was absorbent was dismissed.
2. The vendor of the aforementioned vehicle was fined £4 on each of two counts relating to (a) dirty hands and (b) dirty clothing.

INDEX

	<i>Page</i>
Ambulance Service.....	46-49
Analgesia and anaesthesia.....	34
Ante-Natal Care	29
Atmospheric Pollution	88-89
Bacteriological Examination of Ice-Cream	100
Bacteriological Examination of Milk	99
Bacteriological Examination of Water	98
B.C.G. Vaccination	44-45
Bedding Loan Service	43
Births	14
Blind Welfare	74-77
Bronchitis	20
Burial of the Dead	73
Cancer	20-21
Cancer of the Lung	20
Care of Unmarried Mothers	30
Care of Expectant and Nursing Mothers and Children under School Age	28-32
Care of Premature Infants	34
Causes of Death with Death Rates	15
Chemical Analysis of Water	98, 109
Chemical Examination of Milk	99
Children Act, 1948	37
Children Neglected or Ill-treated in their own homes	37
Child Guidance	31
Child Welfare Centres	30
Chiropody Service	73
Civil Defence	49, 80
Clean Air Act, 1956.....	88, 6
Clinics	28-30
Clubs and Licensed Premises	102
Common Lodging Houses	95
Convalescence	51
Co-ordination of Health Services	61
Cremation	85
Deaf and Hard of Hearing Welfare	77-78
Death Rates for the last ten years.....	19
Demolition and Re-housing	94
Dental Care and Treatment	31-32
Diphtheria Immunisation	5, 45
Disinfection and Distribution of Disinfectants	68
Domestic Help Service	54
Domiciliary Midwifery	6, 33-35
Domiciliary Welfare of the Elderly	71-72
Emergency Obstetrical Unit	34
Examination of Water	98
Factories Acts	90
Family Planning	32
Fertilisers and Feeding Stuffs Act.....	109
Fluoridation of Water	6
Food and Drugs Act	106-107

	<i>Page</i>
Food Condemned	105
Food Hygiene	102
Food Premises	101
Food Sampling	88, 106-109
Handicapped Persons Welfare	74-79
Health Committee	2
Health Education	6, 29, 50
Health Visiting	36
Holidays at Rockwood	73
Home Nursing	37-42
House Improvement	94
Houses in Multiple Occupation	95
Housing Accommodation	94
Housing	93-95
Ice-Cream Manufacturers, Retailers and Premises	99-100
Immunisation	45
Incidence of Sickness—Working Population	26
Infant and Young Children's Clinics	28, 30
Infant Mortality	5, 23-25
Infectious Diseases Notifications	5, 64-66
Infectious Diseases, Prevalence and Control Over	63-68
Inquests and Uncertified Deaths	19
Inspection and Supervision of Food	97-110
Introduction	5
Legal Proceedings	95, 110
Licensing Act, 1961.....	102
Major Accident Organisation	61
Market Hall.....	102
Maternal Mortality.....	24
Maternity Homes	35
Maternity Liaison Committee	35
Meals on Wheels Service	53
Meat Inspection	103-105
Medical Aid	34
Mental Health Services	55-60
Milk Supply.....	98-99
Morbidity	5, 26
National Assistance Act, 1948—Part III Services	69-80
Natural and Social Conditions of the Area	9-11
Neo-Natal Cold Injury	5, 35
Neo-Natal Deaths	23
Nursery	32
Nurseries and Child Minder's Regulation Act, 1948	32
Nursing Equipment	43
Offensive Trades	89
Ophthalmia Neonatorum	35
Perinatal Mortality.....	23
Pharmacy and Poisons Act	91
Places of Entertainment	91
Pneumonia	20
Poliomyelitis Vaccination	44
Post-Natal Clinics	29
Premature Births	22

	<i>Page</i>
Prevention of Damage by Pests Act, 1949	91
Prevention of Illness—Care and After-Care	50-54
Prevalence of and Control Over Infectious Disease	63-68
Principal Causes of Death at all ages	18
Protection of Movable Property	73
Provision of Health Services	27-61
Public Analyst's Annual Report	108-109
Public Baths	83-84
Public Cleansing	85
Public Health Inspection	86-91
Public Conveniences	85
Radio-Telecommunications	49
Rag Flock and Other Filling Materials Regulations, 1951	89
Refuse Collection and Disposal	85
Registrar General's Short List of Causes of Death	16-17
Removal of Persons Needing Care and Attention	73
Rent Act, 1957	95
Residential Accommodation	70-71
Respiratory Diseases—Deaths	20
Retrolental Fibroplasia	35
Rodent Control	91
Sanitary Circumstances of the Area	81-91
Senior Training Centre	60
Sewerage and Sewage Disposal	82-83
Shops Acts	91
Slum Clearance	6, 94
Smallpox Vaccination	43-44
Smoke Control Areas	88
Special Care Unit	60
Staff	2-4
Statistics	13-26
Stillbirths	23
Temporary Accommodation	72
Tetanus Immunisation	45
Toddler Clinics	30
Trade Refuse	85
Training Centre, Hope School	58-59
Training of Midwives	35
Training Centres	58-60
Transport of Midwives	35
Tuberculosis	20, 52-53
Tuberculosis Notifications...	66-67
Vaccination	43-45
Venereal Disease	51-52
Vital Statistics	14
Voluntary Organisations	79
Water Supply	82
Welfare Foods, Distribution	31
Welfare Services	7, 69-80
Whooping Cough Immunisation	45
Workshop Employment	77

