

Editorials

THE PHYSICALLY HANDICAPPED IN MILTON KEYNES

A NEW town is God's gift to the planner, and rightly so. A virgin canvas on which to attempt the likeness of Perfection, it provides a challenge which cannot be refused, and which has been taken up in Milton Keynes by a working group, which has studied the future care and integration of disabled people in that town, and has published its ideas in general and in particular. It states as its creed that so far as is humanly possible the disabled must be in and of the community; the disabled child must be reared, educated and trained with his perfect fellows, and thereafter must work and live among them. It then sets out to find how this can be achieved.

To attain this end the working group decided that every medical and paramedical skill must be used, and that present administrative hedges between these different disciplines must largely disappear. At the apex of the pyramid would be a specialist in physical medicine, who, in addition to his medical work at the district hospital, would supervise and correlate all the services which are to be provided for the disabled in his area. Next in deployment would come the general-practitioner health centre, the principals of which could hold appointments at the district hospital in relevant specialties, and be fully supported in their own centres by the necessary ancillary staff, thus not only having responsibility for disabled patients on their own lists, but also being actively involved in the care of, and planning for, all disabled persons in the town.

Remedial services would comprise nurses, social workers, occupational therapists, health visitors, physiotherapists and speech therapists—for all of whom a wider and more specialized rôle is envisaged than is now generally accepted.

On the educational side, as many physically-handicapped children as possible should be educated at ordinary schools designed to include provision for their needs, or at special units attached to such schools. Nonetheless hostels will be needed for the more seriously handicapped and these must provide continuous care by skilled staff. Transport will be needed on a lavish scale, and the whole service must operate from school-entry until the youth is trained for his ultimate job. Industrially, sheltered workshops and industrial centres are envisaged, and the working group considers that five 200-place industrial centres will be needed in addition to those already existing in Milton Keynes. Again, the need for transport is stressed, and in this field continuous re-assessment is considered to be vital.

On the domiciliary side the novel idea is put forward that all public and private buildings should be so designed that easy modification for the disabled is possible. This is an interesting challenge to the architects, and one likely to stimulate considerable new thought. In addition to all this, day-centres are included for the aged; a comprehensive domiciliary rehabilitation service both for them and for the temporarily disabled is considered essential, and assessment centres are projected at hospital and health-centre level.

All this is unexceptionable except perhaps on one count. What of the cost? According to the figures adduced by the working group, roughly five per cent of the adult population have some disability, and the percentage of handicapped children in Buckinghamshire is of the order of 1.6. Whilst admitting freely the group's thesis that the disabled have a right to be as fully integrated into their community *as is possible*, we have

in the end to come down to hard unemotional brass tacks. What economic yield would be obtained from the immense capital expenditure required for such a scheme? How would the enormous day-to-day expenses be met? The report is quite silent on this subject, and in the wicked and imperfect world in which we have to operate, this is a notable and rather damning omission.

WILL PICKLES OF WENSLEYDALE

WILLIAM NORMAN PICKLES was born at Leeds in 1885. He died in 1969 much loved and full of honours. The main achievements of his long life are well known. He was able to show in his country practice how an epidemiological study could be used to map out the natural history of many of those infectious diseases which are seldom admitted to hospital. His descriptions of infectious hepatitis and Bornholm disease are classics. He was the first president of the College of General Practitioners and the first family doctor practising in partnership to be made a fellow of the Royal College of Physicians. These are things that happen to no ordinary man. In a full-length biography Professor John Pemberton* has now told the story of this remarkable country doctor in a manner worthy of his subject. What emerges is a portrait of a general practitioner of the old school, loved and implicitly obeyed by his patients, and respected by his colleagues. "What sort of man emerges?" asks Professor Pemberton, and he answers, "I think that the overwhelming impression that Will Pickles made upon his friends was one of warmth of character and friendly geniality. His welcoming words to patient or friend alike and uttered with a beaming smile, 'Now old man, come in', made the visitor feel that Will was truly pleased to see him". Professor Pemberton has succeeded in conveying just this in his biography, but he has done more; he has written an enthralling history of medical practice over the last 60 years.

William Pickles was the son of an urban practitioner. His father who, until he acquired a bicycle, always wore a frock coat and top hat, was earning £800 a year when Will was born and his practice was typical of the time; private practice for very small fees and numerous clubs would have been its backbone. When he had served his house appointments Will did many locums whilst waiting for a suitable practice to turn up. In this way he learned much about the ways of doctors and patients, of the clubs and the parish, and the compounding and dispensing of medicines, so that when he came to settle in Aysgarth he was as well equipped as any of his contemporaries. What was unusual at the time was that he remained the perpetual student and during most of his working life he went for an annual refresher course. Great discoveries come only to those who have the prepared mind and this Will Pickles certainly had. Soon after he settled in practice he saw the inception of the National Health Insurance Act and the panel system. He witnessed the unfortunate wave of hysteria which beset the British Medical Association at that time. He served in the Royal Navy in the 1914 war and in the second he did valuable work on many war-time committees. When the National Health Service was inaugurated it met with his approval. He witnessed the wonderful progress of the science of medicine and the dramatic changes in the modes of practice. Whether he would have approved entirely of large group practices and health centres is doubtful. He was essentially a patriarch and could not happily exist without his flock. This great and simple man is indeed fortunate in his biographer.

* *Will Pickles of Wensleydale. The life of a country doctor.* JOHN PEMBERTON. London. Geoffrey Bles. 1970. Pp. 214. Price £2.10.