

74°  
46°

**Parkmerced  
in \*San Francisco**

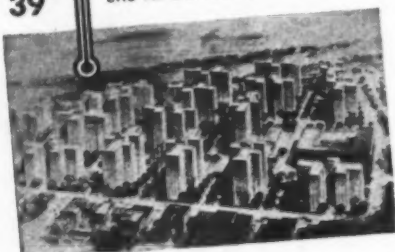
Leonard A. Schultze and Associates, New York; Harry A. Thomsen, Jr. and Aleck L. Wilson, both of San Francisco, Architects.



60°  
39°

**Lillian Wald  
in New York**

Frederick L. Ackerman and Lafayette A. Goldstone, Architects.



## TWO CLIMATES

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In San Francisco, "short hour" heating with steam is provided for Parkmerced, the great housing development of Metropolitan Life Insurance Company by a Webster Vacuum Steam Heating System. Webster Sylphon Packless Valves, Sylphon Traps and Nash Vacuum Pumps were approved for this installation by Consulting Engineer Thomas B. Hunter.

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\*San Francisco is the meeting place this year for the Heating, Piping Contractors National Association, May 8th-11th, and the National Association of Master Plumbers, May 17th-20th.

## Perspective

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# The Illness of the Health Service

by RAYMOND MOLEY

THE inevitable mess into which the British government medical service is descending is now a matter of official record. Great expectations have ended in what a British newspaper called Bleak House. And all that Sir Stafford Cripps could say in his budget speech was that the dreadful thing must stop. How he expects that it can be stopped he does not explain.

Perhaps that hopeless job will be left with Minister of Health Aneurin Bevan, once designated by Churchill as the Minister of Disease. But like the sorcerer's apprentice, "Nye" has started something without knowing how to stop it. If the purpose of Attlee, Morrison, and Cripps is to bury an unpleasant colleague, they are doing it at a colossal cost to the nation.

To recapitulate some figures that were carefully guarded until after the election, the Health Service, for which Cripps asked £261,000,000, last year actually cost £416,000,000. Sir Stafford admits £382,000,000, but some additional millions are hidden in other budgetary items. In any event, the system is costing twice as much as was estimated when it began two years ago, and there is every reason to believe it will continue to rise, despite what Sir Stafford says.

This situation was predicted in a most dispassionate review of the first year of the Health Service, published in "The Practitioner" last year. The cost, the review pointed out, would be the ultimate test of this experiment. Now it is clear that its cost is wholly out of line with any possible schedule of taxes, even with the United States providing the margin for a sizable general budget surplus.

IN a long conversation with Aneurin Bevan on the subject, I learned that he counted heavily on the government's ownership of the hospitals to control the doctors, despite the apparent liberty they enjoy under the plan. But it may be that the management of the hospitals will be the most difficult step to a reduction in costs. In a penetrating survey of the medical profession by Dr. Joseph B. Cripps, it is pointed out that the hospitals are already being

called upon to perform services that should be done in other ways. It is notorious that under the lax administration of the service, hospitals are crowded with chronic cases, many if not most of which should be in private homes. This limits access to cases which would provide more and adequate training for young doctors.

Dr. Collings makes a cogent point in

noting that while the new health service was to improve the standard of medical practice by bringing doctors together in cooperative groups, the exact reverse has been the case. With respect to the medical profession, the service has concerned itself not with improving the competence and esprit of doctors, but

with other, less important matters. The service, therefore, has failed in one of its most important tasks. A profession which needed improvement has actually suffered a retrogression.

INSTEAD of imposing upon doctors a great self-improvement, it has overloaded them with routine. To satisfy the demands of patients, it has practically forced doctors to hand out unwarranted prescriptions for which the government pays. In short, if I may draw a conclusion which Dr. Collings only implies, government medicine tends to reduce a once highly responsible profession to the status of a group of bureaucratic routineers.

It is, of course, too early to determine whether the health of the British people has improved. But in his political speeches the Minister of Health made great boasts about the healthy babies of England. At one point his sense of humor stopped him on the verge of including a higher birth rate among the blessings of socialism. He failed also to note that the mothers of these healthy babies were born and raised under the "benighted oppression" of Conservative governments.

Under a Conservative government which may well take over from this discredited regime, it may not be possible to return to private medicine. But it is not too much to hope that some measure of efficiency will be introduced before Britain loses everything—including its health.

