

FLIGHT SUCCESSFUL—The first flight of a Boeing B52G test bed with the new turbofan engines to be used on America's advanced missile bomber, was described as "a complete success" Thursday by flight test personnel at Wichita, Kans. The B52H, armed with Sky Bolt missiles, and the B52G, armed with Hound Dog missiles, will serve as high-speed, ever-shifting missile bases in the sky to insure instant retaliation in the event of aggression. (UPI Telephoto)

### Back Stairs: Ike Grabs Painted Railing, Chaplain Gets a Sticky Handshake

Newport, R.I. (UPI)—Backstairs at the summer White House.

President Eisenhower Sunday was a victim of the old Navy custom which is summed up in the words: "If it moves, salute it; if it doesn't, paint it."

Descending an outside stairway from the small chapel on the second floor of a rickety frame building, he grasped the railing for support. His right hand came away with a broad smear of white paint.

The chaplain, Lt. Gordon Gale, got a sticky handclasp as the President congratulated him on his sermon.

George Allen, the President's Gettysburg neighbor and friend, is seriously considering teeing up his own golf ball hereafter instead of letting his caddy do it. Eisenhower, during a recent round on the Newport Country Club course, slipped Allen's caddy an explosive plastic ball which disintegrated with a loud bang when it was hit.

Allen's game fell apart for the rest of the day, much to the merriment of Ike.

Eisenhower by now is accustomed to the fog which frequently shrouds the Newport Country club early in the morning before the summer sun has burned it away.

But the other day he ran into a new atmospheric hazard. Dense smoke from a \$200,000 fire which destroyed one of the once fabulous but now abandoned showplaces at this onetime "playground of millionaires," drifted across the fifth tee and halted play for a few minutes until the wind shifted.

### Family Council

Editor's Note: The Family Council consists of a Judge, a psychiatrist, three clergymen, a newspaper editor, a women's editor and two writers. Each article is a summary of an actual case history. The Council reports on problems that have been dealt with by responsible agencies and counselors.

Laura C. - Evelyn gets all privileges. Mrs. L. C. - We are trying to even the score.

Laura C. - I am 16 and my sister Evelyn is nearly 15. We don't get along and my parents show her all the favoritism.

They are so unfair sometimes I feel I could just do something violent. Recently, for example, one of my aunts wanted to take me on a trip. My parents talked her into taking Evelyn instead. Shouldn't an older sister have the preference?

My parents made the excuse that I have to work on my music and dancing. But they know I need a vacation once in a while too. You'd think I was nothing but a work horse. They show preference for Evelyn in a lot of other ways too.

Mrs. L. C. - This problem has been going on since the girls were little more than babies. They are extremely jealous of one another and we can't seem to make them understand that we love them both equally.

Now that the girls are older things are even more serious. Laura is extraordinarily pretty, vivacious and talented. She plays the piano beautifully and is a fine ballet dancer. She gets a tremendous amount of attention from everyone. Evelyn, on the other hand, is a sweet, lovely girl, but nobody even notices her when Laura is around. We try to even the score a little.

The Council: As long as the C's talk and think in terms of evening the score, they will be defeated in their efforts to make their daughters happy with themselves and the world in general.

Scores are rarely even and nobody can afford to be miserable about that. We are all less well off than somebody else in some respects. Those who bemoan this fact do not bother to develop their own full potentialities.

A girl like Laura inevitably attracts the attention of the public. Nevertheless she is very insecure. She seriously feels her parents love her sister more and she can't be expected to feel sisterly affection for such a rival.

We get the impression that these parents are, themselves, overwhelmed by Laura's talents. Possibly they expect big things of her. It is very easy for such a child to get the impression that her parents care only about her achievements and do not love her for herself.

The score the C's want to "even" really involves their own feelings. We believe they love their two daughters equally, but perhaps their own yearnings for success have gotten in the way of the proper demonstration of love for their children.

Possibly the C's have pointed out to Laura that she is better endowed than her sister and should therefore be willing to agree to certain concessions for Evelyn. This may comfort Laura's sore ego for the moment, but it will not touch her deep-seated feelings.

What is needed in this family is a genuine appreciation of both girls for themselves. Undoubtedly Evelyn has wonderful qualities which simply haven't been brought out because the parents have been sidetracked by Laura's assertive abilities. When they can take just as much pride in Evelyn as Laura, their daughters will be able to live at peace with one another. (Copyright 1960, General Features Corp.)

### Chicks Well Done After Trailer Fire

Chicago (UPI)—A semi-trailer caught fire on the Illinois Tri-State Tollway Thursday and about \$15,000 worth of dressed chickens inside it were done to a turn.

### FOOD FOR POLAND

Washington (UPI)—The United States has agreed to supply Poland with \$130 million in surplus agricultural products.

### National Health Service Now an Entrenched Part of The British Way of Life

By LAURENCE MEREDITH United Press International London (UPI) — Britain's National Health service, costing the government nearly \$2 billion yearly, is now an entrenched part of the British way of life.

Originally conceived by a Liberal minister in Winston Churchill's wartime coalition cabinet, it was brought into being 12 years ago by a Labor government.

The British people do not regard the program as "socialized medicine." Nearly universal acceptance has placed it beyond the realm of political controversy.

It is regularly used by 95 per cent of Britain's 50 million people and served by 98 per cent of the nation's doctors. It is available to all who ask for it, whether the applicant is a citizen, or merely a weekend visitor from abroad.

The great majority of British specialists participate in the national program. It is estimated that only 500 to 600 general practitioners administer to patients completely outside the service on a private, individual basis.

Preserves Freedom The National Health service (NHS) was designed by its framers to preserve the essential freedoms of both patient and doctor.

Under its provisions the patient is free to choose his doctor and to change to another if for any reason he so desires. He may use the complete NHS program or just part of it.

Britain's doctors are neither required nor obligated to join the service. If a doctor does participate, he is allowed under terms of the law to accept private, fee-paying patients. He is free from any governmental interference in his clinical judgments. There are no restraints against criticism of NHS or medicine in general.

NHS offers Britons complete family doctor, dental and ophthalmic services, and free drugs and medical appliances such as false teeth, hearing aids, glass eyes, wigs, etc. The hospital service includes treatments, specialists, convalescent homes and ambulances. It also supplies maternity, midwife and child welfare services.

The nearly \$2 billion annual cost of NHS represents 3.75 per cent of Britain's national gross product (the cost of all goods and services) which in 1958 was \$56 billion. The service's total cost represents an outlay of approximately \$40 for every man, woman and child in the country.

Costs of NHS are now, however, consuming 5 per cent less of Britain's tax revenues than they did three years ago. NHS funds paid by employers and employees are partially responsible for the reduction.

Separate Payments These are separate payments from the sickness benefit and pension plan. A British worker now pays 26 cent weekly to NHS and his employer another 6 cents. These monies add up to 14 per cent of the annual NHS total bill.

The British treasury pays about 72 per cent of the NHS bill. Four per cent comes from the various local governments, about 5 per cent from superannuation finances and 5 per cent from sale of NHS items for which charges are made.

These charges include the 14 cents a patient pays for each prescription he purchases at the pharmacy; \$2.80 for

dentistry, or its full cost if less; \$5-\$12 for dentures; \$1.68 per day for a private hospital room if the patient is not considered ill enough to require the private room, and other nominal fees.

Any Briton who is a private paying patient of a doctor must pay for his own drugs, but even this person is eligible for free NHS hospitalization and treatment.

NHS has been described by some Britons as more a "doctor's service" than a "patient's service."

When NHS first came into being it was organized with the idea of retaining the best

of the old medical system in the new.

Various demands of the British Medical association, representing virtually all Britain's doctors, were met and the traditional basis of freedom of doctors was insured. Under the remuneration scheme devised for the service, doctors are not paid salaries but receive a set annual fee for each NHS patient on their treatment lists.

Doctors already were familiar with this "capitation fee" system which had its beginnings in 1911 when the government of Prime Minister David Lloyd George organ-

ized the National Insurance Program. Prior to NHS 20 million British workers already were getting free medical service under the program, and it gave participating British doctors 40 per cent of their incomes.

Each British family doctor in the NHS program is allowed a maximum of 3,500 patients for which he is paid \$2.52 yearly for each. The average number of patients per doctor is about 2,200.

To encourage building larger practices, an additional \$1.68 is paid for all those patients on a doctor's list between numbers 500 and 1,501, increasing to \$4.20 his fee for each of these persons.

Family doctor salaries average about \$7,500 yearly. A doctor with a maximum NHS list grosses about \$11,000. In addition, merit awards ranging from \$1,400 to \$2,800 yearly are given to family doctors or general practition-

ers for meritorious patient service.

Full time hospital doctors are paid varying salaries from public funds. Part-time consultants, or specialists, who may practice privately, are paid set fees per half-day units spent at the hospital.

The two main restrictions of medical freedom are the NHS limit of 3,500 patients on the treatment list, if the doctor practices alone, and a partial hold on his choice of where he shall practice. This later restriction was imposed to achieve better distribution of medical service.

If a doctor wishes to move to another area, he must receive permission from a medical practices committee, seven of whose nine members are doctors.

To encourage doctors to move into "under-doctored" areas, NHS grants special subsidies during the first three years to those willing to practice in those sections.

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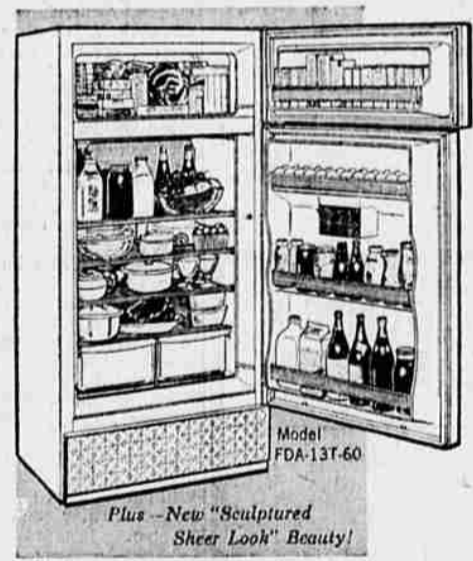
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