

# Lieut.-General Sir HAROLD E. KNOTT

K.C.B., O.B.E., Q.H.P., M.D., D.P.H., LL.D.

DIRECTOR GENERAL ARMY MEDICAL SERVICES—1961-1965

ON the retirement of Sir Harold Knott it is right that we should review what was achieved during his term of office.

The greatest single problem which faced him on his appointment was the grave shortage in personnel, both officers and other ranks. There was an urgency for new ideas to make the Army Medical Services more attractive than ever before. We had not long to wait.

In 1962 came the far-seeing medical cadetship scheme, the dividends of which we are already beginning to see. Without this it would be difficult to imagine how the R.A.M.C. could have faced the future. In the same year the "New Deal" for doctors and dentists was introduced. Not only did this bring enhanced rates of pay and more rapid promotion; there were also greater chances of attaining higher rank than ever before and of achieving the status of consultant, comparable in every way to a consultant in the civilian profession.

A new concept of General Practice was introduced in 1963 when this subject was included in the syllabus of the post graduate courses and students were attached to general practitioners in the London area. In 1964 Dr. John Fry was appointed Honorary Consultant in general practice to the Army. Special three-month courses were arranged for senior officers in group practice. These innovations also resulted in the creation of a new career in general practice up to the rank of colonel. Thus general practice has come in to its own as an important career in the Army.

The whole status and career prospects of the other ranks was reviewed. The technician was recognised for his worth and his pay consequently improved. He was further guaranteed continued employment in his trade for his whole service if he so desires. In 1964 a new scheme for non-medical officers was introduced and this was directly related to career prospects for other ranks. The quartermaster commissions remained for the other rank granted a permanent commission and new types of administrative officers and technical officers commission were announced. The administrative officers commission realised the need for a young non-medical officer who went to Selection Board and trained at Mons Officer Cadet School. This officer is granted a limited service commission and may reach the rank of colonel. The technical officer's commission is reserved for the other rank technician remaining in his trade and he is granted a short service commission.

During 1963 in the Q.A.R.A.N.C., the time element for promotion from Lieutenant to Captain was reduced from six years to four years, and from Captain to Major from fourteen years to twelve, including ante-dates. The new training for state enrolled nurse and the new (1962) syllabus for state registered nurse were started in 1964. Training at the Midwifery Training School at the Louise Margaret Hospital started in November, 1961 and officers and qualified other ranks attend courses there.

To these far reaching personnel schemes must be added a considerable achievement of quite another type. Ever since the end of the 1939-45 War the main energies of the

medical services of the Army have been devoted to the creation of a peace-time medical service in which ever-increasing numbers of families have produced additional problems, the magnitude of which could scarcely have been foreseen. That an efficient service has been produced nobody can deny, but it was done, to a certain extent, to the neglect of the field force medical units.

That this was clearly recognised was shown by the formation of the Knott Committee on Field Medical Organisation in 1961, the conclusions of which were presented at the Director General's Annual Exercise in 1963. The committee made a thorough study of future medical requirements of an Army in the field which resulted in a considerable simplification of the varieties and types of field medical units we once knew. The overall scheme has been generally accepted and user trials have so far proved the value of the committee's work.

In special fields also, increased responsibilities have been undertaken. The control of the War Department civilian medical services has passed to D.G.A.M.S. and a pilot occupational health scheme set up. Reduction in the frequency of periodic examinations will lessen an unpopular but questionable load while a selective scheme for the examination of school children has been introduced.

Facilities for the diagnosis of viral diseases have been extended and laboratories for the medical use of isotopes have been opened at home and abroad. The work of the Army Tumour registry has been expanded four fold and a scheme for the examination of service wives by exfoliative cytology has developed rapidly.

In the field of clinical research there has been more interest and greater facilities are now available.

It would be easy to extend the list of achievements but we have included those we think of the greatest importance. They constitute a record of "something attempted, something done" and credit for them all is due to Sir Harold Knott to whom and to Lady Knott we would extend our best wishes for their future health and happiness.

---

#### **G.M. for Jungle Heroism**

Captain Ian CRAWFORD, R.A.M.C., has been awarded the George Medal in recognition of gallant and distinguished service in the Borneo Territories.

On April 20, the helicopter in which he was visiting forward troops, crashed on landing. The risk of fire was imminent but, having seen to the escape of six Gurkhas, he went to the help of an officer trapped by a shattered arm. Using a clasp knife he worked for an hour in appalling conditions to amputate the officer's arm.

Because of the tilt of the cabin, Captain Crawford had to support most of his patient's weight while completing the dressing. Although exhausted, he insisted on staying with the officer during the subsequent evacuation by relief helicopter.



DR. CHARLES MURCHISON, F.R.C.P., F.R.S.  
(1830—1879)