

THE TRAINING OF FIELD MEDICAL UNITS

BY

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Late Royal Army Medical Corps

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TRAINING EXERCISES

ALTHOUGH a consideration of Exercises has been left to the last it must not be supposed that these are the climax to a period of training. Any such logical progression would soon bore the trainees, and in training there is no objection to letting men run before they can walk. It is in fact an advantage to make them do so, and simple schemes should be done from the beginning of training since they get men into the open air, help to sustain interest, and, even if those taking part in them are too inexperienced to get full benefit, they show the practical application and underline the objects of all other and possibly duller forms of training.

Exercises should aim at ensuring that all ranks think along the same general lines and at the same time should encourage the development of intelligent initiative. If these objects are to be achieved, and if the inevitable unrealities are not to lead to ridicule, so that the C.O. thinks that he has had a useful and instructive scheme whilst everyone else defines it otherwise, it is essential to hold an all ranks post-exercise conference, preferably next day when all have had time to digest the lessons. At these discussions free criticism, comments, and suggestions should be invited from all ranks, and errors of judgment of officers, N.C.O.s and others may be discussed with judicial impartiality. This encourages them to have sound reasons for whatever they do, and does not give offence nor lessen their authority so long as the attitude is insisted upon that we are all learning the game of war together, and that no one solution is necessarily invariably correct. The victims should be encouraged to hit back at the C.O. or Directing Staff in a lively discussion.

If the Field Ambulance is affiliated to a Brigade Group the Regimental Medical Officers and their R.A.P. staffs should attend its exercises to learn Field Ambulance duties. If the R.A.P.s are not represented on the exercises it is impossible to practise one of our most important duties—contact with R.A.P.s which must be visited frequently during battle. The need for this can be emphasized by imposing casualties among the R.A.P. staff or a rush of casualties too great for them to deal with. Other commonly accepted rules can also be practised. The umpire can allot casualties when the unit is on the move or just packing up, since the obvious rule “never refuse to take in a case” was too often forgotten. Units when just about to move sometimes sent an ambulance

to a near-by unit perhaps of another formation which was open. This often had confusing results, and caused unduly prolonged absence of ambulances from the forward area.

On most Field Ambulance exercises the automatic plan for one exchange of stretchers and blankets, the pendulum action by which ambulances and medical supplies are kept moving forward in full replacement of all that comes back, is properly practised; but thought should also be given to what happens when vehicles bringing back casualties do not return to the R.A.P. or C.C.P., as, for example, in a river crossing or when supply echelon or other non-medical vehicles are used to evacuate casualties. On all schemes everything should be loaded in ambulance cars which is normally carried in battle, including one or even two hundred miles of petrol, etc., spare water, improvised cooking outfit and food for patients, and the full kit of the driver and ambulance orderly. Drivers must learn to carry these things without putting anything inside the body of the ambulance, and it is advisable to cover this point in Standing Orders which should include a diagram of the approved method of stowing kit in ambulances. An untidy or improperly loaded ambulance can then be treated as an offence. Slit trenches should be dug during exercises, and they must be properly sited in relation to the needs of camouflage and concealment. If action on air-raid alarms is practised and men are taught to take cover one must be careful to ensure that one's training in this added to their normal instincts of self-preservation do not carry men too far in that direction, so that in action they zealously take cover whenever danger threatens. On occasional schemes everyone may be made to do the job of those immediately senior to them.

If pack animals can be borrowed the problems of their loading and use should be studied. If mules are used in operations the medical unit using them usually has to provide assistant mule leaders and load adjusters, as trained muleteers are usually provided only on a basis of one to two or three mules.

To ensure a thorough knowledge of and compliance with the various D.M.S. circulars and instructions about the preparation of AFs W 3118 and other technical subjects of importance in battle it is a good plan to give to all M.O.s and N.C.O.s down to Staff Serjeants, leaflets containing extracts from these, and to practise their provisions on schemes.

It is important to practise the action to be taken if a site selected for a R.A.P. or C.C.P. is denied to us by enemy action or if the route of evacuation is blocked by shelling, cratering, etc. ALL ranks must learn to study the map for alternative sites and routes, which should be kept in mind when siting such posts. It must be drummed into them that it is their duty to explore for new routes by intelligent, energetic, and resolute probing in a personal reconnaissance, and not just to accept as an unfortunate development their inability to contact the R.A.P., for example, or to sit and wait for someone to tell them what to do. Exercises should be designed as far as possible to test flexibility and intelligent use of the map, and once the basic principles have been grasped

interest can be sustained by altering the country in which schemes are done and by practising methods to overcome the difficulties introduced by rivers, forests, cliffs, trackless country, and minefields.

The importance of NIGHT TRAINING needs no emphasis, and if a continuous succession of night exercises is done for a week or so, a practice which was called "turning night into day," men learn to sleep by day which they must often be compelled to do during operations when a large proportion of our work must often be done at night. Rapidity of dark adaptation and confidence in finding one's way about in the dark can be considerably increased by practice.

If exercises are not to settle into a groove of orderly routine and so to lose reality, unexpected situations and sudden moves, especially at night, must be arranged. It is essential to develop a good drill for assembling everyone from their sleeping places at night and for getting them to their place of work or into the proper vehicles for a sudden move. During the war these and other points were often covered by the writing of so-called ALARM SCHEMES. The purpose of these in medical units is, of course, not resistance to attack but preparation for a sudden move or for a rush of work, or in an attack by ground or airbourne troops the denial to the enemy of the use of our vehicles. They should include the different methods of giving the alarm in various circumstances with details of everyone's action, and should be prepared for different types of warfare and of country, for standing camps, field conditions, and for alarms on the move on foot or in transport. They should be practised frequently especially on schemes lasting more than one day, and during operations they should be read and explained with any necessary emphasis on local conditions after any major change of location.

WATER DISCIPLINE should of course be practised during exercises, and a somewhat unpopular but useful hardening exercise in hot countries is a scheme to accustom men to do with a small ration of water, an ability which can undoubtedly be developed by training and practice. Such practice may perhaps be physiologically unsound, for acclimatization to heat and to altitude are gradual processes which reach completion more rapidly in some men than in others, but it can be justified as a preparation for possible privations during active operations. It can also be explained to men that if they are captured by the enemy it is their duty to escape, and that they will not be presented with a compass and water bottle for this purpose. Preferably only men who have had a reasonable time for acclimatization should take part in the severer forms of such exercises, for they should, if fit, be losing less sweat and also a smaller proportion of salt in their sweat than completely unacclimatized men. They should be sweating "economically"—i.e. losing only that amount of sweat which is sufficient for cooling their bodies, and not soaking their clothing by pouring out pints of unevaporated, and therefore useless, sweat. If they have also acquired a good sun tan so much the better. This can be achieved by making them do all fatigues and marches stripped to the waist, which can be done if only one man in twelve on a march carries a pack with haversack rations.

Incidentally this practice also enables them to keep their clothing clean and hygienic in the desert where water can often not be spared for washing it.

Various types of exercise can be evolved to relieve boredom during a lengthy period of training, and to justify the use of transport for what are really thinly disguised picnics, by including in such expeditions some instructional aspect. For example map reading and navigation can be practised as has already been suggested, by dividing the route into some twenty-four stages by points on the map which should be difficult to identify, and making different men pilot the lorries on the different stages. On one occasion such a picnic was preceded by a schistosomiasis survey of a wadi where this condition was endemic. A lecture on the subject was given and pictures of *Bullinus* and *Planorbis* snails were exhibited on the notice board for some days before the exercise. On another occasion a Water Reconnaissance was done, a supply point being traced to its ultimate sources, and the use of the Horrocks Box and Water Cart and individual methods of sterilizing water for small parties were practised. The use of wireless and the writing of Orders, Messages, and Reports must also be practised.

Bivouacking week-ends, with mountaineering practice or hiking, make a good break in the routine. Each man taking part in such expeditions may be asked to write a complete list of the party's requirements in food, water and other essentials.

When exercises are being done in preparation for any specific task all ranks should be encouraged to give free play to their inventive capacities in evolving special equipment which might be useful. Few Field Ambulances have failed to produce their own patterns of shelter, special bivouac tents and so on, and many of these owe their invention to the private soldiers who had to use and, perhaps, to carry the equipment.

It will help to sustain an interest in exercises and make them more realistic if they can be fitted into the story of an imaginary campaign taking place in the Training Area. This method, which needs careful preparation and for which the original skeleton at least should be provided by the "G" branch of the Staff, is particularly adaptable to a two to four weeks' training camp or to a longer period of collective training. The available ground can be fully used in successive advances by the enemy and by our own side, with counter-attacks, airborne landings, and commando raids. Days when training is being done in camp or barracks represent lulls in the fighting or attacks by other Brigades in the imaginary formation, or by other formations. Ground which is not available for training becomes the scene of operations by flanking formations. A war map with flags and so on showing the day-to-day situation is exhibited on a special notice board outside the orderly room or in the information room, and space should be provided for newspaper cuttings, some of which may be made amusing, for wireless intercepts from neighbouring formations, Intelligence Summaries, and accounts of the interrogation of enemy prisoners. Examples of breaches of security detected by imaginary unit or

Base Censors can also be shown on the board from time to time. Members of other units, or Field Security personnel, can act as enemy agents. In these and other ways a realistically war-like atmosphere can be created which will teach men quite a lot, as well as giving life and interest to all the exercises which are prepared.

Men who have been encouraged to take an interest in such imaginary campaigns will be more intelligent in their interest in a real one, in which their value to their unit is enhanced if they are kept in the picture by daily news bulletins prepared by the C.O. If you tell them everything they in their turn, will often pick up a lot of news for you.

OBSERVERS

Members of Brigade Staffs and of other units should be encouraged to attend Field Ambulance exercises as umpires or as critical observers. In this way they will themselves learn something about the Divisional Medical Services and, if they are outspoken in their criticisms and suggestions, we may learn a lot from them. The opinions of all who pass through our hands as exercise casualties should also be sought. The viewpoint of our potential casualties will often be found to be most illuminating, and it is much better to hear their criticisms during training when we can consider them and perhaps rectify the faults which they have detected, than that we should get them in a more acrimonious form and perhaps at second hand after they have been wounded in battle.

CONCLUSION

In this article the Field Ambulance commander will find a guide to taking over his unit, estimating the state of its training, and training it for war. It is by no means a complete guide for very little has been said about the employment and command of medical units in the field or about the medical arrangements needed for specific operations. These may be dealt with under Officers' Training. It is important especially in the early stages of a war that junior officers who are the unit commanders and staff officers of the future should be taught these subjects, which are not, however, exclusively the concern of officers. Much of what they are taught must be passed on to their men in the endeavour to keep them constantly in the picture both in training and during operations. The importance of this and the ways in which it may be done have been mentioned in many of the sections of this article, but it cannot be emphasized too much. The value of keeping men in the picture at all stages of a battle is axiomatic in our modern army, but in training this axiom tends to be overlooked. The aim of training in general and the specific aim and value of each type of training should at all stages and at every opportunity be explained to everyone. By this means only will a sense of purpose and real enthusiasm be maintained throughout long and sometimes necessarily monotonous periods of training. Although there are certain subjects which are of importance mainly to officers I believe that in general the best possible

training for the officers of Field medical units is to make them learn how to train their men under the guidance of a good Commanding Officer.

If time has allowed for the practice of most of the forms of training described here and for putting them into effect in unit, Brigade, and Divisional exercises rendered more intelligible by the kind of teaching outlined, the men of the unit should be versatile and able to adapt themselves to the conditions of all normal operations and, probably with but little specialized training, also to special types of operations. Their enthusiasm and interest will have been better nourished than by an unrelieved diet of squad drill, tent pitching, nursing training, stretcher exercises and Thomas' splint drill, important to their work though these certainly are. The C.O. should keep his eye on the level of efficiency maintained by each man by means of periodic tests of individual training, an example of which is included in Appendix I. Given sufficient time and suitable areas to enable one to repeat and repeat the more difficult subjects with an ever-varying approach to them, very little of all this training is beyond the scope even of any man.

However valuable Selection Groups may be as a rough guide to the most suitable employment for our men I have no high opinion of a Commanding Officer who broods in his office over his men's employment sheets muttering: "How can one train a unit if they WILL post to it all these SG4 and 5 men?"

Get out amongst them and study them for yourself. You have an advantage over the Serjeant Testers and Personnel Selection Officers in that you have much more time in which to observe them at work and at play. Even if a psychiatrist helped in their grading you are also a doctor and well able to judge a man for yourself, and it is possible that you may know more than he does about the training of men and of units. Engage their interest and let them see the objective of all that you try to teach them. Vary your approach to each subject, and by frequent exercises illustrate the purpose of each type of training. Treat them often rather like Boy Scouts and make of much of their training a game, proficiency in which is an achievement to be prized. The soldier always sees the funny side of things and he often sees it before his officers do. Laugh with them as well as at them, and temper normal discipline with a modicum of genial bullying when necessary. Make them take a pride in their unit and formation and in their work, and especially see that they appreciate the inestimable value to an Army in the Field of an efficient medical service, and the source of comfort and strength to men's minds which is given by the knowledge that if they are wounded they will be quickly and capably succoured by friends whose services they have learned to esteem. Give them a sense of purpose, inspire them with enthusiastic leadership, and you will make of them keen and proficient Field Ambulance men.

I have to thank Major-General T. Menzies, *O.B.E.*, *D.M.S.*, *M.E.L.F.*, for permission to submit this article for publication.

[Extracts from the appendices to this article will appear in future numbers.—ED.]

Retirement



London News Agency Photos Ltd.

The late Mr. Williams with Mr. Pomfret and Major-General John Dowse in the Headquarters Mess, Millbank, March 1949.

It is with some sadness and reflective thoughts on the inexorable precession of the years, that we record the recent retirement of Mr. Pomfret who was so long Hall Porter at the Millbank Mess that, to successive generations of officers, he seemed an essential part of the place.

Pomfret was born in Dublin on June 3, 1883. He was ushered into a then settled and prosperous world by a young surgeon to the Grenadier Guards, who, in the fullness of time, became the first officer to command the Queen Alexandra Military Hospital. He then found this infant the Hall Porter at the Mess.

After service in the Grenadier Guards—his father's Regiment—Pomfret was invalided. He became a mess servant at the Hotel Belgravia in Victoria Street in August 1902, transferred to St. Ermins in April 1903 and to the present mess on its opening in 1907.

There he remained until his retirement in December 1949.

During the first world war, thanks to an introduction by Sir Alfred Keogh, he was employed by the British Red Cross Society as officer in charge of Bulk Stores and Shipping in Alexandria. After service in Egypt and Palestine—where he met many old friends—he returned to Millbank.

During his years at Millbank, Pomfret has kept in touch with many officers who have grown grey and sedate—like himself—with advancing years and long service. They always stopped for a few words, a shake of the hand, and reciprocated good wishes when calling at the Mess.

During the recent war he suffered a sad bereavement in the loss of his wife and his home was badly damaged.

Of late his health had not been what it once was. He began to tire more easily. With his memories going back over so many years he noticed a change in the tempo of life. The younger officers, he noticed, were taking life more seriously than their lighter-hearted predecessors of forty years ago. He realized that "times do be changing" and felt that the time for quiet retirement had come.

Many of our retired officers who share with Pomfret memories of the Hotel Belgravia and St. Ermins will be glad to know that he is comfortably installed in a flat in the immediate vicinity of St. Georges Square where, surrounded by such of his possessions and souvenirs as have survived the war years, he is already enjoying the first of what we all hope will be many years of that peaceful retirement to which we all look forward.

He sends the following message to his old friends:

"On my retirement I wish to express my very sincere thanks to all officers of the Corps (past and present) for the many kindnesses I have received during my Service."

Obituary

Brigadier WILLIAM ANDERSON, O.B.E., F.R.C.S.

It is with great regret that we record the death of Brigadier William Anderson, recently Consulting Surgeon to the Scottish Command and Northern Ireland.

The writer had the good fortune to serve with him in No. 32 C.C.S. at St. Venant in 1916. From time to time, when things were slack, we would pay a visit to Bethune where John Fraser was then operating. It was in this City that Willie, later, cemented what was to prove a life-long and very close friendship with Elliott Cutler whose children idolized him. They met fairly often at Millbank during the recent war. This was a friendship which did much to help the very close liaison between the Surgeons of the U.S.A. and our own.

During this last war—in addition to his normal duties as a Consulting Surgeon—he occasionally relieved the Consulting Surgeon to the Army and sat as a member of the War Office Medical Board. Here he gave sound advice and was still the same kindly soul that he had always been in his dealings with patients and colleagues.