

ORDINARY, MS.

<i>Rein</i>	DEPARTMENT
G.O. DATED <i>25-8-96</i>	
No. <i>534</i>	

INDEXED.

When given for copying

[Despatch Abstract.]

Reinforced
Article 35 Army Reg.
Vol. II, Inc.

1454/92+609

READ AGAIN ORDER OF GOVERNMENT, DATED
18, No. , MISCELLANEOUS.

MILITARY DEPARTMENT,

SEPTEMBER 1891, No.

GOVERNMENT OF MADRAS.

MILITARY DEPARTMENT.

Medical Department—Regulations.

Read the following papers:—

No. . From Surgeon-General Sir J. A. HANBURY, M.B., K.C.B., Principal Medical Officer, Her Majesty's Forces in Madras, to Brigadier-General A. KENNEY-HERBERT, Secretary to Government, Military Department; dated Ootacamund, 1st April 1891, No. 893.

I have the honour, by desire of His Excellency the Commander-in-Chief, to bring to the notice of Government the inadequacy of the requirements, laid down in Para 35, Section I, Army Regulations, India, Vol. VI, as a qualification for administrative promotion, and to state that, in consequence of the very insufficient opportunities afforded of acquiring a knowledge of army medical administration, inefficiency does and will result.

2. The qualifications, for administrative promotion, as laid down in the above paragraph, are—

(a) Six months' military duty within the three years immediately preceding promotion, or

(b) Two months' duty in the office of a Deputy Surgeon-General.

These qualifications, in the opinion of His Excellency the Commander-in-Chief, are totally inadequate, inasmuch as they do not and cannot secure the requisite knowledge of military medical administration, the want of which experience has shown to result in inefficiency and loss to the service, as in the case of Deputy Surgeon-General A. Porter, recently promoted, and who, I regret to say, is sadly wanting in experience.

3. The duties of an Administrative Medical Officer are of an onerous and responsible nature and cannot, in His Excellency's opinion, be satisfactorily performed with the limited knowledge which an officer qualifying under Para. 35, Army Regulations, India, Vol. VI, can be expected to have acquired. An officer qualifying under the above conditions may, in a total service of 25 years or more, have served for two or three years or even less—perhaps in the commencement of his service—in the Military Department, including the term prescribed in Para. 23, Army Regulations, India, Vol. VI, all his remaining service having been rendered in the Civil Department. The selection of such an officer, qualified under Para. 35 of the above Regulations, can scarcely be expected to prove a success, for it will not be possible for him to acquire, within such a short time and under such unfavorable opportunities, a sufficient knowledge of army medical administration. These remarks apply with much more force in times of war, when especially a thorough knowledge is absolutely required.

4. His Excellency the Commander-in-Chief therefore desires me to request that Government may be pleased to amend Para. 35, Army Regulations, India, Vol. VI, so that its conditions may afford a sufficient opportunity of acquiring that knowledge of army medical administration which an officer promoted to the rank of Deputy Surgeon-General should possess.

5. His Excellency considers that a Brigade-Surgeon should revert to military duty for the two years immediately preceding promotion.

A A

A = Copy in full.
B = Not to be copied.
C = Copy abstract only.
D = Copy heading only.

No. 2243.

Referred to the Surgeon-General with the Government of Madras for favour of any remarks he may desire to offer.

(By Order.)

OOTACAMUND,
20th April 1891.

(Signed) A. KENNEY-HERBERT, Brigdr.-Genl.,
Secretary to Government.

No. From W. F. DE FABECK, Esq., M.D., Surgeon-General with the Government of Madras, to Brigadier-General A. KENNEY-HERBERT, Secretary to Government, Military Department; dated Ootacamund, 10th June 1891, No. 38-O.

In returning letter from Sir J. Hanbury, Principal Medical Officer, Her Majesty's Forces, Madras, referred to me for my remarks under your endorsement No. 2243 of the 20th April 1891, I have the honour to state that it has to be borne in mind that the rules and regulations of the Indian Medical Service are the same for the three presidencies, that no such change as that proposed by His Excellency can, I apprehend, be introduced without the sanction of the Secretary of State for India. This question of promotion to the administrative ranks has been very fully dealt with on previous occasions, and I feel confident that such a change in existing regulations as that proposed is opposed to the interests of the Government and the Indian Medical Service.

2. In the 1st and 2nd paras. of his letter, Sir J. Hanbury thus refers in general terms to *existing* and contemplates *future* inefficiency; * * * "inefficiency does and will result;" and again * * * "which experience has shown to result in inefficiency and loss to the service." These are very sweeping statements, but they appear to me to be grounded on insufficient data. Sir J. Hanbury apparently bases his opinion on the one particular case so pointedly referred to.

3. I respectfully submit, however, that the alleged failure of one officer to satisfactorily perform his duties in the administrative grade cannot be regarded as sufficient proof that the whole body of Civil Medical Officers are unfitted for promotion, and that they can only be duly qualified for such promotion by reverting to military duty for two years immediately preceding promotion.

4. In regard to the particular instance of inefficiency quoted by His Excellency through Sir J. Hanbury in support of his general views, it should, I think, be remembered that the duties of Deputy Surgeon-General, Mandalay and Myingyan Districts, are admittedly arduous. It is possible that His Excellency was not aware that Sir J. Hanbury, who has a thorough personal knowledge of these districts, had only 12 days previous to the date of the letter under reference stated that he had "always considered" (see his letter No. 794, of the 19th March 1891, to the Adjutant-General, Madras Army, and Order thereon, G.O., No. 2591, dated 6th May 1891, Military) "the administrative medical duties connected with them too much for one officer to perform," and also recommended that as "the Myingyan District is larger than any other district in this command, either in Burma or in Madras"—"that the Myingyan District be made a separate charge and that it be administered by a separate officer of the rank of Deputy Surgeon-General."

5. Medical Officers employed in the Civil Department are subject to the same rules of discipline as those in military employ, and it is perhaps superfluous to remark that the ordinary duties they have to perform are admittedly of a far more arduous and responsible nature than those of a Medical Officer in military employ.

6. When I reflect on the work that is being done by Medical Officers in civil employ under my orders, and think of the recommendation that for the purpose of qualifying for promotion in the administrative grade they should revert to military duty for two years, I cannot, with all due respect to His Excellency and Sir J. Hanbury, help thinking that they are not aware of the nature and the enlarged

sphere of duties required of Civil Medical Officers since 1883 (*vide* G.O., No. 391, 1883), duties which eminently fit them for promotion.

7. As District Medical Officers they are vested with the entire medical administrative duties of their respective districts—responsible to and under the control of the head of the department and Government—they have a very large subordinate staff and a large and increasing number of hospitals to control—they have to arrange every detail of equipment; and all returns and indents from these hospitals are checked by them. The transfer, promotion and punishment of all medical subordinates and of a large vaccination staff are carried out under their orders.

As District Sanitary Officers they have to deal with all matters connected with epidemics, the formation of cholera camps, to organise the medical arrangements connected with fairs, festivals and famines, to supervise the vital statistics of their districts. All questions affecting the sanitation of the towns and villages are referred to them. They are in most cases the officers in both medical and executive charge of district jails. Finally, they are in charge of the medical institution at their head-quarters where they have unequalled opportunities for the practice of medicine and surgery, &c.

8. So far from considering civil employ a disqualification, I cannot conceive of any better training for promotion to the administrative grades than such a wide experience and the self-reliance engendered thereby affords.

9. The Civil Medical Department thus provides not only a most invaluable reserve, but affords special and unequalled opportunities as a training ground for Administrative Military Medical Officers.

I am therefore unable to concede, as implied by Sir J. Hanbury, that an officer whose whole service has been limited to regimental duty can be as well fitted for advancement to the grade of Deputy Surgeon-General as one who has had long experience in the most important and responsible position of a Medical Officer in civil employ.

10. To select men for promotion merely on the ground of length of military service is, in my opinion, bad in principle and opposed to all the guarantees held out to candidates for the Indian Medical Service, which has been organised for both military and civil duty. The chance of promotion to the administrative grades is held out equally to those who are fortunate enough to be selected for civil employ as to those in military employ.

11. I recognise also that great practical difficulties must arise in carrying out the proposal of His Excellency the Commander-in-Chief. It would be impossible to fix with any degree of certainty the actual date for an officer's promotion. An officer senior to the one selected for promotion might die or retire, or be found unfit for service before the period of two years' military service is completed.

This difficulty might be met by transferring all officers promoted to be Brigade-Surgeons to military duty, but it is scarcely necessary to point out that the injury resulting to the Civil Medical Department, were such a measure adopted, would be incalculable; the Medical Colleges, and the General and Civil Hospitals would be deprived of their most experienced and skilful teachers; the spread of medical education would be interfered with, and the efforts of Government to secure well-educated subordinate medical officers would be impeded.

12. To the individual officers concerned, this measure would also be a harsh one, necessitating as it would do their removal for a long time from active professional and administrative work; and there can be no doubt that such a measure as that proposed would tempt many of the very best and most experienced Medical Officers to retire rather than accept such terms. This is no far-fetched idea. Experience has proved that even under existing conditions Medical Officers have been loth to accept promotion, and Government has found it necessary to pass special orders on the subject.

13. It is to be remembered that, until the year 1884, officers of the Indian Medical Service in civil employ were expected to do six months' military duty within the three years immediately preceding promotion to the administrative grade.

In the year 1884 the Government of India sanctioned the proposal that, as an alternative measure, an officer about to be promoted should be allowed to attend the office of Deputy Surgeon-General for only two months (*vide* Clause 42, India Army Circulars, 1884, and G.O., Military Department, dated 28th March 1884, No. 1567). Since that date the majority of Medical Officers have been promoted in accordance with these orders; and the practice of attaching Medical Officers to regiments for six months practically ceased. Yet, in but one solitary instance—that referred to by Sir James Hanbury—has cause for complaint been represented as regards the manner in which Brigade-Surgeons who have been promoted to the rank of Deputy Surgeon-General have performed their duty.

14. If general experience should point to the necessity that a change in Para. 35, Section I, India Army Regulations, Vol. VI, is desirable, that paragraph might be amended so as to direct that the two senior Brigade-Surgeons selected for promotion to the rank of Deputy Surgeon-General be posted to the medical charge of Native Infantry Regiments at the Presidency town (and perhaps at Rangoon in Burma) for three months, during which period they would attend the office of the Deputy Surgeon-General and have the opportunity of acting for him during his absence on tours of inspection, &c. I suggest that the district which has the Presidency town for its head-quarters (or Rangoon) be selected, as the duties of the Administrative Medical Officer stationed there are more varied than those of the Principal Medical Officer of other districts.

15. During the three months a Medical Officer is thus employed he should, I consider, be permitted to retain a lien on his civil appointment, but would draw the pay pertaining to an officer of his grade in medical charge of a regiment of Native Infantry.

16. A point of great importance which I consider should be laid down is that Brigade-Surgeons ordered to do military duty to qualify for promotion should be held to be in all respects fit for such advancement subsequently. I could not approve of sending a Brigade-Surgeon to military duty if there is a possibility of his being passed over; the spirit of Para. 35, India Army Regulations, Vol. VI, is to the above effect.

17. A thorough knowledge required of an officer in time of war can only be acquired by practical experience; but, with a careful selection for the rank of Brigade-Surgeon in the first instance, and the subsequent training as proposed, I should not be apprehensive of failure.

18. Taking all the circumstances to which this correspondence refers into consideration, I regret to find myself compelled to differ from the views of His Excellency and Sir James Hanbury in the absence of stronger proof than this correspondence affords for the necessity of so material a change in the India Army Regulations as has been recommended in the letter under reference.

No. 3324.

Referred to His Excellency the Commander-in-Chief for any further observation he may desire to offer.

Ootacamund,
13th June 1891.

(Signed)

(By Order.)

A. KENNEY-HERBERT, Brigdr.-Genl.,
Secretary to Government.

To the Principal Medical Officer, Her Majesty's Forces, Madras.

No. From Surgeon-General Sir J. A. HANBURY, M.B., K.C.B., Principal Medical Officer, Her Majesty's Forces in Madras, to Brigadier-General A. KENNEY-HERBERT, Secretary to Government, Military Department; dated Ootacamund, 26th June 1891, No. 1839.

In returning your No. 3324, dated 13th June 1891, I have the honour, by desire of His Excellency the Commander-in-Chief, to offer the following remarks.

2. In para. 2 of his letter No. 38-O, dated 10th June 1891, the Surgeon-General with the Government of Madras states that the opinion expressed in my letter No. 893, dated 1st April 1891, was based on "one particular case," viz., that of Deputy Surgeon-General A. Porter, M.D., and taking this as his argument, he proceeds to say in para. 3 that the "failure of one officer to satisfactorily perform his duties in the administrative grade cannot be regarded as sufficient proof that the whole body of Civil Medical Officers are unfitted for promotion." In connection with these remarks His Excellency desires me to lay before Government the following quotation from a letter addressed by me to the Military Secretary to His Excellency the Commander-in-Chief in June 1890: "It is also to be remembered that this officer (Doctor Porter) has been absent from military medical duties for a period of 14 years, and that the only qualification he possesses in this connection is his being attached for two months to the office of the Deputy Surgeon-General at Madras. He has had only 2 years and 5½ months' military duty altogether in a total service of 25 years. It is, I submit, impossible that he could have acquired, in this short period and in this way, such knowledge of the rules and regulations of the service, discipline and the working of military hospitals as will enable him to perform the duties of an administrative officer satisfactorily." Now these remarks were made before Doctor Porter was promoted to his present grade, and before I had an opportunity of judging of his capabilities for administrative work; so that I may well say that, although made in connection with the question of Doctor Porter's promotion, they are equally of a general nature, as they contain my views on the subject of the qualifications necessary for promotion to the administrative grade. My letter No. 893, dated 1st April 1891, is a repetition of the same views, and is therefore not based on the "one particular case." If Deputy Surgeon-General Porter's case was put forward at all, it was with the sole object of supporting His Excellency's views regarding the inadequacy of the requirements of Para. 35, Army Regulations, India, Vol. VI.

3. For the above reasons it seems unnecessary to offer any remarks on para. 4 of Surgeon-General deFabeck's letter under reply beyond mentioning—

(1) that His Excellency the Commander-in-Chief, at the time my letter No. 893 of 1st April 1891 was written, was fully aware of the statement made in my letter noted in the margin, viz., that the administrative medical duties connected with the Myingyan and Mandalay Districts were too much for one officer to perform; and

(2) that my opinion regarding the inefficiency of Deputy Surgeon-General Porter was based entirely on his want of experience in military medical administration as was anticipated.

4. In paras. 5, 6, 7, 8 and 9 of his letter, Surgeon-General deFabeck gives in detail the duties which devolve on Medical Officers in civil employ—duties which he contends eminently fit them for promotion to the administrative grade, and further that he cannot conceive of any better training for promotion. The logical sequence, if his views were correct, would be that Medical Officers in military employ should be transferred to the Civil Department in order to eminently fit them for the administrative grade in the army.

5. After a careful perusal of the duties of Medical Officers in civil employ, detailed in the paragraphs above referred to of Surgeon-General deFabeck's letter and in G.O., No. 391, dated 22nd February 1883, the Commander-in-Chief is unable to see how these can qualify a Medical Officer, who may be called upon on the shortest notice, and under circumstances when he may not have the chance of consulting either men or books, for the performance of such duties as—

(a) Army hospital organisation and administration in peace and war.

(b) The administration, interior economy, command and discipline of the Army Hospital Corps and Bearer Companies.

(c) The relations of the medical, with all other departments and corps in the army, as defined by the various codes of regulations in force.

(d) Recruiting and invaliding, including a thorough knowledge of the law as it affects soldiers proposed for discharge from the army on account of insanity.

(e) The management of sick and wounded in war.

(f) Field medical organisation.

(g) The transport of sick and wounded by land and sea.

(h) The command of medical officers, warrant officers, non-commissioned officers and men of the Army Hospital Corps, their duties and responsibilities.

(i) The sanitary inspection and equipment of hospital ships and troop transports, and the regulations regarding the sanitation of garrisons, quarters, hospitals, &c., as well as of camps and hospitals in the field and of transports, troops, and hospital ships.

(j) A thorough knowledge of the principles of military law and their practical application.

6. The foregoing convey but a faint idea of the technical duties of an Army Medical Officer (which occupy most of his time to master and keep *au courant* with), and I am confident that Government will agree with His Excellency in opinion that it is utterly impossible for any one to acquire a thorough knowledge of these duties by a two months' attendance at the office of a Deputy Surgeon-General, or eminently so in civil employ. Is it reasonable to expect a Medical Officer, who has spent a prolonged period in civil employ, and who, on promotion probably for the first time, enters a military station hospital, to be capable of performing the duties noted in the preceding paragraph, be he ever so conversant with the duties which devolve on Medical Officers in civil employ?

7. His Excellency the Commander-in-Chief desires me to state that, if any importance is to be attached to the remarks in para. 9 of Surgeon-General deFabeck's letter, it is not understood why such a rule as that laid down in Para. 35, Army Regulations, India, Vol. VI, should ever have been framed, but from the conviction that employment in the Civil Department does not afford the opportunities of acquiring a knowledge of military medical administration. No such rule would ever have come into force if, as the Surgeon-General with the Government of Madras remarks, the Civil Medical Department "affords special and unequalled opportunities as a training ground for Administrative Military Medical Officers." Further, if the Surgeon-General with the Government of Madras was of the above opinion, it is not clear why no steps were taken by him to cancel the rule contained in Para. 35, Army Regulations, India, Vol. VI. I may here observe that the views expressed in my letter No. 893, dated 1st April 1891, were communicated to the Principal Medical Officer in India in connection with the question of the preparation of a revised code of regulations for the Medical Department (*vide* G.O., Military Department, No. 5847, dated 18th September 1890), and that a reply to the following effect was received: "I quite concur in your opinion respecting the qualification of Brigade-Surgeons employed in the Civil Department for promotion to Military Deputy Surgeons-General, and will support the same if the case is referred to this department."

8. In para. 10 of his letter Surgeon-General deFabeck remarks: "To select men for promotion merely on the ground of length of military service is bad in principle." Such a measure was never contemplated, and it is therefore not understood why such a remark was made. My letter No. 893, dated 1st April 1891, has special reference to those officers about to become candidates for advancement to the administrative grade, who have not had sufficient experience of military medical duties in consequence of their prolonged service in the Civil Department.

9. Surgeon-General deFabeck in para. 11 of his letter refers to "the injury resulting to the Civil Medical Department," &c., by transferring Brigade-Surgeons to military duty. If civil institutions suffer by Brigade-Surgeons being transferred for the purpose of qualifying for promotion, the same remark would apply (and with greater force perhaps) when these officers are promoted permanently to the

grade of Deputy Surgeon-General; but it cannot be conceded that any injury would result to the Civil Medical Department by this transference of Brigade-Surgeons; on the contrary there are, it is presumed, quite a sufficient number of officers in civil employ in every way competent to take the places of these transfers. Injury, it is true, may result to one or two who have been holding for years lucrative civil posts, but the very transfer of such officers would seem to His Excellency to be the means of bringing to the front equally deserving officers who would thus acquire sufficient experience to enable them to successfully fill the places of the older officers on the final promotion of the latter to the administrative grade; and, as bearing on the points noted in para. 9, reference is made to para. 15 of the notification of the Government of India communicated in G.O., Public Department, No. 1757, dated 21st August 1886, and recorded in G.O., Military Department, No. 6020, dated 28th September 1886.

10. The remarks in para. 12, in His Excellency the Commander-in-Chief's opinion, only tend to prove that the present system of promotion of Brigade-Surgeons is faulty. If officers knew that they would have to go through a course of training on attaining promotion as Brigade-Surgeons, they would make their arrangements accordingly.

11. So far as the records of my office show, there were 11 promotions to the administrative grade since the promulgation of Clause 42 of India Army Circular of 1884. Of these 11 officers, only 5 appear to have qualified by doing two months' duty in the office of a Deputy Surgeon-General, which does not agree with the statement made in para. 13 of Surgeon-General deFabeck's letter to the effect that the majority of Medical Officers qualified in this manner.

12. If the period of two years be considered too long and likely to affect prejudicially the material interests of Medical Officers in civil employ, Sir James Dormer would propose a shorter period which, it is thought, would afford a satisfactory guarantee of the fitness of the officer for promotion to the administrative grade. Thus it is recommended that the two senior Brigade-Surgeons selected for promotion, if they have not done two years' military duty during the ten years immediately preceding promotion, should revert to military duty for one year and be attached to a regiment of Native Infantry either at Bangalore or Secunderabad—the two stations which afford the largest opportunities of acquiring a knowledge of army medical administration, organisation and administration of station hospitals, command, discipline, &c., during which period they would attend the office of the Administrative Medical Officer and have opportunities of officiating for him during his absence; or that they be employed in such other manner as would, in His Excellency's opinion, afford equal facilities for acquiring the requisite knowledge. Should these Brigade-Surgeons have done two years' military duty in the ten years preceding promotion, but have been absent from military duty for three years, attaching them to the office of the Deputy Surgeon-General of their district for six months would suffice.

13. I fear Government will not sanction the rule suggested in para. 16 of Surgeon-General deFabeck's letter under reply, that "a Brigade-Surgeon ordered to do military duty to qualify for promotion should be held in all respects fit for such advancement subsequently." There have been instances on record, of recent date, of Brigade-Surgeons having been passed over on such grounds as inefficiency, ill-health, &c., and the same objection might be found in the two senior Brigade-Surgeons after their reversion to the Military Department, though such instances would be very exceptional. For this reason His Excellency is not prepared to support the views of the Surgeon-General with the Government of Madras on the subject.

14. In regard to the next paragraph, I am directed to observe that the knowledge required of an officer in time of war cannot be gained in the Civil Department, while on the other hand opportunities are afforded in the Military Department even to junior Medical Officers, of acquiring this experience.

15. In conclusion, I trust Government will agree with His Excellency the Commander-in-Chief in opinion that the statements made in my letter No. 893, dated 1st April 1891, are not "grounded on insufficient data," as the Surgeon-General with Government asserts, and that the conditions of qualification for administrative promotion, as laid down in Para. 35, Army Regulations, India, Vol. VI, are totally inadequate to secure efficiency and therefore require revision.

No. . ORDER THEREON, 21 September 1891, No. 5265

Ordered that the foregoing correspondence be forwarded to the Government of India with the recommendation of the Government of Madras that, in view to removing the disabilities under which the generality of Civil Medical Officers labour on first appointment to Military Medical Administrative duties, Article 35, Army Regulations, India, Vol. VI (Medical), may be amended in accordance with the views expressed in para. 12 of Sir James Hanbury's second letter, viz., that in future a Brigade-Surgeon should revert to military duty for one year prior to promotion.

2. The rule proposed in para. 16 of Surgeon-General deFabeck's letter—viz., that if a Brigade-Surgeon be transferred from civil to military duty for the purpose of qualifying for promotion, he should not be passed over when his turn comes for promotion—does not commend itself to Government, for such a ruling would be opposed to the decision of the Government of India as contained in their letter marginally noted,—appointments to the administrative grade being made by selection.

No. 187-SC, dated 30th April 1891, recorded in Proceedings of Government, No. 2635, dated 16th May 1881.

No. . To the Secretary to the Government of India, Military Department;
dated 21 September 1891, No. 5269.

(True Extract.)

A. Henricus
Brigdr.-Genl.,

Secretary to Government.

To the Principal Medical Officer, Her Majesty's Forces, Madras.
" Surgeon-General with the Government of Madras.
" Adjutant-General, } for information.
" Public Department, }

CURRENT NO. 2762

Table Sept

Govt. of {1891} Madras.
MILITARY.

To
THE PRINCIPAL MEDICAL OFFICER,
H.M.'S FORCES, MADRAS,
&c., &c., &c.

Dated September,

Issued

Recd.

Encl.

G.O., September 1891, No.

SEPTEMBER.

Nos.

Medical Department—Regulations.

Army Regulations, India, Vol. VI (Medical).—
Government of India addressed in view to the
amendment of Article 35, —, so that Brigade-
Surgeons may in future be required to revert to
military duty for one year prior to being pro-
moted to the administrative grade.

Order 25th Sept. 91 No 83

Recorded.

25/9/91

Note

This paper is pur-
sued to the C.S. as he
may like to peruse
the letters in the
C.S. B.

25/9/91
25/9/91
25/9/91
25/9/91

CHIEF SECRETARY
22 SEP 91
GOVERNMENT

WITH ORDER