

LETTER TO THE EDITOR

SENIOR MEDICAL STAFF OFFICER COURSE, NATO SCHOOL, OBERAMMERGAU, GERMANY

From November 1 to November 5, 2010 I took part in a one-week Senior Medical Staff Officer Course at the NATO School in Oberammergau, Germany.

Oberammeragau is a small town with 5 000 inhabitants situated in the Bavarian Alps, near the well-known ski resort Garmisch Partenkirchen. It lies in a very nice part of the Bavarian Alps, about 850 m above sea level. The current school building was used as army barracks as early as 1937 and during the Second World War it was converted to a factory where Messerschmitt aircrafts were produced. The facility has functioned as the NATO School since 2005. From November 1 to November 5 four parallel courses for different military specializations took place in the school. The total number of participants was more than 250. Fifty-six students from more than 30 countries participated in the Senior Medical Staff Officer Course. Besides

military medical service personnel, mainly physicians from NATO countries, military physicians from the Partnership for Peace countries were also present. The official language of the course was English.

The aim of the course was to provide knowledge and detailed insight into NATO's medical support policy. This included policy making in NATO, NATO medical doctrine, strategic force planning, multinational medical support options and relations with other international organizations.

The course was carried out from Monday to Friday, from 8 am to 5 pm. Only on Friday the sessions ended at 1 pm. A large part of the course consisted of lectures. Two afternoons the participants were involved in syndicate work. We worked in small groups of about eight people. At the end of this session, each group gave a presentation. The topics the small groups discussed were "information exchange" and "multinational approach". In each group the armies of large as well as small NATO countries were represented. Besides one British person, one Canadian and two French men our group also consisted of one Czech man, one Lithuanian woman and a military physician from South Africa. For this reason, in our group, both of the NATO official languages were used.

The lecturers were officers and generals of the NATO Medical Service, representatives of the Joint Forces Command (JFC) Brunssum, JFC Lisbon or JFC Naples and representatives of Supreme Headquarters Allied Powers Europe (SHAPE), including the Czech representative in SHAPE, Col. Vojtěch (who is currently working at the level of Allied Command Operation (ACO). On the last day of the course the current Medical Adviser at the Headquarters ISAF (MEDAD HQ ISAF) in Kabul, General Jaeger and MEDAD ACO General Cordell gave their presentations. General Jaeger flew to Oberammergau directly from Kabul. Her presentation was very up-to-date in the view of the safety situation which is constantly worsening in Afghanistan. The fact that the position of MEDAD HQ ISAF has been assigned to a general shows how important the ISAF operation in Afghanistan is to NATO.

One day of the course, the presentations were focused on the structure of the NATO Medical Service – beginning with NATO Headquarters in Brussels through the role of ACO and Allied Command Transformation (ACT) within SHAPE, JCF Brunssum, JCF Naples and JCF Lisbon and ending with the command of ISAF and KFOR operations.

A special presentation was focused on the structure and tasks of the Committee of the Chiefs of Military Medical Services in NATO (COMEDS). The main tasks of COMEDS are force health protection, military health care, structures operating procedures, protection against chemical, biological, radiological and nuclear weapons and medical standardization. Other presentations concerned the issues of force health protection and military health care. The deployment of individual medical roles – Roles 1-4 was given as an example. Force health protection reduces or eliminates the incidence of diseases and non-battle injuries. In another presentation the role of medical intelligence (MEDINT) and its effect on military operations was explained.

In the afternoon blocks attention was paid to defence planning and medical doctrine development.

Another day attention was paid to the issues of civil – military cooperation (CIMIC), medical sup-

port to the civilian population, reconstruction and development in relation to Provincial Reconstruction Team (PRT) and cooperation of military and humanitarian organizations. An interesting presentation in this area was a presentation of the well-known medical humanitarian organization "Médecins sans frontières".

A large number of presentations was focused on medical support to current maritime operations, in particular medical support to operation Ocean Shield. The main topics were primary care medicine, patient transfer ship-to-ship and improving medical support to multinational maritime operations. On the ships operating in the crisis area east of Somalia medical Roles 1 and 2 are currently deployed.

The area of primary care medicine was represented by lectures concerning the issues of Pakistani floods and Pakistani flood medical observations.

The presentation of the Centre of Excellence (COE), which is situated in Budapest and has many partner training facilities all over Europe, including the Czech Republic, was a reminder of the existence of other educational facilities within NATO.

The very high standard of the course was attributed to the very high quality of lectures and of the participants. Each presentation was followed by a discussion. During these discussions the participants expressed a large interest in the current issue of the command of NATO Medical Service. An excellent standard of organization, logistical support and trans-

portation provided to the participants contributed to the success of this educational course.

I would like to recommend the above-mentioned course to other personnel of the Czech Army Military Medical Service, in particular to military physicians working at a higher level of command.

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> Received 26th January 2011. Revised 26th January 2011. Published 6th April 2011.