

EDITORIAL

Training For Overseas Operational Deployments And The DMCC

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INTRODUCTION

Military operational deployments involve inserting varied numbers of personnel into a frequently unfamiliar and risk presenting environment, often at short notice, and with considerable lack of clarity over the exact requirements to be accomplished, the resources available, or the timescale of the mission. That said, in recent memory, deployments have generally been conducted effectively, efficiently and economically. This has been in no small part due to the attention to detail devoted towards preparing personnel for what awaits them, planned and unexpected, on operations.

In order to be effective, military operations require adequate numbers of correctly trained and equipped personnel, with significant situational awareness and a true sense of purpose, in the right place and at the right time. This complex requirement is met as follows:

Personnel Selection. Personnel are selected according to skill sets, experience and physical and psychological suitability. It would be inappropriate to expect a junior medical officer to undertake complex surgery. It would also be inappropriate to expect an obese or clinically depressed individual to cope with a physically demanding, austere environment where self reliance is essential.

Training. Personnel undertake common military individual training to ensure basic competences are confirmed. These include physical training and confirmatory tests, training in defence against Chemical, Biological, Radiological and Nuclear hazards and training on the application of the Law of Armed Conflict. In addition, theatre specific briefings are given relating to geography, economy, demography, culture and climatic and endogenous health hazards. Personnel also undertake collective training in their specialised roles. Medical personnel will simulate their operational roles through a variety of exercise scenarios, often including moulage and mass casualty scenarios.

Equipment. Personal equipment, such as military clothing, boots, helmet, Bergen, webbing, personal weapon, and respirator

will be sized and issued prior to deployment. Specialised role equipment, such as tentage, generators, lighting systems, climate control systems and medical equipment should be issued, unpacked, checked and tested, repacked and tactically loaded onto vehicles prior to deployment.

Situational Awareness. Situational awareness is instilled initially through general and theatre specific briefings. Situational awareness can only be maintained once in theatre through a combination of regular, timely and accurate briefings and an accessible, reliable and responsive communications system, such as an all informed radio network. This is particularly important for medical establishments in order to assess and respond to emergency situations. The necessity to act decisively, quickly and appropriately is vital, and the ability to respond to rapidly changing events is paramount.

Sense of purpose. A sense of purpose is instilled in military personnel through leadership. A leader, or commander, of a military unit is required to both have a clear understanding of the mission, and the ability to enthuse those he/she commands to execute the mission willingly and to the best of their ability. This in turn requires commitment, intelligence, force of character, understanding and self confidence. In addition, the ability to direct purposeful activity amidst significant resource constraints and often contradictory information reports, causing 'situational ambiguity', is required. Inability to exercise command effectively will result in mission failure. Thus, in order to guarantee the establishment and maintenance of a sense of purpose, commanders must be very thoroughly prepared prior to deployments.

What Training and Support is available for NGO workers?

Although most overseas military operations require their medical personnel to be there to support the military mission, increasingly there is a humanitarian component where care of local civilians who present to military health facilities is undertaken. Care of civilians is normally the province of non-governmental organisations and other International Organisations, however in the difficult security scenarios now common in complex humanitarian emergencies, both NGO and

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military personnel may be present. It is useful therefore to examine what training opportunities and support is available for health workers who work for NGOs in overseas operations.

The International Health Exchange (IHE) (www.ihe.org.uk, Email at info@ihe.org.uk), now co-located with RedR, holds a database of NGO workers and has a coordination function with NGOs looking for health workers to employ in their programmes, as well as providing training courses. Their short courses include: Public Health in Emergencies, Culture, Communication and Health, Humanitarian Aid Principles and Practice, and Nutrition in Emergencies. IHE also holds a list of longer courses held by academic institutions throughout the world, up to and including those at Masters degree level. These range from courses in Hygiene and Tropical Medicine to degrees in Managing Disasters and Complex Humanitarian Emergencies.

Support and management of vulnerable NGO workers in increasingly hostile and difficult working conditions is an important area that has developed in the last 10 years. Many aid workers in the past felt poorly managed and unsupported. This has been addressed by the People in Aid Project, which started in 1994, which maintains that NGOs must not only be accountable to their donors and beneficiaries, but also to their staff and volunteers. People in Aid produced their Code of Conduct (www.peopleinaid.org) originally in 1997, which was updated to the People in Aid Code of Good Practice in 2003. This covers 7 key areas, including recruitment and selection, learning, training and development, and health safety and security. Most senior NGOs support and fully abide by the Code in order to protect their ex-patriate and local staff. The IHE also produces a guide to employment issues for UK based Aid Workers, which includes practical advice ranging from contractual advice to training and tax issues.

The DMCC

The Diploma in the Medical Care of Catastrophes (DMCC) was instituted by the Society of Apothecaries of London in 1993, to demonstrate the specific knowledge of doctors providing a medical and surgical response at the scene of major man-made and natural disasters, both in the UK and overseas. It is intended for members of medical response teams, civilian and military, including physicians, surgeons, dentists and nurses.

The examination consists of three vivas, which may be taken in Parts, as follows:

Part I

The general viva, of 20 minutes duration, includes examination of the Clinical Casua-

lity Management, Incident Management, Operational Environment and Preventive Medicine modules.

The projected material viva, of 20 minutes duration, which consists of up to 10 slides with pre-set questions and covers all aspects of the compulsory syllabus.

Part II

The dissertation viva which consists of 20 minutes discussion of the dissertation.

The Examination is held twice a year in London (at Apothecaries' Hall in Black Friars), in February and October, in Washington in March and The Netherlands in September. It may be attempted in one or two parts. Candidates must have completed preparatory modules 1-5 (see below) before the Part I examination and all 7 for Part II. Both parts may be taken together provided all 7 modules have been completed. Candidates must possess a qualification allowing them to practise Medicine, Surgery and Obstetrics and Gynaecology and be registered with the General Medical Council of the United Kingdom **OR** a qualification to practise Dental Surgery and be registered with the General Dental Council of the United Kingdom **OR** a qualification to practise Nursing and be registered with the Nursing and Midwifery Council of the United Kingdom. Graduates in Medicine, Surgery and Obstetrics and Gynaecology, Dental Surgery or Nursing of British Commonwealth, European Community or other overseas Universities, who are not registered to practise in the United Kingdom, may be admitted to the examination with the approval of the Court of Examiners if they have complied with all other requirements of the Regulations.

Preparation

Candidates must complete the seven preparatory modules as follows:

Module 1 - SECURITY AND SURVIVAL

The candidate must be trained in living and working in environmentally hostile conditions. This module includes:

- Care of self and individual clothing and equipment.
- Field craft (e.g. water discipline, field rations, personal hygiene).
- Threat and hazard assessment (e.g. road accidents, criminal activity, mines and munitions, diseases).

Module 2 - CLINICAL CASUALTY MANAGEMENT

The candidate must have the ability to operate within a multi-disciplinary team. This involves understanding and participating within its various components and

responsibilities. Candidates can expect to be examined on how clinical casualty management may need to be modified in a conflict or catastrophe setting. This includes:

- Adaptation of medical skills to the field environment.
- Knowledge and use of field medical equipment.

Evidence of successful completion of a Trauma Life Support (TLS) course is also required for this module.

Module 3 - INCIDENT MANAGEMENT AND MASS CASUALTY PLANNING

The candidate must have the ability to deal with large numbers of sick and injured at the same time, including an understanding of the constraints and practicalities of dealing with casualties contaminated by biological, chemical or nuclear materials or caused by these mechanisms. This includes:

- Reception of casualties.
- Triage.
- Holding of casualties and post operative care.
- Onward evacuation of casualties following the above processes.
- The candidate must have a working knowledge of the interface between the provision of medical care and logistic support functions including communications, command and control and supply chains.

Module 4 - THE OPERATIONAL ENVIRONMENT

Candidates must have an understanding, sufficient to be an effective member of the team, of the following:

- Knowledge of Geneva Conventions/ International Humanitarian Law.
- Awareness of other agencies likely to be encountered, their roles and methods of interoperability.
- Concepts and limitations of mandates.
- Refugee/International Displaced Person: definitions.
- Public relations and politics.

Module 5 - PREVENTIVE MEDICINE, TROPICAL MEDICINE, MEDICINE IN ENVIRONMENTAL EXTREMES AND PUBLIC HEALTH

Candidates must have an understanding of, and some practical instruction in, the essentials of field preventive medicine, entomology, tropical medicine, public health and vulnerability of populations at risk. This module includes relevance of preventive medicine, significance of public health entomology, acute medical problems in the tropics and sub-tropics and significant disease vectors and their control.

Module 6 - THE DISSERTATION

Candidates are required to write a dissertation on a specialist aspect of medical care in catastrophes. Before any detailed research or writing is undertaken the proposed title chosen by the candidate must be submitted for approval to the Registrar. This enables the examiners to monitor the relevance of proposed work and to point out any pitfalls. For less experienced candidates a list of suitable topics is held by the Registrar.

Module 7 - SUPPLEMENTARY MODULE

Candidates must complete two supplementary modules, chosen to reflect the candidates' special area of interest. Exemption is granted by certain post graduate qualifications. Details are contained in the examination regulations.

The DMCC for deployment?

The DMCC aims to prepare candidates for the realities of deployment to an austere environment with either an NGO or the Military. Although medical and nursing staff are highly skilled within their own area of expertise, the DMCC modules provide core information on topics relevant to deployment that may be outside the candidates' previous experience. The DMCC provides candidates with the opportunity to gain a broad understanding of the global issues related to deployment to austere or conflict areas such as public health medicine and refugee care. The DMCC also prepares candidates for dealing with issues of security and survival – so that they remain the solution and do not become part of the problem.

Preparation for Deployment

The following is from a recent successful DMCC candidate:

'As a new Consultant Surgeon heading off on my first deployment, I suddenly valued my gradual progress through the DMCC modules during the preceding years. As I focused on the realities of Surgery in an austere environment I finally realised the benefit of the courses and reading that I had undertaken. As part of the DMCC I had participated in a Disaster Relief Operations Course, this provided me with some insight into the operational environment of both non governmental organisations and the Military and the perceived role of these organisations. Tropical Medicine and Medicine in Environmental extremes was invaluable as was my basic understanding of public health medicine in the aftermath of a diarrhoea epidemic coupled with the extremes of heat. Even within surgery the courses that I had taken in the management of Military injuries (War Surgery Course, Military Neurosurgery and External Fixation courses) proved valuable as the management of much military trauma differs markedly from civilian practice.

I enjoyed my first deployment and its many

and varied challenges. In hindsight the DMCC prepared me for many of these challenges and as a result reduced their scale.'

Further Developments

The DMCC and its supporting part time preparatory Conflict and Catastrophe Medicine Course have provided the foundation for the launch of the new Faculty of Conflict and Catastrophe Medicine.

The aims of the new Faculty include:

- Consolidating and developing the academic base for conflict and catastrophe medicine and nursing.
- Developing higher qualifications at Master and Doctorate level (in collaboration with other academic institutions).
- Establishing a series of eponymous lectures and travelling fellowships in the field of conflict and catastrophe medicine.

Summary

Through the DMCC and similar comprehensive training, Military and NGO personnel can prepare for deployment with a greater understanding of the issues that will confront them whilst there. Progression through the

modules will provide them with a greater skill set to meet the challenges that await them and allow them to be an effective and valuable member of the team.

For further details on the Diploma in the Medical Care of Catastrophes and the Conflict & Catastrophe Medicine Course please contact: The Registrar, Society of Apothecaries, Apothecaries' Hall, Black Friars Lane, London EC4V 6EJ; tel +44 (0)20 7236 1180; email examoffice@apothecaries.org; website www.apothecaries.org

For a membership application form for the Faculty of Conflict and Catastrophe Medicine please contact: The Faculty of Conflict and Catastrophe Medicine, Society of Apothecaries, Apothecaries' Hall, Black Friars Lane, London EC4V 6EJ; tel +44 (0)20 7236 1180; Email FacultyCC@apothecaries.org; website www.apothecaries.org

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