

# EU AEROMEDICAL DRIVE AT EATC

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The European Air Transport Command (EATC) is a long-lasting successful endeavour of 7 European Countries (NDL, BEL, FRA, DEU, LUX, ESP, ITA) **exchanging military air transportation services** through the cashless ATARES points system and by using the same platform of command and control which now manages about 65% of the European fleet. Direct execution of missions is granted to EATC by a revocable transfer of authority on national airframes. This multinational organization has been operating for the past 10 years **bringing together in the same cost-effective environment the fragmented support to deployed troops** otherwise in charge to each single nation. So far nearly 2.8 million passengers have been transported, more than 2900 air-to-air refuelling missions completed, over 10.000 patients evacuated, nearly 875.000 paratroopers dropped and over 165.000 tons of cargo transported. All this in more than 450.000 flying hours. By 2025 the total fleet is expected to reach about 220 assets, mainly of A400M, A330 MRTT and C295 which are supposed to gradually replace older airframes.



NATO Centre of Excellence for Military Medicine (MILMED COE) in Budapest (HUN) is the **knowledge management hub for military medicine** in NATO. Our Centre is a multinational military organization (HUN, DEU, ITA, FRA, GBR, CZE, SVK, USA, BEL, POL, ROM, NDL) working for and accredited by NATO. Main contributions are directly related to **innovation and quality of healthcare** by identifying new challenges, reviewing available data, analysing facts, developing solutions in transformational processes and distributing medical information across the alliance. Our tools are medical exercises, expert meetings, research initiatives, lessons-learned, continuous improvement of healthcare in support to operations, training and education of medical leaders, concept development and experimentation, validation of multinational medical capabilities... All activities result from a coordinated teamwork within the Centre and have the final goal of facilitating cross-national understanding, sharing of resources by Allies and achieving collective effectiveness in military healthcare.

The Aeromedical Evacuation Coordination Centre (AECC) of the EATC hosted the sixth annual conference of the National Patient Evacuation Coordination Centers (NPECC) from 29 to 31 January 2020 at Eindhoven Air Base (NDL). NPECCs are the national shadow of AECC where all national patient movement requests are collected from deployed medical elements, validated and forwarded to AECC. NPECCs are an important stage of patient regulating for national awareness and possible direct interventions, but the role of AECC is to **find the best solution for each patient by selecting the best flight from all multinational options** and reaching a significant wider range of capabilities. The meeting is an important occasion to review the activity of EATC Partner Nations carried out in strategic aeromedical evacuation during the past 12 months, assess possible alternatives to improve quality in the system and outline initiatives for future projects in training, cooperation, interoperability and

efficiency. The thrust that has been building over the years represents an unquestionable example of quality in aeromedical practice beyond every possible national diffidence.



Major General Marboeuf, Commander EATC, addressed the NPECC audience highlighting that the **common effort of EATC with the nations represents the winning element of a genuine chain of rescue** for the personnel deployed in operations. He also stated that “multinational harmonization is key to further success of European air mobility. Striving for more alignment of medical equipment, aircraft configuration or airworthiness certification offers increasing possibilities in a multilateral approach for the transportation of patients, and thereby the best use of EATC on a daily basis”.

In 2019 a total of nearly 1170 patients were evacuated from theatres of operations, mainly from deployments in Africa. Disease and non-battle injuries account for 2/3 of repatriations with the most common diagnosis related to musculoskeletal disorders. Nations then individually contributed with their own experience, describing patients flows, regulating procedures, aeromedical teams training, solutions to current challenges, doctrine development, cooperation initiatives, national excellences, lessons identified and relevant equipment innovations. In particular, this sixth AECC/NPECC meeting **focused on the way ahead to standardize the basic aeromedical evacuation training among the member nations** and on exchanging ideas for practical solutions to best mitigate current shortfalls while waiting for new capabilities to be delivered.

The most promising project in the realm of international cooperation is the **Multinational MRTT Fleet (MMF)**. The MMF Program, endorsed by NDL, LUX, DEU, NOR, BEL and CZE, will provide a set of 8 multirole Airbus A330-200 capable of air-to-air refueling missions, transport of passengers and cargo and medical evacuations. The aircraft will be owned by NATO, will be delivered at the main operational base in Eindhoven (NDL) ready to fly from June 2020 and will be shared in a pooling arrangement that includes 9000 annual flying hours. The assets are planned to be in OPCON EATC providing a 24/7 alert service for Strategic Aeromedical Evacuation with a 24h NTM. EATC will also lead employment and training programs, operational manuals and doctrine, analysis and reporting, while nations will contribute with personnel, equipment, medical consumables and certification of airworthiness. In the medical configuration, the A330 MRTT will be capable of 6 patient transport units for high-dependency

patients, 16 stretchers and 96 seats for passengers. This new capability **will probably be the first real permanent field test** for our European ability to perform high quality, cost-effective and sustainable air transportation missions with a multinational military unit. Colonel Dr Tilmann Moll, head of EATC's Aeromedical Evacuation Control Centre, believes that "a strategic aeromedical evacuation aircraft is the ultimate morale booster for our combat troops. It is our responsibility to make sure that they know that at all moment we take care of our troops". The challenge for the future is to offer, promote and then routinely carry out more cross-national missions, i.e. with mixed medical crew from different nations.

The NATO Centre of Excellence for Military Medicine also contributed to the conference, exploring **new opportunities of cooperation in the areas of interoperability, clinical governance and transformational processes**, especially in the doctrinal harmonization of the aeromedical evacuation services provided by EATC with the other components of a deployed healthcare system in NATO operations. The level of ambition of the Alliance, of which EATC partners are also member states, is to **generate a response to all kind of possible instability situations** included in the strategic assessment of the highest institutions in NATO. Threats are typically unconventional, capable of striking deeply in our societies. Consequently, all military support systems, including medical, must continue to achieve best outcomes complying with the best available standards during baseline activities but also be ready to collectively withstand surges of engagements during crises.

EUMS participated with LTC Martina Hojka who illustrated the peculiar environment of EU defense initiatives with a special focus on existing solutions in aeromedical evacuation and practical approaches in cooperative capability development. With all the risks of outsourcing on military performance improvement by experience, **contracting of private companies is currently the smartest solution to mitigate the lack of a formal self-sustaining EU force** in the cross-national support to individual contributions that make up EU deployments. Contractors in the Airmedevac Project (<https://www.eda.europa.eu/info-hub/publications/publication-details/pub/factsheet-airmedevac>) offer services to evacuate patients from the point of injury to the initial Medical Treatment Facility or to transfer them between in-theatre Medical Treatment Facilities with either rotary-wing or fixed-wing assets as needed. The first four contributing members today are: Austria, Belgium, Germany and the Netherlands, but the project is open to all EDA participating Member States, EU entities as well as third states having an administrative arrangement with EDA.

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