The French Military Health Services

Overview

Reserve Officers Medical Seminar
US Army
Feb. 1st, 2009
Washington D.C.

LTC Francois R. Martelet®, MD
French Military Health Services
Dual mission

To provide medical support to our troops, even in CBRN environment:

• pre deployment
• deployment
• post deployment

To take part in public health

• participation to the national security plan to protect civilians (i.e.: counterterrorism, disaster etc.)
Defense Level of Ambition

To support

- 30 000 troops on a single theater
- 5 000 troops on a second theater
- 2 deployable operational air bases
- 1 aero-naval Task Force
- 10 000 troops deployed in France

To participate in humanitarian assistance missions
**French Armed Forces**

*A coherent and comprehensive expeditionary total force:*

- All volunteer force
- Nuclear Power (4 Nuc Balistic submarines; 60 nuc capable aircraft)
- All military assets, from earth observation satellites to ground forces, Air Early Warning, combat and transport aircraft, a blue sea Navy …
- 60 ships (1 aircraft carrier); 400 combat aircraft; 60 tactical transport aircraft; 80 regiments; 1200 main battle tanks; 1100 heavy artillery …

<table>
<thead>
<tr>
<th>STRENGTH</th>
<th>Army</th>
<th>Navy</th>
<th>Air Force</th>
<th>Gendarme</th>
<th>Support</th>
<th>TOTAL</th>
</tr>
</thead>
<tbody>
<tr>
<td>Military personnel</td>
<td>134 000</td>
<td>43 000</td>
<td>59 000</td>
<td>98 000</td>
<td>14 000</td>
<td>348 000</td>
</tr>
<tr>
<td>Civilian personnel</td>
<td>28 000</td>
<td>9 500</td>
<td>5 000</td>
<td>2 000</td>
<td>35 000</td>
<td>79 500</td>
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<tr>
<td>TOTAL Strength</td>
<td>162 000</td>
<td>52 500</td>
<td>64 000</td>
<td>100 000</td>
<td>49 000</td>
<td>427 500</td>
</tr>
<tr>
<td>Reserves Forces</td>
<td>29 000</td>
<td>7 700</td>
<td>8 000</td>
<td>40 000</td>
<td>9 000</td>
<td>94 000</td>
</tr>
</tbody>
</table>

Female percentage 14%
France’s Overseas Presence

2nd largest exclusive economic zone after the U.S.

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Medical Chain

First Care
Rotary Wing Medevac 2° level
MEDICAL AND SURGICAL FIRST CARE
Role «3»
Role 2 LM
Role 2 E
Forward Medevac 1° Level
POW
Role 4
KC 135 MORPHEE
FINAL CARE
UNCLASSIFIED

Service de Santé des Armées

Since 2002
IVORY COAST
LICORNE

Since 2004
IVORY COAST
ONUCI

Since 2008
AFGHANISTAN
PAMIR

Since 2001
TADJIKISTAN
HERACLES

Since 1992
BOSNIA
ASTREE

Since 1999
KOSOVO
TRIDENT

Since 1978
LEBANON
FINUL / DAMAN

Since 2003
ACR
BOALI

Since 2007
TCHAD
ACR
EUFOR

Since 1986
TCHAD
EPERVIER

2008

12 000 Militaries
480 Medicals (4%)
65% Multinationality

48 role 1
3 Forward Surgical Teams
3 Role 2 E
The Military Health Services

Operational Requirements

Role 1: General Practitioner and Nurse
Role 2 & 3: Specialists (doctors and nurses)
Medical Supply: manufacturing / logistics
CBRN Environment

Maintaining skills up to date / Research

Medical Unit
Military Hospitals
PCA, ERS, CTSA
CRSSA, SPRA
Organization of Military Health Services

Ministry of Defense

Joint Chief of Staff

Army
Navy
Air Force
Gendarmerie

UNITS

Medical support

Military Medical Means

Surgeon General
Human Resources

16000

2337  204  81  58  338  5300  990  484  5673

M.D.  Vets  MSC  NCO  Civil
Pharmacists  Dentists  RN  PVT

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Medical Support to the Forces
Deployment of M.D.s in Units

Army: 518
Air Force: 155
Gendarmerie: 159
Navy: 177
Medical Military Training

EVDG Paris
ESSA Lyon
ESSA Bordeaux
EPPA Toulon
Research & Development Centres

- Led by Defense Staff and Dedicated to the troops and Defense issues

- 5 fields of studies
  - Medical support to the troops
  - Fight against natural biological disease or biological warfare
  - Fight against chemical, nuclear and radiological threats
  - Ergonomics, psychology
  - Maintaining troops in operational readiness (equipment, chronobiology)

- One Research center and 3 specialized institutes

- Expertise in governmental plans
Military Research Centers

- IMASSA Bretigny
- CRSSA Grenoble
- IMTSSA Marseille
- IMNSSA Toulon
Military Medical supply

Supply Directorate

Manufacturing Facility

Medical supply Facility
Pharmacie Centrale des Armées
9 hospitals
3200 beds
Service de Santé des Armées

CTSA

JEAN JULLIARD
Organization of the Medical Reserves

▪ Goals of the Reserves
  ▪ Reinforce the operational capability of Active Units
  ▪ Sustain and develop the defense mindset
  ▪ Maintain the link between the Army and the Nation

▪ Reorganized in 2005
  ▪ Operational Reserve Forces
    ▪ “Special Reserve Units” or USRs concept set up fully integrated into the Active Duty Units
    ▪ With special contract agreement for each operational reservist
  ▪ Non Operational Reserve Forces or “Reserve Citoyenne”
    ▪ Role of strengthening the link “Army-Nation”
    ▪ About 200
Operational Reserve Forces

<table>
<thead>
<tr>
<th></th>
<th>Target 2012</th>
<th>Target 2007</th>
<th>31/12/2007</th>
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</thead>
<tbody>
<tr>
<td>OFFICERS</td>
<td>3 300</td>
<td>1 815</td>
<td>1 968</td>
</tr>
<tr>
<td>NON COMMISION OFFICERS/NURSES</td>
<td>4 660</td>
<td>2 467</td>
<td>874</td>
</tr>
<tr>
<td>SOLDIERS/VOLUNTEERS</td>
<td>640</td>
<td>388</td>
<td>374</td>
</tr>
<tr>
<td>TOTAL</td>
<td>8 600</td>
<td>4 670</td>
<td>3 216</td>
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Reservists Deployment Forces

• Special Contract Agreement
  • 30 days (usually)
  • 60 days with Regional head office approval (15% of all reservists)
  • 150 days if needed linked to the deployment needs
  • 210 days max with MoD approval

• Reservists in Operations
  • 2007: 114 reservists (14 women)
  • 2008: 109 reservists (10 women)
  • About 5400 working days
Human Resources

- **Recruitment**
  - University Hospitals
  - Nurses Institutes
  - National Special Day of Defense (“J APD”)

- **Administration of Operational Reservists**
  - All volunteers
  - Medical exam
  - 17 years of age minimum
  - Age limit: + 5 years beyond the age limit for active duty personnel
  - Beyond 5 days/yr with employer’s agreement
Growing Role of the Military Health Services

- Army (Special Forces)
- Navy
- Air Force
- State Department
- Political
Building up International Cooperation

Confronting Current and Future Medical Threats

a French perspective, through New Organization, Policy and Countermeasures

“To counter the global medical threat, we should reinforce collaborations at all levels, especially at the international one. As the threat is global, the response should be also global”.

LtGen Bernard Lafont, Fr Surgeon General, 2007 AMSUS meeting

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Additional Information on French Reserve

http://www.defense.gouv.fr/sante