

5 Nov 18

## EXERCISE SPARTAN HIKE 2019 – MEDICAL PLAN

### References:

- A. [2018DIN07-081](#) Army Alpine and Nordic Exercises 2019
- B. [JSP 950 Lft 6-7-7](#) Joint Services Manual of Medical Fitness
- C. [2018DIN01-063](#) Medical Preparation for Reservists Deploying Overseas
- D. [ACSO 3216](#) The Safe System of Work / Training
- E. [JSP 539](#) Heat Illness and Cold injury: Prevention and Management
- F. [AGAI 77](#) Army Hearing Conservation Policy
- G. [AP3394](#) The RAF Aeromedical Evacuation Service
- H. [JSP 751](#) Joint Casualty & Compassionate Policy & Procedures
- I. [JSP 770](#) Tri Service Operational and Non-Operational Welfare Policy

### Activity Overview

1. Ex SPARTAN HIKE 2019 (SH19) takes place in Serre Chevalier, France, during the period 12 – 23 Jan 19. SH19 is the Army Inter Unit Semi Final (A) for both the Army Alpine and Nordic Ski Championships and incorporates the Army Reserve Ski Championships.

### Population at Risk (PAR)

2. It is anticipated that there will be a total of between 450-500 military personnel (including officials) at SH19. Included in the exercise staff there is expected to be between 2-6 civilian appointed officials.

### Medical Laydown

3. With the exception of 'life and limb' First Aid to MATT 3 level 1, which may be provided by military personnel, there is no dedicated military medical support to SH19. All medical support will be provided by Host Nation (HN) medical facilities accessed through European Health Insurance Card (EHIC) and /or Medical Insurance.

### Force Health Preparation

4. **JMES.** All competitors are to arrive at SH19 with either a JMES grading MFD, or MLD with an appropriate Appx 9 and Appx 26 Medical Risk Assessment (MRA) iaw **References B & C.**
5. **EHIC.** As per **Reference A**, all personnel are to be in possession of an in-date EHIC which should be used in the first instance - the EHIC is not an alternative to travel insurance – for example it will not cover private medical healthcare. Further guidance on what is and isn't covered is [here](#). The cost of treatment will be reduced by using the EHIC system; any other costs are to be covered by the individual's insurance cover or the individual themselves.

6. **Additional Insurance and Indemnity.** It is recommended that all participants of SH19 hold their own insurance. This will enable them to undertake 'off-duty' recreational winter sports activities outside of SH19 (e.g. recreational skiing or snowboarding) these activities are not covered by MOD liability<sup>1</sup>. It is to include 3rd party liability insurance to cover such areas as personal liability, injury or loss of, or damage to property.
7. **Risk Assessment.** A generic risk assessment has been completed and can be found on AWSA Website, final confirmation and ratification by Ex Director SH to follow. An MRA has been conducted for the range which indicates that Emergency Medical Services (EMS) cover is not required.
8. **First Aid Training.** Ideally all personnel are to be MATT 3 qualified but as a minimum, all range staff and Team Captains are to ensure that they are in date for MATT 3 level 1.
9. **PPE/clothing.** Personnel are to deploy with the appropriate PPE for Alpine and/or Nordic skiing. This includes but is not exclusive to; wet and warm weather clothing, eye protection, hearing protection, and gloves.
10. **Routine medication.** Personnel who are required to take routine medication are to deploy with sufficient quantities for the duration of the exercise. Re-supply of medication cannot be guaranteed and should not be expected.
11. **Spectacles and corrective lenses.** Personnel who require spectacles or contact lenses are to ensure that they have either 2 x pairs of spectacles or 1 x pair spectacles plus sufficient supply of contact lenses and solutions for the duration for the deployment. For those who use disposable contact lenses, daily disposables rather than monthly disposables should be used. It is recommended that 30-day continuous wear lenses are not worn.

## **Force Health Protection**

12. **Safe Systems of Training.** All training is to be carried out iaw Chapter 3 of **Reference D**.
13. **Prevention of climatic injuries.** The prevention of climatic injuries is a CoC responsibility and all activities should be carried out iaw **Reference E**. Personnel are to be made aware of the risks posed by extremes of temperature, their personal responsibilities and steps to take to mitigate the risk. Any individual that has had cold related injuries should be assessed for suitability to deploy by the medical chain. Any climatic injuries must be reported as detailed in **Reference E**.
14. **Eye protection.** Whilst no specific requirement for eye protection, it is CoC responsibility to advise exercising troops that UV protective sunglasses are recommended to protect from sun and wind irritation.
15. **Hearing protection.** Units are to ensure that all personnel deploy with and wear issued hearing protection for use on the range iaw **Reference F**.

## **Primary Healthcare (PHC)**

16. **Non- urgent cases.** Individuals requiring routine or non-urgent access to a GP or other PHC specialists are to do so through their team Admin Support Cell utilising their EHC or personal Medical Insurance. The details of HN medical facilities in Serr Chevalier can be found at **Annex B**. Team Captains are responsible for all transport arrangements for non-urgent cases.

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<sup>1</sup> [JSP 419](#) Adventurous Training in the UK Armed Forces

## Pre-Hospital Emergency Care (PHEC)

17. **Initial emergency medical cover** to the Nordic competition (including biathlon range) and Alpine slopes is to be provided by HN Ambulances. In the event of extraction being delayed, essential First Aid (to MATT 3 level 1) is to be provided by military staff until the arrival of the HN Emergency Services. Each team should have their own First Aid Kit.

18. **Le Monetier Les Bains Range.** An Immediate Action Aide memoire for an ammunition incident on the Le Monerier les bains Range can be found at **Annex A**.

19. **EHIC.** EHICs are to be carried on the person at all times so that access to HN medical services is not delayed should it be required.

20. **Emergency Evacuation.** Host Nation Emergency Medical Services (HN EMS) - ambulances and emergency evacuation vehicles - are the only vehicles permitted to transport casualties. The HN EMS telephone number is **112**.

## Deployed Hospital Care

21. **Host Nation Hospital Locations can be found at Annex B.** All are compatible with UK standards of healthcare and all reachable within clinical timelines. Emergency treatment should be free of charge with **EHIC** and/ or medical insurance but teams should be prepared to pay medical bills for personnel injured on Ex SH19 that may fall outside the parameters of their cover. Further details can be found in **Reference A**.

## MEDEVAC

22. **Local resort non-urgent evacuation.** It is the responsibility of the Unit / Team Captains to evacuate non-urgent cases.

23. **Local resort emergency evacuation.** Host Nation ambulances and emergency evacuation vehicles are the only vehicles permitted to transport casualties. The emergency service telephone number is 112.

24. **Requesting Aeromedical Evacuation (AE) -** The Aeromedical Evacuation Control Centre (**AECC**) coordinates all **global** Strategic AE missions for all military personnel whether on Ops or Exercise. They conduct a clinical risk assessment to ensure that the most appropriate aircraft, medical teams and equipment are tasked to retrieve a patient. If during your deployment you require access to the AE service, then you should firstly contact the AECC on the numbers or email below. It is essential that before you deploy you access (and take relevant copies) of **Reference G<sup>2</sup>** which will give you all the necessary information on the procedure for requesting Strategic AE and how to raise a Patient Movement Request (PMR). If you do not have IT capability on the ground to raise any PMRs, then you must ensure that the Parent Unit are aware of the AE process and would be able to generate a request on behalf of the patient.

**AECC Contact Details** - Routine Contact (0800 – 1700 hrs. UK Time) – +44 (0)1993 895300 or 95461 5300, Out of Hours (1700 – 0800 hrs. UK Time) – Mobile +44 (0)7770 648688, Email address – [Air38Gp-TMWAEECC@mod.uk](mailto:Air38Gp-TMWAEECC@mod.uk)

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<sup>2</sup> [AP3394](#) The RAF Aeromedical Evacuation Service

25. **Repatriation to UK using team transport or Civ flights. Under no circumstance is any injured or ill SP to be repatriated to UK via team organic transport or civ flight without liaison with JCCC/AECC.**

**Medical Command, Control, Communication, Computers and Intelligence (MedC4I)**

26. **Command Status:**

- All Ex staff and Competitors are **OPCON** to Ex Director SH19.
- **ODH** Ex SH19 – GOC FTC
- **DDH** Ex SH19 - Ex Director
- **DDH** for individual team members is the respective individuals' COs

27. **Ex Director.** Ex Director for EX SH19 will be FTC SO1 G3/7 Lt Col Andrew Arthurton [Andrew.Arthurton594@mod.gov.uk](mailto:Andrew.Arthurton594@mod.gov.uk).

28. **Ex Controller and main POC for Ex SH19.** Ex Controller for EX SH19 will be SO2 SPARTAN HIKE Maj Ross Anderson [Ross.Anderson166@mod.gov.uk](mailto:Ross.Anderson166@mod.gov.uk).

29. **Briefings.** The primary means of communications for all personnel will be by daily Team Captains meetings held at 18:00 hrs , the first of which is Sat 12 Jan 19 in the Race Office. A casualty ROC drill is to be conducted on the range prior to the start of the event; this will ensure all Race Control Staff (RCS) are aware of the evacuation and communication procedures. The following is to be carried out prior to the initial Team Captains' briefing, and throughout the duration of SH19:

- a. **Alpine and Nordic.** Chiefs' Alpine and Nordic are to appoint an official responsible as the POC for all emergencies that may occur within their area of responsibility. All participants are to be made aware of this POC, who is to take the necessary action to ensure the HN EMS are notified, if not already done so. A record of all injuries is to be recorded on the relevant Technical Delegate's (TD) Report and reported to the Race Office Manager (ROM).
- b. **Race Office.** The ROM is to ensure that the portable radios are issued and the correct channels allocated to all officials. HNMS locations and contact Nos are to be briefed to all official personnel and be readily available throughout the duration of SH19.

30. **Communications.** Working communication between officials will be by portable radios with channels confirmed daily during the COR Officials' Meetings. Mobile phones will be used as secondary means. The following radio nets will be in operation throughout SH18:

Channel 1	Channel 3	Channel 3	Channel 4
Alpine	Nordic	Race Office	Spare / Emergency Channel
Race Office			

31. **Patient Tracking.** The ROM is to be informed of all personnel admitted to the hospital. It is the responsibility of the ROM to inform the Ex Controller / Duty Officer ASAP. Pastoral care of those admitted is the responsibility of individual team Captains' assisted by the ROM.

32. **G1 Casualty Welfare.** For all individuals admitted to a HN Hospital:

a. The casualty reporting and notification process is co-ordinated by the **Joint Casualty and Compassionate Centre (JCCC)** and all information must be routed through it:

**JCCC 24 Hr Casualty & Compassionate Contact Numbers:**

**Direct Dial: 01452 519951 Mil VPN: 95 471 7325**

**Fax Dir Dial 01452 510807 Fax Mil VPN 95 471 7363**

b. Patients must be supported iaw **References H & I.**

c. Team Captains are to ensure that any individual receiving medical care at a HN medical facility retains a copy of their treatment for submission to their home Medical Centre on return from Ex SHG19 for input to their MOD Medical Records on DMICP.

33. **Army Incident Notification Cell (AINC).** All accidents and incidents involving military personnel, civilians and contracted civilian staff are to be reported to AINC. In relation to Ex SH19 and any other WS Activity it applies to all injuries including: climatic and sporting injuries and injuries as a result of both on and off duty road traffic accidents. AINC operates a 24/7/365 service and can be contacted using any of the following:

a. Tel: 94393 7644 / 01264 887644

Mobile: 07704695068

**AINC SMART NUMBER - CIV: - 03067703661. MIL: - 96770 3661**

b. **By fax:** 94393 6889 / 01264 886889

c. **By e-mail via the Services network to:**

[ArmyLF-CESO-AINC-SO3@mod.uk](mailto:ArmyLF-CESO-AINC-SO3@mod.uk) / [ArmyLF-CESO-Mailbox@mod.uk](mailto:ArmyLF-CESO-Mailbox@mod.uk)

d. **E-mails to AINC are to be sent on RESTRICTED or below systems.**

34. **Defence Accident Investigation Branch (DAIB) Land.** In addition to the requirement above DAIB is also to be informed in the case of death or serious injury by contacting **DAIB(L) Duty Officer** Contact No: **03067986587** (24hr)

35. **Medical Logistics.** There will be no military medical logistic support to Ex SH19.

36. **Physiotherapy Support.** Depending on availability and logistical support, a military physiotherapist may be available over the period of Ex SH19 to offer advice and guidance on individual and team preparations for training and conditioning. **TO BE CONFIRMED.**

Lt Col AE Philpott

SO1 Med FTC

[Anthony.Philpott464@mod.gov.uk](mailto:Anthony.Philpott464@mod.gov.uk)

Annexes:

- A: Immediate Action Aide memoire – Le Monetier Les Bains Range
- B: Medical Facilities in Serre Chevalier
- C: Force Health Protection Instruction (FHPI) Serre Chevalier

## **IMMEDIATE ACTION AIDE MEMOIRE – LE MONETIER LES BAINS RANGE**

1. The following summarises the procedures to be carried out in the event of an ammunition incident. Full details are contained in Range Standing Orders and Section 6 to Chapter 1 of Reference A. Both documents are to be followed in conjunction with this Aide Memoire.
  2. In the event of an ammunition incident or accident on the range the following procedure is to be implemented immediately:
    - a. Stop firing / training and clear weapons as necessary.
    - b. Administer first aid as required.
    - c. Do not move any weapon involved in the incident unless not doing so would involve increased risk to personnel.
    - d. **Contact Exercise Control with the following details:**
      - (1) Where – Name of location or 6 figure grid.
      - (2) What has happened – Briefly?
      - (3) When – Time of incident.
      - (4) How many casualties and type of injury – Male / Female.
      - (5) Nationality – If not British.
      - (6) Assistance required – Fire Service, Lifting / Cutting Gear etc.
      - (7) Who you are – Number, Rank and Name.
      - (8) Who is in command?
  - e. Detail an assistant to receive and log all calls and event details.
  - f. Segregate witnesses and safety staff. No one except the injured are to leave the range.
  - g. Cordon off the area of the incident, take statements from all involved and make a sketch of the scene to include the positions of all involved.
3. Once Exercise Control has received all details, they will maintain a log of all events, timings and actions taken. They will take the following actions:
    - a. Task emergency services as required by dialling **112** on any phone (including UK or any other EU mobile phone). The RCO is to check this Number with the local authorities prior to operating the range for the first time.
    - b. Nominate an ERV to be used.
    - c. Notify the Exercise Director.
  4. If necessary, the Exercise Director will notify:
    - a. JS EOD Op Centre on 0044 1235 513360 / 2
    - b. HQ SASC on 0044 1985 222366 / 612.
    - c. Army Incident Notification Cell on 0044 1980 628458.
    - d. DAIB(L) on 0044 3067 98 6587 (24hr)

## Medical Facilities Serre Chevalier

Google medical centres serre chevalier

Rating -

- Centre médical Rhône-Azur**  
2.7 ★★★★★ (3) - Hospital  
2 Avenue Adrien Daurelle  
+33 826 46 46 55
- Serre Chevalier**  
4.3 ★★★★★ (237) - Ski resort  
Vast ski resort made up of 13 villages, with 115 slopes & summer activities such as mountain biking.  
Centre commercial, Route de Pr...  
+33 4 92 24 98 98
- Korian Montjoy**  
No reviews - Clinic  
52A Route de Grenoble  
+33 4 92 25 68 00  
Open until 18:00
- Docteur CUVILLIEZ François Médecin Générali...**  
5.0 ★★★★★ (3) - General Pra...  
Immeuble L'AREA, 3 Route de Bez  
+33 4 92 24 71 02  
Open until 19:30
- Centre Medical de sante Chant'Ours**  
No reviews - Doctor  
+33 4 92 54 62 99
- Foundation Edith Seltzer**  
4.8 ★★★★★ (4) - Public Medi...  
118 Route de Grenoble  
+33 4 92 25 30 30  
Open until 21:00
- Varziniak Richard**  
1.0 ★★★★★ (1) - General Pra...  
Centre Clal Prélong  
+33 4 92 24 71 37
- Hospital Ctr Des Escartons**

Map showing medical facilities in Serre Chevalier, France. Key locations include Serre Chevalier, Val-des-Prés, Montgenèvre, Saint-Chaffrey, Puy-Saint-Pierre, Puy-Saint-André, Villar-Saint-Pançrace, and Ceryières. Roads shown include D1091, D2341, D9940, D201, N94, D3335, D335, D136, D136A, D902, D901, D36, and D9940. Ski routes are marked in red.

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## Contact Details for Medical Facilities

Facility	Address	Phone Number
Centre médical Rhône-Azur	2 Avenue Adrien Daurelle, 05100 Briançon, France	+33 826 46 46 55
Docteur CUVILLIEZ François Médecin Généraliste	Immeuble L'AREA, 3 Route de Bez, 05240 La Salle-les-Alpes, France	+33 4 92 24 71 02
Korian Montjoy Clinic	52A Route de Grenoble, 05100 Briançon, France	+33 4 92 25 68 00
Centre Medical de sante Chant'Ours	05330 Saint-Chaffrey, France	+33 4 92 54 62 99
Foundation Edith Seltzer	118 Route de Grenoble, 05100 Briançon, France	+33 4 92 25 30 30
Varziniak Richard Clinic	Centre Cial Prélong, 05240 La Salle-les-Alpes, France	+33 4 92 24 71 37
Hospital Ctr Des Escartons	28 Avenue René Froger, 05100 Briançon, France	+33 4 92 20 24 24