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Medical Support of Armed Forces of Ukraine: New Vision of Organizational Structure and Management

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In recent years, the contribution of the human factor (personnel combat strength) to the fighting readiness of combat troops has increased considerably. On the one hand, the use of weapons with highly destructive characteristics may not only cause losses in manpower on a significantly higher scale, but these losses also have different characteristics (large numbers of multiple injuries, in addition to combat stress and fatigue). On the other hand, the armed forces of the civilized nations consist of military specialists managing modern military technologies. As is well known, the expenses of training a modern high quality military pilot training costs several million dollars, which is comparable with the cost of a jet-fighter. Therefore, the health and professional sustainability of military experts has obtained strategic importance.

Another feature of the present situation is the reorientation of the military doctrines of many countries to participation of their armed forces in peacekeeping, humanitarian and disaster relief operations. The military-medical doctrines which are currently being developed by NATO, Russia and Ukraine, are aimed at carrying out of these new roles.

Presently, multinational forces of NATO nations and PfP countries, including the Ukraine peacekeeping contingent, are fulfilling many of the missions mentioned above. In connection with this, there is an increase in the need for exchange of information and experience between the national military-medical departments and services. Such exchange is the main task of the current Specialists' Meeting.

The importance of this event is great, because many of its recommendations to the military-medical services equally apply to the civil health care services of many countries. The Specialists’ Meeting focuses on the interaction between the military and civil health care systems, the rational use of limited medical resources, medical care standards, medical information systems, etc.

The purpose of the present report, which can be important for international medical community, is to describe the problems the Ukraine Armed Forces are currently facing in the area of military medical support.

We have developed a concept for a new system of military-medical service, which is capable of providing modern quality standards of medical care. The concept aims at establishing a military-medical service which will include and combine three managerial infrastructures (curative-prophylactic, hygiene-epidemiological, and military-medical supply) and two systems (training of military-medical personnel and research). Some sections in the program have already been realized. Military-medical personnel is being trained at the Ukraine Military Medical Academy, which was founded in 1996. There are also military-medical faculties at the Kiev National Medical University and at the military-medical college in Vinitsa. In
addition to this, there are groups studying military methods in the emergency medicine faculties of civil medical institutes. All graduates of these institutes obtain the rank of reserve officer and they form basis for military academy and armed forces service admissions. Due to these innovations, the Ukraine military-medical personnel training system is now meeting international standards.

A course on "NATO Armed Forces medical support" has been introduced in the curriculum of the Ukraine Military-Medical Academy. Courses on "Curative-evacuation support of NATO Armed Forces" and "English-Russian-Ukrainian alphabetical reference-book on military and extreme medicine" are being prepared. In addition, a military medicine research capability has been established. The main research establishments are the Ukraine Military-Medical Academy (UMMA), the Research Institute of Military Medicine (RIMM) and the Main Military Clinical Hospital (MMCH). Scientists at the UMMA are working on the organization of medical support to the Armed Forces, medical radiology and toxicology, improvement of the treatment of patients and wounded, and pedagogic and educational issues. The UMMA research center serves as the coordinating body for the Surgeon General, and is assisting him in the supervision of the military-medical research area. The RIMM is the main executor of research on occupational medicine, improvement of the organizational structure and management of the medical services, medical evaluation of armament and military engineering, and other issues. The RIMM consists of 2 boards, 7 departments and 17 laboratories. The MMCH units and clinics serve as a base for UMMA for the training of military physicians and research on the organization of outpatient and hospital medical care, the improvement of the quality of medical care and medical expertise, etc.

All three components of military-medical organization cooperate closely, which allows them to avoid duplication in research planning, and a rationally use of the scientific staff and resources. Additionally, the links between the research establishments of the Ministry of Defense and leading research institutes of Ministry of Health, as well as the Ukraine Academy of Medical Sciences have been strengthened in the last five years.

Presently, we have managed to realize one of three planned managerial infrastructures, the system of hygiene-epidemiological surveillance. The hygiene and epidemiological service of the Ministry of Defense is organized on a territorial principle: from the Central Hygiene and Epidemiological Department downward to the regional hygiene and epidemiological laboratories. Due to our efforts, this service is no longer subordinated to the military and medical commanders. This allows it to carry out surveillance and effective measures independently. As a result of the reorganization, the epidemiological situation in Armed Forces has been improved. This success is expressed in a 30% reduction in the outbreak of epidemics and in the number of victims. However, infectious diseases remain an important risk for the Ukraine Armed Forces and for this reason commanders and the military-medical service give special attention to this problem.

The second managerial infrastructure deals with military-medical supply. According to the proposed model, it includes the Office of Logistics, within the structure of Main Military Medical Directorate (MMMD), the central, regional and territorial medical stores, the pharmacies of the base and garrison military hospitals and other military treatment facilities. The managerial infrastructure of military medical
supply will, by analogy with the infrastructure of the hygiene and epidemiological service, be entirely under the supervision of the MMMD, through the Office of Medical Logistics. Medical supply combines the principles of centralization and decentralization. Purchases of large quantities of medicine and equipment are made on a centralized principle. Purchases that are necessary in limited amounts or for urgent needs, are made on decentralized principle. In the future, a decentralized system of medical supply will be introduced, in a more flexible and economic way, which will allow to operationally respond to the current inquiries.

The third managerial infrastructure, the curative-prophylactic, is in the stage of development and consideration. Essentially, it will encompass a medical care and treatment system which is based on territorial principles (zone of responsibility), with a range of medical treatment facilities: 1) the Main Military Clinical Hospital will provide highly specialized medical care, 2) the Central Military Hospital will provide specialized medical care, 3) the Base Military Hospitals will provide specialized and qualified medical care, and 4) the Garrison Military Hospitals will provide qualified primary care. In this managerial infrastructure, the MMMD carries out the general management of the curative-prophylaxis support, while the Medical Services of the Army, Air Force, Navy and Operational Commands provide class and field combat exercises to increase the readiness of the medical service to act in extreme situations, in peace as well as in war time.

The proposed managerial infrastructure will allow the MMMD to conduct independent planning, personnel selection, financial and supplying policy, and to eliminate inter-service barriers by the organization of the medical support system on territorial principles. It will also enable us to revive the medical service at the military unit level, where up to 70% of all cases of diseases and traumas should be prevented and treated.

At present, the curative-prophylaxis managerial infrastructure has been developed as a structural model, the staff and equipment have been designed, the management mechanism has been determined, and it has begun to be implemented in the structures of operational commands. However, its practical implementation will require further significant effort, specifically with respect to the development of legal procedures and of mechanisms which will put the command and financial authority into the hands of the MMMD.

The legal and financial support of the curative-prophylaxis managerial infrastructure will eliminate double expenses of the limited medical resources, will create conditions for an extension and improvement of the out-patient medical care, will reduce the duration of hospital admissions, and will stimulate the development and implementation of modern standards in the medical services.

Ukraine experts and scientists are currently developing a Military-Medical Doctrine (MMD), in which the combined experiences concerning Armed Forces medical support of the former Soviet Union, NATO nations, and Russia and Ukraine will be utilized. The MMD will become the official document regulating the unified principles, requirements and standards of medical support of the Armed Forces during all their activities. It will define and determine the specific responsibilities and command authorities of the
medical services, and its primary aim will be the preservation and strengthening of the health of military personnel.

The principles of the MMD will become the basis for the development of the model of the military-medical service of the Ukraine Armed Forces-2010. The model will include a close integration of the military and civilian health care systems, priority principles for medical service financing, a definition of the medical budget structure, a revision of the role and functions of the military-medical service commands, the development of modern forms of management and information support, and provisions for the training of the new generation of military-medical specialists.

International cooperation plays an important role in the realization of the reform of the Ukraine military-medical service. From our point of view, the primary topics for cooperation are:

a) studies of the experience of the military-medical support system in NATO nations and in other leading western countries in the following areas:
   - optimization of the management structure of the medical services;
   - re-structuring of the military-medical service and optimization of the organization structure of medical facilities;
   - rational use of medical resources;
   - quality control of medical care;
   - introduction of new technologies in curative-diagnostic process;
   - improvement of the training of military-medical personnel;
   - practical use of military-medical standards;

b) international research cooperation in:
   - scientific support for the reform of the military health system;
   - joint research on military pathology and its influence on troops combat readiness;
   - joint development of the military-medical doctrine;
   - study of the incidence rates, prevention and control of militarily relevant infectious diseases;
   - development of countermeasures against biological terrorism;

c) international humanitarian medical aid to Ukraine (medical equipment, pharmaceuticals diagnostic means).

Ukraine offers to cooperate with other nations on the following issues:

- participation in joint exercises of multinational forces;
- participation in international scientific meetings, seminars, symposia;
- participation in medical support of peacekeeping and humanitarian missions of UN and NATO;
- bilateral and multilateral meetings of official representatives of military-medical departments of Ukraine, NATO nations and other countries;
- exchange of information in working groups to study specific topics of military health care;
- training of Ukraine military-medical personnel in foreign treatment facilities and teaching institutions;
- exchange of scientific and practical information.
A successful implementation of the planned program for a new military health care system in Ukraine, based on the principle that the preservation of the health of military personnel is an issue of national urgency, will be one of the most important criteria for the success of the entire reconstruction and development program of the Ukraine Armed Forces.

References
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