

Initial Naval Training for Medical Officers: successes and opportunities

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Abstract

In 2012, the Initial Officer Training (INT(O)) pipeline for Royal Navy Medical and Dental Officers (RN MODOs) was reorganised to ensure the same key training objectives were met by all Officers in the RN. This modernisation programme was initiated by the Institute of Naval Medicine (INM) and Britannia Royal Naval College (BRNC), to guarantee that MOs possess the leadership and military skills required for service in the Royal Navy.

This article describes the course and how it has developed over the seven years since its introduction. It aims to give an understanding of what initial MO training involves, some areas of opportunity, and intends to inform potential RN Medical Service applicants about what they can expect during initial training.

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Introduction

In 2012, the Initial Officer Training (INT(O)) pipeline for Royal Navy Medical and Dental Officers (RN MODOs) was reorganised to ensure the same key training objectives were met by all Officers in the RN. This modernisation programme was initiated by the Institute of Naval Medicine (INM) and Britannia Royal Naval College (BRNC), to guarantee that MODOs possess the leadership and military skills required for service in the RN.¹

Historically, MODOs joined BRNC as part of a stand-alone division on a bespoke seven-week course. This historical structure was in keeping with the current training pathways of the Army (8-week Commissioning Course (short)) and the Royal Air Force (RAF) (11-week Specialist Entrant and Re-Entrant (SERE) course)).²⁻³ The US Navy, similarly, has a stand-alone course for professionally qualified Officers, the 5-week Officer Development School (ODS).⁴

The new RN training pipeline involves MODOs joining BRNC as part of a regular intake and being dispersed across the six current divisions. The MODOs stay with these divisions for the first nine weeks of the regular RN Officer training programme before forming a single division for a bespoke final five-week programme, passing out at the end of the 14-week term.

This article aims to give the readership an understanding of what is involved in initial MODO training, some areas of opportunity, and aims to inform potential Royal Naval Medical Service (RNMS) applicants about what they can expect during initial training.

The first nine weeks

On arrival at BRNC, new entry MODOs are divided equally among the six divisions along with the Officer Cadets (OCs)

from the other Naval branches. If they have been sponsored through their undergraduate training and foundation programme, MODOs at this stage already hold the substantive rank of Surgeon Lieutenant, but for their time at BRNC this is temporarily withdrawn and all are now given the rank of OC.⁵⁻⁶ This ensures parity with the other RN branches. The bar is out of bounds for the first five weeks of training, and no shore leave is granted for the first nine weeks, other than a few hours during a families' weekend.

The standards expected during this stage of training are the same for all OCs – everyone is expected to pass the Royal Navy Fitness Test (RNFT) in the first week, the Assessed Basic Leadership Exercise (Ex ABLE) in week nine, as well as various other tests, including navigation exams, daily inspections and Ex HAVOC (formerly known as Frantic Friday) during the fifth week. The core Naval values of Commitment, Courage, Discipline, Respect, Integrity and Loyalty (C2DRIL) are assessed throughout.

The programme begins with an induction week, consisting of joining administration as well as introductions to physical training and kit husbandry. Following this, there is a rotation through three separate week-long training packages, each focusing on a different aspect of military skills. This includes a week of weapon handling, a week of basic sea navigation and boat handling, as well as a week of physical training and drill instruction. Week five incorporates Ex HAVOC, which is the formal assessment and conclusion of the induction phase of training, following which the Cadets' families are allowed to visit BRNC for families' weekend.

After this initial phase, the focus shifts towards leadership, with training conducted by the Royal Navy Leadership Academy (RNLA) at BRNC and on Dartmoor. Command, Leadership and Management (CLM) lessons take place during

Week	Content	Location
1	Induction to Militarisation	BRNC
2 - 4	Round Robin of: <ul style="list-style-type: none"> • Mariner 1 • IMF/CT • NMT-100 	BRNC
5	Induction Pass-Out and Ex HAVOC	BRNC
6	ILT and Strategic Studies	BRNC
7	Ex BLD	Okehampton and BRNC
8	First Aid Level 1 & Strategic Studies	BRNC
9	Ex ABLE	Dartmoor
10	MAROPS	BRNC
11	First Aid Level 2	HMS EXCELLENT
12	BSSC	HMS EXCELLENT
13	JOLC 1	OLTC
14	Pass-out Week	BRNC

Figure 1: Weekly plan of BRNC Phase of New Entry Medical and Dental Officer Training. Key: ABLE – Assessed Basic Leadership Exercise; BLD – Basic Leadership Development; BSSC – Basic Sea Survival Course; CT – Ceremonial Training; ILT – Initial Leadership Training; IMF – Initial Military Fitness; JOLC 1 – Junior Officers Leadership Course 1; MAROPS – Maritime Operations; NMT-100 – Naval Military Training (SA80); OLTC – Outdoor Leadership Training Centre, Tal-y-bont.

weeks five and six, introducing OCs to examples of leadership and encouraging them to consider their personal leadership styles and how these may be honed and applied in a military context. A module on Strategic Studies also begins during this phase, in which the OCs learn about Britain's relationship with the sea, famous maritime conflicts and the proud history of the RN.

During week seven, OCs conduct the Basic Leadership Development (BLD) Exercise which consists of three days based in the field at Okehampton Camp followed by two further days at BRNC. The aim of the first three days is to introduce basic field techniques, including living in bivouacs, wet-dry routine and basic soldiering skills. The Dartmoor phase concludes with a day-long navigation exercise, with the OCs taking it in turns to navigate and lead their teams across the moor. On return to BRNC, the OCs spend two days conducting non-assessed Practical Leadership Tasks (PLTs) to develop their command and leadership skills. For MODOs this is a chance to develop the leadership skills they acquired while working in the NHS, learning to apply them in a military context using a more rigid structure.

Following the BLD Exercise, the OCs spend week eight at BRNC undertaking further Strategic Studies, and also a First Aid Level One course – this is completed by all OCs including the MODOs. During this week, every OC receives individual feedback on their performance during the BLD Exercise and how they may improve on this before deploying on the assessed Ex ABLE the following week.

ABLE consists of four days spent on Dartmoor, living in field conditions and conducting assessed PLTs along with other

military activities. Each OC must lead at least two PLTs while being assessed throughout the entire exercise on both their leadership and personal qualities, such as the ability to work as an effective team member, to contribute to team morale even when fatigued, and to continue in the face of adversity. The exercise concludes with a stretcher run-off competition, with the two winning divisions earning a return helicopter flight to BRNC.

The final five weeks

Following ABLE, MODOs leave their respective divisions and form their own New Entry Medical Officer (NEMO) Division to undertake a bespoke five-week package. For the first week of this period, the MODOs receive lectures on Maritime Operations. These lectures include information on the function and operations of the RAF, the Army and the Royal Fleet Auxiliary and how inter-operability is achieved whilst working in the Tri-Service operational environment.

For the next three weeks the MODOs relocate to HMS COLLINGWOOD to complete a number of stand-alone courses. This includes the First Aid Level 2 course, the Basic Sea Survival Course (BSSC) and the Junior Officer Leadership Course 1 (JOLC 1). The last of these courses is conducted at the Royal Navy Leadership Academy (RNLA) Outdoor Leadership Training Centre in Tal-y-bont, Wales. After completing these courses, the NEMOs return to BRNC to be integrated into the divisions who are preparing to pass out (one term ahead of the NEMOs original divisions). With these new divisions they spend five days conducting parade training before concluding the term with their passing out parade and receiving their commissions as RN Officers.



Figure 2: Royal Navy NEMO course 2019 with Surg Capt Crowson, CO INM, Lt Cdr Lawton-Roberts, Head RNMS School and WO1 Smith, WO training RNMS School.

Discussion

The rationale behind the changes instituted seven years ago was to improve the leadership and military skills of MODOs. It also served to increase the understanding between MODOs and Officers from other branches of the RN. The opportunity to work closely with OCs from a wide range of branches during initial training is invaluable, allowing future colleagues to bond over shared hardships as well as professional respect. Those fellow Officers whom the MODOs meet and work with at BRNC are likely to be their colleagues on future deployments and the value of these early bonds should not be understated.

On joining BRNC, MODOs tend to be older than most other OCs, with the exception of Upper Yardsmen (UYs) and Senior Upper Yardsmen (SUYs), and have usually gained life experience from working in the NHS. As a result, many MODOs naturally fall into a mentor role within their division, using their maturity to help to develop any younger OCs who may be struggling. Were the MODOs to remain together as a stand-alone division for their time at BRNC, this valuable development opportunity would probably be lost.

By the time they join BRNC, NEMOs have undergone a minimum of seven years training at medical school and in the NHS, but may have spent little time considering their roles

as Officers and leaders. Most NEMOs will have held Officer rank for several years, but will have received minimal Officer training (apart from the one week acquaint course) before entering BRNC. Allowing the NEMOs a period of time to focus solely on Officer training, free from the pressures of being a doctor, is extremely valuable as it provides an opportunity to understand their role better and to develop as a RN Officer.

An area where a useful opportunity exists is the First Aid Level 1 course, which is an ideal chance for the NEMOs to teach, passing on their medical knowledge while demonstrating professional competence and gaining valuable evidence for their Electronic Portfolios (ePortfolios). In general, there is limited scope for undertaking ePortfolio assessments during time at BRNC – recording personal reflections on the course may be possible, but completing other structured clinical assessments is almost impossible. Completion of ePortfolios now forms a central part of the NEMOs annual appraisal; ensuring the provision of adequate opportunities to satisfy the ePortfolio requirements should be considered in future years.

It has been suggested that MODOs may benefit from completing the full INT(O) course; although this would certainly place NEMOs at considerable advantage in terms of military knowledge, the time out of practice might be disadvantageous at such an early stage in their medical careers. The current

14-week package thus represents an appropriate balance of competing interests and satisfies the military training needs of the MODOs.

Conclusions

The changes to the INT(O) package for New Entry MODOs have received a positive response, both from a training

perspective and in preparing MODOs for the unique challenges of the maritime environment.

Integrating with OCs from other Naval branches is a real strength of the course. The Army and RAF still undertake a separate stand-alone package, but the changes to NEMO INT(O) have helped to ensure that our MODOs are truly viewed as RN Officers and not just as doctors.

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Conflicts of interest

The authors declare no conflicts of interest.

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