



AMEDD School Reaps Benefits from Project Warrior NCOs

By Pablo Villa

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Knowledge sustainment is a key tenet of today's Army. That notion is not only harbored by the NCOs that are part of the Project Warrior program at the U.S. Army Medical Department Center and School, or AMEDDC&S, at Joint Base San Antonio-Fort Sam Houston, Texas, it is practiced on another level.

The program is geared toward taking battle-experienced Soldiers and putting them in positions where they can pass on the insights and knowledge they've gleaned from combat training centers, or CTCs, to benefit Army schools as well as the rest of the force. One vital component to foster this learning is the Lessons Learned program, a compilation of reviews and research that helps provide combat health service support on the battlefield.

Project Warrior, which was introduced in 1989, garnered the spotlight again in May 2013 when the Army Chief of Staff, Gen. Raymond T. Odierno, announced its re-establishment in an effort to infuse the force with seasoned officers who had completed rotations as an observer, coach and trainer, or OCT, at a combat training center.

Though, the program had previously been largely suspended throughout several Army disciplines because of the operational requirements of Iraq and Afghanistan, it never stopped at Fort Sam Houston, where up to 42 AMEDDC&S NCOs at a time have continued honing the skills necessary for success in the highly technical world of Army medicine.

"We haven't stopped in the NCO realm," said Master Sgt. Mike Eldred, the senior enlisted advisor for AMEDDC&S's Center for Pre-Deployment Medicine. "In the rest of the Army, they're re-establishing. But we've been doing it the whole time.

"When the rest of the Army stopped their programs, AMEDD decided to keep it, because it was beneficial for the way ahead into the future for 2020-type Soldiers," he said. "They would learn and be able to apply those lessons learned and those insights that they've gained from their peers that have been gone that could be applied to training down here."

Evolving with Changing Times

The precursor to the U.S. Army Medical Department Center and School was established in 1920 at Carlisle



Master Sgt. Mike Eldred, left, is the senior enlisted advisor for the U.S. Army Medical Department Center and School's Center for Pre-Deployment Medicine at Joint Base San Antonio-Fort Sam Houston. The position was previously held by Master Sgt. Michael Cluette, right. Cluette is now the AMEDD Flight Paramedic Program NCOIC. Both NCOs tout Project Warrior as vital to the success of the post's combat medics. (Photo by Pablo Villa)

Barracks, Pa. For more than 25 years, the Medical Field Service School developed medical equipment and doctrine for the battlefield before having its mission transferred to Fort Sam Houston in 1946.

The school underwent significant changes in structure throughout the years while incorporating the functions of the Army Medical Department. In July 1991, the Army surgeon general, Lt. Gen. Frank F. Ledford Jr., established the AMEDDC&S and in 2005, the Base Realignment and Closure process co-located a large portion of enlisted technical medical training (the Army's, Air Force's and Navy's) at Fort Sam Houston.

Project Warrior, which has had a presence at the post since the mid-'90s, has been a vital part in helping Soldiers evolve with constantly changing tactics and technology, Eldred said, ensuring AMEDDC&S can meet its mission to "envision, design and train a premier military medical force for full spectrum operations in support of our Nation."

"Basically, what we're doing with the program is we're taking experienced Soldiers who have already taken a little bit of 'baptism by fire,'" Eldred said. "They've been out there in a combat zone or in some significant training events that really set them apart as experienced Soldiers. We draw them in through a voluntary program. We go out and advertise and recruit. Once we bring them in, they go to the CTCs. They basically get those big wrinkles knocked off; their tactical and strategic skills are refined. Then they come here for two years and start to spread that higher education and are better able to articulate the needs of advanced training."

Building a Project Warrior

The process of developing a Project Warrior is relatively the same for both officers and NCOs.

In the case of AMEDDC&S NCOs — most of whom are Army MOS 68W health care specialists — Soldiers who are identified as candidates and pass review from the program's command sergeant major serve a 24-month assignment at a combat training center such as the Joint Readiness Training Center at Fort Polk, La. Upon completion of their rotation, they are assigned to positions at Fort Sam Houston and Fort Rucker, Ala., where they can make the biggest impact and dispense the knowledge they've accrued.

"The CSMs have been very good with the Project Warriors when [the program's graduates] PCS," said Master Sgt. Michael Cluette, the former AMEDDC&S Project Warrior program manager and current AMEDD Flight Paramedic Program NCOIC. "They don't send them in a downward spiral. What I mean is while they were at the CTCs, they were a platoon sergeant trainer and they were training platoon sergeants how to be better at what they do. So when they come here after they've learned and start pushing these tactics through doctrine and everything else, the last thing you want to do is take this guy and put him back as a platoon sergeant or as an aid-station NCOIC. You want him to continue forward with his knowledge."

"A lot of times, they'll look to try to get [Project Warrior graduates] into those brigade positions or somewhere with a higher position, if possible. Sometimes it

may not be possible, and that's just where the cards may fall. But their knowledge won't be lost, because it's like a virus. If I teach my 38 soldiers in my platoon what I know, as they grow up, they're going to take their knowledge and spread it. So it just festers like a virus."

To ensure knowledge sustainment and adaptability, Cluette said, Project Warrior candidates must be well-rounded and not focused on one role of care.

"We don't want somebody who has only been in a CSH (combat support hospital). We don't want somebody who has only been mechanized," Cluette said. "We need to get that soldier and that medic who has diversified and not just somebody who is in that tunnel."

The diversification proves helpful in tying together the multiple medical assets on a battlefield, knowing their respective expectations and how those assets work together.

"At that training event — when they get to teach somebody and they're coaching them at the CTCs — they have to be able to talk to them at a strategic level and say, 'Look, when you do your piece here and when you look forward, you've got to know what that next guy is going to do for you and provide for you,'" Cluette said. "You're going to have to link, 'Well once it gets there, he's going to have to go here.' And you have to know what's on that battlefield to do that."

"It's not just tactics or strategy. It's also equipment," Eldred said. "So we have people that go evaluate new equipment. They assist these highly experienced Soldiers who are going out and actually fielding this equipment. They're testing it and seeing what the future of equipment in the Army is. But also, if there's a problem with equipment out in the field, we capture that, bring it back and help them make modifications to the current equipment or change a set kit and outfit so what we give to Soldiers and the units is better."

A Synergy of Information

Once Project Warrior NCOs are in place, they have proved to be able teachers, an invaluable source of knowledge and a vital asset for officers, Eldred said.

"[The Project Warrior Soldier] knows what that team needs in order to accomplish the mission," Eldred said. "They're helping an officer see what their needs are. We, as NCOs, teach those individuals and teams. We understand that mentality. So if you're only pushing officers through this program, you're only going to get an oversight, you're only going to get the planning aspect, you're only going to get the overall project idea. But if you get the NCOs injected in there, like we are now, then you're giving the rest of the project or program a perspective of what it takes to get the individual and the team trained. They put it in the 'Blue Book,'" he said referring to the key job that NCOs perform. "This is what we do; we do drills. That's what we're still doing. It's just that now, this is a highly refined level of how to do drills."

But one of the important facets of Project Warrior is that it is not a license for top-down training approaches. It is cooperative learning with all Army branches at its best.

"We really don't dictate to anybody or give orders on anything," Cluette said. "It's more of the teaching, coaching and mentoring of our peers, and even some of the seniors that are here who ask us questions. We have Project Warriors who teach [Basic Officer Leadership Course], who teach the Captains Career Course. We have senior NCOs who influence those officers. So it's a strategic-level oversight that we're trying to influence and not just at the squad-level or company level. We're trying to do that broad strategic planning kind of thing to where we can get that information out."

And getting information out is critical in the domain of Army health care, where mere minutes can make an enormous difference in the outcome of tending to an injured Soldier.

"We're so technically heavy," Eldred said. "When you're talking about a program of instruction like we have in the 68W training that covers things like anatomy, physiology, pharmacology, the Tactical Combat Casualty Care course — all those things and we have to get certification for emergency medical technician. It's a very intense amount of training and knowledge base that they already have to have. So if we don't front-load that information (through Project Warrior) as far as tactics and strategy, they never ever get it. They just get focused on just the technical aspect. That was a problem in the old Army. We had leaders who were coming up with no strategic and tactical knowledge because all they did was just technical. So we're trying to overcome that and get these guys past that level and widen their knowledge base."

'You're Keeping People Informed'

The resurgence of the Project Warrior program Armywide comes during a lull in the near constant deployments that have been a fixture throughout the past 13 years. As the Army shifts focus away from Iraq and Afghanistan, Eldred and Cluette said, it is a prime time to get a firm grasp on lessons learned during the past decade and prepare to apply them to future conflicts.

"The different platforms for lessons learned are expanding. We're trying to reach the individual," Eldred said. "We've been able to assist in creating programs like the BCT3 (Brigade Combat Team Trauma Training course), which is a mandatory train-up for all 68Ws before they deploy. So the combat medic gets this training because of Project Warrior's influence. Down the road, we want to put a lot of the lessons learned straight from the field — not just into the manuals that people sometimes read — but into training at the lowest level. We're trying to inject that information and keep people relevant, keep their tactics and their concept of combat relevant."

“The future is mobility and flexibility,” Eldred said.

Ensuring that an eye is fixed keenly on the future will pay dividends for the Army’s future Soldiers, Cluette says.

“I think the CTCs are going to be very advantageous to all the brigade combat teams,” he said. “This time around was a COIN fight; the next time around, we might be back in a linear battlefield. These Project Warriors are going to be those guys who learn how to do the strategic linear battlefield. But we’re going to be gone. So as we phase out, those younger Project Warriors are going to have to pick up that knowledge and be able to push that out. There’s so much

that we do, medically, to support the warfighter that the Project Warriors have a wider, strategic grasp on then, say, maybe one of the Soldiers down in the trenches. The Project Warriors just understand it better. And that’s why we’ve pulled them in to teach that at the CTCs to teach that.”

Adds Eldred: “If you’ve ever read *The 360-Degree Leader*, it’s this great book on leading from the middle. That’s what this is. It’s teaching people laterally, not just vertically. You’re keeping people informed. If someone has a tactical or a strategic question, they come to us. They come to a Project Warrior.” ■



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