

MARKET SURVEY FOR THEATER ROTARY WING MEDEVAC SERVICES

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1 INTRODUCTION TO EDA

The European Defence Agency (EDA) governed by Council Decision (CFSP) 2015/1835 was established to “support the Member States and the Council in their effort to improve European defence capabilities in the field of crisis management”.

EDA acts as a catalyst, promotes collaborations, launches new initiatives and introduces solutions to improve defence capabilities. It is the place where Member States willing to develop capabilities in cooperation do so. It is also a key facilitator in developing the capabilities necessary to underpin the Common Security and Defence Policy (CSDP) of the Union.

EDA has developed a structured and comprehensive approach to supporting EU Operations. In particular, when capabilities required in operations are not available, EDA provides administrative, contracting and/or technical support to various actors to alleviate shortfall with contracted solutions.

Further information can be found on the Agency’s web site¹.

2 AIM

Typically, CSDP operations and missions are deployed on short notice to manage crisis in remote areas. In some cases, shortfalls on assets and equipment arising from the force generation have led to outsourcing some key services.

This has been the case for in-theatre rotary wing MEDEVAC in the CSDP military training mission in Mali (EUTM Mali) or the CSDP civilian rule of law mission in Kosovo (EULEX Kosovo).

In order to inform decisions of various stakeholders, EDA is conducting the present market survey to better understand the range of commercially available solutions which could fulfil possible future requirements for in-theatre helicopter MEDEVAC services and associated risks or limitations. It has to be highlighted that the objective of this survey is to identify service providers of ‘turnkey’ solutions and not manufacturers of assets or supply providers.

Operators are invited to participate to the present survey by submitting non-committing answer. Each operator is free to provide as many responses as it sees fit and can equally provide an answer on its own with one solution or collaborate with other operators on other solution(s).

Answers submitted to EDA in the frame of the present survey will not be considered as binding and shall be submitted free of charge. EDA will not reimburse any expenses incurred in the preparation of the answers/information packages. Participating to the present survey shall not entitle any participating operators to any rights nor shall it raise any expectations.

¹ <http://www.eda.europa.eu> and <http://www.eda.europa.eu/what-we-do/activities/activities-search/operations-support>

The information provided to EDA will be used for the purpose of early identification of the market's capacity. EDA will not obtain any user rights. EDA will treat with confidence specific costing/delivery details and specific equipment design, where such details are confidential.

No feedback will be provided. EDA may organise bilateral meetings at a later stage and invite participating operators to further clarify their initial responses. Interested operators are also invited to register to the EDA Contractor Support to Operations web-platform to regularly receive information about workshops and contractor support opportunities².

For any clarification regarding this market survey please contact EDA PoC: Georgios KOUVIDIS, georgios.kouvidis@eda.europa.eu , +32 (0)2 504 29 50.

3 SCOPE

At this stage, the primary scope explored for this survey is the provision of in-theatre rotary-wing MEDEVAC services to evacuate patients from the point of wounding to the initial Medical Treatment Facility or transfer between in-theatre Medical Treatment Facilities.

Medical evacuation of patients requires constant medical supervision and a continuum of care during the transport via air or ground to and between Medical Treatment Facilities (MTFs). The ability to evacuate casualties to a medical care facility on a 24/7 basis, in all weather, over all terrain and in any operational scenario on short notice is also a mandatory requirement for any CSDP deployment.

MEDEVAC assets with skilled medical aid (e.g. doctors, nurses or paramedics) must be able to reach the seriously injured casualty within one hour of wounding. Healthcare providers should be skilled in pre-hospital emergency care, in line with the consolidated international standards (i.e. Pre Hospital Trauma Life support - PHTLS, Advanced Trauma Life Support – ATLS). To meet clinical timelines, rotary wing MEDEVAC assets are increasingly been used. Healthcare personnel should be therefore qualified to perform in Helicopters and provide in-flight treatment.

Although EU can deploy operations and missions anywhere in the world, recent examples have mainly occurred in Europe and Africa. The exact environment for the delivery of the services cannot be defined in detail beforehand but can be generically described as a remote area, not exposed to opposing forces or direct threats. Similarly, the duration of the operations and missions could vary but it can be assessed that the services will be initially required for an initial period of 1 year, which could be extended.

4 RESPONSES

The responses should be provided electronically to the above mentioned mail address by 06 May and should follow as much as possible the following format:

²: http://eda.europa.eu/docs/default-source/eda-publications/eda_csop

Title

[**Company name**] response to EDA market survey for in-theatre helicopter MEDEVAC services.

Part I: Technical description

This part will provide an overall description of the available solution(s). It will include as much as possible details on past performances. At minimum it will contain information about the type of aircraft available and its main characteristics in terms of airworthiness and equipment, transport capacity, communication equipment, medical devices and any other relevant technical aspect and in particular:

- Capacity Pax+ pilot
- Useful load
- Cabin/s configuration
- Number of litters
- Winch/hoist
- MTOW (maximum take-off weight)
- Take off power
- Rotor diameter (main and tail rotor)
- Fast cruise Speed
- Range
- Hover and service ceiling
- Landing requirements (ability to land on difficult or unprepared terrains)
- Operating environment
- Night capability, including type (night vision, goggles, FLIR)
- Ergonomics (type of doors, floors, room availability for additional medical equipment)
- Necessary flight certified medical equipment

It will also include information on qualifications/training and experience of flight, medical and maintenance crews.

Part II: Financial description

This part will include an order of magnitude of prices and commercial conditions. All prices shall be referred in EUROS (€) at the economic conditions of April 2016. This will include in particular, initial costs, average price per flight hour and operating costs other than those related to services such (e.g. sustainment/accommodation of the personnel, travel costs) and any other associated information.

Part III: Management related issues

This part will include any relevant limitation or parameter which may influence delivery of the services e.g. minimum notice to deliver services, restriction on geographic location or environment, certification and qualification issues.

Part IV: Logistic support related issues

This part will include all aspects related to support, maintenance and logistics. In particular it will contain information concerning arrangements in place for the transportation, testing and storage of the fuel, acquisition of spare parts or leasing of equipment. It will also include any relevant information concerning the accommodation and sustainment of the personnel, shelters etc.

Part V: Legal and commercial issues

This part will include aspects related to insurance and liability considerations; limitations and/or conditions for deploying in crisis-management operations, restrictions related with specific operating environments, export and/or applicable law restrictions, etc.