First Sergeant Lessons Learned at the Joint Readiness Training Center (JRTC)

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During the last year, while serving as an observer/controller at the JRTC, I observed my peers perform the duties of first sergeants (1SGs) in light, mechanized, and Stryker Infantry battalions. Great noncommissioned officers (NCOs) face the daily challenges of the contemporary operational environment every day, arriving at common-sense solutions. The purpose of this article is to share some of those solutions. These techniques and possible solutions may not work for every situation or every unit. However, they may serve as starting points from which to focus unit training and develop standing operating procedures (SOPs) in preparation for unit deployments in support of Operation Iraqi Freedom, Operation Enduring Freedom, and other potential combat environments.

Discipline

Good leadership develops discipline. A battalion commander of the 22nd Infantry fighting in France, giving his views on the necessity for emphasis on discipline during training, stated: "Many casualties were incurred among officers and non-commissioned officers (NCOs) in some of my companies, because they literally had to lead the men by the hand to insure accomplishment of their mission. However, the companies whose commanders had required a high standard of discipline suffered fewer casualties and were able to move faster in the attack than those in which discipline was lax."

While we speak of the importance of leadership in battle we must not forget that it is also important during the training periods prior to combat. It is during these periods that the discipline, which must be present on the battlefield, is developed. The degree of discipline attained is in direct proportion to the leadership of the commander.

Combat Lessons #5, Headquarters US Army, 1944.

The best thing a 1SG can do to prepare his unit for combat is ensure his Soldiers operate as a well-disciplined unit. The 1SG, more than anybody else in the company, is the cornerstone for discipline. He sets the standard in everything he does. The Soldiers will follow whatever example he sets, whether it is good or bad. We have 19-year-old young adults in theater today, making life-and-death decisions. For the most part, they are doing great things. However, when these young Soldiers make bad decisions, you will usually find a leader not setting the right example. The 1SG, with the help of his platoon sergeants, must always set the right example. First sergeants with bad attitudes usually have units with bad attitudes.

Combat Inventory Control for Weapons and Sensitive Items

Preparation will pay dividends in accounting for weapons and sensitive items. One particular 1SG spent the time to set up his weapons and all components in accordance with his sensitive-items list in standard numerical order. The first weapon drawn would also have the first M-68, PEQ-2, or whatever other component is listed first on the sensitive-item sheet mounted on that particular weapon. This technique expedited drawing and turning in weapons and was a great asset in tracking weapons and sensitive items once medical evacuation procedures were initiated during combat operations.

Cultivating Junior Leaders: Enforce Troop Leading Procedures

Technical Sergeant Brehard, 330th Infantry: "When the situation permits, get the men out of their fox holes and have them move around a bit. Let them contact other members of the squad. Have them observe shell holes in the area so that they realize enemy fire wasn't as close or as concentrated as they may have thought. It pays to relieve battle tension in this way."

The ability to sense the men's needs, and the initiative and resourcefulness to supply those needs cannot develop in an NCO whose responsibility is not firmly fixed and who depends upon some higher officer for routine instructions.

Combat Lessons #9, Headquarters US Army, 1945.

Units across the U.S. Army struggle with the lack of experienced junior leaders, especially team leaders. Out of sheer necessity, many units fill their team leader positions with privates, straight from entry-level training. These Soldiers have not been in the unit long enough to understand the SOP and they lack the experience required to enforce them. This is where the 1SG has to get personally involved. Junior enlisted Soldiers will look to him for guidance. Many times units roll out of a forward operating base (FOB) with no water in their canteens because the team leaders did not conduct proper pre-combat inspections (PCI) and pre-combat checks (PCC). It is the 1SG's job to conduct thorough random inspections to ensure the standard is being met. The level and extent of the 1SG PCI/PCC must be based on the experience level and demonstrated performance of the team leaders.

The 1SG must ensure that all attachments are involved in the inspection process. The first step is for the 1SG to personally greet each attachment and integrate them into the company. In one situation, attached transportation Soldiers arrived at the situational training exercise lanes without ammunition because no one in the company thought to conduct PCI/PCC on the attachment. If the company SOP makes the 1SG responsible for attachment inspections, he can then delegate PCC down to a lower level and do random PCI to be sure inspections are done to standard. This also holds true for Iraqi Defense forces or Afghan Army soldiers attached to your company in theater.

Post-Mission Recovery Operations

Good mechanics say, "The job isn't finished until the tools are cleaned and put away for the next job." The same is true for military operations. Good units, like good mechanics, practice post-mission recovery operations on all vehicles, weapons, and personnel immediately upon returning to a secure area. This procedure ensures the unit will be ready when one of those "hey you" missions unexpectedly comes up.

Physical Fitness and Realistic Training

Evacuation Methods Informal Report, XIV Corps, Solomon Islands...

—-By Litter "Evacuation by litter bearers was difficult, tiring, time-consuming, and involved distances averaging two or three miles, and five to six miles in some instances. Many more litter bearers had to be utilized than under ordinary conditions. Litter carry in many cases required as high as 16 men per patient over almost impassable terrain and can be counted as least efficient...

Combat Lessons #2, Headquarters US Army, 1944.

Prior training and physical fitness are a must for all company personnel. The units that do the best at JRTC and then in theater are the ones that have trained the most prior to their arrival and conducted an extensive physical fitness program. But training must also be a part of the physical fitness program. 1SGs must ensure that physical training (PT) reflects what the unit will encounter in theater. Commanders will want an extensive program. The 1SG has the most experience and can offer the best advice. Most combat units will live in their body armor, so Soldiers must do PT in body armor. Buddy carries and first-responder training are great if done to standard and are a must to prepare Soldiers for future operations. Too often, Soldiers will practice carrying a casualty 100 meters and call that realistic training. In combat, the distances will be brutally long. Many times the casualties will be wearing their own body armor, which will add dead weight.

Another training opportunity is reflexive fire drills in the all types of realistic positions, to include, but not limited to, standing, kneeling, walking, and off-hand shooting. Another possibility is to pull the company high mobility multipurpose wheeled vehicle up on line and shoot from the driver's side, passenger's side, and gun turret positions. This is an opportunity for 1SGs to use their years of experience to advise company commanders on the most advantageous training for future deployments.

Casualty Evacuation (CASEVAC) and Soldier Medical Kit

Medic Lieutenant John D. McMaster reported the following incident as a typical example of the efficiency and courage of Medical Corps men in combat zones: "An American tank was hit by a German 88.mm shell on 20 July 1944 about 6 miles north of Periers, France. All of the crew left the tank immediately, except one badly wounded man who could not help himself. While the tank was still under fire, members of the 8th Infantry Regiment Medical Detachment went into the vehicle and in 10 minutes had removed the wounded man, who had lost both legs. Emergency treatment was given on the spot and 30 minutes later the casualty was received at a field hospital in the rear. There appropriate dressings were applied and the patient sent to a Base Hospital about 8 miles farther back, where be arrived with wounds treated and dressed, a little more than 2 hours after being wounded."

First Aid Colonel Charles H. Coates, an observer with the Twelfth Army Group, France: "Too few wounded men apply their own aid dressings; too many simply wait until the aid men arrive. The individual line soldier's responsibilities for his own first aid must be stressed continually.

Combat Lessons #5, Headquarters US Army, 1944.

The 1SG's major responsibility in combat operations is to direct the CASEVAC plan. Pre-deployment training of all Soldiers will pay dividends in the long run. Most casualties in Iraq or Afghanistan result in loss of limb or pneumothorax injuries.

The possibility of loss of limb, a common injury in improvised explosive device strikes, requires that all Soldiers be well trained in tourniquet use. Current training dictates that applying a tourniquet is the first thing a person will do in case of any serious extremity wound. Purchasing a combat application tourniquet (CAT) (NSN 6515-01-521-7976) for all personnel will ensure that Soldiers have the means to stop a buddy from bleeding to death from loss of a limb.

The other largest casualty-producing injury is a tension pneumothorax wound. This type of injury occurs when a Soldier has a projectile enter his chest cavity. Once the round or shrapnel enters the body, it causes air to enter the wound. This air cavity puts extreme pressure on either the heart or lungs, or both, causing them to fail. Frequently this occurs when the round comes in from the side, goes through the upper arm, and enters the body armor through the arm hole. For this reason, if the unit's ballistic body armor has the arm protectors, the Soldiers should be wearing them.

In order to effectively treat a tension pneumothorax wound, first-responder training must include how to place an 18-gauge needle into the chest cavity to create a medical "air release" valve. Most medics are familiar with this procedure and can train Soldiers on the technique. The first-responder medical class is essential training for Soldiers getting ready for combat. If the SOP in your company is still two field pressure dressings in an ammo pouch, you need to review this standard. Each Soldier should have, at a minimum, a CAT or improvised tourniquet, one roll of two-inch tape, Israeli bandage, cravat, three 18-gauge catheters, nasal airway opener, and surgical gloves. The old ammo pouches make great holders for all the medical gear.

SOP for CASEVAC to consider integrating into your unit:

- Forward logistics element with medic teams internal to the company. The Stryker brigades are doing this well.
- Employing a five-ton truck or compatible vehicle to back-fill extra rations, water, and ammunition into the company fight. This also ensures that you will have a backhaul capability for personnel killed-in-action, detained transport, or an unexpected requirement.
- Having a succession of command for the company commander in case he is incapacitated. The same should hold true with the 1SG and platoon sergeants to ensure continuity of NCO tasks. E-5s often perform CASEVAC because no one is sure who should handle this task in the absence of the 1SG.
- A separate company CASEVAC frequency will pay off in the long run, especially if the company is in a dynamic and demanding fight, tying up the primary net.
- Attaching a squad under the 1SG's control as a CASEVAC quick reaction force. Although no one wants to lose this much combat power, companies that have done it performed very quick CASEVAC from the objective. This is not much different than having assigned prisoner-and-search teams or demolition teams.
- Whenever the 1SG has to perform CASEVAC procedures back to the combat support area, he should have, at a minimum, communications with the company and combat power for security. He should brief the routes and provide an overlay to all drivers, truck commanders, and personnel manning the radio in the company command post and conduct radio checks with the company once they reach the corps area support hospital (CASH) and upon leaving en route back to the company. These procedures ensure that if the CASEVAC is hit on the way to or from the CASH, the company will know where to send help.
- Tying chem lights on body armor works well for personnel recovery in low-light situations.
- Carrying "bump cards" on each Soldier in triplicate. These cards list, on the front side, a Soldier's name, rank, Social Security Number, company-battalion-brigade information, blood type, and battle roster number. The back side of the card usually contains a breakdown of all sensitive items and specialized gear. The Soldier fills out his card before combat. If the Soldier is wounded, one copy goes to the CASH, one copy goes to the 1SG, and one copy stays with the Soldier.

Most of these ideas worked during the mass casualty drill at JRTC, the center's most demanding training. Hopefully we will never take that many casualties in a real-life scenario, but JRTC is here to test all systems to the breaking point, so we will know what needs to be fixed.

Protecting Your Soldiers' Eyes

One of the safety issues stressed at JRTC is wearing ballistic eyewear. Fifteen percent of all combat-related injuries in country are eye related. Of all wounds, these are the most avoidable. This is an area where the 1SGs must hold the company to the highest standards. Soldiers should never leave the FOB without ballistic eyewear. Do not allow Soldiers to go without it. It may be beneficial to order a second pair for each Soldier before you leave the states so everyone will have a back-up pair.

Plan, Prepare, and Practice Vehicle Recovery

Be Winch Conscious: Colonel Walter A. Goodrich, Coast Artillery Corps, Observer-, United Kingdom: "I have found a considerable number of motor-vehicle drivers who know little or nothing about the use of the truck winch. Also many gun crew members, including a major portion of the section chiefs, are not familiar with this device, Since the winch can perform so many varied and useful duties in getting in and out of position, lifting heavy loads, etc, it would seem extremely important for battery officers to stress its possibilities,"

Combat Lessons #3, Headquarters US Army, 1944.

You must recover vehicles from the battlefield, or they will become an information-operation theme for the enemy to exploit. With that in mind, plan for each level of recovery, from the least damaged, which can be recovered with company assets, to a complete loss that must be recovered by at least battalion-level assets. One method that works well is to use one leg from a 10K sling set on the front of each vehicle to aid in recovering downed vehicles. Another idea that works well is to buy heavy-duty rolling car jacks and keep them in each vehicle in case a tire must be changed. Have all personnel train this as a heavy weapons crew drill, so they can get their recovery times down. You will be glad you trained this when you are in the middle of a firefight and are trying to get a vehicle and all personnel out of the kill zone.

Finally, have a first aid kit in the vehicle stocked with enough supplies to treat at least four personnel (that is usually how many you will have in the standard gun truck). This procedure will help facilitate treating casualties in any type of vehicle attack. The NARP CASEVAC bag (NSN 6530-01-504-905) works well.

Summing Up

Although these ideas are not all encompassing, they may help to focus your unit in the right direction. Many of the ideas may be "old hat" for some 1SGs; however, hopefully they will help other less experienced NCOs. Like we say at JRTC: "There is no such thing as plagiarizing a great idea in the U.S. Army."