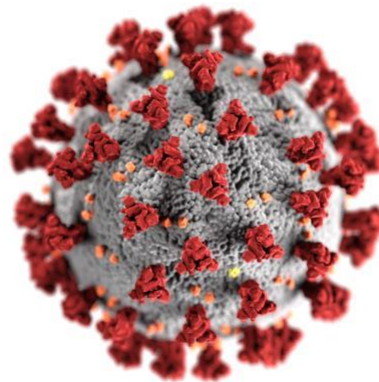




Coronaviruses are a family of viruses that cause disease in people and animals. COVID-19 refers to the “coronavirus disease 2019” and is a disease that can affect the lungs and airways. The World Health Organization classified COVID-19 as a pandemic on 11 March 2020. This fortnightly official statistic provides information on the number of Defence personnel who have had a COVID-19 PCR test administered through the UK national testing programme; and for the UK armed forces, the number of positive cases of COVID-19.

## Key Points



- As at 13 May 2022:
  - 546,992 COVID-19 tests were administered to Defence personnel as part of the national testing programme, of these:
    - 497,232 UK armed forces personnel.
    - 49,760 civilian personnel.
  - 29,868 armed forces personnel had a positive test for COVID-19 recorded in their medical record.

**Responsible statistician:** Head of Defence Statistics Health. **Tel:** 030 67984423

**Further Information/ mailing list:** [Analysis-Health-PQ-FOI@mod.gov.uk](mailto:Analysis-Health-PQ-FOI@mod.gov.uk) .

**Enquiries: Press Office:** 020 72183253.

**Background quality report:** <https://www.gov.uk/government/statistics/number-of-covid-19-tests-in-defence-and-positive-cases-in-the-uk-armed-forces-2021>.

Would you like to be added to our **contact list**, so that we can inform you about updates to these statistics and consult you if we are thinking of making changes? You can subscribe to updates by emailing [Analysis-Publications@mod.gov.uk](mailto:Analysis-Publications@mod.gov.uk).

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## Introduction

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Coronaviruses are a family of viruses that cause disease in people and animals. They can cause the common cold or more severe diseases, such as COVID-19. COVID-19 refers to the “coronavirus disease 2019” and is a disease that can affect the lungs and airways. The World Health Organization classified COVID-19 as a pandemic on 11 March 2020. A pandemic is where a disease is prevalent over a whole country or the world.

Defence, in line with the rest of the country, continues to follow guidance as provided by the UK government and devolved administrations.

[Living safely with respiratory infections, including COVID-19 - GOV.UK \(www.gov.uk\)](https://www.gov.uk/guidance/living-safely-with-respiratory-infections-including-covid-19)

In line with this plan, from 1 April 2022 the legal requirement in England to self-isolate for positive cases has been removed. Universal testing for the general public has now ceased as part of the Government’s strategy to live with and manage the virus. Defence may retain some minimal testing capabilities and continues to balance COVID related risks and Defence outputs across all establishments.

In April 2020 the House of Commons Defence Committee (HCDC) requested that the MOD provide fortnightly updates on the numbers of Defence personnel tested for COVID-19, and positive cases in the UK armed forces.

# Findings

## Defence Personnel – COVID-19 tests

Until April 2022 all symptomatic Defence personnel and household members were eligible for testing in England and Wales, Scotland and Northern Ireland. UK armed forces personnel were also eligible for testing where it was relevant to their military role, for example, those working in NHS healthcare settings or testing centres.

From 1 April 2022 in line with the Government’s plan for Living with COVID minimal testing is maintained to support Defence critical outputs.

The Ministry of Defence has been collecting data on the number of COVID-19 PCR tests administered to Defence personnel through the national testing programme. This includes data on UK armed forces personnel and civilian defence personnel (**Table 1**). People who live in the same household as UK armed forces or civilian personnel have not been included in the numbers presented.

**Table 1: Tests administered to Defence personnel who have attended the COVID-19 national testing programme, by Top Level Budget<sup>1</sup>, numbers<sup>2,3,4</sup>**

As at 13 May 2022

Top Level Budget	ALL	Service Personnel	Civilian Personnel
<b>ALL</b>	<b>546,992</b>	<b>497,232</b>	<b>49,760</b>
Navy	39,914	36,504	3,410
Army	313,467	301,158	12,309
RAF	2,506	2,242	264
UK Strategic Command	163,424	156,521	6,903
Other	27,681	807	26,874

Source: Top Level Budget (TLB) weekly returns.

<sup>1</sup> “Other” includes Defence Electronics and Components Agency, Defence Equipment & Support, Defence Infrastructure Organisation, Defence Nuclear Organisation, Defence Science and Technology Laboratories, Head Office, Oil & Pipelines Agency, Submarine Delivery Agency, UK Hydrographics Office.

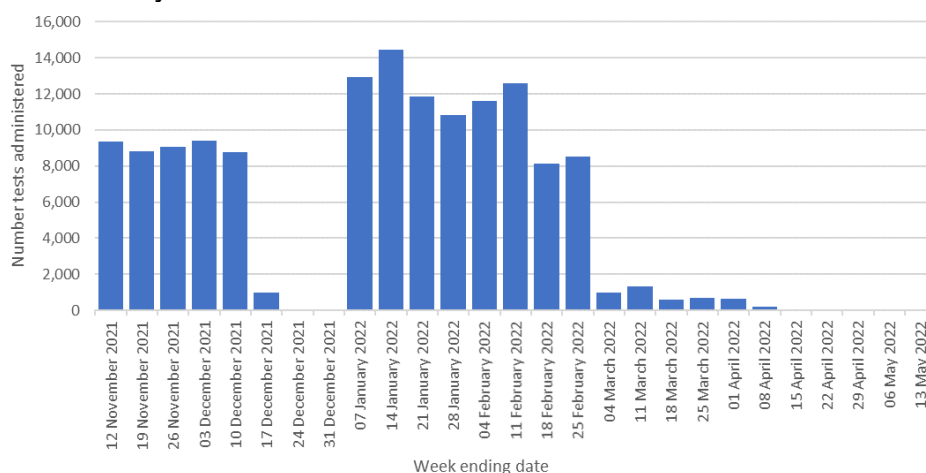
<sup>2</sup> Personnel report each week they have a test, thus personnel may have had more than one COVID test since the start of the pandemic.

<sup>3</sup> Excludes lateral flow tests.

<sup>4</sup> Prior to 25 February 2022 Army testing data included both PCR and LFD tests.

**Figure 1: Tests administered in the past six months to Defence personnel<sup>1</sup> who have attended the COVID-19 national testing programme<sup>2</sup>, by week, numbers<sup>3,4,5</sup>**

As at 13 May 2022



Source: Top Level Budget (TLB) weekly returns.

<sup>1</sup> Includes UK armed forces personnel and MOD civilians.

<sup>2</sup> Personnel who have attended the COVID-19 national testing programme over the previous six-month period. For full time series and numbers, please see the OpenDocument Spreadsheet (ODS) or Excel supplementary tables.

<sup>3</sup> Excludes lateral flow tests.

<sup>4</sup> Prior to 25 February 2022 Army testing data included both PCR and LFD tests.

<sup>5</sup> Data collection was suspended over the Christmas period and therefore the week ending 7 January 2022 represents the previous three weeks.

## Findings Continued

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### Positive test results in the UK armed forces

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Following a test for COVID-19, the results are provided to the individual's primary health care provider. For UK armed forces personnel, results are sent to Defence Primary Health Care (DPHC) and records show that, as at 13 May 2022, a minimum of **29,868** UK armed personnel had tested positive for COVID-19 (**Table 2**).

**Table 2: UK armed forces personnel<sup>1</sup> with a positive COVID-19 test result, by service and location<sup>2</sup>, numbers**

As at 13 May 2022

<b>Service/ Location</b>	<b>ALL</b>
<b>All services</b>	<b>29,868</b>
Navy	8,422
Army	13,441
RAF	8,005
<b>All locations</b>	<b>29,868</b>
UK	25,738
Overseas	4,130

Source: DMICP and NOTICAS.

<sup>1</sup> Personnel include all UK armed forces regular and reserve, trained and untrained personnel.

<sup>2</sup> Location is where the positive test result for the individual was first entered. This is not necessarily where personnel are currently located or where they were first exposed to COVID-19.

## Methodology

**This section provides a brief summary of the methodology and data sources; more detailed information is available in the Background Quality Report for this bulletin.**

### COVID-19 Testing Data

Until 1 April 2022, as part of the national testing programme<sup>[1]</sup> MOD civilians, contractors and UK armed forces personnel in certain settings were eligible for weekly workplace testing. These personnel and others not eligible for workplace testing could also access to Universal Testing Offers in line with what was available to the general public.

From 1 April 2022, in line with Government guidance on Living with COVID, testing is maintained on a minimal basis in support of Defence critical outputs. The tests may be administered at regional test centres, mobile testing units, in hospital or as home test kits.

The MOD require TLBs to report on a weekly basis, with returns submitted by 12:00 every Friday, specifying the number of personnel who have taken a PCR COVID-19 test over the previous 7 days for:

- Military (regulars and reservists, if mobilised or full-time reserve service).
- Civilian Defence personnel (civil servants and crown servants, other than members of the armed forces; and fixed defence contractors).
- Household persons (which are to include any persons living in the same household as military or civilian defence personnel).

Each weekly submission represents the total number of PCR COVID-19 tests administered to personnel during that week, who then also self-report a test has been administered. Thus, personnel who have been tested more than once will have been included in each week they had a test administered. TLBs are responsible for the accuracy of their testing data.

Limitations of the test data:

- As the test data is based on aggregate counts supplied by the TLB on a weekly basis, it is not possible to link the aggregate counts with other data such as the military personnel record or the civilian personnel record including demographic information or other data such as the military medical record.
- It is not possible to identify the total number of defence personnel who have or have not had a COVID test as personnel may be counted multiple times throughout the time period.
- It relies on Defence personnel informing their line management chain that they have had a PCR COVID-19 test administered.
- Although TLB aim to have all their data submitted every Friday, some of the data may not be available in time and thus will be included in subsequent bulletins, reported in the week the tests were administered. Thus, the number of new tests for the latest period cannot be derived by subtracting the number of tests in the previous fortnightly bulletin.
- MOD does not require reporting of the number of personnel mass tested using lateral flow devices for those attending defence sites or those accessing free LFD tests as part of the government initiative. However, until 25 February 2022, Army TLB were reporting both PCR and LFD tests in their weekly return.

The MOD does not receive any information from the national testing programme on the outcome of tests administered to MOD personnel.

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<sup>[1]</sup> <https://www.gov.uk/guidance/coronavirus-covid-19-getting-tested>

## Methodology continued

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### Positive COVID-19 Test Data

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It is the responsibility of UK armed forces personnel to inform their military GP of the outcome of their COVID-19 test. The information on positive test results are then documented in their military healthcare record by Defence Primary Health Care (DPHC).

UK armed forces personnel with a confirmed test result of COVID-19 were identified using;

- Electronic medical records (Defence Medical Information Capability Programme, DMICP) with a COVID-19-related Read code. Please note that DMICP is a live data source and subject to change. Date of data extract 16 May 2022.
- Notification of Casualty (NOTICAS) data where a positive test for COVID-19 was recorded. A casualty notification is raised when a member of the UK armed forces is admitted to hospital for more than 72 hours and/or where there is serious risk to life.

Location of where personnel were diagnosed with COVID-19 was identified as the first location at which a positive test result was entered for that individual. This is not necessarily where personnel are currently located or where they were first exposed to COVID-19.

The voluntary reserves not undertaking MOD tasks receive their primary medical care from the NHS. Any information on COVID-19 entered in an NHS record is not held by MOD thus has not been included in the figures presented.

MOD civilian personnel receive their primary medical care from the NHS. Their results are sent to the individual and their NHS GP, therefore Defence does not hold information on the number of positive tests for civilian personnel.

Limitations of the positive test data for UK armed forces:

- The reporting process relies on the individual reporting the positive test result to their military medical centre.
- Positive tests results were sourced from the military medical record, DMICP, using Read codes from the data warehouse where the Read code indicated a positive test for COVID-19 or coronavirus. Information entered using free text has not been included as the information is not held in the central data warehouse; therefore, the figures provided are a minimum.
- NOTICAS data relies on the chain of command/line manager and the medical officer completing the form documenting that a positive test has been received, thus the figures provided are a minimum.
- The data presented is the total number of cases, it is not possible from the data held to report how many personnel are affected by COVID-19 at a point in time.

DMICP and NOTICAS are live data sources and subject to change due to late reporting. Thus, the total number of new positive cases cannot simply be derived by subtracting the number of positive cases from the total presented in the previous fortnightly bulletin.

## Glossary

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**Army** - The British Army consists of the General Staff and the deployable Field Army and the Regional Forces that support them, as well as joint elements that work with the Royal Navy and Royal Air Force. Its primary task is to help defend the interests of the UK.

**Coronavirus** - Coronaviruses are a family of viruses that cause disease in people and animals. They can cause the common cold or more severe diseases, such as COVID-19.

**COVID-19** - COVID-19 refers to the “coronavirus disease 2019” and is a disease that can affect the lungs and airways. It is caused by a type of coronavirus.

**COVID Support Force (CSF)** – UK armed forces personnel stood at readiness to assist public services with their response to COVID-19.

**Defence Medical Information Capability Programme (DMICP)** - The DMICP programme commenced during 2007 and comprises an integrated primary Health Record (iHR) for clinical use and a pseudo-anonymised central data warehouse.

**Full time reserve service** - are personnel who fill service posts for a set period on a full-time basis while being a member of one of the reserve services, either as an ex-regular or as a volunteer.

**Lateral Flow Device/Test (LFD)** - used to test for COVID-19, similar to a pregnancy test, used for mass testing by schools/employers to test individuals who cannot work at home and maybe asymptomatic. This test gives results within two hours.

**Lockdown** - Lockdown is the shutting down of all non-essential activities to slow the spread of COVID-19. In the UK, this has seen strict limits imposed on daily life. The first UK lockdown was applied on 27 March 2020. This has formed the basis for each nations’ stay at home guidance.

**Mobilised reservists** - are volunteer or regular reserves who have been called into permanent service with the regular forces on military operations under the powers outlined in the Reserve Forces Act 1996.

**Navy** - Royal Navy, the sea-going defence forces of the UK, and Royal Marines, sea-going soldiers. Excludes the Royal Fleet Auxiliary Service (RFA).

**NOTICAS** - Notification of casualty is the name for the formalised system of reporting casualties within the UK armed forces.

**Pandemic** - A pandemic is where a disease is prevalent over a whole country or the world. The World Health Organization classified COVID-19 as a pandemic on 11 March 2020.

**PCR COVID-19 test** - The PCR COVID-19 test is the polymerase chain reaction test and is used when individuals have COVID symptoms, for confirmation of a positive test, if an individual has received an unclear result or if a member of the National Tactical Response Group. Tests are sent to a laboratory and can take up to 3 days for results to be available.

**Top level budgets** - The MOD comprises seven top-level budgets. The head of each TLB is personally accountable for the performance and outputs of their organisation.

**Royal Air Force (RAF)** - the aerial defence force of the UK.

**UK Armed Forces** - full time UK armed forces personnel, including nursing services and Gurkhas, naval activated reservists, mobilised reservists, Military Provost Guarding Service (MPGS), Non-Regular Permanent Service (NRPS) and reservist personnel. Unless otherwise stated, includes all trained and untrained personnel.

**UK StratCom** – UK Strategic Command, provides strategic and operational integration across the five war-fighting domains



## Contact Us

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