



Ministry
of Defence

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Reference: [REDACTED]

[REDACTED]

[REDACTED]

Date: 21 January 2014

[REDACTED]

Thank you for your email of 25 November 2013 where you requested the following information:

- 1. How many serving members of the armed forces have a nut allergy, including those who joined before the introduction of the JPA system?*
- 2. Of these what is the gender split?*
- 3. What are their medical gradings?*
- 4. Of those identified in point 1 how many have served abroad?*

I am treating your correspondence as a request for information under the Freedom of Information Act 2000.

Following clarification received on 19 December 2013, for part four, you requested:

- The total number of currently serving UK Armed Forces personnel with a nut allergy, who have been deployed outside the UK and the total number who have been stationed outside the UK.

A search for the information has now been completed within the Ministry of Defence, and I can confirm that the information in scope of your request is held. The information you requested is below.

As at 1 December 2013, **111** UK Armed Forces personnel had a code for a nut allergy entered on their electronic medical record (DMICP¹). Of these:

- **87** were male and **24** were female.
- **59** were Medically Fully Deployable (MFD), **25** were Medically Limited Deployable (MLD), and **27** were Medically Non-Deployable.

Please note that the MLD and MND personnel may be downgraded for reasons other than their nut allergy.

Of the **111** personnel identified as having a nut allergy on DMICP, **90** have been deployed outside the UK or have been stationed outside the UK.

Under section 16, you may find it useful to note the following:

UK Armed Forces comprises all UK Regular Forces and full time UK Non-Regular Forces but excludes mobilised reservists.

Stationed abroad data is provided from 2007 and are based on the stationed location of the individual as recorded in the 'Assignment Location' field of the electronic administration records (JPA² system). The figures are based on Service personnel's stationed location and not their location of residence - where personnel work isn't necessarily where they live. Personnel deployed on operations to an area away from their stationed location are shown against their most recent stationed location. Personnel data prior to April 2007 ('legacy data') are currently held in a format which is not readily accessible.

The JPA `Move and Track` system has been used to identify personnel deployed from April 2007 onwards. Departmental legacy systems have been used to identify personnel deployed prior to April 2007. Please note the legacy systems only hold information on deployments to Iraq (from 19 March 2003) and Afghanistan (from 7 October 2001). No data relating to other operations prior to 1 April 2007 are held. Information on personnel deployed to Afghanistan from 1 January 2003 to 14 October 2005 is stored in individual records and is not readily accessible.

Overseas deployments are defined as the total number of personnel deployed outside the UK's borders. This includes all military personnel mobilised for contingency operations, wartime operations, United Nations peacekeeping operations and humanitarian operations. It also includes personnel on board ships leaving their home port. It is not possible to separate those leaving for training exercises from those deployed on operations.

In accordance with Defence Statistics rounding policy, numbers for personnel deployed or stationed outside the UK have been rounded to the nearest 10. Numbers ending in '5' have been rounded to the nearest 20 to avoid systematic bias.

Personnel can be awarded a Medical Deployability Standard (MDS) of either Medically Fully Deployable (MFD), Medically Limited Deployable (MLD) or Medically Non Deployable (MND).

¹ Defence Medical Information Capability Programme

² Joint Personnel Administration

The Defence Medical Information Capability Programme (DMICP) is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers. DMICP was rolled out in 2007 and legacy medical data for currently serving personnel was migrated across during rollout. The data presented here has been extracted from the DMICP management information system and matched to JPA (personnel) data.

The electronic patient record has information that is Read coded. Read codes are a set of clinical codes designed for Primary Care to record the every day care of a Patient. They are part of a hierarchical structure and form the recognised standard for General Practice.

The READ code SN583 was used to extract nut allergy cases from DMICP.

Any data entered as free text only in the patients' medical record will not be included in the figures presented as this information is not available in the data warehouse. Where a patient has failed to inform their GP they have a nut allergy, they will not be included in the dataset.

There has been no clinical audit of the accuracy of the data recorded on the patient's record.

If you are not satisfied with this response or you wish to complain about any aspect of the handling of your request, then you should contact me in the first instance. If informal resolution is not possible and you are still dissatisfied then you may apply for an independent internal review by contacting the Information Rights Compliance team, 1st Floor, MOD Main Building, Whitehall, SW1A 2HB (e-mail CIO-FOI-IR@mod.uk). Please note that any request for an internal review must be made within 40 working days of the date on which the attempt to reach informal resolution has come to an end.

If you remain dissatisfied following an internal review, you may take your complaint to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not investigate your case until the MOD internal review process has been completed. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website, <http://www.ico.gov.uk>.

I hope you find this information useful

Yours sincerely,

Defence Statistics Health Head (B1)