



Ministry of Defence

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20 December 2016

E-mail address: [REDACTED]

Dear [REDACTED],

Thank you for your email of 25 November in which you requested the following information:

"Could you please provide details of the number of soldiers who have served as Ammunition Technicians, Ammunition Technical Officers who have been diagnosed with PTSD, as assessed by MOD Specialist Mental Health Services. I would like figures from 2009 onwards."

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

A search for the information has now been completed within the Ministry of Defence, and I can confirm that information in scope of your request is held. During the period 1 January 2009 and 30 September 2016 (latest data available) of the 1,147 UK regular Army personnel who have served or are serving as Ammunition Technicians and Ammunition Technical Officers since 2009, ten (0.9%) had an initial assessment for Post-Traumatic Stress Disorder when attending a Ministry of Defence Department for Community Mental Health (DCMH) centre since serving as Ammunition Technicians or Ammunition Technical Officers from 2009*.

Under section 16 of the FOIA, you may wish to be aware that UK Armed Forces personnel have access to Specialist Mental Health Services, by referrals made by their GP, provided through MOD DCMH or MOD In-patient providers. DCMH are specialised psychiatric services based on community mental health teams closely located with primary care services at MOD sites in the UK and abroad. All UK based and aero-medically evacuated Service personnel based overseas requiring in-patient admission are treated by one of eight NHS trusts in the UK which are part of a consortium headed by the South Staffordshire and Shropshire NHS Foundation trust. UK based Service personnel from British Forces Germany were treated at Guys and St Thomas Hospital in the UK up until April 2013 and from this date, at Gilead IV hospital, Bielefeld, under a contract with Soldiers, Sailors and Airmen Family Association through the Limited Liability Partnership.

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, Ground 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, <https://ico.org.uk>.

Yours sincerely,


Disclosure and Litigation Leader

* Notes:

1. DCMH staff record the initial mental health assessment during a patient's first appointment, based on presenting complaints. The information is provisional and final diagnoses may differ as some patients do not present the full range of symptoms, signs or clinical history during their first appointment. The mental health assessment of condition data were categorised according to the World Health Organisation's International Statistical Classification of Diseases and Health-Related Disorders 10th edition (ICD-10).
2. This response only captures the patients that were referred to a MOD DCMH and does not represent the totality of mental health problems in the Armed Forces as some patients can be treated wholly within the primary care setting by their GP or medical officer.
3. It is not possible from centrally held data to identify whether a mental health episode is associated with serving as an Ammunition Technician or Ammunition Technical Officer.
4. DCMH staff record the initial mental health assessment during a patient's first appointment, based on presenting complaints. The information is provisional and final diagnoses may differ as some patients do not present the full range of symptoms, signs or clinical history during their first appointment. The mental health assessment of condition data were categorised according to the World Health Organisation's International Statistical Classification of Diseases and Health-Related Disorders 10th edition (ICD-10).
5. Defence Statistics receive data from DCMH for all UK Armed Forces personnel from the following sources :
 - Between 01 January 2007 and 30 June 2014, data was provided by DCMHs to Defence Statistics in monthly returns.
 - For the period 01 April 2012 to 30 June 2014, new episodes of care data were also sourced from the electronic patient record held in Defence Medical Information Capability Program (DMICP) in addition to those provided by DCMH in monthly returns.
 - Since 01 July 2014, DMICP has been the single source of DCMH new episodes of care data.
6. JPA is the most accurate source for demographic information on UK Armed Forces personnel and is used to gather information on a person's Service, Main Trade and Competence.
 - A search of JPA for a Main Trade of 'RLC Ammo Tech' and 'Ammunition Technician - RLC' was used to identify Ammunition Technicians.
 - A search of JPA for a Competence of 'Mil Symbol[ato]Army]', 'RLC[ATO]Army]' was used to identify Ammunition Technical Officers.
5. The data in this response includes UK regular Army personnel only. JPA data was extracted at 13 December 2016