



Ministry
of Defence

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[REDACTED]

11th August 2015

Dear [REDACTED]

Thank you for your email of 14 June 2015 requesting the following information:

*"I am interested in learning about how the Royal Navy supports those *in-service* personnel with mental health conditions.*

I would like quantitative data in relation to in-service personnel on:

- * The number of diagnostic assessments related to mental health conditions.*
- * The number of anti-depressants issued.*
- * The number of anti-psychotics issued.*
- * The numbers of talk-therapy sessions conducted, such as CBT.*
- * The number of other forms of therapy, such as EMDR.*

I am happy to discuss alternative ways of making this request to stay within statutory limits and other criteria such as to preserve national security. Ideally the data would be on an annual basis for a specific number of years and have comparative data also, such as the total number of in-service personnel regardless of disability."

On the 13 July 2015 following communications with us you refined your request to the following:

"I am happy to receive information for not only the Royal Navy, but the Royal Marines also. If it were possible to show the information for both in separate columns that would be help.

I am happy to receive the numbers of personnel prescribed anti-depressants and anti-psychotics and would be grateful if these could be on separate rows. It would also be helpful to know the numbers who have not been prescribed either of these to contextualise the data.

In relation to the numbers of personnel receiving talk therapy, I am happy to receive this information from 2012 onwards and would also like the numbers not provided with it.

On this basis it would be helpful for the data provided to be based on the figures for each year since 2012."

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

I am writing to confirm that MOD holds the information on the subject you have requested.

Table 1 presents information on the number and percentage of personnel at risk of Royal Navy and Royal Marine personnel who had an initial assessment for a mental disorder at a Department of Community Mental Health (DCMH) and admissions to in-patient providers (MOD Specialist Mental Health Services) between 2012/13 and 2013/14.

Table 1: Royal Navy and Royal Marine personnel assessed with a Mental Disorder at MOD Specialist Mental Health Services¹ 2012/13 – 2014/15, Number and percentage personnel at risk.

Mental Disorders	2012/13		2013/14		2014/15	
	n	%	n	%	n	%
Royal Navy	586	2.1	617	2.4	649	2.5
Royal Marines	120	1.5	111	1.4	142	1.8

Source: DS (Health) Database, DMICP, SSSFT, BFG

1. MOD Specialist Services includes attendances at Department of Community Mental Health (DCMH) and admissions to in-patient providers.

Table 2 presents information on the number of Royal Navy and Royal Marine personnel who have been discharged from a MOD DCMH, and the number and percentage of these who have had talk therapy during their care. Please note the numbers discharged will be less than the numbers assessed as some personnel will still be receiving care (see section 16 advice and assistance for further information).

Table 2: Royal Navy and Royal Marine personnel who have been discharged from MOD DCMH care and received therapy, 2012/13 – 2014/15. Number.

		2012/13	2013/14	2014/15
Royal Navy	Total Discharged	384	416	462
	<i>of which had talk therapy²</i>	190	218	232
	<i>not given talk therapy</i>	194	198	230
	<i>of which had other therapy</i>	48	77	88
Royal Marines	Total Discharged	73	70	76
	<i>of which had talk therapy²</i>	38	33	38
	<i>not given talk therapy</i>	35	37	38
	<i>of which had other therapy</i>	5	12	15

Source: Mental Health Discharge DMICP template

1. See Section 16 for the list of therapies included as talk therapies. Please note MOD classes EMDR as a talk therapy

2. Note an individual may have had more than one talk therapy and more than one 'other' therapy.

Table 3 presents information on the number of Royal Navy and Royal Marines personnel who were in the Armed Forces as at 1 April at the end of the financial year and who had been prescribed anti-depressant drugs and anti-psychotic drugs. Please note these numbers will not include any prescriptions for the above drugs for personnel who left service during the financial year.

The numbers include personnel who have received a prescription from their GP or a MOD DCMH and therefore will not match the numbers assessed with a mental health disorder as presented in Table 1.

Please note anti-psychotics are generally prescribed only for mental health conditions but can be used for relieving anxiety, restlessness and some may be used in nausea and vomiting. Some anti-depressants can be used for other things as well eg amitriptyline can be used for neuropathic pain.

Table 3: UK Armed Forces personnel¹ prescribed anti-depressant drugs and anti-psychotic drugs by service and financial year, 2012/13 – 2014/15, numbers^{2,3}.

		2012/13	2013/14	2014/15
Royal Navy	<i>Personnel prescribed Anti-depressant drugs</i>	723	807	869
	<i>Personnel not prescribed Anti-depressant drugs</i>	25,665	24,879	24,426
	<i>Personnell prescribed Anti-psychotic drugs</i>	29	38	64
	<i>Personnel not prescribed Anti-psychotic drugs</i>	26,359	25,648	25,231
Royal Marines	<i>Personnel prescribed Anti-depressant drugs</i>	113	182	157
	<i>Personnel not prescribed Anti-depressant drugs</i>	7,604	7,669	7,541
	<i>Personnell prescribed Anti-psychotic drugs</i>	10	7	16
	<i>Personnel not prescribed Anti-psychotic drugs</i>	7,707	7,844	7,682

Source: DMICP

1. Trained and untrained Regular and Full Time Reserve Naval Service Personnel as at 1 April at the end of the financial year.

2. Personnel prescribed anti-depressant drugs or anti-psychotic drugs are counted once per financial year.

3. Patients will be counted twice if they were prescribed both Anti-depressant drugs and Anti-psychotic drugs within same financial year.

Under section 16 of the Act (Advice and Assistance), you may find it useful to note the following:

Mental Health data

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 (SSSFT). UK based Service personnel from British Forces Germany (BFG) 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 (SSAFA) through the Limited Liability Partnership.

Defence Statistics receive data from DCMH and in-patient providers for UK regular Armed Forces personnel from the following sources :

DCMH

- a) Between 01 April 2012 and 31 March 2014, the data provided was sourced from DCMH monthly returns and thus initial diagnosis was supplied using aggregate level ICD 10 data.
- b) Between 01 April 2012 to 31 May 2014, new episodes of care data was sourced from the electronic patient record held in Defence Medical Information Capability Program (DMICP) in addition to those provided by DCMH in monthly returns.
- c) 1 June 2014 to date, new episodes of care was sourced using DMICP data

In-patient

- d) Since January 2007, SSSFT and Gilead IV hospital Bilefield have submitted relevant in patient records.

Centrally compiled information on whether a patient has received therapies such as CBT and EMDR is available once a patient has been discharged from the care of a MOD Department of Community Mental Health (DCMH).

The talk therapies included in this analysis were as follows:

- Behavioural activation therapy
- Brief solution focused therapy
- Cognitive-behaviour therapy
- Couple Therapy
- Eye Movement Desensitisation and Reprocessing - EMDR
- Group psychotherapy
- Guided self help cognitive behavioural therapy
- Other psychotherapy Not Otherwise Specified
- Problem solving therapy
- Supportive Counselling
- Trauma focused psychotherapy Not Otherwise Specified

These were included under clinical advice.

Templates capturing information at discharge from MOD DCMHs were introduced in April 2012. With any new data collection system, there is a training burden; user inexperience with the new mental health templates in DMICP may have affected coverage and accuracy. Also there is currently no way of obtaining information on therapies received for patients who are still in care until they have discharged; therefore the numbers presented in this response should be treated as a minimum.

The information presented in Table 2 is based on coded information recorded in the electronic data warehouse. The use of templates and codes is not mandatory and clinicians may enter text into the patient record which cannot be centrally analysed. Therefore the numbers presented in Table 2 should be treated as a minimum.

Prescribed data

Data are compiled by MOD from the Defence Medical Information Capability Programme (DMICP) data warehouse. The DMICP programme commenced during 2007 and comprises an integrated primary Health Record (iHR) for clinical use and a pseudo-anonymised central data warehouse. Prior to this data warehouse, medical records were kept locally, at each individual medical centre. By 2010, DMICP was in place for the UK and the majority of Germany. Rollout to other overseas locations commenced in November 2011. The data between 2007 and 2010 may be incomplete due to the rollout of the electronic medical record system, therefore numbers presented are a minimum.

Medical data is stored in the DMICP data warehouse using British National Formulary chapter (BNF). Data on Service personnel with British National Formulary chapter (BNF) entered on their medical record relating to prescriptions for anti-depressant drugs and anti-psychotic drugs has been sourced from DMICP. The data entered has been collected using the following British National Formulary chapter (BNF) extracted on 04 August 2015:

4.2 – Anti-psychoses and related disorders

4.3 - Anti-depressant drugs

Please note if any of the descriptions or BNF listed above were recorded as free text only in the patient medical record they will not be included in the above search.

Would you like to be added to our contact list, so that we can inform you about updates to our statistical publications covering mental health in the UK Armed Forces and consult you if we are thinking of making changes? You can subscribe to updates by emailing: DefStrat-Stat-Health-PQ-FOI@mod.uk.

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

I hope this is helpful.

Yours sincerely

Defence Statistics (Health) Head (B1)