



# Ministry of Defence

Ref: FOI2018/10589

Ministry of Defence  
Abbeywood North  
Bristol  
BS34 8JH  
United Kingdom

Telephone: 03067 984423

E-mail: [Def-Strat-Stat-Health-PQ-FOI@mod.gov.uk](mailto:Def-Strat-Stat-Health-PQ-FOI@mod.gov.uk)

13 September 2018

E-mail: [REDACTED]

Dear [REDACTED],

Thank you for your email of 14<sup>th</sup> August 2018 requesting the following information.

*"I would like to know the number of casualties and fatalities suffered while serving the Royal Air Force in the role of a Pilot between 2012 and the present; I would also like to know the number of casualties and fatalities suffered while serving the Royal Air Force in any other role, distinct from the information regarding Pilots.*

*If possible, I would like the information presented by year or month, in an electronic copy"*

I am treating your correspondence as a request for information under the Freedom of Information Act 2000. A search for the information has now been completed within the Ministry of Defence, and I can confirm the information in scope of your request is held. Some of the information falls entirely within the scope of the absolute exemptions provided for at section 40 (Personal Data) of the FOIA and has been withheld.

Section 40(2) has been applied to some of the information to protect personal information as governed by the Data Protection Act 2018. Numbers fewer than five are suppressed to reduce the possible inadvertent disclosure of individual identities; secondary suppression has been applied so numbers cannot be derived. This is also in line with JSP200 Statistics Disclosure Guidance. Section 40 is an absolute exemption and there is therefore no requirement to consider the public interest in making a decision to withhold the information.

Defence Statistics Health have interpreted 'casualty' to mean all those personnel who have died or been injured/ill on operations.

**Table 1** below presents the information you have requested by year.

**Table 1: RAF Pilot deaths<sup>1,2</sup> and casualties<sup>2,3</sup> on operations, numbers  
1 January 2012 to 30 June 2018**

Year	All	2012	2013	2014	2015	2016	2017	2018 <sup>4</sup>
All	505	105	125	108	44	39	53	31
<b>Deaths<sup>1,2</sup></b>	<b>6</b>	<b>2</b>	<b>0</b>	<b>1</b>	<b>2</b>	<b>0</b>	<b>0</b>	<b>1</b>
Pilots	1	0	0	0	1	0	0	0
All others	5	2	0	1	1	0	0	1
<b>Casualties<sup>2,3</sup></b>	<b>499</b>	<b>103</b>	<b>125</b>	<b>~</b>	<b>~</b>	<b>39</b>	<b>53</b>	<b>30</b>
Pilots	24	6	9	~	~	0	5	0
All others	475	97	116	106	39	39	48	30

**Source: Defence Statistics Health**

1. Figures are for all regular personnel and for 'on duty' reserve personnel only.
  2. Figures are for the following causes of death and casualty: Hostile action, accidents, natural causes, assaults, self-harm and cause not yet known.
  3. Initial NOTICAS and Aeromedical evacuations (numbers do not include connecting flights and reverse aeromedical evacuations. Aeromedical Evacuation is defined as patient movement towards the UK<sup>a</sup>; patient movement in any other direction is defined as Reverse Aeromedical Evacuation).
  4. Up to and including 30 June.
- ~ Data presented as "~" has been suppressed in accordance with Joint Service Publication (JSP) 200.

Under Section 16 (Advice and Assistance) you may find it helpful to note the following:

Figures are for the following causes of death and casualty on all operations: Hostile action, accidents, natural causes, assaults, self-harm and cause not yet known.

Death figures are for all regular personnel and for 'on duty' reserve personnel only.

In line with JSP 200 (April 2016), the suppression methodology has been applied to ensure individuals are not inadvertently identified dependent on the risk of disclosure. Numbers fewer than five have been suppressed for casualties and presented as '~'. Where there was only one cell in a row or column that was fewer than five, the next smallest number or total has also been suppressed so that numbers cannot simply be derived from totals.

Defence Statistics Health compiles the Department's authoritative deaths database for all UK regular Armed Forces personnel who died whilst in Service going back to 1984. Information is compiled from several internal and external sources from which we release a number of internal analyses and external National Statistics Notices.

Casualty data has been sourced from the Notification of Casualty system (NOTICAS) and Aeromedical evacuation data (AEROMED)

NOTICAS is the name for the formalised system of reporting casualties within the UK Armed Forces. The NOTICAS reports raised for casualties contain information on how seriously medical staff judge their condition to be. They are not strictly medical categories but are designed to give an indication of the severity of the injury or illness to inform what the individual's next of kin are told.

Not all casualties will have a NOTICAS raised (e.g. less severe casualties in the UK that do not require hospitalisation); therefore these records provided should be treated as the minimum.

The NOTICAS system medically categorises casualties as either:

- Very Seriously Injured/ill (VSI) – A patient is termed 'very seriously injured/ill' when his/her injury is of such severity that life is imminently endangered.

<sup>a</sup> Special flights may also be requested for the internal movement of patients, either within an overseas theatre or within the UK. The flight must be justifiable in terms of the condition of the patient and the distance that would otherwise have to be travelled by surface means.

- Seriously Injured/ill (SI) – A patient is termed 'seriously injured/ill' when his/her injury is of such severity that there is cause for immediate concern but there is no imminent danger to life.
- Incapacitating Injury/Illness (III). Any illness or injury (including battle casualties) which does not warrant classification of VSI or SI but renders them physically and/or mentally incapacitated.
- Unlisted Casualties (UL). An individual whose illness or injury requires hospitalisation but whose condition does not warrant classification as VSI, SI or III. Casualties who have been unexpectedly admitted to hospital and medically categorised as UL in the following circumstances must have a NOTICAS raised:
  - i) On duty away from their home base; on operations, overseas deployments and exercises.
  - ii) On board HM ships at sea or away from home ports.
  - iii) The casualty has been admitted to hospital for less than 72 hours, but their injuries were caused by circumstances that would be of public interest, i.e. personnel Wounded in Action (WIA). When admissions exceed 72 hours they must be reported with effect from the date and time of admission.
  - iv) Where casualties require aeromedical evacuation.
  - v) Casualties whose injuries are believed to be caused as a result of deliberate self-harm/attempted suicide and who have not been otherwise listed should be reported as UL.

Defence Statistics routinely receive aeromedical evacuation records from the Aeromedical Evacuation Control Centre (AECC) at RAF Brize Norton. Aeromedical Evacuation (AE) is the medically supervised movement of patients to and between medical facilities by air transportation. The RAF Aeromedical Evacuation Service provides the worldwide patient air movement capability for Defence 24 hours a day, 365 days a year. Patients are risk assessed prior to flight, and when necessary, trained medical teams are provided to deliver care in the air.

The numbers presented in this response include the number of personnel aeromed only. These numbers do not include connecting flights and reverse aeromedical evacuations.

If you have any queries regarding the content of this letter, please contact this office in the first instance.

If you wish to complain about the handling of your request, or the content of this response, you can request 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.gov.uk](mailto:CIO-FOI-IR@mod.gov.uk)). Please note that any request for an internal review should be made within 40 working days of the date of this response.

If you remain dissatisfied following an internal review, you may raise your complaint directly to the Information Commissioner under the provisions of Section 50 of the Freedom of Information Act. Please note that the Information Commissioner will not normally investigate your case until the MOD internal review process has been completed. The Information Commissioner can be contacted at: Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire, SK9 5AF. Further details of the role and powers of the Information Commissioner can be found on the Commissioner's website at <https://ico.org.uk/>.

I hope this is helpful.

Yours sincerely

Defence Statistics Health Head