



Ministry  
of Defence

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28 February 2019

Dear [REDACTED]

Thank you for your email received on 02 February 2019 requesting the following information:

“Please could you provide me with information regarding the tariff under the AFCS awarded to service personnel who have suffered and claimed for the injury of cauda equina in 2012 - 2016.”

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

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. 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 the information in order to protect personal information as governed by the Data Protection Act 2018 and GDPR. In line with JSP 200 (March 2016), numbers provided have been rounded to the nearest five, with numbers fewer than three suppressed in order to reduce the possible inadvertent disclosure of individual identities. 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.

Claimants can be awarded compensation for Service-attributable cauda equina under the Armed Forces Compensation Scheme (AFCS) in accordance with tariff levels 2, 3, 4 or 6 of the Neurological Disorder tariff of injury table.

Between 2012/13 and 2016/17, there were **five**<sup>1</sup> claimants awarded compensation under the AFCS for cauda equina, of which:

- **Five**<sup>1</sup> claims were awarded compensation at tariff level 6.
- **Fewer than three**<sup>1</sup> claims were awarded compensation at tariff level 4.

Note due to rounding, totals do not equal the sum of their parts.

Under Section 16 (advice and assistance) you may wish to note the following:

#### Armed Forces Compensation Scheme

The AFCS came into force on 6 April 2005 to pay compensation for injury, illness or death attributable to Service that occurred on or after that date. It replaced the previous compensation arrangements provided by the War Pensions Scheme (WPS) and the attributable elements of the Armed Forces and Reserve Forces Pensions Scheme.

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<sup>1</sup> Numbers provided have been rounded to the nearest five, with numbers fewer than three suppressed, in order to reduce the possible inadvertent disclosure of individual identities.

Defence Statistics publish an annual National Statistic on claims and awards under the AFCS: <https://www.gov.uk/government/collections/armed-forces-compensation-scheme-statistics-index>  
The latest update was published on 28 June 2018 (as at 31 March 2018).

Claimants' injuries/illnesses considered to be Service-attributable are awarded under the AFCS in line with one of nine tariff of injury tables<sup>2</sup>, each covering the legislation surrounding the payment of compensation for: Burns (Table 1); Injury, Wounds and Scarring (Table 2); Mental Disorders (Table 3); Physical Disorders (Table 4); Amputations (Table 5); Neurological Disorders (Table 6); Senses (Table 7); Fractures and Dislocations (Table 8); and Musculoskeletal Disorders (Table 9). The information supplied in this response concerns awards made under Table 6 – Neurological Disorders.

Table 1 presents the AFCS Neurological Disorder tariff levels, plus their descriptions, under which compensation may be awarded for cauda equina.

**Table 1: AFCS Neurological Disorder tariff levels and descriptions for claims awarded for cauda equina<sup>1</sup>**

<b>Tariff</b>	<b>Description of injury and its effects</b>
2	Injury to conus medullaris or cauda equina giving rise to complete paraparesis.
3	Injury to conus medullaris or cauda equina giving rise to partial paraparesis or severe monoparesis.
4	Injury to conus medullaris or cauda equina giving rise to partial asymmetric paraparesis.  OR  Traumatic spinal injury with partial spinal cord, conus or cauda equina damage causing paraparesis of upper or lower limbs, or both, with some recovery and restoration of upper limb motor and sensory function, but no useful manual dexterity or ability to walk.
6	Injury to conus medullaris or cauda equina giving rise to partial monoparesis.

The AFCS uses a tariff system with 15 levels which reflect the severity of the injury, with tariff level 1 being associated with the most serious injuries and 15 with the least serious. Every AFCS claim awarded a tariff level 1 to 15 includes the payment of a lump sum for the injury/illness. For more serious injuries/illnesses which have been awarded a tariff level 1 to 11, an income stream is paid in addition to the lump sum. This is known as the Guaranteed Income Payment (GIP) and is paid for life<sup>3</sup>.

The information in this response presents the number of AFCS claims awarded for cauda equina that were cleared between 1<sup>st</sup> April 2012 and 31 March 2017 (these claims may have been registered prior to 1<sup>st</sup> April 2012).

AFCS data is sourced from the Compensation and Pension System (CAPS) which is administrated and managed by DBS Veterans UK.

In line with the directives of the JSP 200, disclosure control is conducted on all statistical information provided by the MOD to safeguard the confidentiality of individuals. A risk of disclosure is considered to be high where numbers presented are fewer than three. In cases where a risk of disclosure exists, appropriate disclosure control methods have been applied. The figures provided in this response have been rounded to the nearest five, with numbers fewer than three suppressed, in order to reduce the possible inadvertent disclosure of individual identities.

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

<sup>2</sup> <http://www.infolaw.co.uk/mod/docs/AFCS-2016-05-31.pdf> - information about tariff of injury tables, tariff levels and descriptions can be found from page 60 onwards.

<sup>3</sup> [https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment\\_data/file/683176/20180215-JSP765-Official.pdf](https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/683176/20180215-JSP765-Official.pdf)

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/>.

Yours sincerely

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