



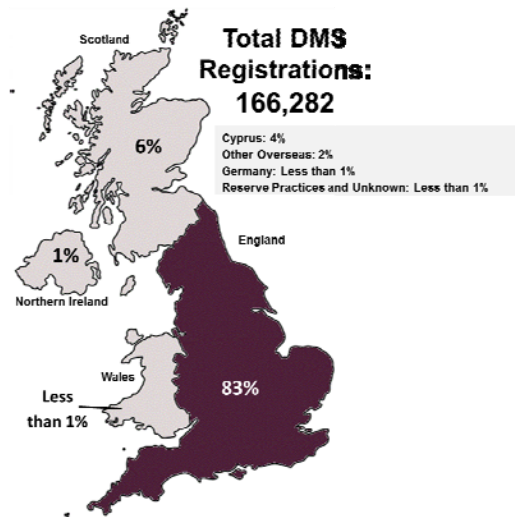
This bi-annual official statistic provides summary statistics on the number of serving UK armed forces personnel and entitled civilian personnel with a Defence Medical Services (DMS) registration as at 1 October 2019. Information in this report is used by the MOD, NHS, Public Health England (PHE) and local authorities to make informed decisions regarding the commissioning of clinical services in different parts of the country depending on the size and composition of the UK armed forces populations requiring access to care.

The NHS England organisational structure was updated in 2019 to incorporate Sustainability and Transition Partnerships (STPs) that sit between regions and Clinical Commissioning Groups (CCGs). This official statistic presents information using the updated organisational structure. Further information on the structure of the NHS can be found at this link: <https://digital.nhs.uk/services/organisation-data-service/data-downloads/other-nhs-organisations>.

### Key Points

- As at 1 October 2019 **166,282** UK armed forces and entitled civilian personnel had a Defence Medical Services (DMS) registration. This is a 1% decrease since 1 April 2019.
- **91% (151,907)** of personnel with a DMS registration were located in the UK. This is an increase from 89% as at 1 April 2019.
- **Less than 1% (1,364)** of personnel with a DMS registration were in Germany. This is a decrease from **5% (8,248)** as at 1 April 2019. This was due to pre-announced movements of units from Germany.

**Figure 1: UK armed forces and entitled civilian personnel DMS registrations, by registration location, percentages<sup>1</sup>**  
1 October 2019



When someone has a **Defence Medical Services (DMS) registration**, it means that their primary medical care is provided by the MOD.

Source: DMICP Data Warehouse and JPA  
<sup>1</sup> Due to rounding, percentages may not sum to 100%.

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**Background quality report:** <https://www.gov.uk/government/collections/defence-personnel-nhs-commissioning-quarterly-statistics-index>

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Past publications, and supplementary tables containing all data presented in this publication, can be found at

<https://www.gov.uk/government/collections/defence-personnel-nhs-commissioning-quarterly-statistics-index>

## Introduction

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This report enables the MOD, the Department of Health, NHS England (and devolved administrations), Public Health England and local authorities make informed decisions regarding the commissioning of clinical services in different parts of the country depending on the size and composition of the UK armed forces populations requiring access to care.

Information is presented by the following in the supplementary tables<sup>1</sup>:

- England:
  - NHS Region, Sustainability and Transition Partnerships (STP) and their Clinical Commissioning Groups (CCG).
  - Regions and their Local Area Authorities (LAA).
- Wales:
  - Local Health Boards (LHB).
  - Local Area Authorities (LAA).
- Scotland:
  - Council Area (CA).
- Northern Ireland:
  - Local Commissioning Groups (LCG).
  - District Council Areas (DCA).
- United Kingdom:
  - Defence Primary Healthcare (DPHC) regions.

For this edition of the official statistic, changes to the NHS England organisational structure have been applied.

Changes included the introduction of STPs as a layer between NHS regions and CCGs. Some minor changes to CCGs were also applied. Full details of the changes can be found here: <https://www.england.nhs.uk/ccg-details/>. This affects supplementary tables B1.1 to B1.7.

Figures include UK armed forces and entitled civilians with a DMS registration. UK armed forces includes Regulars, Gurkhas, Officer Designates and Full Time Reserve Service (FTRS) Full Commitment (FC) personnel. Entitled civilians includes service personnel family dependents and MOD employed civilian personnel who are entitled to care at MOD primary care facilities.

The number of UK armed forces and entitled civilian personnel with a DMS registration is directly impacted by the size of the armed forces required by the MOD to achieve success in its military tasks. More information about the sizes of the armed forces can be found in the UK armed forces personnel statistic:

<https://www.gov.uk/government/collections/uk-armed-forces-quarterly-service-personnel-statistics-index>

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<sup>1</sup> As advised by the Office for National Statistics (ONS) and NHS England.

## Main Findings

As at 1 October:

▼ <b>166,282</b>	<b>Total DMS registrations</b> a decrease of 2,273 since 1 April 2019
▲ <b>151,907</b>	<b>UK DMS registrations</b> an increase of 2,334 since 1 April 2019
▼ <b>1,364</b>	<b>Germany DMS registrations</b> a decrease of 6,884 since 1 April 2019
▲ <b>143,564</b>	<b>UK armed forces DMS registrations</b> an increase of 71 since 1 April 2019
▼ <b>22,718</b>	<b>Entitled civilian DMS registrations</b> a decrease of 2,344 since 1 April 2019

**UK armed forces** includes Regulars, Gurkhas, Officer Designates and Full Time Reserve Service (FTRS) Full Commitment (FC) personnel.

**Entitled civilians** include contractors, MOD employed entitled civilians and military family dependents.

86% of all DMS registrations at MOD medical centres were for UK armed forces personnel.

Of the **166,282** UK armed forces and entitled civilians with a DMS registration:

- **91%** were registered in the UK of which<sup>1</sup>:
  - **83%** England.
  - **6%** Scotland.
  - **1%** Northern Ireland.
  - **less than 1%** Wales.
- **4%** Cyprus.
- **3%** other overseas locations.
- **less than 1%** Germany.
- **less than 1%** reserve practices or unknown.

For **UK armed forces** personnel with a DMS Registration:

- **96%** were in the UK.
- **3%** were overseas.
- **Less than 1%** were at reserve practices or unknown.

For **entitled civilian** personnel with a DMS registration:

- **61%** were in the UK.
- **38%** were overseas.
- **1%** were at reserve practices or unknown.

**Less than 1% (1,364)** of all DMS registrations were in Germany. This is a decrease from **5% (8,248)** as at 1 April 2019. This is due to movement of units from Germany to other locations as set out in the Strategic Defence and Security Review (SDSR) 2010<sup>2</sup>. The SDSR announced that while the presence of the British military in Germany has played an important role in demonstrating Alliance solidarity, there was no longer any operational requirement for UK forces to be based there, and the aim to withdraw forces from Germany by 2020.

**Table 1** (overleaf) presents the number of UK armed forces and entitled civilian personnel by location as at 1 October 2019. Please see Table A1.2 in the supplementary tables for numbers by service.

<sup>1</sup> Sub totals may not match totals due to rounding of percentages.

<sup>2</sup> [https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/62482/strategic-defence-security-review.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/62482/strategic-defence-security-review.pdf)

## Main Findings (Continued)

**Table 1: UK armed forces and entitled civilian DMS registrations, by registration location, numbers<sup>1,2</sup>**

1 October 2019

Location	All persons	UK armed forces	+/-	Civilian	+/-
<b>ALL</b>	<b>166,282</b>	<b>143,564</b>		<b>22,718</b>	<b>-</b>
UNITED KINGDOM	151,907	138,116		13,791	
of which:					
England	137,626	124,881		12,745	
Wales	1,362	1,147		215	
Scotland	10,671	10,190	-	481	
Northern Ireland	2,248	1,898		350	
<b>OTHER</b>	<b>14,375</b>	<b>5,448</b>	<b>--</b>	<b>8,927</b>	<b>--</b>
of which:					
Germany	1,364	508	--	856	--
Cyprus	6,302	2,299		4,003	
Other overseas	5,696	1,882	++	3,814	++
Reserve practices	115	109	-	6	
Unknown <sup>3</sup>	898	650	+	248	

To display changes in populations since the last issue of this official statistic, the **+/-** column is provided.

**+/-** shows an increase/decrease of 5% to 10% of the population.

**++/-** shows an increase/decrease of over 10% of the population.

Source: DMICP Data Warehouse and JPA.

<sup>1</sup> The presence of +/- indicates percentage changes in figures over the last six-month period. + indicates there has been between a greater than 5% and less than or equal to 10% increase and - indicates there has been between a greater than 5% and less than or equal to 10% decrease. ++ indicates a greater than 10% increase and -- indicates a greater than 10% decrease.

<sup>2</sup> Where possible, UK armed forces patients registered in other overseas locations are allocated back to their last known UK, Germany or Cyprus practice in the last 12 months. No entitled civilian patients registered in other overseas locations are allocated back to previous regions.

<sup>3</sup> Unknown includes data quality issues and data management practice registrations.

## UK Armed Forces Personnel

In order to meet the manpower reduction targets set out in SDSR 2010, a redundancy programme, coupled with adjusted recruiting (intake) and contract extensions were set. The redundancy programme was completed and in November 2015, the Ministry of Defence published the National Security Strategy and Strategic Defence and Security Review 2015. SDSR 2015 outlined plans to maintain the size of the Regular armed forces; not reducing the Army to below 82,000 personnel and increasing the Royal Navy/Royal Marines and Royal Air Force by a total of 700 personnel.

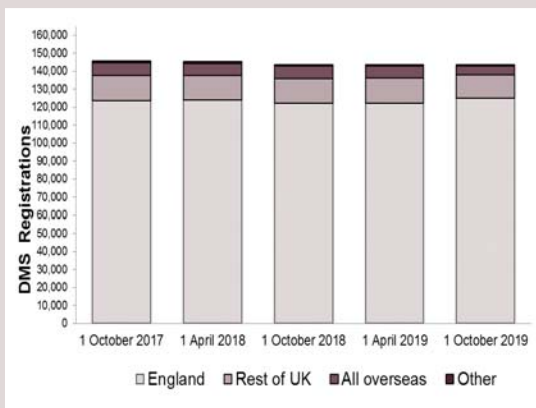
Trends over a longer time period show that there has been an overall reduction of **21,007** UK armed forces personnel with a DMS registration since 1 October 2013; numbers reduced from **164,571** at 1 October 2013 to **143,564** at 1 October 2019 in line with the previous manpower reduction targets as set out in the SDSR 2010.

**Figure 2** presents the number of DMS registrations for UK armed forces personnel over the last five reported time periods. The total number of UK armed forces DMS registrations increased by **71** since 1 April 2019.

The number of UK armed forces with a DMS registration in Germany fell by **3,026** (86% decrease) since 1 April 2019.

The number of UK armed forces with a DMS registration in other overseas locations has doubled. This is because some MOD practices that were managed by Germany transferred to be the responsibility of other overseas locations as a result of SDSR 2010.

**Figure 2: UK armed forces DMS registrations, by country, numbers**<sup>1,2,3</sup>  
1 October 2017 to 1 October 2019



Source: DMICP Data Warehouse

<sup>1</sup> Rest of UK consists of Wales, Scotland and Northern Ireland.

<sup>2</sup> All Overseas consists of Germany, Cyprus and Other Overseas.

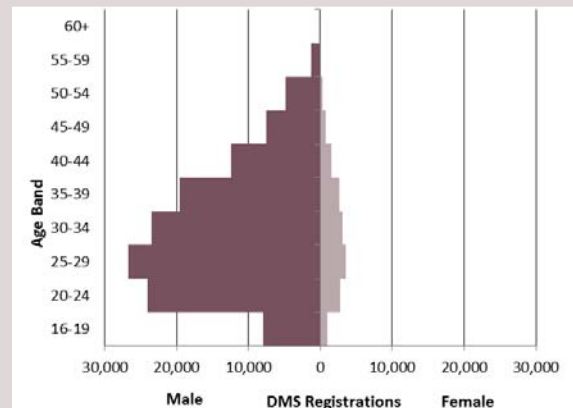
<sup>3</sup> Other consists of Reserve Practices and Unknown.

**Figure 3** presents the number of DMS registrations for UK armed forces personnel by gender and age band as at 1 April 2019:

- **89%** of registrations were for male personnel.
- **58%** of registrations were for personnel aged 20 to 34 years.

The distribution of age group by gender reflects the demographic structure of the UK armed forces population.

**Figure 3: UK armed forces DMS registrations, by gender and age band, numbers**  
1 October 2019



Source: DMICP Data Warehouse and JPA

## Entitled Civilian Personnel

The number of entitled civilians has fallen over the previous 6 months. This is partly due to movement of units from Germany to other locations as set out in the Strategic Defence and Security Review (SDSR) 2010. With this move, the majority of service personnel's family dependents that returned to the UK are no longer classed as entitled civilians and have reverted back to being under the primary care of the NHS.

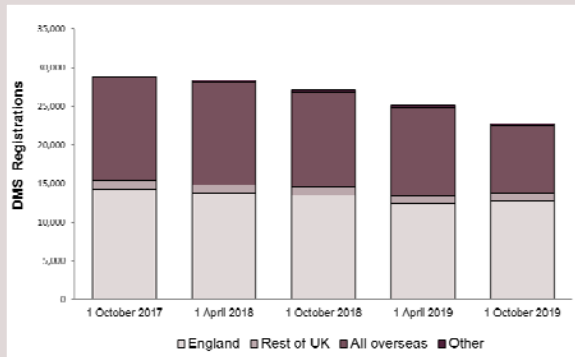
The number of entitled civilians with a DMS registration has approximately halved since 1 October 2013 when there were 47,898 entitled civilians with a DMS registration, compared to **22,718** as at 1 October 2019

**Figure 4** presents the number of registrations for entitled civilians with a DMS registration over the last five time periods.

The number of entitled civilians with a DMS registration fell by 2,344 since 1 April 2019.

The number of entitled civilians with a DMS registration in Germany fell by **3,858** (82% decrease) since 1 April 2019. This was due to some civilians returning to the UK from Germany and no longer being entitled to DMS care, and some registrations transferring to other overseas locations.

**Figure 4: Entitled civilian DMS registrations, by country, numbers** <sup>1,2,3</sup>  
1 October 2017 to 1 October 2019



Source: DMICP Data Warehouse

<sup>1</sup> Rest of UK consists of Wales, Scotland and Northern Ireland.

<sup>2</sup> All Overseas consists of Germany, Cyprus and Other Overseas.

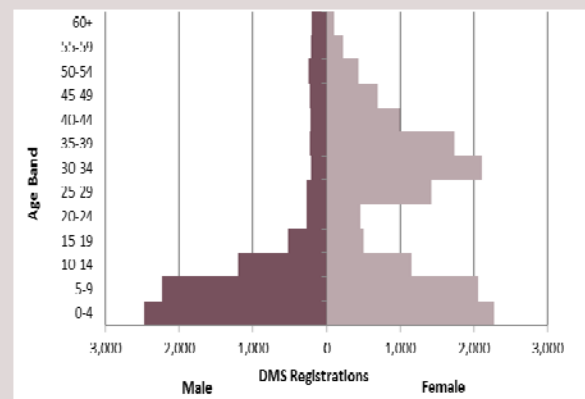
<sup>3</sup> Other consists of Reserve Practices and Unknown.

**Figure 5** presents the number of registrations for entitled civilians at 1 October 2019 by gender and age band.

- **62%** of registrations were for female personnel.
- **50%** of these registrations were for those aged 0-14 years.

These represent the main categories of UK armed forces personnel's dependents: children and female partners.

**Figure 5: Entitled civilian DMS registrations, by gender<sup>1</sup> and age band, numbers**  
1 October 2019



Source: DMICP Data Warehouse

<sup>1</sup> Please note there was a civilian whose gender was recorded as "unspecified" and therefore was excluded from Figure 5.

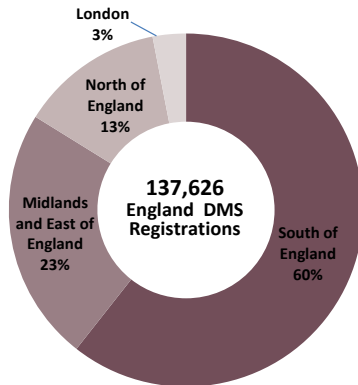
## Regional Analysis

DMS registrations by location, age and gender can be found in the supplementary tables of this report.

### England Regional Analysis

**Figure 6: UK armed forces and entitled civilian DMS registrations in England by region, percentages**

1 October 2019



▲ There was an increase of 2,943 UK armed forces and entitled civilian personnel registered in England since 1 April 2019.

Source: DMICP Data Warehouse and JPA

Changes in the NHS England structure mean that comparisons between October 2019 and April 2019 cannot be made at regional or STP levels for all CCGs. However, some CCGs have remained the same. Full details of the changes can be found here: <https://www.england.nhs.uk/ccg-details/>

Where comparisons can be drawn, the largest changes are noted below.

There was an **increase** of **2,027 (12%)** UK armed forces registrations at NHS Wiltshire CCG. This was due to a large number of personnel relocating from Germany.

There was an **increase** of **214 (36%)** UK armed forces registrations at NHS East Riding of Yorkshire CCG. This was due to a large intake from Pirbright and new joiners to the UK armed forces.

There was an **increase** of **169 (12%)** UK armed forces registrations at NHS East Leicestershire and Rutland CCG. This was due to a unit rotating from Cyprus to Cottesmore.

There was a **decrease** of **519 (28%)** UK armed forces registrations in NHS Guildford and Waverley CCG (formerly NHS North West Surrey CCG). This is largely due to a unit moving to the Royal Military Academy Sandhurst.

There was a **decrease** of at least 10% in the following CCGs due to routine movements:

- NHS Buckinghamshire CCG (formerly NHS Aylesbury Vale CCG, **452** personnel, 17%).
- NHS Northumberland CCG (**221** personnel, 20%).
- NHS West Norfolk CCG (**174** personnel, 11%).
- NHS Swindon CCG (**93** personnel, 10%).

**Routine movements** are any movement of personnel which is expected as part of normal duty. E.g. rotation of units to new garrison locations or movement of untrained personnel to new locations following completion of training.

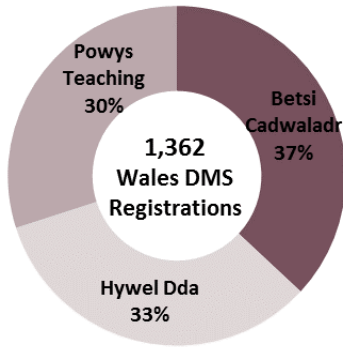
For England statistics by NHS region, STP and CCG please see tables B1.1 to B1.7, and for statistics by LAA region and LAA please see tables B2.1 to 2.7 in the supplementary tables of this report.

## Regional Analysis (Continued)

### Wales Regional Analysis

**Figure 7: UK armed forces and entitled civilian DMS registrations in Wales, by Local Health Board, percentages**

1 October 2019



▲ There was an increase of **8** UK armed forces and entitled civilian personnel with DMS registrations in Wales since 1 April 2019.

The number and demographics of UK armed forces and entitled civilian personnel with DMS registrations in Wales remained similar to those as at 1 April 2019.

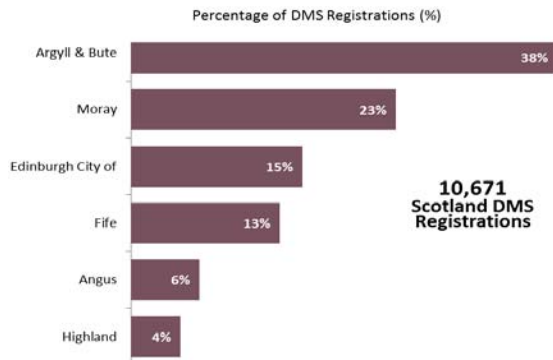
Source: DMICP Data Warehouse and JPA.

For Wales statistics by LHB and LAA please see Tables C1.1 to C2.7 in the supplementary tables of this report.

### Scotland Regional Analysis

**Figure 8: UK armed forces and entitled civilian DMS registrations in Scotland, by Council Area, percentages**

1 October 2019



▼ There was a decrease of **537** UK armed forces and entitled civilian personnel registered in Scotland since 1 April 2019.

There was a decrease of 26% in the Fife Council Area, from **1,892** as at 1 April 2019 to **1,405** as at 1 October 2019. This was due to the movement of HMS Prince of Wales to Portsmouth, south of England.

Source: DMICP Data Warehouse and JPA

<sup>1</sup> Please note that South Ayrshire council area is not presented as there were no personnel registered at this location.

For Scotland statistics by council area please see Tables D1.1 to D2.7 in the supplementary tables of this report.

### Northern Ireland Regional Analysis

As at 1 October 2019, there were 2,248 UK armed forces and entitled civilian personnel with DMS registrations in Northern Ireland, a decrease of **3%** (80) since 1 April 2019.

For Northern Ireland statistics by service, gender and age please see Tables E1.1 to E2.7 in the supplementary tables of this report.



## Methodology

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**This section provides a brief summary of the methodology and data sources; more detailed information is available in the background quality report for this bulletin.**

The analysis provided in this publication is based on patient registration information from the Defence Medical Information Capability Programme (DMICP) and cross-referenced with the Joint Personnel Administration system (JPA) for Service personnel.

The following UK armed forces personnel have been included: Regulars, FTRS and Gurkhas with a DMS registration. This includes both trained and untrained personnel. Service personnel have been excluded when they have a non-DMS registration type (**4,049** personnel as at 1 October 2019). The data presented on entitled civilian personnel were based on the number of DMS registrations in DMICP identified as 'civilian'. 'Civilians' include contractors, MOD employed entitled civilians and military family dependents.

For UK armed forces personnel only, Defence Statistics have developed a process to allocate personnel to a medical centre where they are registered at overseas practices (excluding Germany and Cyprus), data management practices, reserve practices and at incorrect facilities. For civilian patients, no data processing is currently carried out.

Where a previous UK, Germany or Cyprus medical centre could not be identified in the last 12 months, personnel have been presented in Table 1 as follows:

- Overseas, Operations and Exercises - 'Other Overseas'
- Data management practices – 'Unknown'
- Non-primary care locations – 'Unknown'
- Reserve Practices – 'Reserve Practices'

All UK medical centres identified from DMICP were mapped to an NHS CCG using a list published by the Health and Social Care Information Centre (HSCIC) and the Office of National Statistics (ONS).

For tables where age bands have been presented, the Service age bands start at 16 (the youngest age at which it is possible to join the armed forces). The entitled civilian age bands start from 0-4. Note that the age bands in the tables span five years with the exception of a 16-19 category for Service personnel and the 60+ category for both Service and entitled civilian personnel. The age presented is as at 1 October 2019.

Naval Service personnel registered to surface or submarine flotilla have been allocated to either HMS Nelson (Portsmouth), HMS Drake (Plymouth) or HMS Neptune (Faslane, Scotland). The base ports are responsible for the care of individuals requiring medical treatment or onward referral to the NHS.

## Glossary

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### **Army Basing Programme**

The Basing Plan sets out the location changes for the Army and also confirms the drawdown of all units from Germany by 2020. The plan has transitioned into a delivery Programme and this will affect most areas of the Army as more than 100 units will either relocate, re-role, convert or disband over the next six years.

### **British Forces in Cyprus**

In 1960, a treaty of establishment allowed Cyprus to become an independent Republic, free from British control. Within the agreement, two Sovereign Base Areas (SBAs) at Akrotiri and Dhekelia were identified as real estate that would remain as British sovereign territory and therefore remain under British jurisdiction. The British Army in Cyprus works to a tri-service headquarters and is tasked with protecting the two Sovereign base Areas (SBAs) and associated retained sites.

### **British Forces in Germany**

British Forces have been stationed in Germany for reasons of national and NATO security with the agreement and support of the German government. The Strategic Defence and Security Review (SDSR) 2010 announced that while the presence of the British military in Germany has played an important role in demonstrating Alliance solidarity, there was no longer any operational requirement for UK forces to be based there, and the aim to withdraw forces from Germany by 2020.

### **Clinical Commissioning Group (CCG)**

Responsible for the commissioning of clinical services and provision of public health initiatives in England.

### **Community Health Partnership (CHPs)**

CHPs existed from 2004 until 1 April 2015. They were responsible for the commissioning of clinical services and provision of public health initiatives in Scotland.

### **Defence Medical Information Capability Programme (DMICP)**

The MOD electronic primary healthcare patient record. 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.

### **Defence Medical Service (DMS)**

Provides primary healthcare, dental care, hospital care, rehabilitation, occupational medicine, community mental healthcare and specialist medical care to Service personnel and entitled civilian personnel.

### **Defence Medical Service Registration**

A DMS registration at a MOD medical centre means that the MOD are responsible for providing long term, permanent and full primary healthcare; however these individuals will be referred to the NHS for secondary healthcare provision. UK armed forces Serving personnel entitled to DMS includes Regular personnel, Gurkhas, Officer Designates and Full Time Reserve Service (FTRS) personnel who are Full Commitment (FC). Some service personnel family dependents and MOD employed civilian personnel are entitled to care.

### **Entitled Civilians**

Civilians whose primary healthcare is provided by Defence Medical Services. Includes contractors, MOD employed entitled civilians and military family dependents. Numbers presented in this report are not representative of the number of MOD employed civilians or

## **Glossary (Continued)**

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military dependents associated with the MOD as the majority of MOD civilian employees are not entitled to military healthcare, and the majority of military dependents will be registered with an NHS GP practice.

### **Full Time Reserve Service (FTRS)**

FTRS are personnel who fill Service posts for a set period on a full-time basis while being a member of one of the Reserve Services, either as an ex-regular or as a volunteer. An FTRS reservist on:

*Full Commitment (FC)* fulfils the same range of duties and deployment liability as a regular Service person;

*Limited Commitment (LC)* serves at one location but can be detached for up to 35 days a year;

*Home Commitment (HC)* is employed at one location and cannot be detached elsewhere.

### **Gurkhas**

Gurkhas are recruited and employed in the British and Indian Armies under the terms of the 1947 Tri-Partite Agreement (TPA) on a broadly comparable basis. They remain Nepalese citizens but in all other respects are full members of UK armed forces. Since 2008, Gurkhas are entitled to join the UK Regular Forces after 5 years of service and apply for British citizenship.

### **Health & Social Care Partnerships (HSCPs)**

Responsible for the commissioning of clinical services and provision of public health initiatives in Scotland.

### **Joint Personnel Administration (JPA)**

The personnel administration system used by the UK armed forces. It is the single authoritative source for personnel demographic information.

### **Local Commissioning Group (LCG)**

Responsible for the commissioning of clinical services and provision of public health initiatives in Northern Ireland.

### **Local Health Board (LHB)**

Responsible for the commissioning of clinical services and provision of public health initiatives in Wales.

### **Non - Defence Medical Service Registration (Non-DMS)**

A 'non-DMS' registration denotes that a person's primary healthcare is delivered by the NHS, with a record also being held on DMICP. This record is used for when they access healthcare facilities in DMS medical centres for emergency or ad hoc treatment, and for treatment whilst on operations. Service personnel have been excluded when they have a non-DMS registration type.

### **Regulars**

Full time Service personnel, including Nursing Services, but excluding FTRS, Gurkhas, Naval activated Reservists, mobilised Reservists, Military Provost Guarding Service (MPGS) and Non-Regular Permanent Service (NRPS).

### **Strategic Defence and Security Review 2010 (SDSR)**

The SDSR was a review of the United Kingdom's Defence and security capability published in 2010. It envisaged that by 2020 each Service will number: Royal Navy 29,000, RAF 31,500 and Army 94,000. The target for the Army was revised to 82,000 following the internal 3 Month Exercise in July 2011 and announcements in the Army 2020 paper published July 2012.

## **Glossary (Continued)**

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### **Strategic Defence and Security Review 2015 (SDSR)**

On 23rd November 2015, the Ministry of Defence published the National Security Strategy and Strategic Defence and Security Review 2015. SDSR 2015 outlines plans to uplift the size of the Regular armed forces, setting targets for a strength of 82,000 for the Army, and increasing the Royal Navy/Royal Marines and Royal Air Force by a total of 700 personnel.

### **Sustainability and Transformation Partnerships (STPs)**

STPs were created to bring local health and care leaders together to plan around the long-term needs of local communities. They were drawn up by senior figures from different parts of the local health and care system, following discussion with staff, patients and others in the communities they serve (NHS England).

### **UK armed forces personnel**

Comprise of Regulars, Gurkha and Full Time Reserve Service personnel.

## Further Information

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### Symbols

**Table 1** containing UK armed forces and civilian breakdowns shows the changes in population figures over the latest quarter. The following symbols indicate percentage changes:

- + There has been between a greater than 5% and less than or equal to 10% increase since the previous quarter;
- ++ There has been a greater than 10% increase since the previous quarter;
- There has been between a greater than 5% and less than or equal to 10% decrease since the previous quarter;
- There has been a greater than 10% decrease since the previous quarter.

Percentage changes have not been shown where population figures were below 20 in both the current and previous quarters. This is because a difference of a small number of people can show a large percentage change, creating a false sense of change over the six-month period.

### Statistical Disclosure Control

Following the release of Joint Service Publication 200 (March 2016) the tables in this report have been presented as unrounded. However due to the additional breakdowns provided in the Supplementary Tables, presenting these as unrounded would result in a large amount of secondary suppression. For this reason, some of the numbers in the Supplementary Tables are rounded so that more values can be presented.

Where applicable, numbers have been rounded to the nearest 10 in keeping with the ONS Dissemination of Health Statistics: Confidentiality Guidance. All numbers five or fewer have been suppressed and presented as '~'. Rounding is desirable both as a means of disclosure control and to improve the clarity of outputs and convey appropriate levels of precision to users. Totals and sub-totals have been rounded separately and so may not equal the sums of their rounded parts. Numbers ending in "5" have been rounded to the nearest multiple of 20 to prevent systematic bias.

## Contact Us

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Defence Statistics welcome feedback on our statistical products. If you have any comments or questions about this publication or about our statistics in general, you can contact us as follows:

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<https://www.gov.uk/make-a-freedom-of-information-request/the-freedom-of-information-act>

### Other contact points within Defence Statistics are:

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Price Indices	030 6793 2100	<a href="mailto:DefStrat-Econ-ESES-PI-Hd@mod.gov.uk">DefStrat-Econ-ESES-PI-Hd@mod.gov.uk</a>
Naval Service Manpower	023 9254 7426	<a href="mailto:DefStrat-Stat-Navy-Hd@mod.gov.uk">DefStrat-Stat-Navy-Hd@mod.gov.uk</a>
Army Manpower	01264 886175	<a href="mailto:DefStrat-Stat-Army-Hd@mod.gov.uk">DefStrat-Stat-Army-Hd@mod.gov.uk</a>
RAF Manpower	01494 496822	<a href="mailto:DefStrat-Stat-Air-Hd@mod.gov.uk">DefStrat-Stat-Air-Hd@mod.gov.uk</a>
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Civilian Manpower	020 7218 1359	<a href="mailto:DefStrat-Stat-Civ-Hd@mod.gov.uk">DefStrat-Stat-Civ-Hd@mod.gov.uk</a>
Health Information	030 6798 4423	<a href="mailto:DefStrat-Stat-Health-Hd@mod.gov.uk">DefStrat-Stat-Health-Hd@mod.gov.uk</a>

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