



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 2020. 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.

For this official statistic, personnel registered at the HMS Audacious medical facility are shown within the Argyll and Bute Community Health Partnership, Scotland. Previously, while HMS Audacious was in build, personnel registered there were incorrectly allocated back to their last known medical facility (see methodology section for further information). The correction of methodology for these personnel has resulted in a decrease of registrations at Morecambe Bay CCG and contributed to an increase at Argyll and Bute Community Health Partnership. For the most accurate information on the current commissioning population, please use this edition of the official statistic.

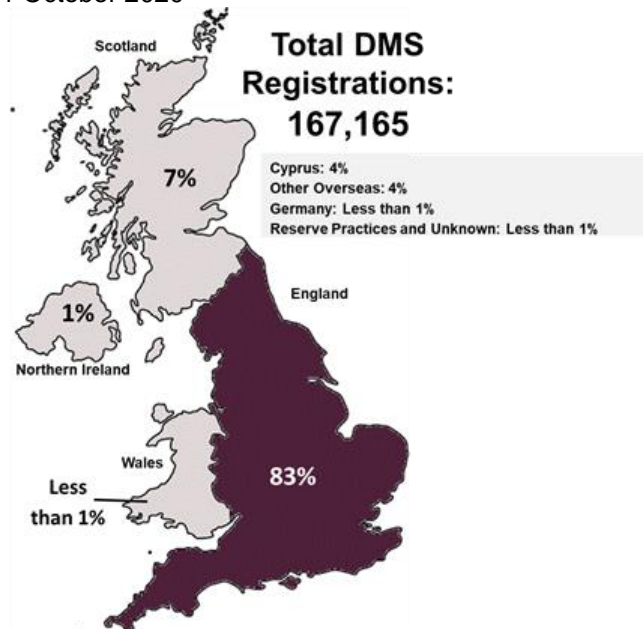
Key Points

- As at 1 October 2020 **167,165** UK armed forces and entitled civilians had a Defence Medical Services (DMS) registration. This is an increase of less than 1% since 1 April 2020.
- **92% (153,102)** of individuals with a DMS registration were located in the UK. This is consistent with figures as at 1 April 2020.
- There have been continued decreases of the numbers of personnel with a DMS registration in Germany; from 669 as at 1 April 2020 to 601 as at 1 October 2020. This is due to the drawdown of units from Germany.

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

Figure 1: UK armed forces and entitled civilian personnel DMS registrations, by registration location, percentages¹

1 October 2020



Source: DMICP Data Warehouse and JPA

¹ 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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Contents

Introduction	Page 2	
Main Findings	Page 3 to 4	
UK Armed Forces Personnel	Page 5	
Entitled Civilian Personnel	Page 6	
Regional Analysis	Page 7 to 8	Past publications, and supplementary tables containing all data presented in this publication, can be found at
Methodology	Page 9	
Glossary	Page 10 to 12	
Further Information	Page 13	https://www.gov.uk/government/collections/defence-personnel-nhs-commissioning-quarterly-statistics-index
Contact Us	Page 14	

Introduction

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 tables¹:

- 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.

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>

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

Main Findings

As at 1 October 2020:

▲ 167,165	Total DMS registrations an increase of 685 since 1 April 2020
▲ 153,102	UK DMS registrations an increase of 257 since 1 April 2020
▲ 6,504	Cyprus DMS registrations an increase of 66 since 1 April 2020
▼ 601	Germany DMS registrations a decrease of 68 since 1 April 2020
▲ 145,495	UK armed forces DMS registrations an increase of 858 since 1 April 2020
▼ 21,670	Entitled civilian DMS registrations a decrease of 173 since 1 April 2020

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.

87% of all DMS registrations at MOD medical centres were for UK armed forces personnel.

Of the 167,165 UK armed forces and entitled civilians with a DMS registration:

- **92%** were registered in the UK¹:
 - **83%** England.
 - **7%** Scotland.
 - **1%** Northern Ireland.
 - **less than 1%** Wales.
- **4%** Cyprus.
- **4%** 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:

- **62%** were in the UK.
- **38%** were overseas.
- **Less than 1%** were at reserve practices or unknown.

4% (6,504) of all DMS registrations were in Cyprus. This remains consistent over time as British Forces Cyprus and their dependants are located in Cyprus, in the Sovereign Base Areas of Akrotiri and Dhekelia. For further information, see the glossary for “British Forces Cyprus”.

4% (6,124) of all DMS registrations were in other overseas locations (overseas, not including Cyprus or Germany). This is the same proportion as 1 April 2020.

Less than 1% (601) of all DMS registrations were in Germany. This proportion is small due to movement of units from Germany to other locations as set out in the Strategic Defence and Security Review (SDSR) 2010².

¹ Sub totals may not match totals due to rounding of percentages.

Main Findings (Continued)

Table 1 presents the number of UK armed forces and entitled civilian personnel by location as at 1 October 2020. Please see Table A1.2 in the supplementary tables for numbers by service.

Table 1: UK armed forces and entitled civilian DMS registrations, by registration location, numbers^{1,2}

1 October 2020

Location	All persons	UK armed forces	+/-	Civilian	+/-
ALL	167,165	145,495		21,670	
UNITED KINGDOM	153,102	139,666		13,436	
of which:					
England	138,437	125,978		12,459	
Wales	1,402	1,186		216	++
Scotland	11,133	10,684		449	-
Northern Ireland	2,130	1,818		312	-
OTHER	14,063	5,829	+	8,234	
of which:					
Germany	601	187	--	414	--
Cyprus	6,504	2,494	+	4,010	
Other overseas	6,124	2,408	++	3,716	
Reserve practices	143	137	+	6	
Unknown ³	691	603	++	88	++

+/- icons are provided to display changes in populations since the last issue of this official statistic (as at 1 April 2020).

+/- 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.

¹ The presence of +/- indicates percentage changes in figures since 1 April 2020.

² 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.

³ Unknown includes data quality issues and data management practice registrations.

UK Armed Forces Personnel

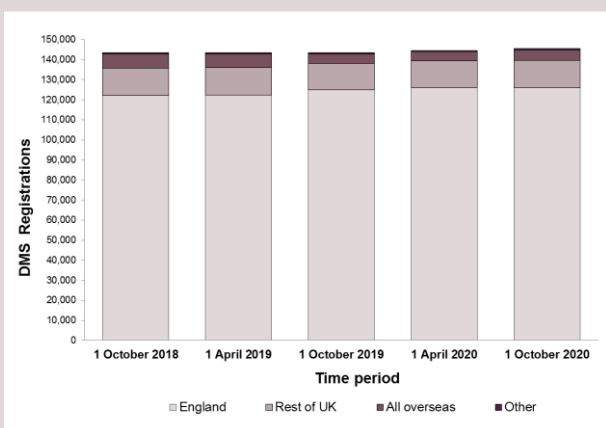
In order to meet the workforce reduction targets set out in SDSR 2010, a redundancy programme, coupled with adjusted recruiting (intake) and contract extensions were set. The redundancy programme was completed and in November 2015, the Ministry of Defence published the National Security Strategy and 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 to 30,450 and 31,750 respectively. For further information on the number of military personnel in the UK armed forces, please refer to the quarterly service personnel national statistics at <https://www.gov.uk/government/collections/quarterly-service-personnel-statistics-index>.

Trends over a longer time period show that there has been an overall reduction of **19,076** UK armed forces personnel with a DMS registration since 1 October 2013 (first published NHS Commissioning Population Statistics); numbers reduced from **164,571** at 1 October 2013 to **145,495** at 1 October 2020.

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 858** (less than 1%) since 1 April 2020.

The proportion of UK armed forces with a DMS registration at overseas locations (not including Cyprus or Germany) has remained stable at 4% since 1 April 2020. However the number of personnel with a DMS registration in such locations has increased by 12% (251). This is due to movement of personnel to locations across the world, and continuing improvements to the management of patient records to better represent their location.

Figure 2: UK armed forces DMS registrations, by country, numbers^{1,2,3}
1 October 2018 to 1 October 2020



Source: DMICP Data Warehouse and JPA

¹ Rest of UK consists of Wales, Scotland and Northern Ireland.

² All Overseas consists of Germany, Cyprus and Other Overseas.

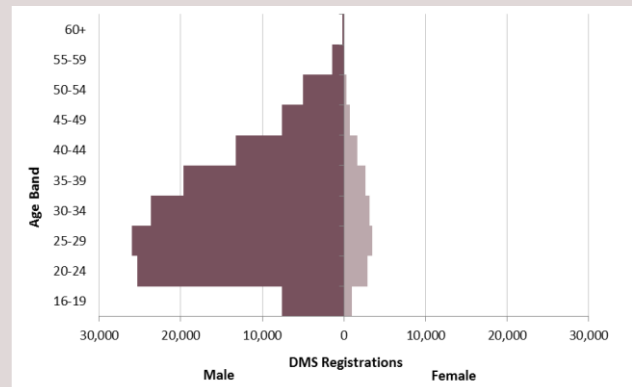
³ Other consists of Reserve Practices and Unknown.

Figure 3 presents the number of DMS registrations for UK armed forces personnel by gender and age band as at 1 October 2020:

- **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 and is consistent over time.

Figure 3: UK armed forces DMS registrations, by gender and age band, numbers
1 October 2020



Source: DMICP Data Warehouse and JPA

Entitled Civilian Personnel

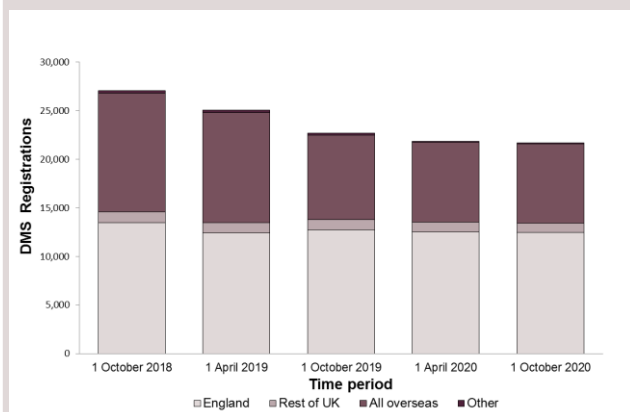
As at 1 October 2020 there were **21,670** entitled civilians with a DMS registration. This is comparable to 1 April 2020. Trends over a longer time period show that the number of entitled civilians with a DMS registration has more than halved since 1 October 2013 when there were 47,898 entitled civilians with a DMS registration (first published NHS Commissioning Population Statistics).

This decrease over time 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.

Figure 4 presents the number of registrations for entitled civilians with a DMS registration over the last five time periods. The total number of entitled civilians with a DMS registration **decreased by 173** (less than 1%) since 1 April 2020.

The number of entitled civilians with a DMS registration in Germany has decreased by 10% (from 460 to 414) since 1 April 2020. This was due to 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 ^{1,2,3}
1 October 2018 to 1 October 2020



Source: DMICP Data Warehouse

¹ Rest of UK consists of Wales, Scotland and Northern Ireland.

² All Overseas consists of Germany, Cyprus and Other Overseas.

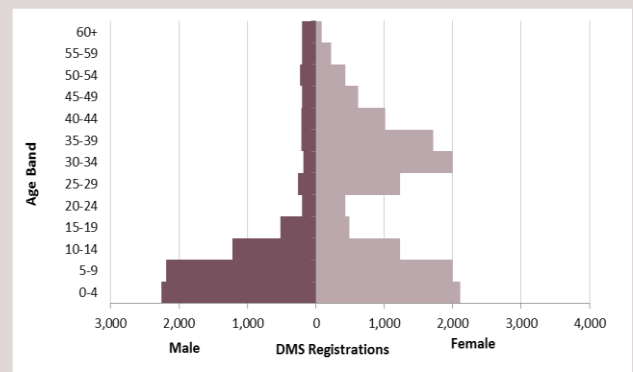
³ Other consists of Reserve Practices and Unknown.

Figure 5 presents the number of registrations for entitled civilians at 1 October 2020 by gender and age band.

- **63%** of registrations were for female personnel.
- **51%** 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 gender¹ and age band, numbers
1 October 2020



Source: DMICP Data Warehouse

¹ Please note there was one civilian whose gender was recorded as "unspecified" and therefore was excluded from Figure 5.

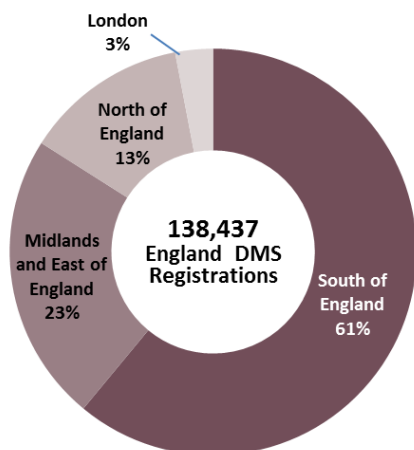
Regional Analysis

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

England Regional Analysis

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

1 October 2020



▼ There was a decrease of **35** UK armed forces and entitled civilian personnel registered in England since 1 April 2020.

Source: DMICP Data Warehouse and JPA

¹ NHS regions are combined in this chart. South of England represents South East and South West. North of England represents North West and North East and Yorkshire. Midlands and East of England represents Midlands and East of England. London is not combined.

² Due to rounding, percentages may not sum to 100%.

There was a **decrease** of **60 (42%)** UK armed forces registrations at Morecambe Bay CCG due to personnel registered at HMS Audacious now being allocated to Argyll and Bute, Scotland. For information, see page 1.

There was a **decrease** of **546 (25%)** UK armed forces registrations at Gloucestershire CCG due to the closure of South Cerney medical centre and registrations transferring to Lyneham.

There was a **decrease** of **519 (15%)** UK armed forces registrations at West Hampshire CCG mainly due to the closure of Southwick Park and registrations transferring to HMS Collingwood.

Routine movements are any movements 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.

There was an **increase** of at least 5% in the following CCGs due to routine movements:

- South Warwickshire CCG (**44** personnel, 25%)
- Fareham and Gosport CCG (**504** personnel, 15%)
- Portsmouth CCG (**641** personnel, 9%).
- Devon CCG (**508** personnel, 6%).
- Bath and North East Somerset, Swindon and Wiltshire CCG (**936** personnel, 5%).

There was a **decrease** of at least 5% in the following CCGs due to routine movements:

- East Riding of Yorkshire CCG (**110** personnel, 14%)
- Kernow CCG (**314** personnel, 10%)
- Surrey Heartlands CCG (**116** personnel, 7%).
- Buckinghamshire CCG (**175** personnel, 6%).
- Kent and Medway CCG (**115** personnel, 5%).
- Somerset CCG (**161** personnel, 5%).
- Northumberland CCG (**46** personnel, 5%).

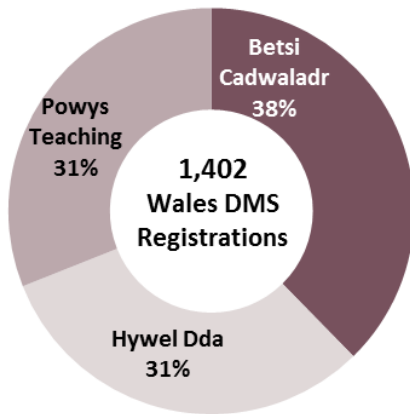
For England statistics by NHS region, STP and CCG please see tables B1.1 to B1.7, and for statistics by LAA region and LAA please see tables B2.1 to 2.7 in the supplementary tables of this report.

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 2020



▲ There was an increase of **64** UK armed forces and entitled civilian personnel with DMS registrations in Wales since 1 April 2020.

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 2020.

There was an **increase** of **44 (11%)** UK armed forces registrations at Powys Teaching LHB due to routine training intake of personnel into Brecon.

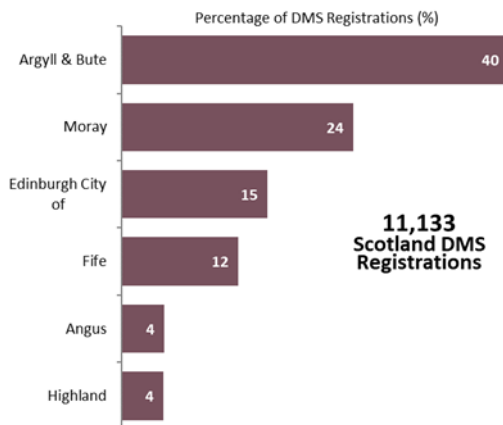
Source: DMICP Data Warehouse and JPA.

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 2020



▲ There was an increase of 297 UK armed forces and entitled civilian personnel registered in Scotland since 1 April 2020.

There was a **decrease** of **68 (12%)** in the Angus Community Health Partnership Area due to routine movement to RM CTC Lymptstone for training.

There was an increase of **256 (6%)** UK armed forces registration in the Argyll and Bute Community Health Partnership due to routine movements, and inclusion of UK armed forces personnel registered at HMS Audacious.

Source: DMICP Data Warehouse and JPA

¹ 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 2020, there were 2,130 UK armed forces and entitled civilian personnel with DMS registrations in Northern Ireland, a decrease of 69 since 1 April 2020.

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

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 (**4,642** personnel as at 1 October 2020). 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'

In late 2019, as part of continuous improvements to the management of patient records, some personnel who had previously been registered to a data management practice had their registration transferred to a practice under the "Other Overseas" administration, which better reflected the location of personnel.

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 2020.

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

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 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.

Glossary (Continued)

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 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).

Glossary (Continued)

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.

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

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

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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If you require information which is not available within this or other available publications, you may wish to submit a Request for Information under the Freedom of Information Act 2000 to the Ministry of Defence. For more information, see:

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

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Tri-Service Workforce	020 7807 8896	Analysis-Tri-Service@mod.gov.uk
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