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Ref: FOI 2022/11358

Thank you for your email on 11 October 2022 confirming that you were content with our interpretation of your request and confirming the following would answer your request for information:

Of the service personnel who medically discharged between 1 April 2012 and 31 March 2017, as presented in FOI 2018/01438:

Armed Forces Compensation Scheme (AFCS)

- 1. How many were awarded compensation under Table 4 of the AFCS and what tariff level were they awarded?
- 2. How many challenged the decision made on their claim, as either a reconsideration or an appeal, and was this challenge successful?

War Pension Scheme (WPS)

- 1. How many were awarded compensation for chronic fatigue syndrome under WPS and what disablement percentage were they awarded?
- 2. How many challenged the decision made on their claim, and was this challenge successful?

Armed Forces Pension Scheme (AFPS)

1. How many were allocated a medical pension under AFPS (05 or 15) and what tier of medical pension were they awarded?

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 that information in the scope of your request is held.

Section 40(2) has been applied to some of the information to protect personal information as governed by the Data Protection Act 2018 and GDPR. In line with JSP 200 the following disclosure control method has been applied to reduce the possible inadvertent disclosure of individual identities: numbers less than five have been supressed. 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.

## Armed Forces Compensation Scheme (AFCS)

Of the **46** UK Regular Armed Forces personnel medically discharged between 1 April 2012 and 31 March 2017 with a principal or contributory cause of Chronic Fatigue Syndrome (CFS), **13** individuals had an awarded condition across **13** claims under Table 4 – Physical Disorders of the Armed Forces Compensation Scheme (AFCS) as at 31 March 2022.

Of the **13** claims awarded under Table 4 – Physical Disorders:

- Fewer than 5 had a highest awarded tariff level 8
- Five had a highest awarded tariff level 11
- Fewer than 5 had a highest awarded tariff level 12
- Fewer than 5 had a highest awarded tariff level 13

#### Please note:

- These claims are not limited to the timeframe following the individual being medically discharged, therefore the information may include claims lodged while the individual was still in-service.
- Tariffs under Table 4 Physical Disorders are suitable for awards of multiple conditions including, but not limited to, Chronic Fatigue Syndrome.
- Through electronic data held within Defence Statistics Health, it is not possible to determine the specific conditions awarded under Table 4 – Physical Disorders and therefore it cannot be assumed that a claim was awarded for Chronic Fatigue Syndrome.
- This award represents the latest outcome on the claims, including the initial claim outcome and any subsequent activity including reconsiderations, reviews and appeals. For claims where a claimant has been awarded for more than one condition under Table 4 – Physical Disorders, the highest awarded tariff has been presented.

Of the **13** claims with awarded conditions under Table 4 – Physical Disorders at latest outcome, **10** had been previously challenged via reconsideration and/or appeal. Reconsiderations and appeals can be lodged against multiple subsequent activities on a single claim, therefore the totals of reconsiderations and/or appeals may exceed the number of awarded claims.

#### Of these 10 claims:

- **14** reconsiderations had been lodged, of which, **7** had received an outcome favourable to the claimant.
- **13** appeals had been lodged, of which, **6** had received an outcome favourable to the claimant.

Please note, it is possible that multiple reconsiderations and appeals were awaiting an outcome as at 31 March 2022, therefore these figures should be treated as a minimum.

# War Pension Scheme (WPS)

Of the **46** service personnel who medically discharged between 1 April 2012 and 31 March 2017 with a principal or contributory cause of CFS:

- Fewer than 5 personnel claimed for and were awarded compensation for CFS under the War Pension Scheme (WPS)
- All received a disablement percentage of 20%

 None went on to challenge the decision made on their claim and make a subsequent appeal.

Armed Forces Pension Scheme (AFPS)

Of the **46** UK Regular Armed Forces personnel medically discharged due to Chronic Fatigue Syndrome between 1 April 2012 and 31 March 2017, **13** had been awarded a Tier 1-3 payment or Early Departure Payment under the Armed Forces Pension Scheme (AFPS) 05 and AFPS 15 (part 4).

### By tier received:

- 8 were awarded a Tier 1 payment.
- Fewer than 5 were awarded a Tier 2 payment.
- None were awarded a Tier 3 payment.
- Fewer than five were awarded an Early Departure Payment.

It is possible for a recipient to receive payments from multiple schemes simultaneously. Where different tiers are paid across schemes, the highest tier has been presented.

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

Medical Discharges

Medical discharge figures are for UK Regular personnel (including Gurkhas and MPGS).

Medical discharges are the result of a number of specialists (medical, occupational, psychological, personnel, etc) coming to the conclusion that an individual is suffering from a medical condition that pre-empts their continued service in the armed forces. Statistics based on these discharges do not represent measures of true morbidity or pathology. At best they indicate a minimum burden of ill-health in the armed forces. Furthermore, the number and diversity of processes involved with administering a medical discharge introduce a series of time lags, as well as impact on the quality of data recorded.

Medical discharges due to chronic fatigue were identified as personnel who were discharged with a principal or contributory cause coded as G933 (Chronic fatigue syndrome) in the International Classification of Diseases and Related Health Problems Tenth Revision (ICD-10). Please note, personnel can be discharged due to multiple conditions and therefore Chronic Fatigue Syndrome may not be the only cause of discharge.

Information on medical discharges was sourced from electronic medical records (DMICP) and manually entered paper documents (FMed 23s). The primary purpose of these medical documents is to ensure the appropriate administration of each individual patient's discharge. Statistical analysis and reporting are secondary functions.

Defence Statistics release annual updates on medical discharges in the UK armed forces as an Official Statistic publication. The last statistical release was on 14 July 2022 which presented data up to 31 March 2022. The latest report can be found at: <a href="https://www.gov.uk/government/collections/medical-discharges-among-uk-service-personnel-statistics-index">https://www.gov.uk/government/collections/medical-discharges-among-uk-service-personnel-statistics-index</a>

## Armed Forces Compensation Scheme (AFCS)

The Armed Forces Compensation Scheme (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.

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

Data were extracted from the CAPS as at 31 March 2022 to inform the latest published National Statistics, as published on the Gov.uk website on 30 June 2022: <a href="https://www.gov.uk/government/collections/armed-forces-compensation-scheme-statistics-index">https://www.gov.uk/government/collections/armed-forces-compensation-scheme-statistics-index</a>

Claimants' injuries/illnesses considered to be Service-attributable are awarded under the AFCS in line with one of nine tariff injury tables, which each cover the legislation surrounding the payment of compensation: Table 1 - Burns; Table 2 - Injury, Wounds and Scarring; Table 3 - Mental Disorders; Table 4 - Physical Disorders; Table 5 - Amputations; Table 6 - Neurological Disorders; Table 7 - Senses; Table 8 - Fractures and Dislocations; and Table 9 - Musculoskeletal Disorders. This response includes claims assessed and awarded under Table 4 - Physical Disorders.

In cases where claimants are unhappy with the initial outcome of their claim, they can request for DBS Veterans UK to arrange a different assessing officer to reassess their claim, via a reconsideration. During reconsideration, DBS Veterans UK can either maintain the decision already made or increase the award. The award cannot be reduced or removed.

A claimant can lodge an appeal to an independent tribunal if they are unhappy with the reconsidered outcome of their initial AFCS claim. Where an appeal has been lodged and a reconsideration has not already been carried out, the MOD must carry out a reconsideration of the original decision and notify both the claimant and the Tribunal of the reconsideration outcome. The request must be received within six months of the notification date of the reconsideration outcome. The Tribunal is held by the HM Courts and Tribunals Service (England, Scotland and Wales) and the Northern Ireland Courts and Tribunals Service and is independent from the MOD. The Tribunal is bound by the rules of the scheme.

### War Pension Scheme (WPS)

The WPS provides no-fault compensation for all ex-service personnel where illness, injury or death is caused by Service from the start of the First World War in 1914 up until 5 April 2005. The WPS is managed by the Ministry of Defence (MOD) with all compensation claims administered by Defence Business Services (DBS) Veterans UK.

All ex-service personnel are entitled to register first claims under the WPS for injuries/illnesses as a result of Service prior to 6 April 2005. Compensation is paid for injuries/illnesses which arise as a result of service or are made worse by service, regardless of how they are sustained.

Figures provided are sourced from data stored on the War Pensions Computer System (WPCS).

Claims for Chronic Fatigue Syndrome are recorded on the WPCS as a free-text medical diagnosis description. This information is based on the medical evidence and diagnosis

obtained from the GP once a claim has been registered with DBS Veterans UK. Chronic Fatigue Syndrome could be awarded as either a one-off lump sum (gratuity payment), or as an ongoing pension. The figures provided in this response were based on a free-text text search on the following term: 'Chronic Fatigue Syndrome'.

A search was also conducted to capture potential incorrectly spelled diagnoses. However, every spelling iteration cannot be accounted for, so it is possible some claims for Chronic Fatigue Syndrome have not been identified. Therefore, the figures supplied should be treated as a minimum.

Under the WPS, individuals can be awarded for multiple conditions under one claim. Claims can also be made for conditions unrelated to a medical discharge. In cases where disablement is due to more than one injury, a composite assessment of the degree (percentage) of disablement is made by reference to the combined effect of all injuries. On the medical certificate of entitlement, the overall assessment is given and individual assessments are assigned to each accepted condition. However, where is it not possible to separate the effects of two or more conditions, a combined assessment is given for these particular conditions.

WPS disablement claims determined to be service-attributable are awarded a disablement percentage between 0% and 100%:

- Those awarded at a disablement percentage of 20% 100% (recorded in 10% increments) are paid an ongoing weekly war pension.
- Those awarded at a disablement percentage of 1% 19% are paid a one off gratuity (lump sum) payment. These cases appear in the WPS data with a grouped disablement percentage of one of the following: 1-5%, 6-14%, 15-19%.
- Cases where the claimed injury/illness is determined to be Service-attributable but not severe enough to impact on daily life are awarded a nil (0%) award.

If a claimant is unhappy with the outcome of their claim they can appeal to an independent tribunal. Tribunals are held by the HM Courts and Tribunals Service (England, Scotland and Wales) and the Northern Ireland Courts and Tribunals Service and are independent from DBS Veterans UK. WPS appeals are heard at the independent First-tier Tribunal in England and Wales or the Pensions Appeal Tribunal in Scotland and Northern Ireland. Tribunal decisions are legally binding on both the appellant and DBS Veterans UK. The Tribunal is bound by the rules of the scheme. If the decision is overturned, the Tribunal have agreed with the appellant. Appeals are cleared once a decision has been made from a Tribunal.

# Armed Forces Pension Scheme (AFPS)

Information on Tier awarded under AFPS 05 and AFPS 15 relates to personnel who were medically discharged between 1 April 2012 and 31 March 2017 with a principal or contributory cause of Chronic Fatigue Syndrome (CFS). Therefore, this information does not include any personnel who were medically discharged for other conditions and awarded AFPS 05 or AFPS 15 for CFS.

Early Departure Payments (EDP) are made to personnel who receive a Tier 1 ill-health discharge after they have achieved at least 20 years pensionable service and reached the age of 40 and are comprised of a tax-free lump sum and monthly payment made between leaving service and deferred pension age.

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). 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,

Defence Statistics Health