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Dear

Thank you for your email from 7 August 2023 requesting the following information further to our response to FOI2023/07435:

"I was wondering whether you could also provide the overall male / female breakdown for the 17% (n=18) that have been graded as MFD, 52% (n=56) as MLD and 31% (n=34) as MND."

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 all the information in scope of your request is held.

I can advise that some of the information in scope of your request falls entirely within the scope of the exemption provided for at Sections 40 (Personal Data) of the FOIA and has been redacted. Section 40(2) has been applied to some of the information in order to protect personal information as governed by the Data Protection Act 2018. Section 40(2) requires the Department to conduct a balancing exercise, this exercise involves balancing the rights and interests of individuals against the legitimate interests in disclosure, this is not the same as carrying out the public interest test associated with certain exemptions in FOIA. The balancing exercise is carried out in order to decide whether the absolute exemption in section 40(2) is engaged. In particular, there is no assumption of disclosure in the legitimate interests test, as there is with qualified exemptions. The outcome of the balancing exercise has resulted in numbers fewer than five being suppressed to prevent inadvertent disclosure of individual identities.

As at 1 May 2023, of the **108** UK Army personnel that had at least one Read code for coeliac entered into their electronic medical record (as identified in FOI2023/07435), **17%** (n = 18) had been graded as MFD, **52%** (n = 56) as MLD and **31%** (n = 34) as MND. Table 1 provides a breakdown by gender.

Table 1: Medical Deployment Standard (MDS) gradings awarded for UK army personnel with a read code for coeliac in their electronic medical record by gender, numbers 1 May 2023

Gender		
All	Male	Female
108	~	~
18	~	~
56	41	15
34	19	15
	All 108 18 56	All Male   108 ~   18 ~   56 41

Source: DMICP and JPA

~In line with JSP 200 on statistical disclosure, figures fewer than five have been suppressed where providing them inadvertently disclosures the numbers. Where there was only one cell in a row or column that was fewer than five, the next smallest number has also been suppressed so that numbers cannot simply be derived from totals.

It is important to note that:

- a) Numbers presented are for personnel who ever had a Read code for coeliac entered on to their medical record and does not necessarily reflect a formal diagnosis.
- b) Most reserve personnel do not come into contact with MOD healthcare on a regular basis as their care is provided by the NHS. Therefore, if these personnel incur an injury or illness which would result in a change of MDS, the MOD will not be aware until that person is called up for service/mobilised or unless they inform Defence as they are required to do by Reserve regulations. Therefore, we expect that the MDS of reserve personnel may be outdated and not accurately reflect their current health. Reserve personnel who are entitled to care from the MOD (such as FTRS (FC)) are not affected by this data limitation.

Under section 16 of the Act (Advice and Assistance) you may find it useful to note:

The figures provided in this response are for all UK armed forces regular and reservist personnel. This does not include entitled or non-entitled civilians, Foreign Service or non-UK military. This response relates to the currently serving population.

Reservist personnel have been included. However, please note that most reservist personnel receive their primary medical care from the NHS.

The point of diagnosis for Coeliac disease cannot be determined, however, as coeliac disease is a bar to entry into the armed forces then it can be assumed that anyone with a Read code for Coeliac disease has had the condition identified whilst in service.

Information was derived from the Defence Medical Information Capability Programme (DMICP). DMICP has a centralised data warehouse of Read coded information. It is the source of electronic, integrated healthcare records for primary healthcare and some MOD specialist care providers from which searches can be run.

The following Read codes were used to identify personnel with coeliac disease:

- 68W4 (Coeliac disease autoantibody profile positive)
- J690 (Coeliac disease)
- J6900 (Congenital coeliac disease)
- J6901 (Acquired coeliac disease)
- J690z (Coeliac disease NOS)

Please note that if information was entered as free text in the patient record then it is not available in the DMICP data warehouse and was not retrieved using the search for Read codes.

DMICP is a live data source and is subject to change. Date of data extract 20 June 2023.

## Medical grading

Service personnel with medical conditions or fitness issues which affect their ability to perform their duties will generally be referred to a medical board for a medical examination and review of their medical grading. The patient may be downgraded, to allow for treatment, recovery and rehabilitation. The Medical Deployment Standard (MDS) awarded can be on a temporary or permanent basis. The definitions of MDS categories are as follows:

• Medically Fully Deployable (MFD): Personnel medically fit for duty with no employment limitations.

- Medically Limited Deployable (MLD): Personnel medically fit for duty with minor employment limitations. MLD personnel may have a medical condition or functional limitation that prevents the meeting of all Medically Fully Deployable (MFD) requirements.
- Medically Not Deployable (MND): Personnel medically fit for duty with major employment limitations. MND personnel are not fit to deploy on Operations but may be deployable on UK based exercises and should be able to work effectively for at least 32.5 hours per week.

Most reserve personnel do not come into contact with MOD healthcare on a regular basis as their care is provided by the NHS. Therefore, if these personnel incur an injury or illness which would result in a change of MDS, the MOD will not be aware until that person is called up for service/mobilised or unless they inform Defence as they are required to do by Reserve regulations. Therefore, we expect that the MDS of reserve personnel may be outdated and not accurately reflect their current health. Reserve personnel who are entitled to care from the MOD (such as FTRS (FC)) are not affected by this data limitation.

Information on medical gradings was sourced from electronic medical records (DMICP).

Joint Personnel Administration (JPA) is the most accurate source for demographic information for UK armed forces personnel and was used to gather information on a person's service and gender.

Yours sincerely,

Defence Statistics Health (Analysis Directorate)