

# MOD Health and Safety Statistics Annual Report 2007/08 - 2012/13<sup>1</sup>



Ministry  
of Defence

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## INTRODUCTION

1. This annual Statistical Notice presents summary statistics on injury and illness to UK regular Armed Forces personnel, Ministry of Defence (MOD) civilian employees and other civilians that were recorded on the MOD's Health and Safety recording systems during the six year period between 2007/08 and 2012/13. The report also provides information on the number of deaths to UK regular Armed Forces and MOD civilian employees as held by Defence Statistics and the Defence Safety and Environment Authority (DSEA) over the same period. This information updates previous notices published by Defence Statistics, adding information on deaths, injuries and illnesses that occurred in 2012/13.
2. Please note that this report focuses on injuries and illness to UK regular Armed Forces personnel and MOD civilian employees. Injuries and illnesses to other civilian populations (for example to contractors, visitors and cadets) have been moved from the tables into the commentary. Previous versions of this report have included other civilian populations in the published tables; therefore direct comparisons between reports should not be made.
3. Please note that **Annex A Table 1** has been amended since initial publication due to validation of the fatalities data. It was found that one of the on duty and pending individuals was a civilian and therefore did not need to be included in this report.
4. As in previous reports, the primary focus of the report is to examine MOD health and safety performance. For this reason in a number of tables and figures, injuries and deaths due to hostile action and off duty road traffic accidents (RTAs).

## KEY POINTS

5. The number of deaths excluding hostile action and off duty RTAs in 2012/13 increased by 19% from a low of 62 in 2009/10 to 74 in 2012/13.
6. In 2012/13, 17 on duty injury-related deaths occurred as a result of work place incidents or on duty road traffic accidents (excluding deaths due to hostile action) among UK Armed Forces and civilian personnel. The number of confirmed safety related deaths is lower than in previous years, however this number may increase once the outcome of the pending cases is confirmed.
7. The number of major and serious injuries and illnesses reported decreased by 33% from 2,545<sup>1</sup> in 2011/12 to 1,715 in 2012/13. Of these, 1,540 (90%) involved regular Armed Forces personnel. This decrease was due to a resource issue regarding data entry of Land Force incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of records recorded rather than an actual decrease in the number of incidents for this year. Any further injuries/illnesses reported on the system will be updated in future releases.
8. The most common mechanism of non-fatal major and serious incidents to Armed Forces personnel and MOD civilian employees was 'Training/Exercise' with 915 (48%) incidents reported.
9. The rate of major and serious injuries and illnesses for UK regular Armed Forces personnel and MOD civilian employees increased 10% over the latest six years from 658<sup>1</sup> per 100,000 to 726 per 100,000. This is likely to be due to better reporting of health and safety incidents, rather than an actual increase in the number of incidents.

## **DATA, DEFINITIONS AND METHODS**

### **DATA**

#### **Deaths**

##### ***UK regular Armed Forces: death data***

10. Defence Statistics receives weekly notifications of all regular Armed Forces deaths from the Joint Casualty and Compassionate Cell (JCCC formerly the single Service casualty cells). Defence Statistics also receive cause of death information from military medical sources in the single Services, death certificates and coroner's inquests.
11. The information on deaths presented here for regular Armed Forces includes all trained and untrained personnel and Non-regulars who died on deployment. In addition, Defence Safety and Environment Authority (DSEA) notify Defence Statistics of deaths to Non-regular Armed Forces personnel where the cause of death is deemed to be safety-related.
12. The deaths data excludes the Home Service of the Royal Irish Regiment, full time reservists, Territorial Army and Naval Activated Reservists. Since Defence Statistics do not receive routine notifications of all deaths among reservists and Non-regulars, and because reliable denominator data to produce interpretable statistics are not available.
13. To record information on cause and circumstances of death, Defence Statistics uses the World Health Organisation's International Statistical Classification of Diseases and Health-related Problems 10th revision (ICD-10).
14. Defence Statistics regularly check all deaths for information on coroner's verdicts (England and Wales) and the results of investigations by the Procurator Fiscal for Scotland where possible. For Northern Ireland, Defence Statistics liaise with the Northern Ireland Statistics and Research Agency (NISRA) who handle the official information on behalf of the Northern Ireland Office. There is an obligation for all accidental deaths and those resulting from violent action to be referred to these officials. Inquests are usually held within a few months of the death, but occasionally a few years may elapse. Therefore some recent deaths may not have clearly defined cause information.

##### ***Work-related deaths to civilian personnel***

15. Civilian deaths who died while on-duty or on MOD sites (excluding those who died on deployment) are as notified to Defence Statistics via DSEA.

#### **Health and Safety Injuries and Illnesses**

##### ***Reporting Procedures***

16. Since 2005, Service personnel and civilians report incidents to Incident Notification Cells or via their on-site Safety, Health, Environment and Fire (SHEF) advisors in the Joint Forces Command TLB
17. The notification cells record accidents and incidents on Health and Safety reporting systems; these include the Incident Recording Information System (IRIS), the Army Incident Notification Cell (AINC), the Defence Equipment and Support Cell (DINC), and the Naval Service Incident Notification Cell (NSINC) databases.
18. The number of reported injuries and illnesses during 2012/13 is noticeably lower than the previous years. This is due to a staffing issue regarding data entry of Army incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of reporting rather than an actual decrease in the number of incidents for this quarter. Any further injuries / illnesses reported on the system will be updated in future reports. Latest figures and trends should therefore be interpreted with caution.

##### ***Health and safety incidents: cases covered***

19. This is the third MOD Health and Safety Statistics Annual Report in its revised format. The first report in this series 'MOD Health and Safety Statistics Annual Report 2010/11' provides details of the methodological changes.

20. The information provided here covers a range of health and safety incidents as set out by the Health and Safety Executive (HSE) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations 1995 (RIDDOR) and the MOD Joint Service Publication (JSP) 375, Leaflet 14 'Accident/Incident Reporting and Investigation'<sup>1</sup>. Cases include both MOD and Non-MOD personnel: regular Service personnel, members of the volunteer and regular reserves if they have been mobilised, MOD civilian staff, and any other civilians on MOD property or injured in or by MOD vehicles.
21. There is no current legal requirement, set out by RIDDOR, for injuries and illnesses to UK Service personnel to be notified to the HSE. However, MOD policy requires that all Service and civilian accidents/incidents, disease or dangerous occurrences which would have been reportable under RIDDOR be reported to the MOD.
22. It is MOD policy that all accidents/incidents (excluding battlefield injuries) relating to MOD staff, visitors, premises or equipment, or for which MOD may be culpable are reported and recorded; this includes fatalities, injuries, ill-health and near misses.
23. MOD personnel report health and safety incidents using a variety of reporting mechanisms. Since 2005 Service personnel and civilians report incidents to Incident Notification Cells or via their on-site Safety, Health, Environment and Fire (SHEF) advisors.
24. The notification cells record accidents and incidents on Health and Safety reporting systems; these include the Incident Recording Information System (IRIS), the Army Incident Notification Cell (AINC), the Defence Equipment and Support Cell (DINC) and the Naval Service Incident Notification Cell (NSINC) databases. To produce summary figures presented in this report, Defence Statistics combine and validate data from all eight databases. Further information on reporting mechanisms and validation processes can be found in paragraphs 16 to 22 and 62 to 65.

## DEFINITIONS

### Incident classifications

#### *Illness*

25. Illnesses specified within this report are defined as any reported episode of ill health with a cause which can be attributed to MOD activities or an individual's employment with the MOD.

#### *Major injuries and illnesses (excluding deaths)*

26. Major injuries are defined by the HSE as work-related cases which:
  - could result in death or in hospitalisation (or being confined to bed, if at sea) for more than 24 hours
  - result in a person who was not at work being taken to a hospital for treatment.
  - a specific type of injury e.g. fracture (except for fingers, thumbs and toes)
27. Major illnesses include any illness recorded on the Health and Safety reporting systems with a severity of 'major'.

#### *Serious injuries and illnesses*

28. Serious injuries equate to the HSE over-three-day injury category, and are those that are not defined as 'major' according to the above criteria but which could result in a person being unable to perform their normal duties for more than three days.
29. Serious illnesses include any illness recorded on the MOD's Health and Safety reporting systems with a severity of 'serious'.

#### *Minor injuries and illnesses*

30. Minor injuries and illnesses are those that are not classified as 'major' nor 'serious'. This category will include the severities of 'slight' and 'trivial'. Slight injuries and illnesses are defined as those causing a loss of normal work activity for more than one hour, but less than three days loss of the injured person's normal duty. Trivial injuries and illnesses are any other (resulting in less than one hour's lost time).

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<sup>1</sup> [http://www.mod.uk/NR/rdonlyres/D6D22833-8ABA-40E9-A0A7-84847754DDC6/0/20110524\\_JSP375\\_Leaflet14\\_UpdatedDINC.pdf](http://www.mod.uk/NR/rdonlyres/D6D22833-8ABA-40E9-A0A7-84847754DDC6/0/20110524_JSP375_Leaflet14_UpdatedDINC.pdf)

### ***Near Misses***

31. Near Misses are events that, while not causing harm, have the potential to cause death, injury, damage or ill health, but which was avoided by circumstance or through timely intervention. Also known as hazardous incident at sea.

### ***Dangerous Occurrences***

32. The Health and Safety systems also record specific, unplanned, uncontrolled events which have the potential to cause injury or damage and are listed in Schedule 2 of RIDDOR (1995).

### ***Work place incident***

33. A 'work place incident' is an incident, for which the MOD is responsible, that is it is deemed to be 'within the wire', thus work place incidents will include any incidents that occur on MOD property. On duty road traffic accidents (RTAs) are also included.

### ***Within the wire***

34. 'Within the wire' refers to incidents that occur on MOD property, including MOD sites in the UK and overseas, on military training facilities and ships. Injuries in Service provided accommodation and in Service educational facilities are also included.

### ***Work-related deaths***

35. For the purpose of this report, 'work-related deaths' have been defined as injury related deaths occurring on-duty or on MOD property, excluding suicides.

### ***Hostile action***

36. 'Hostile action' is the combination of the JCCC reporting categories 'killed in action' and 'died of wounds' for operational deaths that are a result of hostile action.

### ***Road Traffic Accidents - on duty***

37. Road traffic accidents are those which occur on public highways whilst the Service personnel or MOD civilian employees are on duty.

### ***Land Transport Accident***

38. A land transport accident is defined as any accident involving a device that has been designed for, or is being used at the time for, the conveyance of either goods or people from one place to another on land.

## **Personnel classifications**

39. **All** – Includes identified UK regular Armed Forces personnel and MOD civilian employees.

40. **Regular Armed Forces** - Includes identified UK regular Armed Forces personnel only.

41. **Naval Service** – Includes identified Royal Navy and the Royal Marine personnel only.

42. **Army** - Includes identified UK regular Army personnel only.

43. **RAF** - Includes identified UK regular Royal Air Force personnel only.

44. **MOD civilian** – Consists of permanent Industrial and Non-Industrial MOD employees only. Excludes Royal Fleet Auxiliary (RFA) and MOD locally engaged staff overseas (LEC's).

45. **MOD civilian Industrial** - (also known as skill zone staff) are civilian personnel employed primarily in a trade, craft or other manual labour occupation. This covers a wide range of work such as Industrial technicians, air freight handlers, storekeepers, vergers and drivers.

46. **MOD civilian Non-Industrial** - are civilian personnel who are not primarily employed in a trade, craft or other manual labour occupation. This covers a wide range of personnel undertaking work such as administrative, analysis, policy, procurement, finance, medical, dental, teaching, policing, science and engineering.

47. **Other** – The 'Other' category consists of all other personnel who have an injury or illness recorded on MOD health and safety systems. These are people who are not identified as UK regular Service

personnel or MOD civilians (Industrial or Non-Industrial), but for whom the MOD has a duty of care. Such people include reservist personnel, contractors (both casual and permanent), MOD locally engaged staff overseas, agency staff, Service cadets, visiting forces, dependents of Service personnel including children, members of public.

## HSE comparison populations

48. **Office workers with high risk site/warehouse visits occupations** are split into two separate entities: Office work (high risk site visits) and Office work (warehouse).
49. Office work (high risk site visits) include the following occupations
  - Production manager and directors in manufacturing (1121)
  - Production managers and directors in construction (1122)
  - Health Services and public health managers and directors (1181)
  - Health care practice manager (1241)
  - Property, housing and estate managers (1251)
  - Waste disposal and environmental services managers (1255)]
  - Environment professionals (2142)
50. Office work (warehouse) include the following occupations
  - Managers and directors in transport and distribution (1161)
  - Managers and directors in storage and warehousing (1162)
  - Stock control clerk and assistants (4133)
  - Transport and distribution clerks and assistants (4134)
51. **Warehouse Labourer occupations** include the following occupations
  - Elementary storage occupations
52. For further information please see the ONS Standard Occupational Classification 2010 Volume 1 Structure and descriptions of unit groups' document at <http://www.ons.gov.uk/ons/guide-method/classifications/current-standard-classifications/soc2010/index.html>. The occupational codes listed above are the SOC 2010 unit group codes

## Mechanism classifications

53. **Adventure Training** – Injuries resulting from organised adventure training activities (i.e. when part of an exercise or training course) such as skiing, rock climbing, parachuting and mountain biking.
54. **Built Estate Infrastructure** - Injuries resulting from issues with the working environment or accommodation on MOD sites. For example, injuries resulting from slips, trips or falls on poorly treated icy surfaces or trip hazards such as broken flooring. Injuries resulting from poor lighting would also come under this mechanism.
55. **Discipline Related** – Injuries resulting from incidents where an individual could be disciplined by the Service or civilian authorities for their actions. The individual committing the offence does not necessarily have to be the injured person or a member of the Services. Many injuries that fall in to this mechanism are as a result of assaults. However, please note this mechanism is also used for injuries resulting from suspected self harm, which is not considered a military offence.
56. **Equipment Maintenance** – Injuries resulting from trying to fix or routinely maintain an item of machinery. For example injuries resulting from carrying out weapon repairs, injuries in workshops not directly involving vehicles, injuries as a result of using specialist equipment such as grinders or bolt guns.
57. **Normal duties** – Injuries that occur during normal work duties that do not fall into other mechanism categories.
58. **RTA** – Injuries resulting from road traffic accidents on the public highway. Only RTAs that occur on duty are included in the report (with the exception of **Table 1**).

59. **Sport/Recreation** – Injuries resulting from participating in sporting activities such as football or rugby. This mechanism also includes injuries resulting from off duty activities where that activity does not readily fall in to any other mechanism.
60. **Training/Exercise** – Injuries resulting from activities related to being on exercise, routine training or participating in organised physical training. This mechanism also includes Non battlefield injuries sustained on operations where the information supplied on health and safety systems is minimal.
61. **Workplace Transport** - Injuries resulting from road traffic accidents off the public highway i.e. within the boundaries of a military establishment or training area. This mechanism also includes injuries resulting from directly working on a vehicle.

## METHODS

### Data Quality

#### **Validation process**

62. Data from the MOD health and safety recording systems have been standardised, merged and validated prior to the production of this report. To standardise the data a new category 'Amended Mechanism' was created and each individual incident is allocated an 'Amended Mechanism based upon the 'Event Cause', 'Event Kind' and 'Incident Summary'. The primary validation processes are detailed in paragraphs 64 to 65.
63. **Duplicates:** Where duplicate injuries have been found within, or across systems, duplicate records have been removed.
64. **Severity:** Where incidents have been recorded on health and safety systems with a severity of 'Unknown' or blank and the severity can be clearly identified, it has been reclassified to the correct severity. If the severity is not clear it has been classified as 'Minor'.
65. **Service Number** – Service personnel and MOD civilians have been identified by linking their recorded service or staff number to the Joint Personnel Administration System (JPA) or Human Resources Management System (HRMS). Where a service/staff number has been entered incorrectly or left blank, it has been updated where possible. If no information exists on the health and safety system to indicate the individual's Service (if applicable), or if they are identified as cadets, contractors or locally employed civilians or members of the public, they have been allocated to the 'Other' personnel category.

#### **Quality issues**

66. **Excluded records:** No injuries reported on the MOD Health and Safety recording systems during the period 2007/08 to 2012/13 has been excluded from this report. Only duplicate incident records have been removed.
67. **Safety-related deaths:** The MOD does not formally classify deaths as safety or Non-safety related. Therefore, injury-related deaths caused by work place incidents and on duty RTAs are presented in **Section 2**, aligning with the ICD (International Classification of Diseases) and the deaths National Statistic. **Annex A** provides the number of deaths due to health and safety failures.
68. Injury and illness data used within this report was extracted from the various health and safety systems on 1 July 2013. Deaths data was sourced from the Deaths in the UK regular Armed Forces 2012 National Statistic and Quarter 1 2013 deaths data extracted as at 5 September 2013.
69. **Late reporting of incidents:** Due to the fact that injuries and illnesses can be reported several months after the event, figures for 2012/13 have been marked as provisional (p) and will be updated in the 2013/14 report. The level of late reporting is not known; therefore figures for 2012/13 should be used with caution as they may under represent the actual number of injuries that occurred in that period.
70. **Illness reporting:** The primary process for reporting ill health to Service personnel is through the Service medical reporting chain, not health and safety reporting processes. MOD civilians report through their reporting chain however they may report illnesses directly to their medical general practitioner. Therefore the numbers of safety related illnesses presented in this report should be treated as a minimum.

71. Due to complexity of reporting across different Top Level Budget (TLB) systems, the mechanism from the Army AINC system has been adapted and applied to the other incident records held on other systems. It is not an exact practice due to the different types of activity undertaken by the three Services and MOD civilians resulting in different data capture. Mechanism definitions are currently under review by the single Service Chief Environment & Safety Officers (CESOs).
72. **Defence Transformation** – Due to the ongoing structural changes occurring within the MOD, human resources across all TLBs has become limited. This is noticeable in the AINC where there has been a significant decrease in reporting due to low staffing levels. It also means many records have been duplicated and some had not been allocated a severity. By examining each record manually, it was possible for Defence Statistics to allocate a severity for these records.
73. This report is based on health and safety incidents **as recorded** on the MOD's systems. Further incidents may have been reported to the Incident Notification Cells that have not yet been recorded on the systems due to staffing issues. Defence Statistics are investigating with CESOs the extent of this issue.

## **Statistical measures**

### ***Numbers and rates***

74. In line with Defence Statistics' rounding policy health and safety injury numbers have been rounded to the nearest five. Numbers fewer than five have been suppressed, and are represented by ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts. Percentage values have been calculated using un-rounded figures.
75. When reporting deaths, actual numbers have been presented in line with Defence Statistics' rounding policy, May 2009.
76. All time series presented in this report begin at financial year 2007/08. Additional years will be added to this time series in future reports to reach a rolling ten year time series. Defence Statistics do hold Health and Safety data for incidents prior to 2007/08, however figures prior to this point are likely to have inconsistencies due to changes in health and safety business practices and IT systems that were rolled out across the Ministry of Defence (MOD), finishing in 2007/08. Therefore to ensure consistency, figures are only presented from 2007/08 onwards.
77. This report provides data on the number of incidents recorded by various health and safety systems. Where possible we also provide crude rates based on the overall known population. Please note that Defence Statistics do not have reliable denominators for the reservist population, therefore the rates for Service personnel exclude reservists. For civilians, Defence Statistics only have information on MOD employees, not on external contractors. It is important to note that crude rates are not strictly comparable owing to the possible different age and gender profiles of the baseline populations. This would apply particularly between Service personnel and civilian personnel as the former are predominantly composed of young people.
78. Injury rates for UK regular Armed Forces personnel have been calculated using a 13 month average strength over each financial year using the Joint Personnel Administration System (JPA) for 2007/08 to 2012/13. All UK Armed Forces strengths data used are considered finalised. These will be published in the next release of UK Defence Statistics 21<sup>st</sup> November 2013 (see Defence Statistics website for release date -[www.dasa.mod.uk](http://www.dasa.mod.uk)).
79. All rates presented in the report are per 100,000 personnel per year.
80. The report uses the number of Full-Time Equivalent (FTE) personnel as the denominator for MOD civilian rates. FTE is a measure of the proportion of a standard working week that an individual is employed, for example, a person who works three standard working days per week would have an FTE of 0.6.

### **Amendments to the structure and contents of the report**

81. Within Section 7, the rates of injuries that are considered to be RIDDOR reportable are presented. In order to provide a valid comparison, only those injuries to MOD civilian employees that met the criteria for reporting under RIDDOR are included in this section. Therefore, injuries that occurred

overseas, RTAs on public highways, suicides, suspected suicides and illnesses have been excluded.

82. RIDDOR injury rates for MOD civilian employees have been calculated using a 13 month average strength over each financial year using the Human Resources Management System (HRMS) for 2007/08 to 2011/12. The strengths from JPA have been revised to exclude those MOD civilian employees overseas or classified as at sea, as injuries to personnel outside the UK are not RIDDOR reportable.
83. Changes by the HSE to the categorisation of occupations have changed the way in which a comparison is made between MOD civilians. These changes have occurred as technological and organisational changes have significant impact on the occupational structure via the introduction of new jobs and the numbers of job holders in particular occupations. Thus, classification must be regularly updated to account for these changes. Within this report SOC2000 has been replaced with SOC2010. See paragraph 51 for more information
84. Injury rates for the protective services, warehouse labourer and high risk office worker groups in the figures have been calculated using data sourced from the HSE. For more information please go to <http://www.ons.gov.uk/ons/guide-method/classifications/current-standard-classifications/soc2010/index.html>.

### **Future planned changes affecting the structure and contents of the report**

85. Two changes have occurred to health and safety reporting that may affect the contents of this report in 2013/14. Defence Statistics will monitor the impact of these changes and devise appropriate amendments to the 2013/14 report, in consultation with stakeholders.
86. **Changes to RIDDOR** - As of April 2014, RIDDOR's major injury classification has changed and replaced with a shorter list of 'specified injuries'. Occupational illness is being amended to reduce the number of types of industrial disease from 47 to eight. Finally, fewer types of dangerous occurrence will require reporting. Reporting of the new major classification is scheduled to begin in 2016 however data will be collected in this way from April 2014. This will allow for a change over period in order to capture all major injuries and illnesses that occur.
87. **Changes to AINC**- The Army Incident Notification Cell (AINC) is being upgraded and will include data from the Naval Service from November 2013. This may have an effect on the level of reporting of injuries and illnesses as the number of incidents reported is likely to increase due to the fact that AINC has had staffing issues for the previous year.

### **Revisions**

88. Data presented for 2007/08 to 2011/12 are final and are not subject to revision, unless errors are found in the classifications or statistical methods used during their publication. Due to the fact that injuries and illnesses can be reported several months after the event, figures for 2012/13 have been marked as provisional (p) and will be updated in the 2013/14 report. All revisions are marked 'r'.

## RESULTS

### Section 1: All deaths to UK regular Service personnel

89. In 2012/13 there were 118 deaths to UK regular Service personnel; of these, 15 (13%) were Naval Service personnel, 84 (71%) were Army personnel and 19 (16%) were RAF personnel. A summary of these deaths by cause and duty status is provided in **Table 1**.

**Table 1: UK regular Service personnel<sup>1</sup>, all deaths, by cause, 2012/13<sup>2</sup>, numbers**

Cause	All	On Duty	Off Duty
<b>All</b>	<b>118</b>	<b>55</b>	<b>63</b>
<b>Disease-related conditions</b>	<b>30</b>	<b>7</b>	<b>23</b>
<b>External causes of injury</b>	<b>82</b>	<b>46</b>	<b>36</b>
<b>Deaths due to Accidents</b>	<b>45</b>	<b>15</b>	<b>30</b>
Land Transport Accidents	14	1	13
of which Road Traffic Accidents	14	1	13
Other	31	14	17
<b>Deaths due to Violence</b>	<b>32</b>	<b>31</b>	<b>1</b>
Hostile Action	31	31	0
Other	1	0	1
<b>Suicide and Open verdicts</b>	<b>5</b>	<b>0</b>	<b>5</b>
<b>Cause not currently available</b>	<b>6</b>	<b>2</b>	<b>4</b>

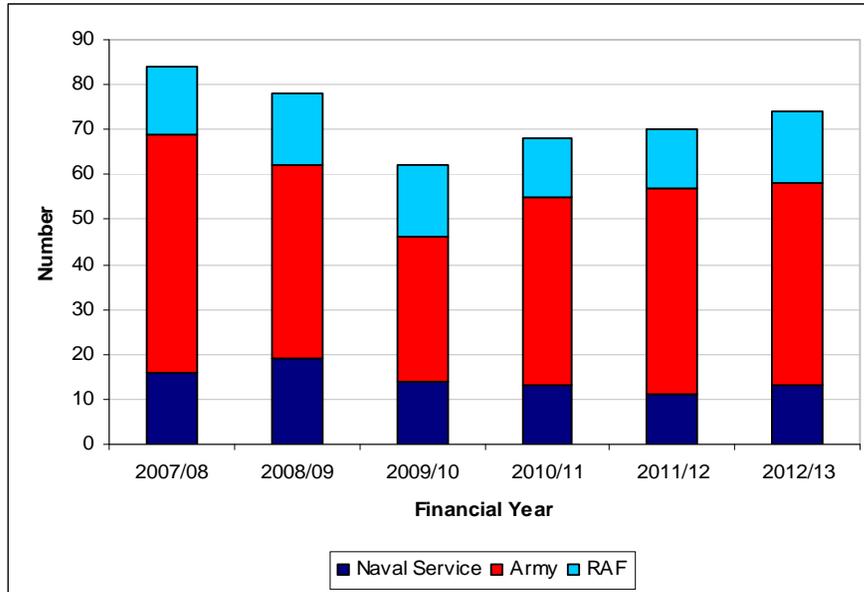
1. Figures for Tri-Service Regular personnel and only those reservists who have died whilst deployed on operations.

2. 2012 data as reported in the 2012 Death National Statistic, Qtr 1 2013 data is as at 18 Sept 2013.

3. Duty status at time of death under investigation.

90. As in previous reports, the primary focus of the report is to examine MOD health and safety performance. For this reason, injuries and deaths due to hostile action and off duty road traffic accidents (RTAs) have been excluded from tables and figures from this point within the report, unless otherwise specified. Those deaths that can be attributed to health and safety failures are reported on in **Annex A Table 2**.

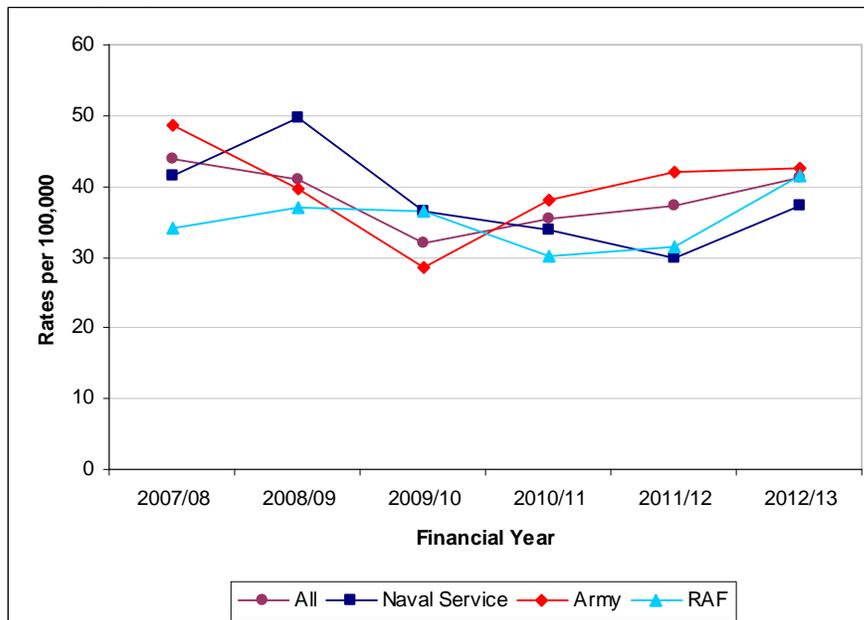
**Figure 1: UK regular Service personnel<sup>1</sup>, deaths, by Service, 2007/08 to 2012/13<sup>2,3</sup>, numbers**



1. Figures for Tri-Service Regular personnel and only those reservists who have died whilst deployed on operations.
2. 2012 data as reported in the 2012 Death National Statistic, Qtr 1 2013 data is as at 18 Sept 2013.
3. See paragraph 76 for explanation of time series presented.

91. The number of deaths to UK regular Service personnel (excluding hostile action and off-duty RTAs) decreased from 84 deaths in 2007/08 to a low of 62<sup>f</sup> deaths in 2009/10. The number of deaths increased by 19% to 74 in 2012/13 (can be obtained from **Table 1** by subtracting deaths due to hostile action (n=31) and off-duty Road Traffic Accidents (n=13) from all deaths (n=118)).

**Figure 2: UK regular Service personnel<sup>1</sup>, deaths, by Service, 2007/08 to 2012/13<sup>2,3</sup>, rates per 100,000 per year**



1. Figures for Tri-Service Regular personnel and only those reservists who have died whilst deployed on operations.
2. 2012 data as reported in the 2012 Death National Statistic, Qtr 1 2013 data is as at 18 Sept 2013.
3. See paragraph 76 for explanation of time series presented.

92. The rate of UK regular Armed Forces personnel deaths (excluding hostile action and off-duty RTAs) decreased from 44 per 100,000 in 2007/08 to 32 per 100,000 in 2009/10. Since 2009/10 the rate has increased over time to 41 per 100,000 in 2012/13. This drop in the rate in 2009/10 is likely to be due to the increased operational activity in Afghanistan at this time, which resulted in a higher number of deaths due to hostile action. Please see Defence Statistics Armed Forces deaths National Statistic for further information: <http://www.dasa.mod.uk/index.php/publications/health/deaths/deaths-in-service/2012>.
93. The most frequently recorded causes of death between 2007/08 and 2012/13 were transport related deaths: involving helicopter accidents (five separate incidents resulting in 10 deaths), fixed wing aircraft accidents (six separate incidents resulting in 13 deaths) and land transport accidents (35 separate incidents resulting in 40 deaths).

## Section 2: Work place incidents and on duty road traffic accidents resulting in injury-related deaths

94. **Section 2** presents information on injury-related deaths that were caused by work place incidents and on duty road traffic accidents (RTAs). A 'work place incident' is a death for which the MOD is responsible, that is it is deemed to be 'within the wire'. Work place incidents also include any vehicle incident that occurred on MOD property and on duty RTAs (see paragraphs 33, 34 and 37). A further breakdown of these deaths is provided in Annex A **Table A2**. Please note that disease-related deaths that may have been caused or exacerbated by health and safety failure are not included in these figures.
95. **It is important to note that Defence Statistics are not able to attribute these deaths to health and safety failures. Those deaths that can be attributed to health and safety failures are reported on in Annex A Table A2.**
96. In 2012/13 there were 25 work place incidents and on duty RTAs resulting in injury-related deaths. (**Table 2**). Of these, four were Naval Service personnel (15%), 14 were Army personnel (58%), and seven were RAF (27%) personnel. In 2012/13 there were no civilian deaths as a result of work place incidents and on duty RTAs.

**Table 2: All personnel<sup>1</sup>, work place incidents<sup>2</sup> and on duty RTAs<sup>3</sup> resulting in deaths, 2012/13, numbers**

Cause	All	On Duty	Off Duty	Under Investigation
<b>All</b>	<b>25</b>	<b>17</b>	<b>8</b>	<b>0</b>
<b>External causes of injury</b>	<b>22</b>	<b>15</b>	<b>7</b>	<b>0</b>
<b>Deaths due to Accidents</b>	<b>22</b>	<b>15</b>	<b>7</b>	<b>0</b>
Land Transport Accidents	1	1	0	0
of which Road Traffic Accidents	1	1	0	0
Other	21	14	7	0
<b>Deaths due to Violence</b>	<b>0</b>	<b>0</b>	<b>0</b>	<b>0</b>
Other	0			
<b>Cause not currently available</b>	<b>3</b>	<b>2</b>	<b>1</b>	<b>0</b>

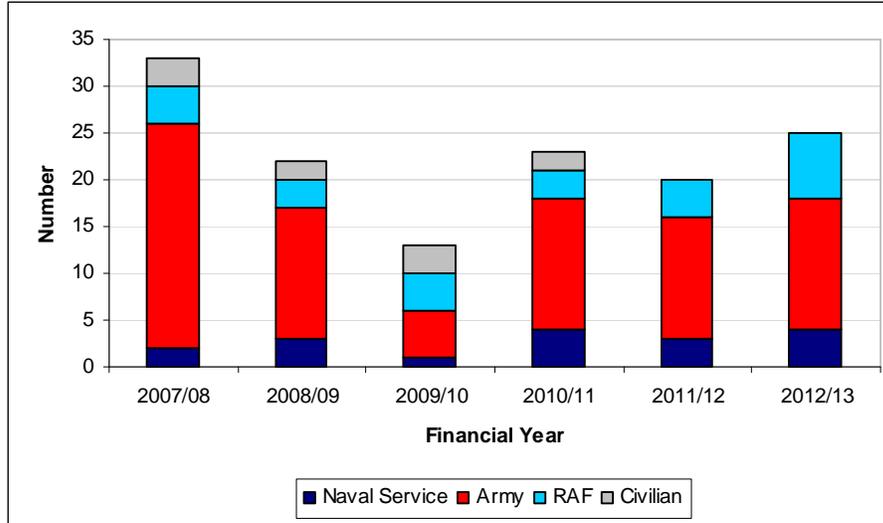
1. 'All personnel' includes any person whose injury or illness was recorded on MOD health and safety systems. This includes regular Armed Forces personnel and any other person injured as a result of MOD activity or on a MOD site (see paragraph 38).

2. For definition of work place incident (see paragraph 33).

3. 'Road traffic accidents - on duty' are those which occurred on public highways whilst the person was on duty (see paragraph 37).

97. There was no common cause among the 21 'Other deaths due to accidents'. These deaths included suspected suicides, aircraft accidents, negligent discharge and falls.

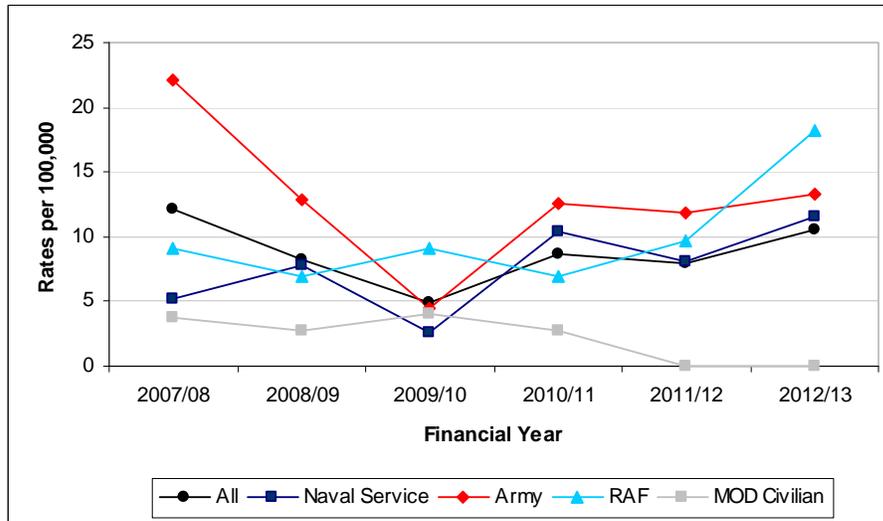
**Figure 3: All personnel<sup>1</sup>, work place incidents<sup>2</sup> and on duty RTAs<sup>3</sup> resulting in deaths, by Service, 2007/08 to 2012/13<sup>4</sup>, numbers**



1. 'All personnel' includes any person whose injury or illness was recorded on MOD health and safety systems. This includes regular Armed Forces personnel and any other person injured as a result of MOD activity or on a MOD site (see paragraph 38).
2. For definition of work place incident (see paragraph 33).
3. 'Road traffic accidents - on duty' are those which occurred on public highways whilst the person was on duty (see paragraph 37).
4. See paragraph 76 for explanation of time series presented.

98. Figure 3 shows that there was a high of 33<sup>f</sup> injury-related deaths caused by work place incidents and on duty RTAs in 2007/08 and a low of 13 in 2009/10. This drop in the number of deaths during 2009/10 is due to an increase in operational activity in Afghanistan during 2009/10, resulting in more hostile action deaths. Since 2009/10 the number of injury related deaths has increased to 25 in 2012/13.
99. There were 10 work place incidents and on duty RTAs resulting in injury-related deaths to civilians during the period 2007/08 to 2012/13. Of these, five were cadets, three were contractors, one was a member of the Royal Fleet Auxiliary (RFA) and one was a MOD civilian locally engaged staff based overseas.

**Figure 4: All personnel<sup>1</sup>, work place incidents<sup>2</sup> and on duty RTAs<sup>3</sup> resulting in deaths, by Service, 2007/08 to 2012/13<sup>4</sup>, rates<sup>5</sup> per 100,000 per year**



1. 'All personnel' includes any person whose injury or illness was recorded on MOD health and safety systems. This includes regular Armed Forces personnel and any other person injured as a result of MOD activity or on a MOD site (see paragraph 38).
2. For definition of work place incident (see paragraph 33).
3. 'Road traffic accidents - on duty' are those which occurred on public highways whilst the person was on duty (see paragraph 37).
4. See paragraph 76 for explanation of time series presented.
5. Rates for general civilian population cannot be calculated.

100. In 2012/13, the rate of work place incidents and RTAs resulting in injury-related death for UK Armed Forces and MOD civilian personnel was 11 per 100,000, an increase of 38% since 2011/12.

101. Comparing 2007/08 to 2012/13, the rate of work place incidents and RTAs resulting in injury-related deaths varied between each of the Services:

- The Naval Service rate increased from 5 per 100,000 to 12 per 100,000
- The Army rate decreased from 22<sup>r</sup> per 100,000 to 13 per 100,000
- The RAF rate increased from 9 per 100,000 to 18 per 100,000
- The MOD civilian rate decreased from 4 per 100,000 to 0 per 100,000

### Section 3: Major and serious injuries and illnesses

102. **Section 3** contains information on major and serious injuries and illnesses recorded on the MOD health and safety systems. Major injuries equate to the Health and Safety Executive's (HSE) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) category of 'major'. Serious injuries equate to the HSE RIDDOR category of 'over-three-day' injuries. Further information on the categories of injury and illness contained in this report can be found in paragraphs 23 to 28, along with detailed definitions of major and serious injuries and illnesses.

103. The MOD has no legal requirement to report injuries and illnesses to Armed Forces personnel to the HSE. However, all information on major and serious injuries has been provided with the assumption that there is no exemption. Incidents that involve MOD civilian personnel are notified to the HSE through normal RIDDOR procedures.

104. Deaths have been excluded from the following tables and figures, as they have been reported in Sections 1 and 2. Other exclusions include battlefield injuries and off duty Road Traffic Accidents (RTAs) (see paragraph 3).

105. Please note that the following tables include reported injuries and illnesses to UK regular Armed Forces personnel and MOD civilian employees only. Paragraph 108 summarises the number of injuries/illnesses to other occupational groups.

106. **Table 3** presents the number of major and serious injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Table 3: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major and serious injuries and illnesses, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2</sup>**

Service	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13 <sup>p</sup>
<b>All</b>	<b>1,785</b>	<b>2,290</b>	<b>2,520</b>	<b>2,850</b>	<b>2,545<sup>r</sup></b>	<b>1,715</b>
<b>Regular Armed Forces</b>	<b>1,495</b>	<b>1,925</b>	<b>2,135</b>	<b>2,525</b>	<b>2,300<sup>r</sup></b>	<b>1,540</b>
Naval Service	225	215	175	170	210 <sup>r</sup>	220
Army	1,195	1,585	1,735	2,130	1,965 <sup>r</sup>	1,225
RAF	75	120	220	220	130 <sup>r</sup>	95
<b>MOD Civilian</b>	<b>285</b>	<b>370</b>	<b>385</b>	<b>325</b>	<b>245<sup>r</sup></b>	<b>180</b>
Industrial	125	150	145	140	120 <sup>r</sup>	80
Non-Industrial	160	220	240	185	125 <sup>r</sup>	100

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

p. Figures for 2012/13 are provisional (see paragraph 69).

107. There were 1,715 major and serious injuries and illnesses to UK regular Armed Forces personnel and MOD civilian employees that were reported on MOD health and safety systems during 2012/13 (**Table 3** and **Figure 5**). This was a 33% decrease on the 2011/12 figure of 2,545.

108. The number of reported major injuries and illnesses was noticeably lower in 2012/13 than in previous years. This was due to a resource issue regarding data entry of Land Force incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of reporting rather than an actual decrease in the number of incidents for this year. Any further injuries/illnesses reported on the AINC system will be updated in future releases.

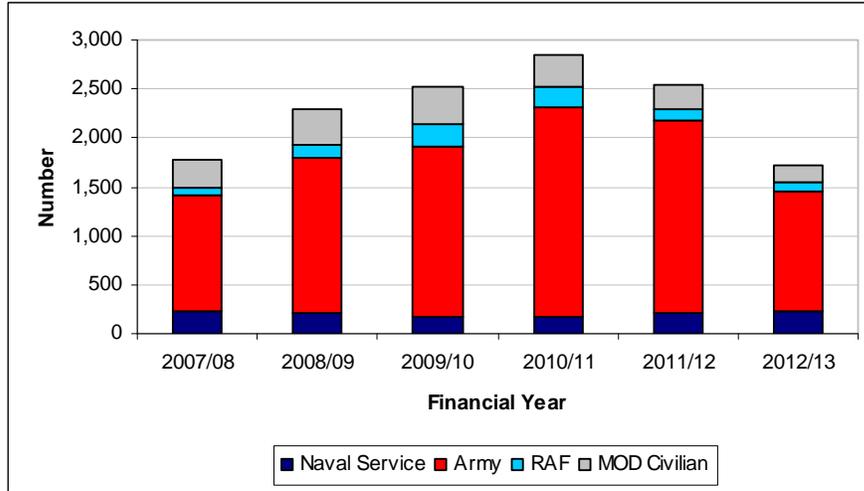
109. In addition, there were 640 other persons classified with a major or serious injury/illness reported on MOD health and safety systems during 2012/13:

- 200 (33%) were identified as reservists
- 160 (24%) were cadet forces (including adult volunteers)
- 60 (9%) were MOD locally engaged staff overseas
- 40 (6%) were contractors.

- The remaining 180 personnel were identified as either Royal Fleet Auxiliary staff (RFA), agency staff, member of the public, dependants of service personnel (including children), foreign forces or official visitor.

110. **Figure 5** presents the number of major and serious injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Figure 5: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major and serious injuries and illnesses, 2007/08 to 2012/13<sup>2,p</sup>, numbers**



1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

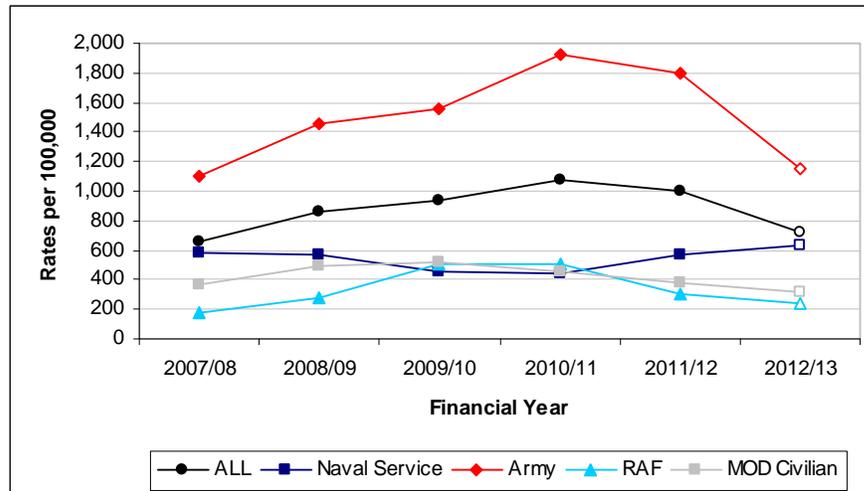
111. Of the 1,715 incidents reported in 2012/13, 10% (180) were MOD civilians and 90% (n=1,540) involved UK regular Armed Forces personnel. Of the 1,540 Regular Service Personnel: 14% (n=220) were Naval Service personnel, 80% (n=1,225) were Army personnel, 6% (n=95) were RAF personnel.

112. Of the 1,715 incidents, 1% (n=20) were illnesses. Half of which were to MOD civilian personnel (n=10). The most common cause was work-related stress (n=5). The most common cause for illnesses within the Armed Forces was exposures to excessive heat and cold (n=6).

113. Please note that reporting of work related illness is known to be incomplete, so the figures quoted should be treated as a minimum. Chronic illness and infectious diseases were more likely to be reported through medical services (either military or civilian).

114. **Figure 6** presents the rates of major and serious injuries and illnesses to UK regular Armed Forces by Service and MOD civilians between 2007/08 and 2012/13.

**Figure 6: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major and serious injuries and illnesses, by Service, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD Civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

115. The rate of major & serious injuries and illnesses for UK regular Armed Forces and MOD civilian personnel increased by 10% from 658 per 100,000 in 2007/08 to 726 per 100,000 in 2012/13. The increase is partly due to better reporting mechanisms introduced in the MOD over this period. The drop in rates for the Army in 2012/13 was due to a resource issue affecting data input at the AINC (see paragraph 17 for more details). Once the backlog in records is cleared the rate for 2012/13 will increase.

116. Comparing 2007/08 to 2012/13, the rate of reported major & serious injuries and illnesses varied between each of the Services:

- Naval Service increased by 9% from 588 to 638 per 100,000
- Army increased by 6% from 1,097 to 1,158 per 100,000. The rate of injuries in 2012/13 is likely to increase once the backlog of Army records is cleared (see paragraph 17).
- RAF increased by 40% from 172 to 241 per 100,000
- MOD civilians decreased by 14% from 362 to 311 per 100,000

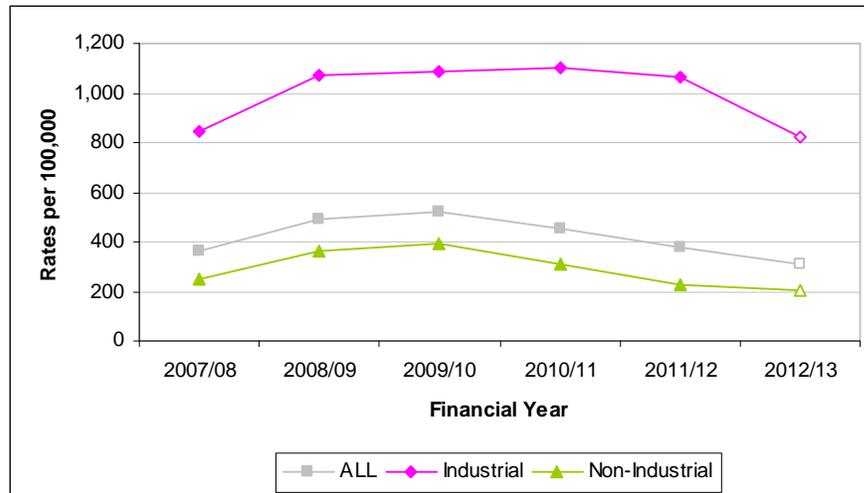
117. The highest annual rate of reported major & serious injuries and illnesses for each Service was as follows:

- Naval Service at 638 per 100,000 in 2012/13
- Army at 1,926 per 100,000 in 2010/11. This result may change once the backlog of Army records is cleared (see paragraph 17).
- RAF at 510 per 100,000 in 2010/11
- MOD civilians at 522 per 100,000 in 2009/10

118. Due to the many trades and roles across the UK Armed Forces, the rates of major and serious injuries and illnesses for the UK Armed Forces personnel have not been broken down into smaller sub groupings. However, MOD civilian employees can be broken down into two clearly identifiable groups: Industrial and Non-Industrial employees.

119. **Figure 7** presents the rates of major and serious injuries and illnesses to MOD civilians by employee type between 2007/08 and 2012/13.

**Figure 7: MOD civilian employees<sup>1</sup>, major and serious injuries and illnesses by employee type, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD civilian' includes Industrial and Non-Industrial employees only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

120. From 2007/08 to 2012/13, the rate for MOD Industrial staff was consistently higher than MOD Non-Industrial staff (see **Figure 7**). The difference in rates between the MOD Industrial staff and MOD Non-Industrial staff was likely to be due to the different duties performed and the relative level of risk they were exposed to. For example, MOD Non-Industrial staff are predominately office based while MOD Industrial staff work in vehicle workshops and stores. Further details of rates by severity for MOD Industrial staff and MOD Non-Industrial staff can be found in Annex B **Table B1**.

121. From 2007/08 to 2012/13, the rate of reported major and serious injuries and illnesses for:

- MOD Industrial staff decreased by 2% from 843 to 824 per 100,000
- MOD Non-Industrial staff decreased by 17% from 249 to 206 per 100,000

122. The highest rate of reported major and serious injuries and illnesses for the

- MOD Industrial staff was 1,101 per 100,000 in 2010/11
- MOD Non-Industrial staff was 395 per 100,000 in 2009/10

123. **Table 4** presents the number of major and serious injuries and illnesses to UK regular Armed Forces and MOD civilians by mechanism, 2012/13.

**Table 4: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major and serious injuries and illnesses by Service and mechanism, 2012/13<sup>p</sup>, numbers<sup>2</sup>**

Mechanism	All		Naval Service <sup>5</sup>		Army		RAF		MOD Civilian	
	Count	%	Count	%	Count	%	Count	%	Count	%
<b>All</b>	<b>1,715</b>	<b>100%</b>	<b>220</b>	<b>100%</b>	<b>1,225</b>	<b>100%</b>	<b>95</b>	<b>100%</b>	<b>180</b>	<b>100%</b>
Adventure training	140	8%	15	7%	125	10%	~	2%	0	0%
Built Estate infrastructure	45	3%	5	3%	15	1%	~	3%	25	13%
Discipline Related	40	2%	~	1%	35	3%	~	2%	~	1%
Equipment Maintenance	20	1%	~	0%	5	0%	10	10%	~	2%
Normal duties	230	13%	85	39%	50	4%	10	12%	85	47%
RTA	45	3%	~	1%	35	3%	0	0%	5	4%
Sport/Recreation	295	17%	40	19%	220	18%	25	26%	5	3%
Training/Exercise	815	48%	55	26%	685	56%	35	38%	40	21%
Workplace Transport	85	5%	10	5%	55	4%	5	8%	15	8%

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

p. Figures for 2012/13 are provisional (see paragraph 69).

124. In 2012/13, 'Training/Exercise' was the most common mechanism that led to a major or serious injury with 815 (48%) incidents, this was followed by 'Sport/Recreation' (n=295, 17%) and 'Normal duties' (n = 230, 13%).

125. The most common mechanisms leading to major/serious injuries in each of the Services were as follows:

- 'Training/Exercise' was the most common mechanism for the Army (n=685, 56%) followed by 'Sport/Recreation' (n=220, 18%).
- 'Normal duties' was the most common mechanism for the Naval Service (n=85, 39%) followed by 'Training/Exercise' (n=55, 26%).
- 'Training/Exercise' was the most common mechanism for the RAF (n=35, 38%), followed by 'Sport/Recreation' (n=25, 26%).

126. The differences may be due to a definitional issue whereby activities classed as 'Normal duties' in the Naval Service and RAF may be classed as 'Training/Exercise' in the Army. The definitions of mechanism are currently under review by the single Service Chief Environment and Safety Officers (CESOs).

127. 'Normal duties' was the most common mechanism for MOD civilians. This reflects the fact that MOD civilians predominately perform office based tasks which would be classified as 'Normal duties'.

## Section 4: Major injuries and illnesses

128. **Section 4** contains information on major injuries and illnesses recorded on the MOD health and safety systems. Major injuries equate to the Health and Safety Executive's (HSE) Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR) category of 'major'. These include injuries where fractures or dislocations are sustained or where the injury necessitates hospitalisation of more than 24 hours. Further information on the categories of injury and illness contained in this report can be found in paragraphs 23 to 28, along with detailed definitions of major injuries and illnesses.

129. Deaths have been excluded from the following tables and figures, as they have been reported on in Sections 1 and 2. Other exclusions include battlefield injuries and off duty RTAs (**see paragraph 3**).

130. Please note that the following tables include reported injuries and illnesses to UK regular Armed Forces personnel and MOD civilian employees only. Paragraph 133 summarises the number of injuries/illnesses to other occupational groups.

131. **Table 5** presents the number of major injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Table 5: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major injuries and illnesses, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2,3</sup>**

Service	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13 <sup>p</sup>
<b>All</b>	<b>765</b>	<b>1,085</b>	<b>1,265</b>	<b>1,190</b>	<b>980<sup>r</sup></b>	<b>820</b>
<b>Regular Armed Forces</b>	<b>705</b>	<b>1,000</b>	<b>1,160</b>	<b>1,105</b>	<b>925<sup>r</sup></b>	<b>775</b>
Naval Service	85	130	90	85	100 <sup>r</sup>	140
Army	605	830	945	895	790 <sup>r</sup>	600
RAF	15	40	125	125	40 <sup>r</sup>	35
<b>MOD Civilian</b>	<b>60</b>	<b>85</b>	<b>105</b>	<b>80</b>	<b>55<sup>r</sup></b>	<b>45</b>
Industrial	15	30	35	30	20 <sup>r</sup>	20
Non-Industrial	45	55	70	50	35 <sup>r</sup>	25

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked -. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

3. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

132. There were 820 major injuries and illnesses reported on MOD health and safety systems during 2012/13 (**Table 5** and **Figure 8**). This was a 16% decrease from the 2011/12 figure of 980.

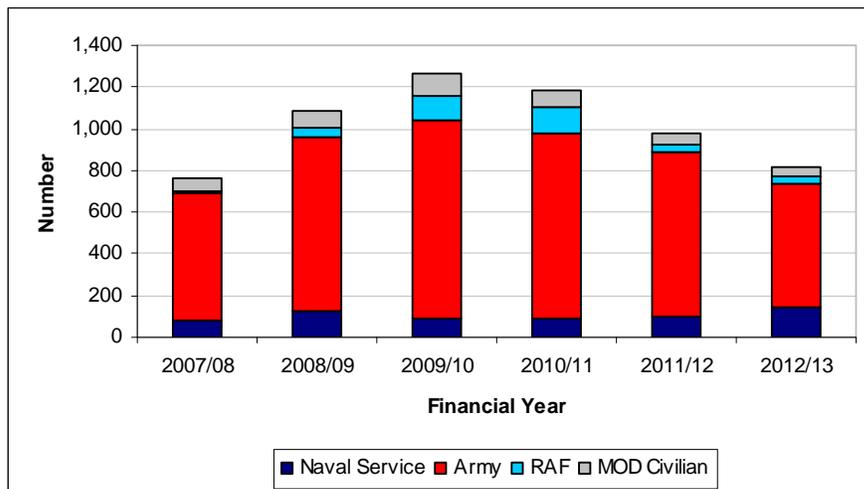
133. The number of reported major injuries and illnesses was noticeably lower in 2012/13 than in previous years. This was due to a resource issue regarding data entry of Land Force incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of reporting rather than an actual decrease in the number of incidents for this year. Any further injuries/illnesses reported on the AINC system will be updated in future releases.

134. In addition, there were 285 other persons classified with a major injury/illness reported on MOD health and safety systems during 2012/13, of these:

- 100 (35%) were identified as reservists
- 60 (21%) were cadet forces (including adult volunteers)
- 20 (7%) were contractors
- 10 (3%) were MOD locally engaged staff overseas.
- The remaining 90 personnel were identified as either Royal Fleet Auxiliary staff (RFA), agency staff, member of the public, dependants of service personnel (including children), foreign forces or official visitor.

135. **Figure 8** presents the number of major injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Figure 8: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major injuries and illnesses, 2007/08 to 2012/13<sup>2,p</sup>, numbers**



1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented

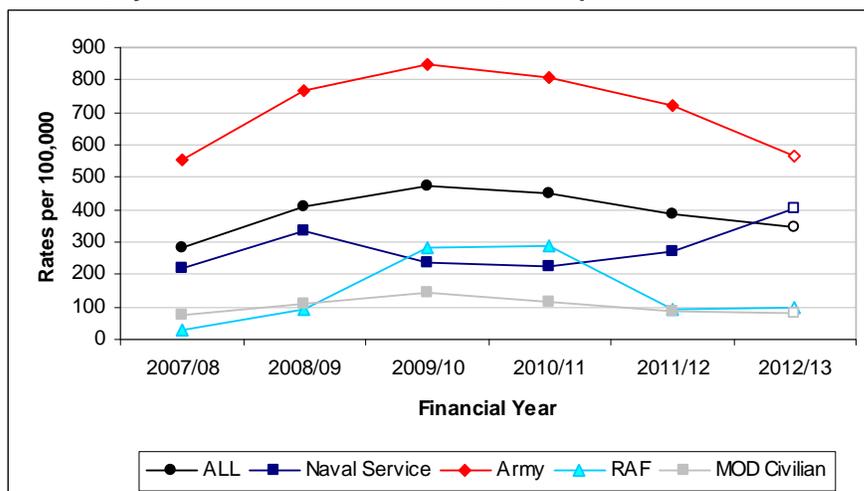
p. Figures for 2012/13 are provisional (see paragraph 69).

136. Of the 820 incidents reported in 2012/13, 6% (n=45) were MOD civilians and 94% (n=775) involved UK Regular Service personnel. Of the 775 UK Regular Service personnel: 18% (n=140) were Naval Service personnel, 77% (n=600) were Army personnel and 5% (n=35) were RAF personnel.

137. Of the 820 major incidents, 1% (n=10) were illnesses. Please note that reporting of work related illness is known to be incomplete, so the figures quoted should be treated as a minimum. Chronic illness and infectious diseases were more likely to be reported through medical services (either military or civilian).

138. **Figure 9** presents the rates of major injuries and illnesses to UK regular Armed Forces by Service and MOD civilians between 2007/08 and 2012/13.

**Figure 9: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major injuries and illnesses, by Service, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD Civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

139. The rate of major injuries and illnesses for UK regular Service and MOD civilian personnel increased by 23% from 282 per 100,000 in 2007/08 to 347 per 100,000 in 2012/13. Defence Statistic will investigate the drivers behind this increase.

140. The drop in rates for the Army in 2012/13 was due to a resource issue affecting data input at the AINC (see paragraph 17 for more details). Once the backlog in records is cleared the rate for 2012/13 will increase.

141. Comparing 2007/08 to 2012/13, the rate of reported major injuries and illnesses varied between each of the Services:

- Naval Service increased by 83% from 220 to 403 per 100,000
- Army increased by 2% from 556 to 567 per 100,000. The rate of injuries in 2012/13 is likely to increase once the backlog of Army records is cleared (see paragraph 17).
- RAF increased by 200% from 32 to 96 per 100,000
- MOD civilians increased by 2% from 77 to 79 per 100,000

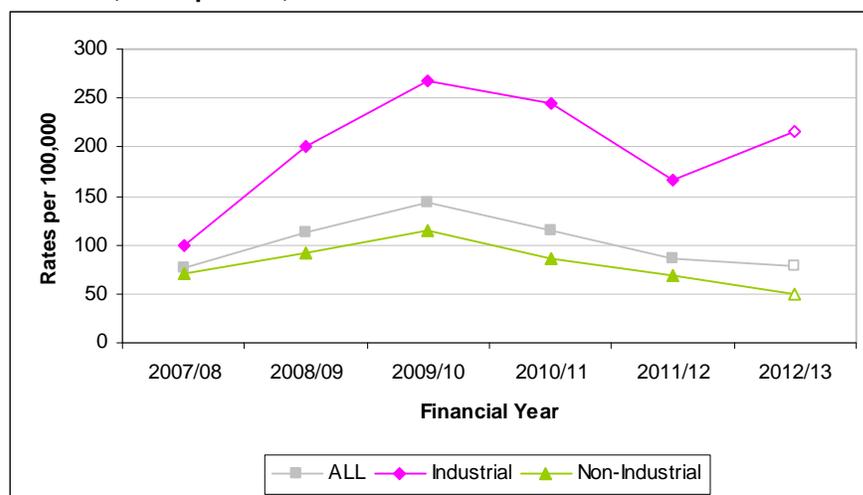
142. The highest annual rate of reported major injuries and illnesses for each Service was as follows:

- Naval Service at 403 per 100,000 in 2012/13
- Army at 847 per 100,000 in 2009/10. This result may change once the backlog of Army records is cleared (see paragraph 17).
- RAF at 291 per 100,000 in 2010/11
- MOD civilians at 142 per 100,000 in 2009/10

143. Due to the many trades and roles across the UK Armed Forces, the rates of major injuries and illnesses for the UK Armed Forces personnel have not been broken down into smaller sub groupings. However, MOD civilian employees can be broken down into two clearly identifiable groups: Industrial and Non-Industrial employees.

144. **Figure 10** presents the rates of major injuries and illnesses to MOD civilians by employee type between 2007/08 and 2012/13.

**Figure 10: MOD civilian employees<sup>1</sup>, major injuries and illnesses by employee type, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD civilian' includes Industrial and Non-Industrial employees only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

145. From 2007/08 to 2012/13, the rate of major injuries for MOD Industrial staff has been consistently higher than the rate for MOD Non-Industrial staff (See **Figure 10**). The difference in rates between the MOD Industrial staff and MOD Non-Industrial staff is likely to be due to the different duties performed and the relative level of risk they were exposed to. For example, MOD Non-Industrial staff are predominately office based while MOD Industrial staff primarily work in vehicle workshops and stores. Further details of rates by severity for MOD Industrial staff and MOD Non-Industrial staff can be found in Annex B **Table B1**.

146. Figure 10 also shows that the rates for non-industrial staff have decreased each year between 2009/10 and 2012/13. This fall in the rate can be explained by a reduction in the number of non-industrial staff at risk over the period and a loss of the IRIS reporting system. Meanwhile, rates for industrial staff have increased between 2011/12 and 2012/13. This increase is apparent across all Top Level Budget (TLB) reporting systems.

147. From 2007/08 to 2012/13, the rate of reported major injuries and illnesses for:

- MOD Industrial staff increased by 116% from 100 to 216 per 100,000
- MOD Non-Industrial staff decreased by 31% from 72 to 50 per 100,000

148. The highest rate of reported major injuries and illnesses for:

- MOD Industrial staff was 267 per 100,000 in 2009/10
- MOD Non-Industrial staff was 115 per 100,000 in 2009/10

149. **Table 6** presents the number of major injuries and illnesses to UK regular Armed Forces and MOD civilians by mechanism, 2012/13.

**Table 6: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, major injuries and illnesses by Service and mechanism, 2012/13<sup>p</sup>, numbers<sup>2</sup>**

Mechanism	All		Naval Service <sup>5</sup>		Army		RAF		MOD Civilian	
	Count	%	Count	%	Count	%	Count	%	Count	%
<b>All</b>	<b>820</b>	<b>100%</b>	<b>140</b>	<b>100%</b>	<b>600</b>	<b>100%</b>	<b>35</b>	<b>100%</b>	<b>45</b>	<b>100%</b>
Adventure training	70	9%	10	7%	60	10%	~	3%	0	0%
Built Estate infrastructure	15	2%	~	3%	5	1%	~	3%	~	7%
Discipline Related	30	4%	~	1%	25	5%	~	3%	0	0%
Equipment Maintenance	5	1%	~	1%	~	0%	~	11%	0	0%
Normal duties	90	11%	45	34%	25	4%	~	8%	20	40%
RTA	25	3%	~	1%	20	3%	0	0%	5	13%
Sport/Recreation	190	23%	30	20%	150	25%	10	28%	~	7%
Training/Exercise	345	42%	40	28%	285	48%	15	36%	10	18%
Workplace Transport	40	5%	5	5%	25	4%	~	8%	5	16%

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts. The percentages have been calculated on the actual values rather than unrounded figures.

p. Figures for 2012/13 are provisional (see paragraph 69).

150. In 2012/13, 'Training/Exercise' was the most common mechanism that led to a major injury with (n=345, 42%) incidents, this was followed by 'Sport/Recreation' (n=190, 23%) and 'Normal duties' (n=90, 11%).

151. The most common mechanisms leading to major injuries in each of the Services were as follows:

- 'Normal Duties' was the most common mechanism for the Naval Service (n=45, 34%)
- 'Training/Exercise' was the most common mechanism for the Army (n=285, 48%)
- 'Training/Exercise' was the most common mechanism for the RAF (n=15, 36%)

152. The difference in the most common mechanism was most likely due to definitional issues currently under review by the single Service Chief Environment & Safety Officers (CESOs).

153. 'Normal duties' was the most common mechanism for MOD civilians. This reflects the fact that MOD civilians predominately perform office based tasks which would be classified as 'Normal duties'.

## Section 5: Serious injuries and illnesses

154. **Section 5** contains information on serious injuries and illnesses recorded on the MOD health and safety systems.

155. Serious injuries equate to the HSE over-three-day injury category, and are those that are not defined as 'major' according to the above criteria but which could result in a person being unable to perform their normal duties for more than three days. Serious illnesses include any illness recorded on the MOD's Health and Safety reporting systems with a severity of 'serious'.

156. Please note that the following tables include reported injuries and illnesses to UK regular Armed Forces personnel and MOD civilian employees only. Paragraph 160 summarises the number of injuries/illnesses to other occupational groups.

157. **Table 7** presents the number of serious injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Table 7: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, serious injuries and illnesses, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2,3</sup>**

Service	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13 <sup>p</sup>
<b>All</b>	<b>1,020</b>	<b>1,205<sup>r</sup></b>	<b>1,250</b>	<b>1,660</b>	<b>1,565<sup>r</sup></b>	<b>895</b>
<b>Regular Armed Forces</b>	<b>795</b>	<b>925</b>	<b>975</b>	<b>1,420</b>	<b>1,375<sup>r</sup></b>	<b>760</b>
Naval Service	140	90	85	85	110 <sup>r</sup>	80
Army	590	755	790	1,240	1,175 <sup>r</sup>	625
RAF	60	80	100	95	90 <sup>r</sup>	55
<b>MOD Civilian</b>	<b>225</b>	<b>285</b>	<b>280</b>	<b>245</b>	<b>190<sup>r</sup></b>	<b>135</b>
Industrial	110 <sup>r</sup>	120	110	110	100 <sup>r</sup>	60
Non-Industrial	115	165	170	135	90 <sup>r</sup>	75

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

3. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

158. There were 895 serious injuries and illnesses reported on MOD health and safety systems during 2012/13 (**Table 7** and **Figure 11**). This was a 43% decrease on the 2011/12 figure of 1,565.

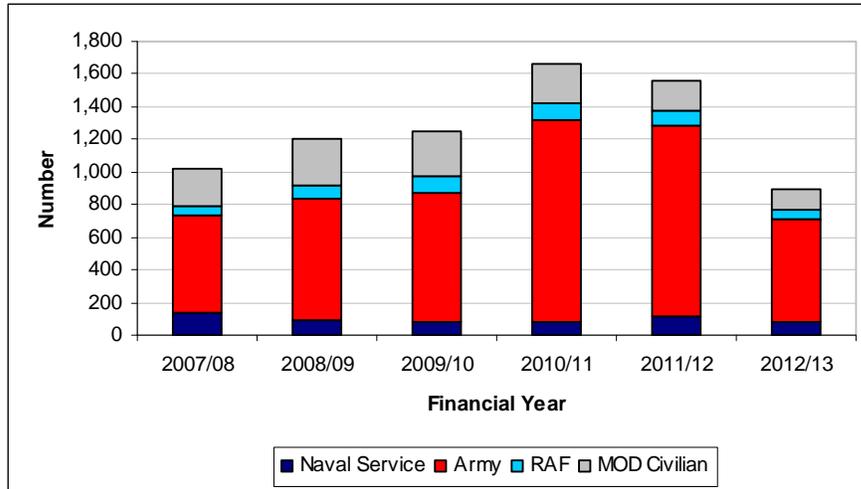
159. The number of reported serious injuries and illnesses was noticeably lower in 2012/13 than in previous years. This was due to a resource issue regarding data entry of Land Force incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of reporting rather than an actual decrease in the number of incidents for this year. Any further injuries/illnesses reported on the AINC system will be updated in future releases.

160. In addition, there were 355 other persons classified with a serious injury/illness reported on MOD health and safety systems during 2012/13, of these:

- 100 (29%) were identified as reservists
- 95 (27%) were cadet forces (including adult volunteers)
- 50 (14%) were MOD locally engaged staff overseas
- 20 (5%) were contractors
- The remaining 85 personnel were identified as either Royal Fleet Auxiliary staff (RFA), agency staff, member of the public, dependants of service personnel (including children), foreign forces or official visitor.

161. **Figure 11** presents the number of serious injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Figure 11: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, serious injuries and illnesses, 2007/08 to 2012/13<sup>2,p</sup>, numbers**



1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

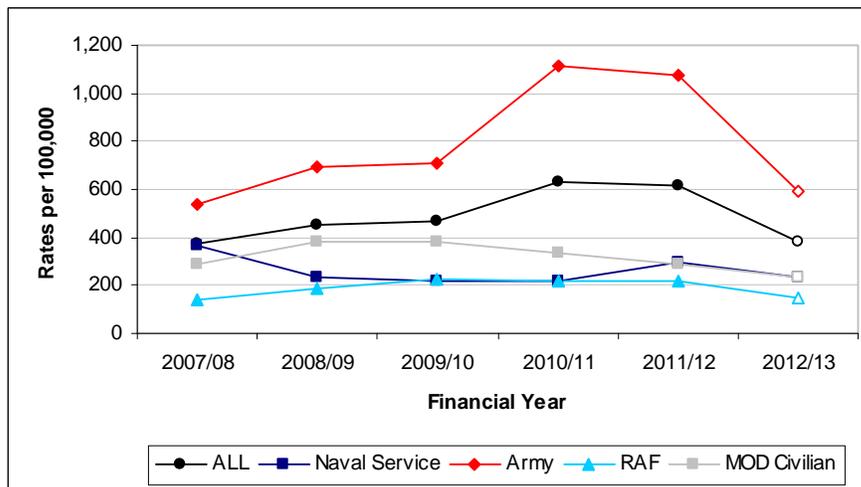
p. Figures for 2012/13 are provisional (see paragraph 69).

162. Of the 895 incidents reported in 2012/13, 15% (n=135) were MOD civilians and 85% (n=760) involved UK regular Service personnel. Of the 760 UK Regular Service personnel: 11% (n=80) were Naval Service personnel, 82% (n=625) were Army personnel, 7% (n=55) were RAF personnel.

163. Of the 895 serious incidents, 1% (n=10) were illnesses. Please note that reporting of work related illness is known to be incomplete, so the figures quoted should be treated as a minimum. Chronic illness and infectious diseases were more likely to be reported through medical services (either military or civilian).

164. **Figure 12** presents the rates of serious injuries and illnesses to UK regular Armed Forces by Service and MOD civilians between 2007/08 and 2012/13.

**Figure 12: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, serious injuries and illnesses, by Service, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD Civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

165. The rate of serious injuries and illnesses for UK regular Service and MOD civilian personnel increased by 1%, from 376 per 100,000 in 2007/08 to 380 per 100,000 in 2012/13.

166. The drop in rates for the Army in 2012/13 was due to a resource issue affecting data input at the AINC (see paragraph 17 for more details). Once the backlog in records is cleared the rate for 2012/13 will increase.

167. Comparing 2007/08 to 2012/13, the rate of reported serious injuries and illnesses varied for each of the Services:

- Naval Service decreased by 36% from 368 to 236 per 100,000
- Army increased by 9% from 541 to 591 per 100,000. The rate of injuries in 2012/13 is likely to increase once the backlog of Army records is cleared (see paragraph 17).
- RAF increased by 6% from 140<sup>f</sup> to 148 per 100,000
- MOD civilians decreased by 19% from 285 to 232 per 100,000

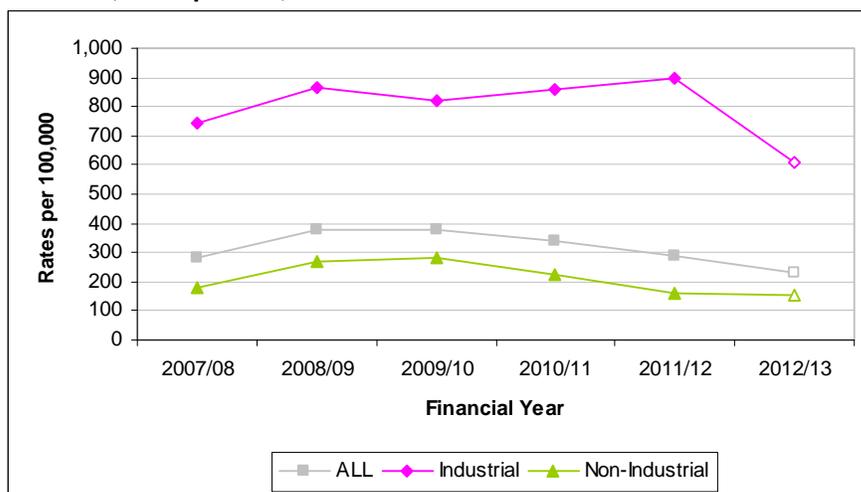
168. The highest rate of reported serious injuries and illnesses for each Service was as follows:

- Naval Service at 368 per 100,000 in 2007/08
- Army at 1,118 per 100,000 in 2010/11. This result may change once the backlog of Army records is cleared (see paragraph 17).
- RAF at 224 per 100,000 in 2009/10
- MOD civilians at 380 per 100,000 in 2008/09 and 2009/10

169. Due to the many trades and roles across the UK Armed Forces, the rates of serious injuries and illnesses for the UK Armed Forces personnel have not been broken down into smaller sub groupings. However, MOD civilian employees can be broken down into two clearly identifiable groups: Industrial and Non-Industrial employees.

170. **Figure 13** presents the rates of serious injuries and illnesses to MOD civilians by employee type between 2007/08 and 2012/13.

**Figure 13: MOD civilian employees<sup>1</sup>, serious injuries and illnesses by employee type, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD civilian' includes Industrial and Non-Industrial employees only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

171. From 2007/08 to 2012/13 the rate of serious injuries and illnesses for MOD Industrial staff has been consistently higher than MOD Non-Industrial staff (see **Figure 13**). The difference in rates between the MOD Industrial staff and MOD Non-Industrial staff was likely to be due to the different duties performed and the relative level of risk they were exposed to. For example, MOD Non-Industrial staff are predominately office based while MOD Industrial staff work primarily in vehicle workshops and stores. Further details of rates by severity for MOD Industrial staff and MOD Non-Industrial staff can be found in Annex B, **Table B1**.

172. From 2007/08 to 2012/13, the rate of reported serious injuries and illnesses for:

- MOD Industrial staff decreased by 18% from 743 to 608 per 100,000
- MOD Non-Industrial staff decreased by 12% from 177 to 155 per 100,000

173. These trends in rates over time for serious injuries differ to the rates observed for major injuries (Figure 10). This is due to a 42% decrease in the number of serious injuries to MOD non-industrial staff.

174. The highest rate of reported serious injuries and illnesses for:

- MOD Industrial staff was 897 per 100,000 in 2011/12
- MOD Non-Industrial staff was 281 per 100,000 in 2009/10

175. **Table 8** presents the number of serious injuries and illnesses to UK Regular Armed Forces and MOD civilians by mechanism, 2012/13.

**Table 8: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, serious injuries and illnesses by Service and mechanism, 2012/13<sup>p</sup>, numbers<sup>2</sup>**

Mechanism	All		Naval Service <sup>5</sup>		Army		RAF		MOD Civilian	
	All	%	Service <sup>5</sup>	%	Army	%	RAF	%	Civilian	%
<b>All</b>	<b>895</b>	<b>100%</b>	<b>80</b>	<b>100%</b>	<b>625</b>	<b>100%</b>	<b>55</b>	<b>100%</b>	<b>135</b>	<b>100%</b>
Adventure training	70	8%	5	6%	65	11%	~	2%	0	0%
Built Estate infrastructure	30	4%	~	2%	5	1%	~	4%	20	16%
Discipline Related	10	1%	0	0%	5	1%	~	2%	~	2%
Equipment Maintenance	15	1%	0	0%	5	1%	5	9%	~	2%
Normal duties	140	15%	40	49%	25	4%	10	14%	65	50%
RTA	15	2%	0	0%	15	3%	0	0%	~	1%
Sport/Recreation	100	11%	15	17%	70	11%	15	25%	~	2%
Training/Exercise	470	52%	20	22%	400	64%	20	39%	30	23%
Workplace Transport	45	5%	~	4%	30	5%	~	7%	10	6%

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

p. Figures for 2012/13 are provisional (see paragraph 69).

176. In 2012/13, 'Training/Exercise' was the most common mechanism that led to a serious injury with 470 (52%) incidents, this was followed by 'Normal duties' (n=140, 15%) and 'Sport/Recreation' (n=100, 11%).

177. The most common mechanisms leading to serious injuries in each of the Services were as follows:

- 'Normal duties' was the most common mechanism for the Naval Service (n=40, 49%)
- 'Training/Exercise' was the most common mechanism for the Army (n=400, 64%)
- 'Training/Exercise' was the most common mechanism for the RAF (n=20, 39%)

178. The difference in the most common mechanism was most likely due to definitional issues currently under review by the single Service Chief Environment and Safety Officers (CESOs).

179. 'Normal duties' was the most common mechanism for MOD civilians. This reflects the fact that MOD civilians predominately perform office based tasks which would be classified as 'Normal duties'.

## Section 6: Minor injuries and illnesses

180. **Section 6** contains information on minor injuries and illnesses recorded on the MOD health and safety systems. Minor injuries are not reportable under RIDDOR, but are presented here to give a complete picture of reported injuries and illnesses on MOD health and safety systems. Please note that minor injuries and illnesses are known to be underreported. Due to the ongoing structural changes within the MOD (defence transformation and reform), human resources have become limited and data entry of minor injuries and illnesses have recently not been a priority, thus the figures in this section should be considered a minimum.

181. Minor injuries are defined as any injury which results in the injured person being unable to carry out their normal duties for fewer than 3 days. The full definition of minor injuries and illnesses can be found in paragraph 28. Minor illnesses include any illness recorded on the MOD's Health and Safety reporting systems with a severity classification of 'minor'.

182. Please note that the following tables include reported injuries and illnesses to UK regular Armed Forces personnel and MOD civilian employees only. Paragraph 186 summarises the number of injuries/illnesses to other occupational groups.

183. **Table 9** presents the number of minor injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Table 9: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, minor injuries and illnesses, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2,3</sup>**

Service	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13 <sup>p</sup>
<b>All</b>	<b>2,825</b>	<b>3,490</b>	<b>3,655</b>	<b>3,960</b>	<b>3,685</b> <sup>r</sup>	<b>3,400</b>
<b>Regular Armed Forces</b>	<b>1,635</b>	<b>2,185</b>	<b>2,190</b>	<b>2,465</b>	<b>2,330</b> <sup>r</sup>	<b>2,340</b>
Naval Service	600	765	720	820	595 <sup>r</sup>	755
Army	420	650	630	835	915 <sup>r</sup>	885
RAF	615	770	840	815	815 <sup>r</sup>	700
<b>MOD Civilian</b>	<b>1,190</b>	<b>1,305</b>	<b>1,465</b>	<b>1,490</b>	<b>1,355</b> <sup>r</sup>	<b>1,060</b>
Industrial	560	570	580	570	505 <sup>r</sup>	350
Non-Industrial	630	740	885	925	850 <sup>r</sup>	705

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

3. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

184. There were 3,400 minor injuries and illnesses reported on MOD health and safety systems during 2012/13 (**Table 9** and **Figure 14**). This was a decrease of 8% on the 2011/12 figure of 3,685.

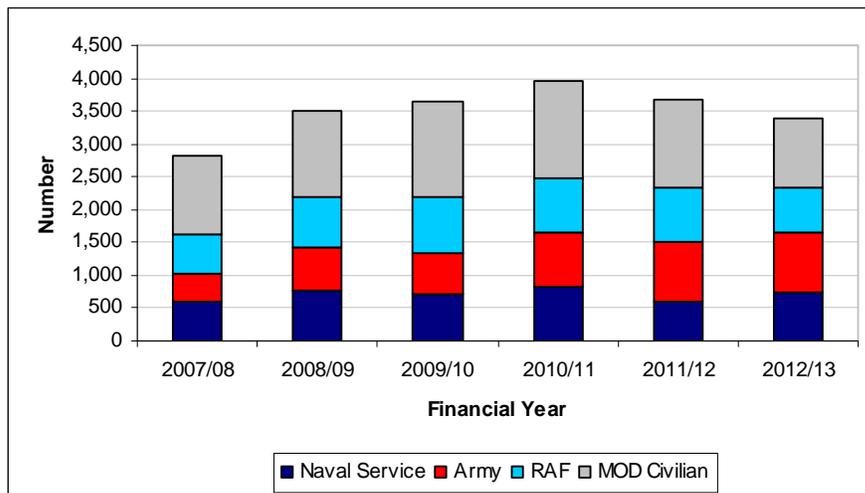
185. The number of reported minor injuries and illnesses was lower in 2012/13 than in previous years. This was due to a resource issue regarding data entry of Land Force incidents at the Army Incident Notification Cell (AINC) resulting in a decrease in the level of reporting rather than an actual decrease in the number of incidents for this year. Any further injuries/illnesses reported on the AINC system will be updated in future releases.

186. In addition, there were 1,975 other persons classified with a minor injury/illness reported on MOD health and safety systems during 2012/13, of these:

- 235 (12%) were reservists
- 570 (29%) were cadet forces (including adult volunteers)
- 575 (29%) were contractors
- 35 (2%) were MOD locally engaged staff overseas
- The remaining 560 personnel were identified as either Royal Fleet Auxiliary staff (RFA), agency staff, members of the public, dependants of service personnel (including children), foreign forces or official visitors.

187. **Figure 14** presents the number of minor injuries and illnesses to UK regular Armed Forces and MOD civilians between 2007/08 and 2012/13.

**Figure 14: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, minor injuries and illnesses, 2007/08 to 2012/13<sup>2,p</sup>, numbers**



1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

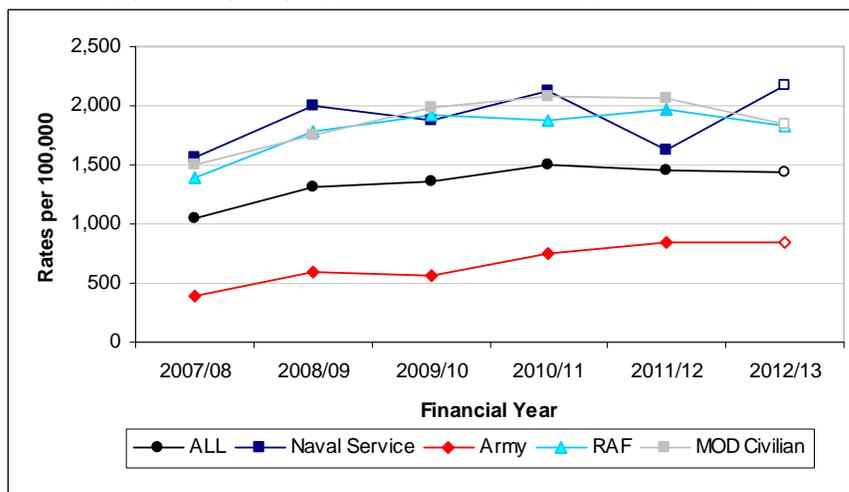
p. Figures for 2012/13 are provisional (see paragraph 69).

188. Of the 3,400 incidents reported in 2012/13, 31% (n=1,060) were MOD civilians and 69% (n=2,340) involved UK Regular Service personnel. Of the 2,340 UK Regular Service personnel: 32% (n=755) were Naval Service personnel, 38% (n=885) were Army personnel, 30% (n=700) were RAF personnel.

189. Due to the safety culture in MOD civilians and an increased awareness of health and safety reporting procedures the proportion of minor injuries and illnesses was higher than UK regular Armed Forces. Another reason may be due to the Army having to prioritise the recording of incidents due to staffing pressures at the call centre.

190. **Figure 15** presents the rates of minor injuries and illnesses to UK regular Armed Forces by employee type and MOD civilians between 2007/08 and 2012/13.

**Figure 15: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, minor injuries and illnesses, by employee type, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD Civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

191. The rate of minor injuries and illnesses for UK regular Service and MOD civilian personnel increased by 38%, from 1,043 per 100,000 in 2007/08 to 1,439 in 2012/13.

192. The Army rates for 2012/13 may be affected by a resource issue with data input at the AINC (see paragraph 17 for more details). Once the backlog in records is cleared the rate for 2012/13 may increase.

193. Comparing 2007/08 to 2012/13, the rate of reported minor injuries and illnesses varied for each of the Services:

- Naval Service increased by 39% from 1,556 to 2,168 per 100,000
- Army increased by 118% from 384 to 838 per 100,000. The rate of injuries in 2012/13 is likely to increase once the backlog of Army records is cleared (see paragraph 17).
- RAF increased by 31% from 1,396 to 1,822 per 100,000
- MOD civilians increased by 23% from 1,502 to 1,848 per 100,000

194. The highest rate of reported minor injuries and illnesses for each Service was as follows:

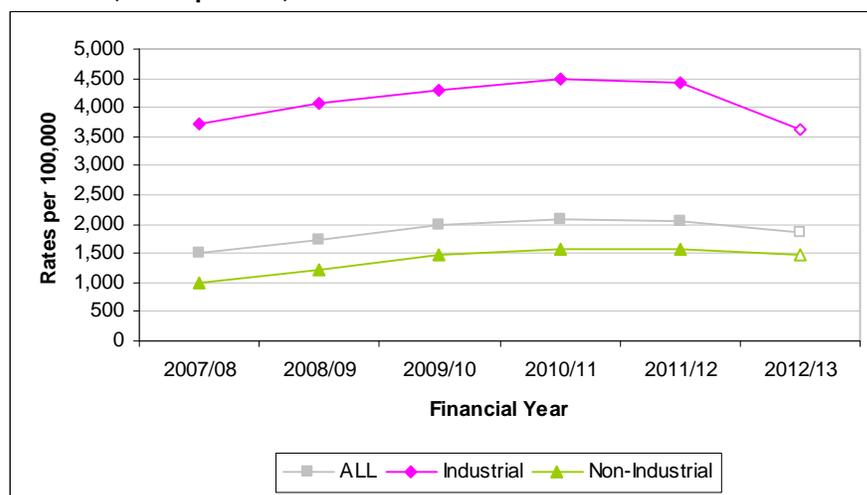
- Naval Service at 2,168 per 100,000 in 2012/13
- Army at 878 per 100,000 in 2011/12. This result may change once the backlog of Army records is cleared (see paragraph 17).
- RAF at 1,968 per 100,000 in 2011/12
- MOD civilians at 2,076 per 100,000 in 2010/11

195. The rate of minor injuries and illnesses for the Army was consistently lower than the rates for the Naval Service, RAF and MOD civilian personnel. This was most likely to be due to the Army having to prioritise the recording of incidents due to staffing pressures at the call centre.

196. Due to the many trades and roles across the UK Armed Forces, the rates of minor injuries and illnesses for the UK Armed Forces personnel have not been broken down into smaller sub groupings. However, MOD civilian employees can be broken down into two clearly identifiable groups: Industrial and Non-Industrial employees.

197. **Figure 16** presents the rates of minor injuries and illnesses to MOD civilians by Service between 2007/08 and 2012/13.

**Figure 16: MOD civilian employees<sup>1</sup>, minor injuries and illnesses by Service, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000**



1. 'MOD civilian' includes Industrial and Non-Industrial employees only (see paragraphs 44-46).

2. See paragraph 76 for explanation of time series presented.

p. Figures for 2012/13 are provisional (see paragraph 69).

198. From 2007/08 to 2012/13, the rate of minor injuries for MOD Industrial staff has been consistently higher than the rate for MOD Non-Industrial staff (see **Figure 16**). The difference in rates between the MOD Industrial staff and MOD Non-Industrial staff was likely due to the different duties performed and the relative level of risk they were exposed to. For example, MOD Non-Industrial staff are predominately office based while MOD Industrial staff work primarily in vehicle workshops

and stores. Further details of rates by severity for MOD Industrial staff and MOD Non-Industrial staff can be found in Annex B **Table B1**.

199. Comparing 2007/08 to 2012/13, the rate of reported minor injuries and illnesses for:

- MOD Industrial staff decreased by 3% from 3,724 to 3,628 per 100,000
- MOD Non-Industrial staff increased by 51% from 982 to 1,485 per 100,000

200. The highest rate of reported minor injuries and illnesses for:

- MOD Industrial staff was 4,473 per 100,000 in 2010/11
- MOD Non-Industrial staff was 1,564 per 100,000 in 2010/11

201. **Table 10** presents the number of minor injuries and illnesses to UK regular Armed Forces and MOD civilians by mechanism, 2012/13.

**Table 10: UK regular Armed Forces personnel and MOD civilian employees<sup>1</sup>, minor injuries and illnesses by Service and mechanism, 2012/13<sup>p</sup>, numbers<sup>2</sup>**

Mechanism	All		Naval Service <sup>5</sup>		Army		RAF		MOD Civilian	
	Count	%	Count	%	Count	%	Count	%	Count	%
<b>All</b>	<b>3,400</b>	<b>100%</b>	<b>755</b>	<b>100%</b>	<b>885</b>	<b>100%</b>	<b>700</b>	<b>100%</b>	<b>1,060</b>	<b>100%</b>
Adventure training	175	5%	35	5%	80	9%	50	7%	10	1%
Built Estate infrastructure	250	7%	30	4%	20	2%	45	7%	155	15%
Discipline Related	20	1%	~	1%	5	1%	~	0%	10	1%
Equipment Maintenance	135	4%	20	3%	10	1%	80	11%	25	3%
Normal duties	1,360	40%	395	52%	115	13%	165	24%	685	65%
RTA	55	2%	5	1%	30	3%	10	2%	10	1%
Sport/Recreation	320	9%	75	10%	130	14%	95	14%	20	2%
Training/Exercise	880	26%	140	19%	450	51%	215	31%	75	7%
Workplace Transport	205	6%	50	6%	55	6%	35	5%	65	6%

1. 'MOD civilian' includes Industrial and Non-Industrial personnel only (see paragraphs 44-46).

2. In line with Defence Statistics' rounding policy, all figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked ~. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

p. Figures for 2012/13 are provisional (see paragraph 69).

202. In 2012/13, 'Normal duties' was the most common mechanism that led to a minor injury with 1,360 (40%) incidents, this was followed by 'Training/Exercise' (n=880, 26%) and 'Sport/Recreation' (n=320, 9%).

203. The most common mechanisms leading to minor injuries in each of the Services were as follows:

- 'Normal duties' was the most common mechanism for the Naval Service (n=395, 52%)
- 'Training/Exercise' was the most common mechanism resulting in minor injuries and illnesses for the Army (n=450, 51%) and the RAF (n=215, 31%).

204. The difference in the most common mechanism is likely to be due to definitional issues currently under review by the single Service Chief Environment and Safety Officers (CESOs).

205. 'Normal duties' was the most common mechanism for MOD civilians. This reflects the fact that MOD civilians predominately perform office based tasks which would be classified as 'Normal duties'.

## Section 7: HSE Benchmarking

206. **Section 7** provides a comparison of the rates of RIDDOR reportable injuries that occurred to MOD civilian employees with the rates of injury that occurred to similar UK occupational groups.

207. Defence Statistics have worked with the Health and Safety Executive (HSE) to identify UK occupational groups whose daily work activities are the most similar to those carried out by MOD civilian employees, and therefore provide the most valid comparison. The occupational group selected to compare with MOD Non-Industrial civilians was 'Office workers with high risk site/warehouse visits occupations', and the occupational group selected to compare with MOD Industrial civilians was of 'Warehouse Labourer Occupations'. This is a change on previous years as the HSE has changed its categorisation. Paragraphs 48 to 52 provide further details of the selected occupational groups.

208. **Please note** that HSE are trialling the injury statistics by occupational groups, and therefore the figures should be treated with caution. As HSE produce further occupational groupings Defence Statistics will evaluate them to assess whether they will provide more valid comparison population for MOD employees.

209. The HSE occupational data provided below shows the rate of injury (including deaths) within each occupational group as reported under RIDDOR. In order to provide a valid comparison, only those injuries to MOD civilian employees that met the criteria for reporting under RIDDOR were included in this section. Therefore, injuries that occurred overseas, Road Traffic Accidents (RTAs) on public highways, suicides, suspected suicides and illnesses have been excluded. In order to calculate rates, any MOD civilian employees who were based overseas have also been excluded. Paragraphs 43 and 44 contain further details on the injuries and employees excluded from this section.

210. All comparisons within this section should be used with caution because of the potential difference in injury reporting levels in the groups being compared. Currently, the Health and Safety Executive estimate that just over half of all qualifying injuries to employees are actually reported under RIDDOR in the UK, with the self-employed reporting a much smaller proportion. The reporting levels within the MOD are not known, and Defence Statistics are working with the MOD Chief Environmental Safety Officers (CESOs) to explore methods to estimate under-reporting.

### MOD Civilian Non-Industrial employees

211. This section compares MOD civilian Non-Industrial injury rates to the occupational grouping of 'Office workers with high risk site/warehouse visits occupations'. MOD Non-Industrial employees include all civilians not primarily employed in a trade, craft or manual labour occupation. Therefore this group covers a range of functions, including administration, policing, guarding, science and engineering. The UK high risk office worker occupations' was selected as the best available comparison population. However, there are differences between the activities undertaken by UK high risk office worker occupations and MOD Non-Industrial civilian employees and therefore the following comparisons should be used with caution; examples of the high risk office workers can be found in paragraph 52.

Table 11 presents the number of RIDDOR deaths and injuries to MOD civilian Non-Industrial employees and UK high risk office worker occupations, 2007/08 to 2012/13.

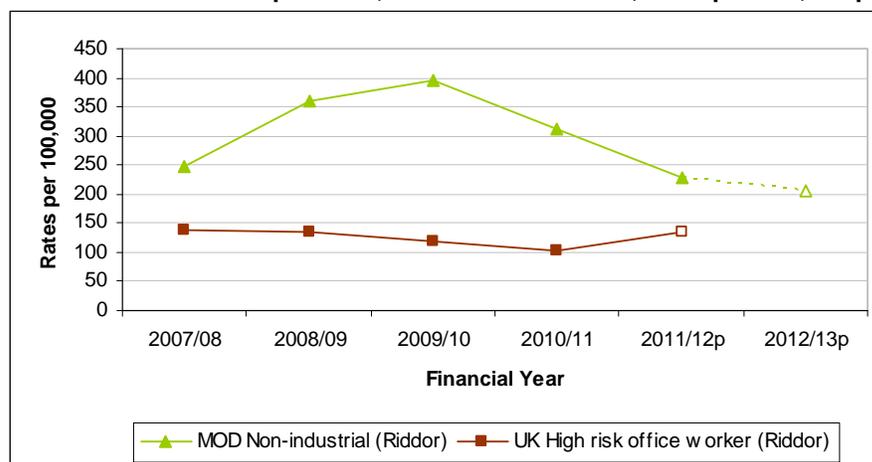
**Table 11: MOD civilian Non-Industrial employees RIDDOR deaths and injuries and UK High risk office worker occupations<sup>1</sup>, by injury severity, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2,4</sup>**

Grouped Occupations	2007/08	2008/09	2009/10	2010/11	2011/12p	2012/13p
<b>MOD Non-industrial (Riddor)<sup>3</sup></b>	<b>160</b>	<b>220</b>	<b>240</b>	<b>185</b>	<b>125</b>	<b>100</b>
Deaths	0	0	0	0	0	0
Major injuries	45	55	70	50	35	25
Serious injuries	115	165	170	135	90	75
<b>UK High risk office worker (Riddor)</b>	<b>1,265</b>	<b>1,285</b>	<b>1,105</b>	<b>960</b>	<b>1,115</b>	-
Deaths	2	3	3	7	3	-
Major injuries	430	405	410	325	335	-
Serious injuries	835	880	690	625	775	-

1. Data for 2012/13 on UK high risk office worker occupations not currently available.
2. In line with Defence Statistics' rounding policy, all injury figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked -. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.
3. Includes UK injuries only excluding battlefield, off duty RTAs, on duty RTAs on public highway, suicides and suspected suicides. - = not available
4. See paragraph 76 for explanation of time series presented.
- p. Figures for UK high risk office worker for 2011/12 and all figures for 2012/13 are provisional (see paragraph 69).

212. The following figures (**Figures 17 to 19**) present the rates of RIDDOR deaths and injuries, by injury severity, to MOD civilian Non-Industrial employees and UK high risk office worker occupations, 2007/08 to 2012/13.

**Figure 17: RIDDOR deaths and injuries to MOD civilian Non-Industrial employees and UK High risk office worker occupations<sup>1r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



1. Data for 2012/13 on UK high risk office worker occupations not currently available.
2. See paragraph 76 for explanation of time series presented.
- p. Rates for UK high risk office worker for 2011/12 and all rates for 2012/13 are provisional.
- r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

213. The annual rate of RIDDOR deaths and injuries to MOD civilian Non-Industrial employees was consistently higher than the rate for UK high risk office worker occupations over the period 2007/08 to 2012/13 (using 2011/12 as a proxy). In 2011/12 (using 2011/12 as a proxy), the rate of RIDDOR deaths and injuries to MOD civilian Non-Industrial employees was 229 per 100,000 compared with 135 per 100,000 for all UK high risk office worker occupations.

214. There have been no MOD civilian Non-Industrial deaths over the period 2007/08 to 2012/13.

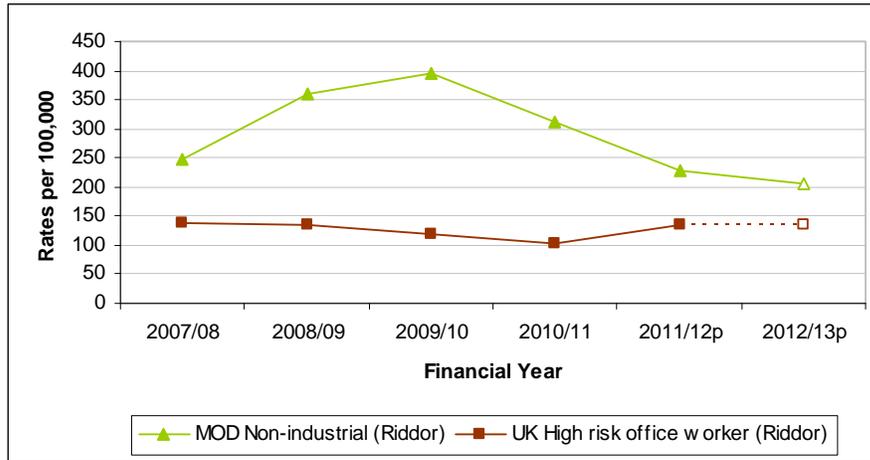
215. The rate of death for high risk office worker occupations has varied over this period, between 0.3 per 100,000 in 2008/09 and 0.8 per 100,000 in 2010/11.

216. The reasons for the difference in RIDDOR injury rates are not known. It may be due to differences between the levels of risk of activities carried out by the two groups. The MOD civilian Non-Industrial group, for example, includes Non office-based employees such as the MOD Police (who carry out armed policing) and MOD Guard Service (who carry out unarmed guarding). The responsibilities of these personnel may involve higher risk of injury than the UK high risk office worker occupations,

who include warehouse staff and office workers who undertake site visits (for example, property housing and land managers). Defence Statistics will investigate methods of improving the validity of the comparisons made in this section prior to the next release of these statistics.

217. Other reasons may account for the differences between the two groups. For example, anecdotal evidence suggests that there is a strong safety culture among MOD Non-Industrial civilians. In conjunction with the active promotion of accident reporting mechanisms, this may have resulted in a higher level of accident reporting than was seen in UK high risk office worker occupations.

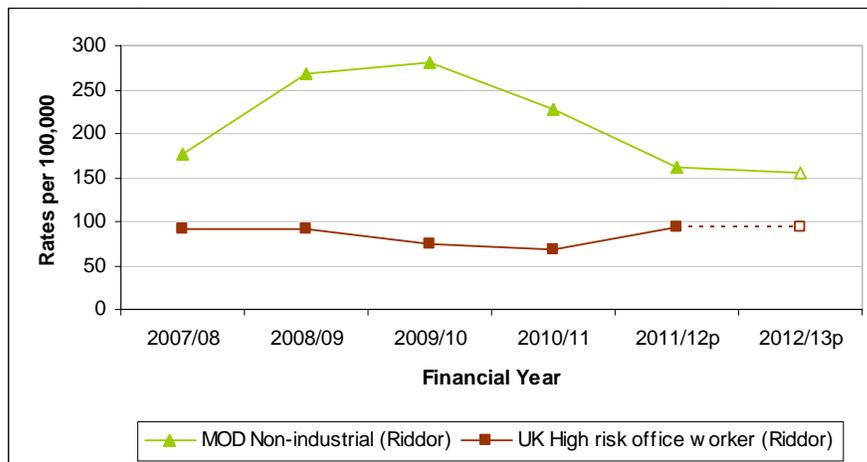
**Figure 18: Major injuries to MOD civilian Non-Industrial employees and UK High risk office worker occupations<sup>1r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



- 1. Data for 2012/13 on UK high risk office worker occupations not currently available.
- 2. See paragraph 76 for explanation of time series presented.
- p. Rates for UK high risk office worker for 2011/12 and all rates for 2012/13 are provisional.
- r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

218. The annual rates of RIDDOR major injuries to MOD civilian Non-Industrial employees were consistently higher than the rates for UK high risk office worker occupations over the period 2007/08 to 2012/13 (using 2011/12 data as a proxy). In 2012/13 (using 2011/12 data as a proxy), the rate of RIDDOR major injuries to MOD civilian Non-Industrial employees was 68 per 100,000 compared with 40 per 100,000 for all UK high risk office worker occupations.

**Figure 19: Serious injuries to MOD civilian Non-Industrial employees and UK High risk office worker occupations<sup>1r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



- 1. Data for 2012/13 on UK high risk office worker occupations not currently available.
- 2. See paragraph 76 for explanation of time series presented.
- p. Rates for UK high risk office worker for 2011/12 and all rates for 2012/13 are provisional.
- r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

219. The annual rates of RIDDOR serious injuries to MOD civilian Non-Industrial employees were consistently higher than the rates for UK high risk office worker occupations over the period 2007/08

to 2012/13. In 2012/13 (using 2011/12 as a proxy), the rate of RIDDOR serious injuries to MOD civilian Non-Industrial employees was 162 per 100,000 compared with 94 per 100,000 for all UK high risk office worker occupations.

## MOD Civilian Industrial employees

220. This section compares MOD civilian Industrial injury rates to the occupational grouping of 'Warehouse Labourer Occupations. MOD Industrial employees include all civilians primarily employed in a trade, craft or manual labour occupation. Therefore this group covers a range of functions, including air freight handlers, storekeepers, drivers and Industrial technicians. The UK warehouse labourer occupations group was selected as the best available comparison population. However, there are differences between the activities undertaken by UK warehouse labourer occupations and MOD Industrial civilian employees and therefore the following comparisons should be used with caution. Paragraph 52 provides further details on the type of occupations contributing to the Warehouse Labour Occupations.

221. **Table 12** presents the number of RIDDOR deaths and injuries to MOD civilian Industrial employees and UK warehouse labourer staff occupations, 2007/08 to 2012/13.

**Table 12: RIDDOR deaths and injuries to MOD civilian Industrial employees and UK warehouse labourer staff occupations<sup>1</sup>, by injury severity, 2007/08 to 2012/13<sup>p</sup>, numbers<sup>2,4</sup>**

Grouped Occupations	2007/08	2008/09	2009/10	2010/11	2011/12p	2012/13p
<b>MOD Industrial (Riddor)<sup>3</sup></b>	<b>125</b>	<b>150</b>	<b>145</b>	<b>140</b>	<b>120</b>	<b>80</b>
Deaths	0	0	0	0	0	0
Major injuries	15	30	35	30	20	20
Serious injuries	110	120	110	110	100	60
<b>UK Warehouse Labourer Occupations</b>	<b>11,105</b>	<b>10,400</b>	<b>9,050</b>	<b>8,795</b>	<b>8,630</b>	-
Deaths	5	9	7	8	5	-
Major injuries	1,735	1,515	1,420	1,360	1,285	-
Serious injuries	9,365	8,880	7,620	7,430	7,340	-

1. Data for 2012/13 on UK warehouse labourer staff not currently available.

2. In line with Defence Statistics' rounding policy, all injury figures of five or more have been rounded to the nearest 5 and figures fewer than five have been suppressed and marked -. Totals and sub-totals have been rounded separately and thus totals may not equal the sums of their rounded parts.

3. Includes UK injuries only excluding battlefield, off duty RTAs, on duty RTAs on public highway, suicides and suspected suicides.

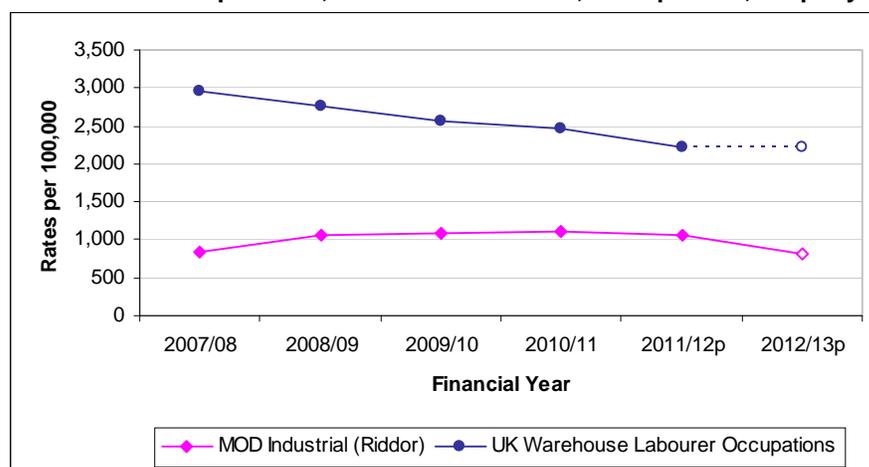
4. See paragraph 76 for explanation of time series presented.

- = not available

p. Figures for UK warehouse labourer staff for 2011/12 and all figures for 2012/13 are provisional (see paragraph 69).

222. The following figures (**Figures 20 to 22**) present the rates of RIDDOR deaths and injuries, by injury severity, to MOD civilian Industrial employees and UK warehouse labourer staff occupations, 2007/08 to 2012/13.

**Figure 20: RIDDOR deaths and injuries to MOD civilian Industrial employees and UK warehouse labourer staff occupations<sup>1r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



1. Data for 2012/13 on UK warehouse labourer staff not currently available.

2. See paragraph 76 for explanation of time series presented.

p. Rates for UK warehouse labourer staff for 2011/12 and all rates for 2012/13 are provisional.

r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

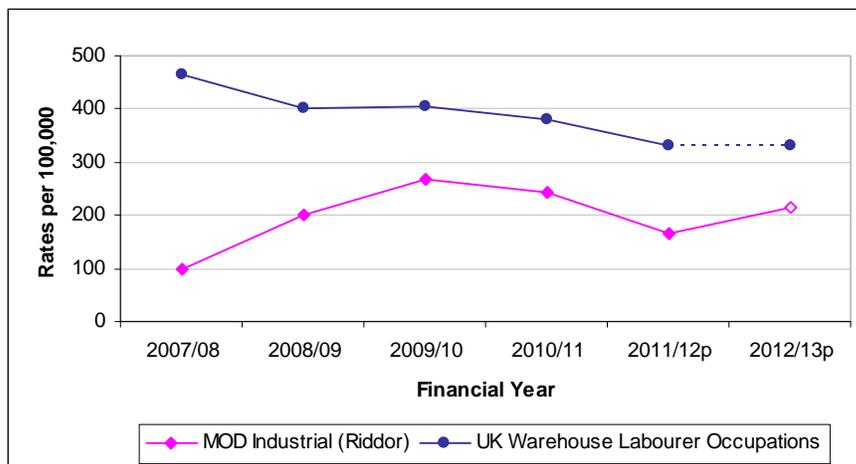
223. The annual rate of RIDDOR deaths and injuries to MOD civilian Industrial employees was consistently lower than the rate for UK warehouse labourer staff occupations over the period 2007/08 to 2011/12. In 2011/12, the latest year for which comparison data was available, the rate of RIDDOR deaths and injuries to MOD civilian Industrial employees was 1,064 per 100,000 compared with 2,213 per 100,000 for UK warehouse labourer staff occupations.

224. The rate of RIDDOR deaths and injuries to MOD civilian Industrial employees fluctuated over the period, ranging from a low of 843 per 100,000 in 2007/08 to a high of 1,100 per 100,000 in 2010/11. The UK Warehouse Labourer occupations rate of RIDDOR deaths and injuries has steadily decreased over the period, from 2,213 per 100,000 in 2011/12 to 2,969 per 100,000 in 2007/08.

225. There have been no MOD civilian Industrial deaths over the period 2007/08 to 2011/12. The rate of death for UK warehouse labourer staff occupations has varied over this period, between 1.3 per 100,000 in 2007/08 and 2011/12 and 1.9 per 100,000 in 2008/09.

226. The reasons for these changes and the large difference between the rates of UK Warehouse Labourer Occupation and MOD civilian Industrial employees were not known. It may have been due to differences between the levels of risk of activities carried out by the two groups. The MOD civilian Industrial group, for example, includes personnel employed as store-keepers, couriers, drivers and in technical trades. The responsibilities of these personnel may involve lower risk of injury than the UK warehouse labourer staff occupations. Defence Statistics will investigate methods of improving the validity of the comparisons made in this section prior to the next release of these statistics.

**Figure 21: Major injuries to MOD civilian Industrial employees and UK Warehouse Labourer occupations<sup>1,r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



1. Data for 2012/13 on UK warehouse labourer staff not currently available.

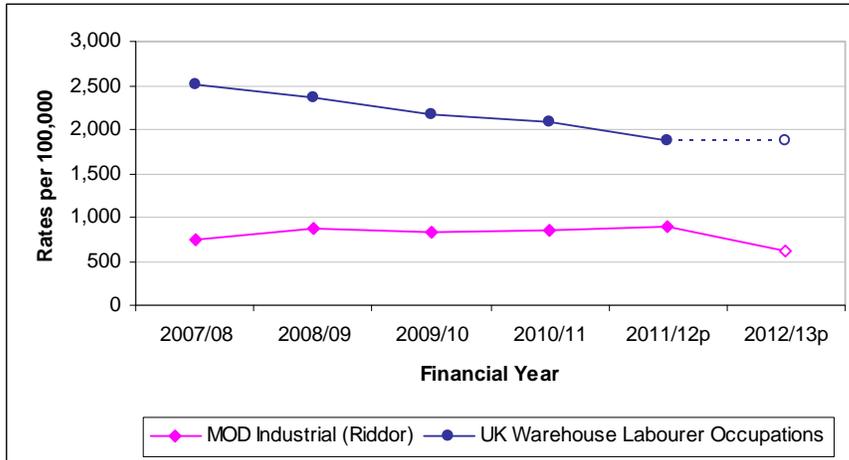
2. See paragraph 76 for explanation of time series presented.

p. Rates for UK warehouse labourer staff for 2011/12 and all rates for 2012/13 are provisional.

r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

227. The annual rates of RIDDOR major injuries to MOD civilian Industrial employees were consistently higher than the rates for UK Warehouse Labourer occupations over the period 2007/08 to 2012/13 (using 2011/12 as a proxy). In 2012/13 (using 2011/12 as a proxy), the rate of RIDDOR major injuries to MOD civilian Industrial employees was 167 per 100,000 compared with 330 per 100,000 for all UK warehouse labourer staff occupations.

**Figure 22: Serious injuries to MOD civilian Industrial employees and UK Warehouse Labourer occupations<sup>1r</sup>, 2007/08 to 2012/13<sup>2,p</sup>, rates per 100,000 per year**



1. Data for 2012/13 on UK warehouse labourer staff not currently available.

2. See paragraph 76 for explanation of time series presented.

p. Rates for UK warehouse labourer staff for 2011/12 and all rates for 2012/13 are provisional.

r. Due to changes in HSE categorisation (SOC2010) all figures have been revised

228. The annual rates of RIDDOR serious injuries to MOD civilian Industrial employees were consistently higher than the rates for UK Warehouse Labourer occupations over the period 2007/08 to 2012/13 (using 2011/12 as a proxy). In 2012/13 (using 2011/12 as a proxy), the latest year for which comparison data was available, the rate of RIDDOR serious injuries to MOD civilian Industrial employees was 897 per 100,000 compared with 1,882 per 100,000 for UK Warehouse Labourer occupations.

## **Section 8: Other recorded incidents - Near misses and dangerous occurrences**

229. **Section 8** contains information on incidents recorded on the MOD health and safety systems that did not result in injury or illness.

230. Health and Safety systems also record specific, unplanned, uncontrolled events which have the potential to cause injury or damage and are listed in Schedule 2 of RIDDOR (1995). These are recorded as dangerous occurrences.

### **Near Misses**

231. There were 3,165 near misses recorded on health and safety systems in 2012/13, accounting for 30% of all events.

232. The number of near misses increased between 2007/08 and 2012/13 from 780 to 3,165 respectively. The highest number of recorded near misses was in 2012/13 with 3,165.

233. In 2007/08 near misses accounted for 10% of all recorded incidents, by 2010/11 this had increased to 17%. In 2012/13 this proportion has further increased to 30%. Although it may be too early to speculate, it suggests that the trend in reporting practices of near misses across the MOD has increased.

234. In December 2010, a MOD Near miss reporting campaign was launched to increase reporting of near misses and is one of the Defence Board's strategic objectives. Near misses are events which would normally have resulted in death, injury or ill health, or a dangerous event.

235. The majority of near misses were reported by the Defence Equipment and Support Incident Notification Cell (DINC) with 2,063 near misses reported in 2012/13.

236. When a near miss occurred, it generally involved the following event descriptions:

- Transport incidents - driving of vehicles (8%)
- Moving/falling objects - Estate infrastructure - high wind damage to buildings i.e. falling tiles (1%)
- Exposure to harmful substances - fuel leaks from vehicles (5%)
- Machinery/Equipment - defective/malfunction of machinery/equipment (11%)
- Slips/trips/falls - People walking on icy pavements, uneven walkways (3%)

237. Of the 3,165 near misses 53% were categorised as not applicable. Defence Statistics will work with the data providers to improve the quality of near miss data.

### **Dangerous Occurrences**

238. There were 90 dangerous occurrences reported on health and safety systems in 2012/13, an increase of 8% compared with 2011/12 when there were 85 dangerous occurrences reported.

239. Of the 90 dangerous occurrences reported in 2012/13, 27% were reported to the Joint Force Command (JFC) (n=25). These covered a range of incidents such as traffic violations, unsafe working practices and equipment failure.

## Annex A – Work-related deaths

### Work-related deaths

240. Work-related deaths' have been defined as injury related deaths occurring on-duty or on MOD property, excluding suicides. Hostile action includes deaths categorised as Killed in Action (KIA) and Died of Wounds (DOW). KIA is a battle casualty who is killed outright or who dies as a result of wounds or other injuries before reaching a medical treatment facility. DOW is a battle casualty who dies of wounds or other injuries received in action, after having reached a medical treatment facility.

**Table A1: All personnel<sup>1</sup>, work-related deaths by type of incident<sup>2</sup>, 2007/08 to 2011/12, numbers<sup>34</sup>**

Type of incident	All	08/09	09/10	10/11	11/12	12/13
<b>All</b>	<b>420</b>	<b>82</b>	<b>136</b>	<b>94</b>	<b>60</b>	<b>47</b>
Hostile action	333	60	125	74	43	31
LTA - On duty	18	4	0	8	5	1
On duty and confirmed safety related	27	8	5	8	5	1
On duty and pending	15	0	2	2	2	8 <sup>r</sup>
On duty and not safety related	27	10	4	2	5	6

Source: Defence Statistics Health Information) and DSEA

1. 'All personnel' includes any person whose injury or illness was recorded on MOD health and safety systems. This includes regular and Reservist personnel and any other person injured as a result of MOD activity or on a MOD site (see paragraph 33).

2. Excludes coroner confirmed suicide and open verdicts.

3. Figures were for on duty deaths only

4. All numbers exclude incidents which were natural causes

5. Should a death resulting from an LTA be found to be the result of a H&S related failure the death will be reported under the category 'on duty, confirmed H&S related' and not under LTA – on duty

241. Deaths in the 'On duty and confirmed safety related' category are defined as: any injury-related deaths, occurring as a direct result of, or related to, defence activity, which have been confirmed as work and safety-related either by a Coroner's (or equivalent) Report or Service Inquiry.

242. Deaths in the 'On duty and pending' category are defined as: any injury-related deaths, occurring as a result of, or related to, defence activity, which are potentially safety related.

243. Deaths in the 'On duty and not safety related' category are defined as: any injury related deaths, occurring whilst on-duty, but not as a result of safety related failings.

244. The MOD reported 420 work related deaths among UK Armed Forces and civilian personnel for the period 2008/09 to 2012/13, of which 27 were confirmed to be the result of health and safety related failures (a further 15 deaths are awaiting the outcome of either a Service Inquiry or a coroner's inquest).

## Annex B - MOD civilian employee's injuries and illnesses

### MOD civilian employee's injuries and illnesses

245. **Table B1** shows MOD civilian employees all injury and illness rates by severity.

**Table B1: MOD civilian employees<sup>1</sup>, all severities of injuries and illnesses<sup>2</sup>, 2007/08 to 2012/13<sup>p</sup>, rates per 100,000<sup>3</sup>**

Severity	2007/08	2008/09	2009/10	2010/11	2011/12	2012/13 <sup>p</sup>
<b>Major and Serious</b>						
<b>All</b>	<b>362</b>	<b>492</b>	<b>522</b>	<b>452</b>	<b>363</b>	<b>311</b>
Industrial	843	1,068	1,090	1,101	1,047	824
Non-Industrial	249	360	395	313	221	206
<b>Major</b>						
<b>All</b>	<b>77</b>	<b>112</b>	<b>142</b>	<b>114</b>	<b>82</b>	<b>79</b>
Industrial	100	201	267	244	167	216
Non-Industrial	72	92	115	86	64	50
<b>Serious</b>						
<b>All</b>	<b>285</b>	<b>380</b>	<b>380</b>	<b>338</b>	<b>281</b>	<b>232</b>
Industrial	743	867	823	857	880	608
Non-Industrial	177	268	281	227	156	155
<b>Minor</b>						
<b>All</b>	<b>1,502</b>	<b>1,746</b>	<b>1,986</b>	<b>2,076</b>	<b>1,925</b>	<b>1,848</b>
Industrial	3,724	4,071	4,294	4,473	4,160	3,628
Non-Industrial	982	1,213	1,469	1,561	1,458	1,485

1. 'MOD civilian' includes Industrial and Non-Industrial employees only (see paragraphs 44-46).

2. Injury and illness classifications (see paragraphs 23-28).

3. Rates are calculated using Full-time equivalent civilian strengths as the denominator.

p. Figures for 2012/13 are provisional (see paragraph 69).