

NHS Resolution Resolution through collaboration

Our 2025–28 Strategy



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Our strategy at a glance

Who we are

We are part of the NHS, operating at arm's length from the Department of Health and Social Care.

Our services

Indemnity and Claims Management: Comprehensive cover and claims management for NHS services.

Advice: Supporting the NHS with concerns about practitioner performance.

Appeals: Offering impartial resolution of primary care contracting disputes.

Safety and Learning: Using the information we hold to support improvement.

Our priorities



Fair resolution

All of our services will focus on fair and timely resolution, keeping patients and healthcare staff out of litigation and other formal processes to minimise distress and cost.



Data and insights

We will contribute our unique data and insights to learn from harm and the response to harm across the health and justice systems.



Maternity and neonatal

We will draw on our unique position and work with our system partners to support maternity and neonatal safety improvements.

Our strategy is driven by our priorities, supported by our people and systems.

Our values

Professional: we are dedicated to providing a professional, high quality service.

Expert: we bring unique skills, knowledge and expertise to everything we do.

Ethical: we are committed to acting with honesty, integrity and fairness.

Respectful: we treat people with consideration and respect and encourage supportive, collaborative and inclusive team working.



Introduction

Welcome from our Chair and Chief Executive

Welcome to our corporate strategy for the period of 2025–28, *Resolution through collaboration*, where we set our strategic priorities and aims for the next three years. The challenges faced by the health service are serious, with the costs of clinical negligence currently amounting to £5.1 billion annually¹ against a background of constrained public finances. There is an imperative to re-engage and retain a skilled NHS workforce, to emphasise the importance of safe, high-quality care for all patients, to do everything possible to support a culture where staff are valued and where every patient's voice is heard, ensuring there is a compassionate and open response when something goes wrong. Our aim throughout everything we do is to make outcomes better for patients and better for staff whilst ensuring we deliver value-formoney across all our services.

NHS Resolution has delivered reliable and comprehensive indemnity solutions for the NHS for 30 years, offering the best value for public funds and supporting open, compassionate care in which litigation (where required) is not seen as a barrier to transparency. Our services have grown to encompass advice on practitioner performance and resolving disputes between commissioners and providers of primary care. During this time, we have continued to develop our services to respond rapidly, when needed, to wider changes in the health and justice systems: for example, developing new schemes to support maternity and neonatal services, indemnity solutions to address workforce challenges in general practice and to support the pandemic response. Over the next three years, we will work with our sponsoring department to ensure that the indemnity schemes continue to act as an enabler for new models of care. To support the development and implementation of system-wide recommendations for improvement, we will work collaboratively with our partners, as anticipated in the NHS 10-year plan. In addition, we will need to continue responding to the financial challenge of rising compensation costs whilst building on the benefits of our digital and service transformation.

¹ The cost of harm represents the cost of claims resulting from incidents from a specific financial year. For further information, please see <u>2023/24</u> <u>Annual Report and Accounts</u> (page 72).



Alongside the continued development of our systems and digital technologies, our innovative plans will move our dispute resolution work onto a permanent footing, capitalising on the shift of cases out of litigation as we handle more work inhouse. We will use our new regional model to work more closely with the NHS to improve the system response to patients and families. Where necessary, we will continue to test and challenge cases in the courts, to provide clarity where the law is uncertain and to ensure that compensation payments from public funds are only made where they are due. Our new case management system will be delivered in 2025, enabling us to deliver our services in the most efficient way possible.

Over the next three years, we will continue to focus on supporting trusts to deliver safe, personalised and compassionate patient care with a specific focus on our work in maternity and neonatal care, recognising it remains an important area of concern for the NHS. We will drive forward our ambition to inform and incentivise work to prevent brain injury at birth and to ensure an effective and compassionate response for families affected by maternity and neonatal incidents with an enhanced approach to family engagement. In line with the recommendations of the Darzi Review², we will call on evidence-based interventions and act on the conclusions of the evaluations of our Early Notification (EN) and Maternity Incentive Scheme (MIS).

Finally, our multi-year transformation programmes are expected to conclude within the lifespan of this strategy. As we move into the next phase of our strategic cycle, we will leverage the power of technology, data and artificial intelligence (AI) as part of our approach to continuous improvement across our services. We are grateful to our staff, our partners and our sponsoring department for supporting our ambitions over the coming three years.





² Independent Investigation of the National Health Service in England.

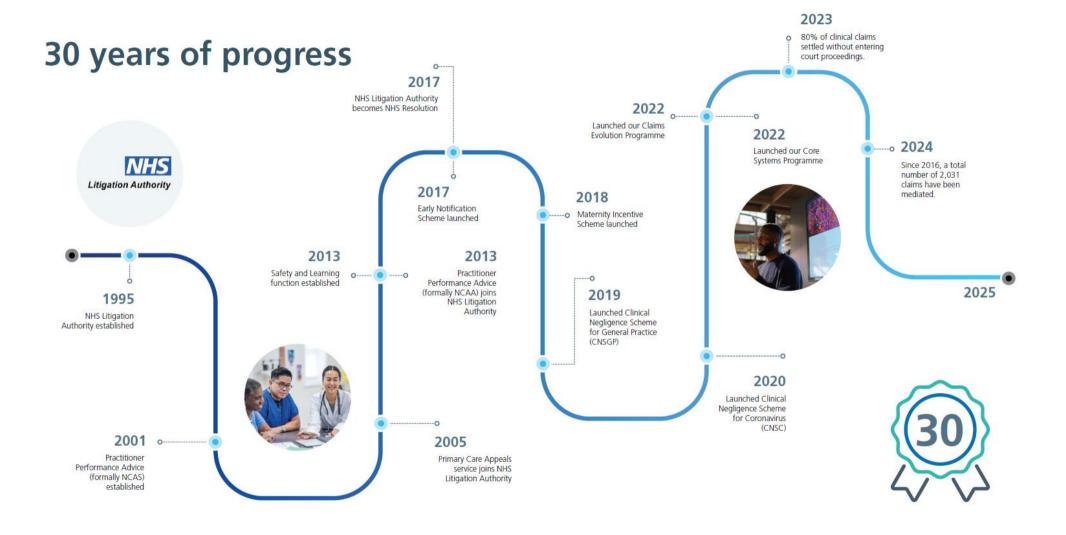


Who we are and what we do

We are part of the NHS, operating as an arm's-length body of the Department of Health and Social Care (DHSC), tasked with:

- Administering a range of **indemnity schemes** to cover the risks involved in delivering general practice and secondary healthcare services in England and handling associated compensation claims.
- Providing expert advice and support on the management of concerns about the performance of doctors, dentists and pharmacists.
- Resolving contracting disputes between primary care contractors and commissioners of primary care, operating independently and transparently.
- Using our unique perspective across the causes of claims, performance concerns and contracting disputes to provide insights back to the NHS to help to **improve safety and manage risk**.







Our priorities

Strategic priority 1: Fair resolution



What success will look like: We will focus on fair and timely resolution, as far as possible keeping patients and healthcare staff out of litigation and other formal processes to minimise distress and cost.

Indemnity and Claims Management

We are committed to tackling the distress and cost associated with clinical negligence. Our ambition is that no compensation claim against the NHS should enter litigation unless absolutely necessary. Some cases will always need to be dealt with by the courts, for example, to protect vulnerable individuals, determine novel legal issues or contest claims where there is no entitlement to compensation from public funds, and this will mean that we expect the rate of litigated claims will stabilise. However, our focus will be to continue to innovate and improve our processes to deliver fair, compassionate and efficient resolution.

We will achieve this by:

| Driving forward our innovation in dispute resolution models | particularly the use of early neutral evaluation, resolution summits, case stock-takes and remote mediations. These methods of dispute resolution give us the opportunity to choose, in collaboration with claimants and their representatives, the most suitable course of action, tailored to each case. We believe that a range of models is needed to address claimants' concerns and achieve resolution which does not prejudge the outcome sought and what is most important to an individual. We will also make the most of the technological advancements available to support this aim. |
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| Working closely with the NHS and with claimant lawyers | so that we understand and can respond to emerging models and changes in the legal environment and are collectively ensuring that we are driving fair and effective claims management. |



| Continuing to develop our operating model, through our Claims Evolution Programme | to deliver efficiency savings by bringing in more work in-house, identifying best practice for delivering fair resolution of claims. The programme will also empower our staff, utilising their expertise to deliver resolution of claims, with a financial benefit to public funds, all without compromising the service delivered to users of our services. |
|--------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Implementing the findings of the evaluation of our innovative Early Notification Scheme | giving us the opportunity to accelerate aspects of the scheme which are working well and review where changes may be needed. This includes working with Maternity and Newborn Safety Investigations (MNSI) to strengthen alignment between MNSI investigations and EN assessments and to identify other opportunities for learning. |
| Enhancing our approach to family engagement | to ensure that the experience and perspectives of families affected by severe birth injury remains central to what the EN scheme aims to achieve, calling on the skills of our Family Liaison and Mediation Lead and building on the work we have done to improve transparency and how we communicate with families, by developing support materials that meet the needs of diverse audiences. |



Practitioner Performance Advice

In line with the ambitions of our Practitioner Performance Advice (Advice) service to advocate local informal resolution first, we will help the NHS to resolve issues concerning healthcare practitioner performance at the earliest possible stage in a fair, timely and proportionate way to reduce an adverse impact on the practitioner, their team and the organisation.

We will achieve this by:

| Acting as an impartial adviser to all parties involved in practitioner performance concerns | whether they are healthcare organisations, teams or individual doctors, dentists, or pharmacists. |
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| Providing fair, respectful and expert advice and interventions which achieve resolution | and place service quality, retention and practitioner experience in the centre of the process. We will also proactively challenge management practice which puts practitioners or patients at risk. |
| Continuously improving our interventions and assessments | to respond to emerging themes in concerns, particularly those associated with behaviour. |
| Working collaboratively with users of our services | to hear and respond to feedback about their experience and how we can better support them. |
| Engaging with Boards to support their role | in effective leadership, clinical and corporate governance, and oversight of performance management. |



Primary Care Appeals

Our Primary Care Appeals (<u>Appeals</u>) service, which joined our organisation 20 years ago following its establishment in 1991, will continue to be transparent, robust and impartial in its decision-making and responsive to the implications of case law and judicial review outcomes.

We will achieve this by:

| Interpreting and applying primary care regulations alongside consideration of public law issues | and responding rapidly to new areas of dispute. |
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| Publishing all Appeals service decisions promptly and transparently | by explaining outcomes, new approaches or policies based on case law and judicial guidance. |

All of our services

Our Significant Concerns Framework, which allows us to share information internally and externally across our services where we see instances of harm or potential harm, will continue to respond to the evolving NHS landscape.



Strategic priority 2: Data and insights



What success will look like: We will contribute our unique data and insights to learn from harm and the response to harm across the health and justice systems, as a catalyst for improvement.

We will support the NHS's approach to understanding, developing and maintaining effective systems and processes to learn from harm, ensuring we take a similar approach to explore these themes within our data. Supported by our investments in analytics capability, we will use more of the information we hold to drive safety improvements aimed at preventing incidents from occurring in the future and reducing the impact of harm on patients, their families, practitioners and those involved in the resolution of an issue. Our <u>Safety and Learning</u> function and our Advice service will work in partnership with others in the health system to ensure that we collectively prioritise and rigorously test the work that we do to ensure that it delivers value, can contribute towards improvement and gives people practical tools to deliver change.

We will share data and insights in the following ways:

Learning from claims to support safe and compassionate care

| Working with stakeholders from frontline clinicians to legal teams and leaders | to improve the response to harm through transparent and patient-focussed communications. This will include areas such as duty of candour and consent, and supporting a just and learning culture across the NHS. |
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| Analysing our data and maximising the impact of this by sharing our data and related learning outputs with the system | including through the provision of local claims data. In doing this, we will support safety improvements and a compassionate and transparent response to harm. |



| Collaborating with <pre>partners across the healthcare system</pre> to share learning and best practice in relation to patient safety, supporting the system to share learning and best practice in relation to patient safety, supporting the system to share learning and best practice in relation to patient safety, supporting the system accelerate improvements in the quality and safety of care. |
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Learning from resolution of performance concerns

| Promoting and modelling a holistic approach to the management and resolution of practitioner performance concerns | underpinned by an expert understanding of organisational processes, culture and the individual circumstances of the practitioner, as well as a commitment to practitioner well-being and patient safety. |
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| Using our national platform and place-based relationships to connect and share learning | across the healthcare system to improve and enhance performance management practice in the NHS. |
| Promoting transparency in our data | and applying our expertise to help organisations maximise the learning from our data and insights to support their assurance and identify emerging concerns. |



Learning from resolution of disputes

Working to improve local decision-making in primary care contracting

by providing training and resources.

Our data and insights priority is enabled by our commitment to engaging with the deployment of AI and digital tools to drive efficiencies in our work when using NHS systems and to improve how we analyse our data. We recognise the sensitivity of our data and, therefore, we will take a balanced approach to implementation, with reference to good practice and relevant government guidelines. In parallel, we will also ensure that our people-related data is accurate and well-maintained to support the implementation process of the Future NHS Workforce Solution.



Strategic priority 3: Maternity and neonatal care

What success will look like: We will draw on our unique expertise and work with our system partners to support maternity and neonatal safety improvements.

We will complete independent evaluations of our Early Notification (EN) and Maternity Incentive Schemes (MIS) and use this learning to evolve each scheme.

We will achieve this by:

| Our Early Notification Scheme will continue to proactively investigate specific brain injuries at birth | and will also share learning rapidly to support safety improvements and improve the process for obtaining compensation for families. Future development will include continuous improvement of the family liaison service and further collaboration with partners like MNSI to support a coordinated approach. |
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| We will continue to work with and develop our Early Notification Maternity Voices Advisory Group | to provide external stakeholders, in particular families and their representatives, with a forum where they can advise and support future developments of the EN Scheme. |



| Our Maternity Incentive Scheme will continue to act as a convener for those involved in maternity and neonatal safety improvement | to incentivise an agreed set of safety actions. Emerging feedback from the evaluation shows that the MIS is perceived to be an important lever to raise the profile of maternity and neonatal services at Board level in trusts across England. We will work collaboratively with those who oversee, commission, provide and advise on maternity and neonatal services to ensure that the MIS safety actions are appropriately targeted, with cross-system support and reflect the government's priorities and ambition on maternity and neonatal safety. |
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| Supporting the wider maternity and neonatal system | through continuing our work to foster a just and learning culture, supporting cross-system action to address maternal and neonatal health inequalities and evolving our processes to identify, share and escalate insights and concerns |



How to contact us

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