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August 2025 FOI_7368

The following information was requested on 6 August 2025:

May I crave your indulgence and ask another question?

The number of claims in my own specialty [Urology] has been rising, but the proportion of claims that result in no compensation has also been increasing. One possible explanation for this is that there are more patients being encouraged to make claims in the hope that they might be awarded some compensation. There are, or were, advertisements in NHS outpatient clinics form solicitors encouraging patients who are dissatisfied with the outcome of their treatment to make a claim. I have heard a similar advertisement on Classic FM. 'Ambulance chasers' are not confined to accident cases, it seems.

In the past you have replied to my request for a breakdown of the causes of litigation in five specialties, Orthopaedics, General Surgery, Gynaecology, Accident and Emergency and Urology, over the last 10 years. I would be most grateful if you could supply this information to me for the y/e 31 March 2025, giving the same breakdown of causes in the same five specialties. For urology you have included the number of claims and the numbers that did and did not receive compensation. Both the overall numbers and the percentage who do not receive compensation have been increasing. I am wondering whether this trend is seen in the other four specialties.

Our Response

Please find attached the requested information. This information only covers England and not the rest of the UK. The previous similar request is:

FOI 7058 Urology Gynaecology Orthopaedic-Surgery Emergency-Medicine-and-General-Surgery.pdf

We have provided data on clinical claims only.

NB: We have recently changed the way we report on our FOIs to align better with our published documents. Streamlining our reporting on FOIs with our annual published reports may mean a variation in snapshot dates. This means this data may not align with previous similar requests and it may not be possible for you to compare this information with a previous request. For further information, please refer to https://resolution.nhs.uk/resources/understanding-nhs-resolution-data.

Please note claims notified/received and open are not guaranteed to be settled in the same year and can take many years to be concluded. Claims notified/received in any given year will often relate to incidents that have occurred many years prior. Claims closed in any given year will often relate to claims received/notified many years prior.

The data shows variation in numbers of cases received per year and costs attributed to those claims. This is a reflection of the nature of individual claims received by NHS Resolution which can vary significantly. In some cases, this can be affected by an adverse issue involving a number of patients. As such these fluctuations cannot be interpreted as trends.

Due to the way in which data is extracted, it is also possible that the same claim may appear more than once in a dataset, across different year groups e.g. where the case has been closed (as nil damages payment), challenged, reopened, and closed again at conclusion.

Table 1 shows: - Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is **'Orthopaedic Surgery'**.

Table 2 shows: - Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Emergency Medicine'.

Table 3 shows: - Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is '**Gynaecology**'.

Table 4 shows: - Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is **'General Surgery**'.

Table 5 shows: - Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is **'Urology'**.

Table 6 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2014/15' and '2024/25' with a damages payment, where the Specialty is one of the following; '**Orthopaedic Surgery**', '**Emergency Medicine'**, '**Gynaecology'**, '**General Surgery'**, '**Urology'**. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

Table 7 shows: - Number and Cost of Clinical Claims Closed between financial years '2014/15' and '2024/25' with **NIL** damages paid where the Specialty is one of the following; '**Orthopaedic Surgery**', '**Emergency Medicine'**, '**Gynaecology'**, '**General Surgery'**, '**Urology'**.

PPOs

The information disclosed includes damages and costs paid up to the end of the settlement year (in Periodical payment order (PPO) cases) and up to the end of the closure year in non-PPO cases.

PPOs are an agreement between the parties, to pay an initial lump sum and regular future payments (PPO damages) related to the injured party's ongoing needs, usually care for life i.e., a percentage of the full value of the claim is paid at the point of settlement (lump sum damages) with the balance paid at regular intervals over subsequent years. The information disclosed includes lump sum damages, costs and any PPO damages paid up to the end of the year of settlement. It does not include PPO damages, which have been committed to but due to be paid after the settlement year.

Low figures

We have not provided the information for low figures involved as we believe that disclosure of information with this level of granularity is exempt under Section 40(2) by virtue of section 40(3A) (a) of the FOI Act, where disclosure to a member of the public would contravene one or more of the data protection principles. The data protection principles are set out in Article 5 of the General Data Protection Regulation. We take the view that it would not be fair or lawful (given the sensitive and confidential nature of the information held) to disclose such information, and any disclosure would therefore contravene the first data protection principle.

In some instances, the low numbers of claims (fewer than 5) in each category, the likelihood exists that individuals who are the subject of this information may be identified either from this information alone, or in combination with other available information. In addition to this, as this information is considered to be sensitive personal data (the data subjects' medical condition); NHS Resolution believes it has a greater responsibility to protect those individuals' identities, as disclosure could potentially cause damage and/or distress to those involved.

Further to our obligations to provide advice and assistance, you may find it helpful to review the work of the <u>Getting It Right First Time team</u> with whom NHS Resolution has been working with to undertake in-depth analysis of our claims data. They have produced a number of <u>reports</u> from analysing our claims data, which has been shared following approval of the confidentiality advisory group to the use of confidential patient information for this purpose.

If you would like to know how data is categorised in our Claims database please see the following link: Glossary

This concludes our response to your request.

If you are not satisfied with the service that you have received in response to your information request, it is open to you to make a complaint and request a formal review of our decisions. If you choose to do this, you should write to <u>Joanne Appleby</u>, Deputy

Data Protection Officer for NHS Resolution, within 28 days of your receipt of this reply. Reviews of decisions made in relation to information requests are carried out by a person who was not involved in the original decision-making about the request.

If you are not content with the outcome of your complaint, you may apply directly to the Information Commissioner for a review of the decision. Generally, the Information Commissioner will not make a decision unless you have exhausted the local complaints procedure. The address of the Information Commissioner's Office is:

Wycliffe House Water Lane Wilmslow Cheshire SK9 5AF

https://ico.org.uk/



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NB: Number of claims fewer than 5 (and any associated values, within the same row) are masked with a "#" (in accordance with Data Protection guidelines). Accordingly, some total values may also be approximated to prevent masked values to be deduced through reverse calculation.

<u>Table 1: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Orthopaedic Surgery'.</u>

<u>Table 2: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Emergency Medicine'.</u>

<u>Table 3: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Gynaecology'.</u>

<u>Table 4: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'General Surgery'.</u>

<u>Table 5: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Urology'.</u>

Table 6: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2014/15' and '2024/25' with a damages payment, where the Specialty is one of the following; 'Orthopaedic Surgery', 'Emergency Medicine', 'Gynaecology', 'General Surgery', 'Urology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

Table 7: Number and Cost of Clinical Claims Closed between financial years '2014/15' and '2024/25' with NIL damages paid where the Specialty is one of the following; 'Orthopaedic Surgery', 'Emergency Medicine', 'Gynaecology', 'General Surgery', 'Urology'.



Table 1: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Orthopaedic Surgery'.

Notified	Υ
Specialty1L1ARA	Orthopaedic Surgery
ClinicalNonClinical	Clinical
ReportingYear	2024/25

Primary Cause	No. of Claims
Fail / Delay Treatment	281
Failure/Delay Diagnosis	143
Inappropriate Treatment	122
Operator Error	99
Intra-Op Problems	96
Fail To Warn-Informed Consent	77
Assault, Etc By Hospital Staff	72
Failure To Interpret X-Ray	47
Fail To Follow-Up Arrangements	34
Inadequate Nursing Care	34



Table 2: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Emergency Medicine'.

Notified	Υ
Specialty1L1ARA	Emergency Medicine
ClinicalNonClinical	Clinical
ReportingYear	2024/25

Primary Cause	No. of Claims
Failure/Delay Diagnosis	513
Fail / Delay Treatment	420
Failure To Perform Tests	110
Failure To Interpret X-Ray	84
Failure To X-Ray	64
Inadequate Nursing Care	60
Inappropriate Treatment	41
Fail To Supervise	31
Fail To Follow-Up Arrangements	27
Wrong Diagnosis	25
Medication Errors	25



Table 3: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Gynaecology'.

Notified	Υ
Specialty1L1ARA	Gynaecology
ClinicalNonClinical	Clinical
ReportingYear	2024/25

Primary Cause	No. of Claims
Fail To Warn-Informed Consent	162
Fail / Delay Treatment	128
Failure/Delay Diagnosis	82
Operator Error	41
Inappropriate Treatment	37
Intra-Op Problems	25
Failure To Perform Tests	23
Fail To Interpret USS	20
Fail To Recog. Complication Of	17
Wrong Diagnosis	16



Table 4: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'General Surgery'.

Notified	Υ
Specialty1L1ARA	General Surgery
ClinicalNonClinical	Clinical
ReportingYear	2024/25

Primary Cause	No. of Claims
Fail / Delay Treatment	148
Failure/Delay Diagnosis	73
Intra-Op Problems	65
Fail To Warn-Informed Consent	50
Operator Error	37
Inappropriate Treatment	33
Fail To Follow-Up Arrangements	27
Delay In Performing Operation	26
Fail To Recog. Complication Of	26
Failure To Perform Tests	22



Table 5: Top 10 Causes by Number of Clinical Claims and Incidents received in the '2024/25' financial year where the Specialty is 'Urology'.

Notified	Υ
Specialty1L1ARA	Urology
ClinicalNonClinical	Clinical
ReportingYear	2024/25

Primary Cause	No. of Claims
Fail / Delay Treatment	74
Failure/Delay Diagnosis	45
Fail To Follow-Up Arrangements	27
Fail To Warn-Informed Consent	21
Operator Error	20
Intra-Op Problems	15
Delay In Performing Operation	12
Fail To Act On Abnorm Test Res	12
Inappropriate Treatment	11
Failure To Perform Tests	9



Table 6: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2014/15' and '2024/25' with a damages payment, where the Specialty is one of the following; 'Orthopaedic Surgery', 'Emergency Medicine', 'Gynaecology', 'General Surgery', 'Urology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

ClosedSettled Y
ClaimOutcome Damages Paid
ClinicalNonClinical Clinical

Year of Closure (Settlement Year for PPOs)			NHS Legal	Claimant Legal	
Specialty	No. of Claims	Damages Paid	Costs Paid	Costs Paid	Total Paid
2014/15			Joseph and	oosts i ala	
Orthopaedic Surgery	926	76,455,932	9,479,796	42,798,466	128,734,194
Emergency Medicine	851	70,827,035	7,108,124	31,679,368	109,614,527
General Surgery	577	39,513,933	4,804,894	25,684,451	70,003,278
Gynaecology	352	14,619,962	1,835,390	11,381,622	27,836,973
Urology	142	6,133,447	926,485	5,417,188	12,477,120
2015/16		5,155,111	020,.00	3,111,100	,,0
Orthopaedic Surgery	925	76,032,833	10,739,800	50,625,506	137,398,138
Emergency Medicine	801	50,232,482	7,558,553	34,734,163	92,525,199
General Surgery	622	39,843,327	6,358,147	31,757,408	77,958,882
Gynaecology	352	22,045,201	2,932,039	15,756,756	40,733,996
Urology	143	5,924,433	1,146,070	6,629,358	13,699,860
2016/17		5,5=1,155	.,,	2,022,000	,,
Orthopaedic Surgery	1,090	89,951,201	13,896,940	62,319,321	166,167,461
Emergency Medicine	967	63,660,554	9,493,560	42,096,140	115,250,253
General Surgery	746	61,888,325	9,210,342	48,838,659	119,937,325
Gynaecology	425	20,611,636	3,838,470	19,878,507	44,328,612
Urology	172	7,255,434	1,230,686	6,190,679	14,676,799
2017/18		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	.,	2,122,212	,,
Orthopaedic Surgery	1,011	96,358,356	14,051,688	59,892,684	170,302,728
Emergency Medicine	895	90,675,262	11,297,177	50,015,890	151,988,329
General Surgery	724	56,605,865	8,539,216	39,609,297	104,754,378
Gynaecology	492	31,173,588	4,725,832	21,525,038	57,424,457
Urology	187	8,305,812	1,482,946	7,724,532	17,513,289
2018/19		.,,.	, , , , ,	, , , , ,	,, ,,
Orthopaedic Surgery	925	86,050,010	12,236,898	50,746,418	149,033,325
Emergency Medicine	915	106,299,697	11,059,208	45,054,801	162,413,706
General Surgery	616	59,511,219	7,854,924	32,756,053	100,122,196
Gynaecology	407	29,617,842	4,708,841	19,285,336	53,612,018
Urology	210	14,686,115	1,820,894	9,005,176	25,512,185
2019/20					
Emergency Medicine	1,021	92,099,117	10,831,102	44,429,613	147,359,831
Orthopaedic Surgery	1,009	100,660,315	14,567,199	53,863,044	169,090,558
General Surgery	699	61,925,333	9,161,102	35,179,367	106,265,803
Gynaecology	435	27,968,153	4,313,123	18,884,695	51,165,971
Urology	218	16,976,762	2,279,257	9,456,693	28,712,711
2020/21					
Orthopaedic Surgery	877	97,639,132	12,979,543	48,006,901	158,625,576
Emergency Medicine	839	85,011,428	9,645,224	36,551,958	131,208,610
General Surgery	593	65,282,100	8,166,049	33,581,260	107,029,409
Gynaecology	351	29,902,979	4,210,660	17,696,526	51,810,164
Urology	196	10,426,485	2,071,954	8,000,756	20,499,196
2021/22					
Orthopaedic Surgery	960	121,218,767	15,155,852	57,814,032	194,188,651
Emergency Medicine	957	150,297,901	15,404,003	56,704,891	222,406,796
General Surgery	646	67,643,729	9,686,589	37,090,946	114,421,263
Gynaecology	419	35,286,989	5,489,908	22,948,623	63,725,519
Urology	237	15,481,582	2,317,512	10,654,371	28,453,465
2022/23					
Emergency Medicine	883	142,157,008	14,264,162	54,002,873	210,424,043
Orthopaedic Surgery	858	80,556,074	11,939,910	45,945,696	138,441,680



Table 6: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2014/15' and '2024/25' with a damages payment, where the Specialty is one of the following; 'Orthopaedic Surgery', 'Emergency Medicine', 'Gynaecology', 'General Surgery', 'Urology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

ClosedSettled Y
ClaimOutcome Damages Paid
ClinicalNonClinical Clinical

Year of Closure (Settlement Year for PPOs) Specialty	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
General Surgery	580	60,703,272	9,419,403	32,392,266	102,514,942
Gynaecology	403	33,477,126	4,513,197	21,209,510	59,199,834
Urology	217	19,130,184	2,039,111	10,306,661	31,475,956
2023/24					
Emergency Medicine	888	139,063,302	15,337,231	57,684,067	212,084,601
Orthopaedic Surgery	818	98,038,695	11,924,655	49,985,516	159,948,866
General Surgery	526	59,890,226	7,208,365	29,728,688	96,827,279
Gynaecology	398	50,341,580	5,581,943	23,979,219	79,902,743
Urology	201	20,337,307	2,118,406	10,256,873	32,712,586
2024/25					
Emergency Medicine	939	145,779,824	15,389,400	60,983,796	222,153,021
Orthopaedic Surgery	815	121,448,012	14,303,674	56,662,195	192,413,881
General Surgery	495	64,137,505	6,582,759	31,157,418	101,877,682
Gynaecology	412	32,988,725	5,763,959	25,830,919	64,583,602
Urology	205	13,121,741	1,872,711	9,816,182	24,810,635
Grand Total	33,568	3,283,270,851	422,874,880	1,782,208,371	5,488,354,103



Table 7: Number and Cost of Clinical Claims Closed between financial years '2014/15' and '2024/25' with NIL damages paid where the Specialty is one of the following; 'Orthopaedic Surgery', 'Emergency Medicine', 'Gynaecology', 'General Surgery', 'Urology'.

ClosedSettled Y
ClaimOutcome Nil Damages
ClinicalNonClinical Clinical

ear of Closure Specialty	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
2014/15		-	· ·
Orthopaedic Surgery	730	1,789,831	113,84
Emergency Medicine	570	1,234,472	25,20
General Surgery	480	1,115,932	20,09
Gynaecology	258	394,632	482,52
Urology	118	164,797	402,32
2015/16	110	104,737	
Orthopaedic Surgery	708	1,944,140	107,20
Emergency Medicine	590	1,738,426	7,71
General Surgery	422	1,111,548	77,18
Gynaecology	265	503,917	204,38
Urology	112	233,065	204,00
2016/17	112	255,005	
Orthopaedic Surgery	692	2,470,290	96,93
Emergency Medicine	570	1,996,613	62,61
General Surgery	431	1,271,860	9,48
Gynaecology	260	791,783	305,60
Urology	139	264,577	303,00
2017/18	139	204,377	
	781	1 775 062	
General Surgery Orthopaedic Surgery	616	1,775,962 2,053,772	13,66
Emergency Medicine	549	2,053,772	74,98
	252		
Gynaecology Urology	142	746,222	284,03
2018/19	142	375,811	12,01
	502	2 502 000	40.50
Orthopaedic Surgery	583	2,503,999	42,52
Emergency Medicine	519 420	3,033,335	
General Surgery	239	1,560,613	70.4
Gynaecology		703,366	72,4
Urology 2019/20	151	420,527	5,50
	500	0.040.000	50.00
Orthopaedic Surgery	522	2,040,368	56,60
Emergency Medicine	506	2,568,744	37,69
General Surgery	338	1,406,695	21,55
Gynaecology	248	1,091,312	202,78
Urology	150	373,910	
2020/21	404	0.000.750	00.4
Emergency Medicine	464	2,268,750	88,49
Orthopaedic Surgery	455	1,871,476	62,2
General Surgery	301	1,265,530	00.4
Gynaecology	259	855,420	32,4
Urology	123	514,391	
2021/22	10.1	0.004.440	404.0
Orthopaedic Surgery	484	2,804,110	121,9
Emergency Medicine	464	2,951,212	67,1
General Surgery	344	1,951,969	172,2
Gynaecology	304	790,639	25,2
Urology	88	332,615	18,6
2022/23			
Emergency Medicine	477	3,159,662	38,5
Orthopaedic Surgery	439	2,557,095	39,2
Gynaecology	372	851,155	19,3
General Surgery	291	1,317,420	22,7
Urology	98	448,998	
2023/24			
Emergency Medicine	484	2,455,045	184,3
Orthopaedic Surgery	422	2,551,301	64,0
Gynaecology	290	845,809	38,9
General Surgery	267	1,262,229	19,3
Urology	110	316,906	
2024/25			
Emergency Medicine	517	2,549,715	25,0
Orthopaedic Surgery	423	2,099,966	81,5
Gynaecology	271	817,386	
General Surgery	254	1,017,790	66,6
Urology	101	342,459	
rand Total	20,463	78,070,481	3,541,74