



Resolution

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December 2023

FOI_6327

The following information was requested on 14 December 2023:

- 1. In 2018/19, 2019/20, 2020/21, 2021/22 and 2022/23 how many claims were paid out across all schemes where the injury code has been removal of testicle and what was the total value paid out in damages for such claims?*
- 2. For the same years as above, please state how many "removal of testicle" claims were linked to each separate type of cause code e.g. (wrong diagnosis, operation on wrong part of body etc.)*
- 3. For the same years above, what was the highest single claim or range of claim paid out.*
- 3. For 2022/23, which Trusts did these incidents take place at? If this would risk identification, which regions in the country?*

(Please note that this question relates to when the claims were paid regardless of when the incident took place or when the claim was lodged.)

Our Response

Please find attached the requested information.

Please note: 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>.

Claims notified/received in any given year will often relate to incidents that have occurred many years prior. Due to the nature of clinical negligence claims and the level of investigation needed to bring them to a resolution, claims received and notified in a specific year may take years to settle and close. They are not guaranteed to be settled

and closed in the same year. As such, there will be a time gap between incident and claim closure.

Many of the claims notified will have been repudiated and settled without damages paid.

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 with nil damages paid), challenged, reopened, and closed again at conclusion.

Please also note that the data shows variation in the number of claims received, and the number closed. This is a reflection of the nature of individual claims received by NHS Resolution, which can vary significantly. As such, year on year fluctuations cannot necessarily be interpreted as trends.

Table 1 shows: - Number and damages payment for Clinical Claims Closed with a damages payment between financial years 2018/19 and 2022/23 where the Primary Injury is '**Removal of Testicle**'.

Table 2 shows: - Number and damages payment for Clinical Claims Closed with a damages payment between financial years 2018/19 and 2022/23 where the Primary Injury is '**Removal of Testicle**'. Breakdown by Primary Cause.

Table 3 shows: - The damages range for the highest clinical Claim Closed with a damages payment between financial years 2018/19 and 2022/23 where the primary injury code is '**Removal of Testicle**'.

Table 4 shows: - Number and damages payment for Clinical Claims Closed with a damages payment in financial year 2022/23 where the Primary Injury is '**Removal of Testicle**'. Breakdown by Trust.

Low Numbers

We have suppressed low figures 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. Where we are in the territory of such small numbers in the attached, we have used a '#' symbol in the relevant field. You should still be able to see aggregate/total details for higher level fields containing this data.

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 [Tinku Mitra](#), Deputy Director of Corporate and Information Governance, 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.

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Table 1: Number and damages payment for Clinical Claims Closed with a damages payment between financial years 2018/19 and 2022/23 where the Primary Injury is 'Removal of Testicle'.

FOI View	Closed Settled
Clinical	Clinical
Claim_Outcome	Successful

Year of Closure	No. of Claims	Damages Paid
2018/19	26	492,104
2019/20	28	837,045
2020/21	22	582,097
2021/22	36	798,315
2022/23	33	773,560
Grand Total	145	3,483,121

Table 2: Number and damages payment for Clinical Claims Closed with a damages payment between financial years 2018/19 and 2022/23 where the Primary Injury is 'Removal of Testicle'. Breakdown by Primary Cause.

FOI View	Closed Settled
Clinical	Clinical
Claim_Outcome	Successful

Primary Cause	No. of Claims	Damages Paid
Failure/Delay Diagnosis	79	1,755,281
Fail / Delay Treatment	34	739,292
Delay In Performing Operation	9	358,000
Fail To Warn-Informed Consent	5	95,634
Wrong Diagnosis	#	#
Fail/Delay Referring To Hosp.	#	#
Failure To Perform Tests	#	#
Fail To Recog. Complication Of	#	#
Inappropriate Treatment	#	#
Fail To Follow-Up Arrangements	#	#
Intra-Op Problems	#	#
Failure To Perform Operation	#	#
Fail/Delay Admitting To Hosp.	#	#
Fail To Infrm Test Rslts	#	#
Fail To Act On Abnorm Test Res	#	#
Inadequate Nursing Care	#	#
Grand Total	145	3,483,121

Table 3: The damages range for the highest clinical Claim Closed with a damages payment between financial years 2018/19 and 2022/23 where the primary injury code is 'Removal of Testicle'.

FOI View	Closed Settled
Clinical	Clinical
Claim_Outcome	Successful

Year of Closure	Damages Paid
2018/19	50,000 - 100,000
2019/20	150,000 - 200,000
2020/21	150,000 - 200,000
2021/22	25,000 - 50,000
2022/23	25,000 - 50,000

Table 4: Number and damages payment for Clinical Claims Closed with a damages payment in financial year 2022/23 where the Primary Injury is 'Removal of Testicle'. Breakdown by Trust.

FOI View	Closed Settled
Clinical	Clinical
Claim_Outcome	Successful
reportingYear	2022/23

Member Name	No. of Claims	Damages Paid
NHS Commissioning Board	6	133,170
Wirral University Teaching Hospital NHS Foundation Trust	#	#
Royal Devon University Healthcare NHS Foundation Trust	#	#
Homerton Healthcare NHS Foundation Trust	#	#
The Rotherham NHS Foundation Trust	#	#
Surrey and Sussex Healthcare NHS Trust	#	#
University Hospitals of Leicester NHS Trust	#	#
Royal Surrey County Hospital NHS Foundation Trust (The)	#	#
Newcastle Upon Tyne Hospitals NHS Foundation Trust (The)	#	#
Harrogate & District NHS Foundation Trust	#	#
St George's University Hospitals NHS Foundation Trust	#	#
Barts Health NHS Trust	#	#
Lewisham & Greenwich NHS Trust	#	#
London North West University Healthcare NHS Trust	#	#
Tameside and Glossop Integrated Care NHS Foundation Trust	#	#
Northumbria Healthcare NHS Foundation Trust	#	#
Chesterfield Royal Hospital NHS Foundation Trust	#	#
Nottingham University Hospitals NHS Trust	#	#
Southport and Ormskirk Hospital NHS Trust	#	#
East Kent Hospitals University NHS Foundation Trust	#	#
Royal Wolverhampton NHS Trust (The)	#	#
Maidstone and Tunbridge Wells NHS Trust	#	#
Kingston Hospital NHS Foundation Trust	#	#
Bedfordshire Hospitals NHS Foundation Trust	#	#
King's College Hospital NHS Foundation Trust	#	#
Epsom and St Helier University Hospitals NHS Trust	#	#
Grand Total	33	773,560