



Resolution

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Telephone: 020 7811 2700

April 2024

FOI_6436

The following information was requested on 1 March 2024:

[Following a telephone conversation with you on 1 March 2024 we sought clarification on the request as follows]:

Thank you for emailing me and it was nice talking to you on the phone earlier.

Please, would you be able to clarify your request?

You told me you are interested in claims for specialty Podiatry and value of these claims.

We are able to provide the breakdown in financial years from 2006/07 to 2022/23, broken down by damages paid.

Please refer to our publication: [Guidance-note-Understanding-NHS-Resolution-data-updated](#) and a set of codes against which claims are logged: [CNST-Codes.xlsx \(live.com\)](#) (see the three tabs in the spreadsheet).

Would you also like to receive a breakdown by causes or injuries?

Your request will be put on hold until we receive the clarification requested above.

[You replied on 1 March 2024 with]:

Thank you for your email. A breakdown for the years would be appreciated and if you could also split into the cause of claim as well that would be excellent.

Our Response

Please find attached the requested information we are able to provide. This information only covers England and not the rest of the UK.

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 [Understanding NHS Resolution data - NHS Resolution](#)

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.

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.

The data shows variation in numbers of cases received, closed per year, and costs attributed to those claims. This is a reflection of the nature of individual claims received and resolved by NHS Resolution which can vary significantly. As such these fluctuations cannot be interpreted as trends.

Table 1: Number of Clinical Claims and Incidents received between financial years 2006/07 and 2022/23 where the Specialty is **Podiatry**.

Table 2: Number and Cost of Clinical Claims Closed between financial years 2006/07 and 2022/23 with a damages payment, where the Specialty is **Podiatry**.

Table 3: Number and Cost of Clinical Claims Closed between financial years 2006/07 and 2022/23 with **NIL** damages paid where the Specialty is **Podiatry**.

Table 4: Analysis of Primary Causes for Clinical Claims Closed between financial years 2006/07 and 2022/23 with a damages payment where the Specialty is **Podiatry**.

Table 5: Analysis of Primary Injuries for Clinical Claims Closed between financial years 2006/07 and 2022/23 with a damages payment where the Specialty is **Podiatry**.

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 [Getting It Right First Time team](#) with whom NHS Resolution has been working with to undertake in-depth analysis of our claims data. They have produced several [reports](#) 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.

Please refer to [Understanding NHS Resolution data](#) guidance for further details on how our Claims database is categorised.

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 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.

Table 1: Number of Clinical Claims and Incidents received between financial years 2006/07 and 2022/23 where the Specialty is Podiatry.

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Table 1: Number of Clinical Claims and Incidents received between financial years 2006/07 and 2022/23 where the Specialty is Podiatry.

FOI View	Notified
Year of Notification	No. of Claims
2006/07	13
2007/08	11
2008/09	18
2009/10	14
2010/11	24
2011/12	38
2012/13	30
2013/14	26
2014/15	47
2015/16	45
2016/17	48
2017/18	40
2018/19	43
2019/20	53
2020/21	49
2021/22	38
2022/23	40
Grand Total	577

Table 2: Number and Cost of Clinical Claims Closed between financial years 2006/07 and 2022/23 with a damages payment, where the Specialty is Podiatry.

FOI View Closed Settled

Year of Closure	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
2006/07	6	190,850	72,770	257,300	520,920
2007/08	#	#	#	#	#
2008/09	6	271,376	86,012	364,250	721,638
2009/10	10	226,493	107,863	307,000	641,356
2010/11	11	209,198	81,905	258,398	549,501
2011/12	11	808,754	161,611	447,160	1,417,526
2012/13	17	992,429	222,597	769,850	1,984,876
2013/14	18	999,331	181,092	633,931	1,814,354
2014/15	17	1,448,978	235,710	1,008,996	2,693,685
2015/16	15	423,385	90,566	512,589	1,026,539
2016/17	26	1,593,681	295,856	1,276,750	3,166,286
2017/18	30	1,962,697	426,073	1,816,114	4,204,884
2018/19	24	1,065,917	279,623	1,257,658	2,603,198
2019/20	32	2,023,756	289,246	991,298	3,304,300
2020/21	32	2,689,761	520,153	1,681,531	4,891,445
2021/22	26	2,240,582	419,837	1,648,962	4,309,381
2022/23	29	2,859,955	469,548	1,721,352	5,050,856

Table 3: Number and Cost of Clinical Claims Closed between financial years 2006/07 and 2022/23 with NIL damages paid where the Specialty is Podiatry.

FOI View Closed Settled

Year of Closure	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
2006/07	14	6,787	0
2007/08	11	54,039	0
2008/09	5	0	0
2009/10	13	36,408	0
2010/11	11	54,270	0
2011/12	13	15,027	0
2012/13	18	8,888	0
2013/14	14	17,696	0
2014/15	16	42,914	#
2015/16	18	19,184	0
2016/17	23	57,295	0
2017/18	21	60,659	0
2018/19	26	175,344	#
2019/20	19	46,535	0
2020/21	23	117,547	0
2021/22	19	93,695	0
2022/23	21	63,192	0
Grand Total	285	869,479	#

Table 4: Analysis of Primary Causes for Clinical Claims Closed with a damages payment between financial years 2006/07 and 2022/23 where the Specialty is Podiatry.

FOI View

Closed Settled

Primary Causes	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Fail To Carry Out PO Observs.	5	278,500	57,499	293,500	629,499
Perform. Of Op. Not Indicated	5	276,448	60,157	205,288	541,892
Operator Error	10	121,828	34,994	262,750	419,572
Fail To Warn-Informed Consent	15	745,548	138,509	577,767	1,461,824
Fail To Recog. Complication Of	16	635,652	192,588	520,165	1,348,404
Intra-Op Problems	18	2,200,872	301,139	1,256,406	3,758,417
Fail/Delay Referring To Hosp.	19	1,286,256	174,633	1,106,056	2,566,945
Failure/Delay Diagnosis	32	2,330,481	675,173	2,091,364	5,097,018
Inappropriate Treatment	62	3,453,669	831,625	2,999,299	7,284,593
Fail / Delay Treatment	99	7,753,024	1,318,807	4,474,570	13,546,401
Other	#	#	#	#	#
Failed Infection Control Policy/Hospital Hygiene	#	#	#	#	#
Inadequate Nursing Care	#	#	#	#	#
Err With Agnt/Dose/Route/Selec	#	#	#	#	#
Failure To Interpret X-Ray	#	#	#	#	#
Inadequate Monitoring Intra-Op	#	#	#	#	#
Equipment Malfunction	#	#	#	#	#
Diathermy Burns/react. To Prep	#	#	#	#	#
Foreign Body Left In Situ	#	#	#	#	#
Failure To Perform Tests	#	#	#	#	#
Fail To Act On Abnorm Test Res	#	#	#	#	#
Bacterial Infection	#	#	#	#	#
Fail To Follow-Up Arrangements	#	#	#	#	#
Failure To X-Ray	#	#	#	#	#
Failure To Perform Operation	#	#	#	#	#
Wrong Site Surgery	#	#	#	#	#
Fail To Supervise	#	#	#	#	#
Incorrect Injection Site	#	#	#	#	#
Inapprop. Case Selection	#	#	#	#	#
Cross Infection	#	#	#	#	#
Lack Of Assistance/Care	#	#	#	#	#
Wrong Site Surgery (Never Event)	#	#	#	#	#

Table 5: Analysis of Primary Injuries for Clinical Claims Closed with a damages payment between financial years 2006/07 and 2022/23 where the Specialty is Podiatry.

FOI View

Closed Settled

Primary Injuries	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Nerve Damage	5	127,847	61,593	189,052	378,492
Tissue Damage	6	106,476	57,456	177,621	341,554
Other Infection	6	35,750	10,100	79,250	125,100
Burn(s)	7	59,115	6,679	81,025	146,819
Pressure Sores	8	148,329	22,151	86,806	257,286
Fracture	10	503,384	48,864	299,097	851,345
Joint Damage	11	905,198	169,223	659,125	1,733,546
Poor Outcome - Fractures Etc.	14	524,702	106,599	495,229	1,126,530
Unnecessary Pain	63	1,782,402	516,737	1,995,014	4,294,152
Adtnl/unnecessary Operation(s)	64	4,135,148	863,143	3,960,860	8,959,151
Amputation - Lower	90	8,728,043	1,717,298	5,563,398	16,008,739
Multiple Injuries	#	#	#	#	#
Scarring	#	#	#	#	#
Other	#	#	#	#	#
Amputation - Upper	#	#	#	#	#
Fatality	#	#	#	#	#
Infection (bacterial)	#	#	#	#	#
Psychiatric/Psychological Dmge	#	#	#	#	#
Sepsis	#	#	#	#	#
Tendon Damage	#	#	#	#	#
Cancer	#	#	#	#	#
Cosmetic Disfigurement	#	#	#	#	#
Advanced Stage Cancer	#	#	#	#	#
Bruising/ Extravasation	#	#	#	#	#
Foot Drop	#	#	#	#	#
Dislocation	#	#	#	#	#
Limb Deformity	#	#	#	#	#
Infectious Diseases	#	#	#	#	#
Viral Infection	#	#	#	#	#