NHS Resolution

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February 2025
FOI_6937

The following information was requested on 8 January 2025:

In the NHSR accounting year 2023/24, in respect of all claims where the treatment giving rise to the claim was provided by a <u>private healthcare provider</u> with the indemnity provided under one of the clinical negligence schemes, please provide the following information: -
1. The number of clinical negligence claims received during the year.
2. The number of clinical negligence claims closed during the year.
3. The number of clinical negligence claims closed before the issue of proceedings with no payment of damages.
4. The number of clinical negligence claims closed before the issue of proceedings with payment of damages.
5. In respect of the claims identified in 4, please state:
a. The total damages paid.
b. The total Claimant costs.
c. The total Defendant costs.
6. In respect of the claims identified in 4, please state:
a. The number of claims where the damages did not exceed £25,000 and in respect of those cases:
b. The total damages paid.
c. The total Claimant costs.
d. The Total Defendant costs.
7. In respect of the Claims identified in 4, please state:
a. The number of claims where the damages exceeded £25,000 but did not exceed £100,000 and in respect of those cases:
b. The total damages paid.
c. The total Claimant costs.
d. The total Defendant costs.
8. The number of clinical negligence claims closed after the issue of proceedings with no payment of damages.
9. The number of clinical negligence claims closed after the issue of proceedings with payment of damages.
10. In respect of the claims identified in 9, please state
a. The total damages paid
b. The total Claimant costs
c. The total Defendant costs
11. In respect of the claims identified in 9, please state
a. The number of claims where the damages did not exceed £25,000 and in respect of those cases:
b. The total damages paid.
c. The total Claimant costs.
d. The total Defendant costs.
12. In respect of the claims identified in 9, please state
a. The number of claims where the damages exceeded £25,000 but did not exceed £100,000 and in respect of those cases:
b. The total damages paid.

c. The total Claimant costs.
d. The total Defendant costs.

Our Response

Please find attached the details of clinical claims recorded against independent sector healthcare providers treating NHS patients who are members of our indemnity scheme. The numbers are likely to include a few cases where treatment was in the community, as opposed to on the premises of private providers.

Please note that we do not indemnify **all** independent sector providers and therefore can only answer the questions raised for those organisations that are members of our schemes. Therefore, the volume of claims notified and settled will fluctuate, dependant on the number of independent sector members we indemnify at any point.

Please note there are a small number of claims not included where a Trust has sub-contracted work to a private hospital, and it is a term of the arrangement that the Trust agrees to accept liability (for whatever reason), and we log such cases against the Trust. It is not possible to identify these from our Claims Management System as we do not have a code for them.

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 that the attached data covers claims closed in the relevant financial year or settled with a Periodical Payment Orders (PPO) during the financial year.

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 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.

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.

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.

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 a number of 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.

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/

FOI 6937 - All Clinical Negligence Claims in 2023/24 where the treatment giving rise to the claim was provided by a private healthcare provider

	2023/24
1. The number of clinical negligence claims received during the year.	362
2.The number of clinical negligence claims closed or settled with a PPO during the year.	377
3.The number of clinical negligence claims closed before the issue of proceedings with no payment of damages.	127
4. The number of clinical negligence claims closed before the issue of proceedings with payment of damages.	171
5. In respect of the claims identified in 4, please state:	
a. The total damages paid.	9,666,329
b. The total Claimant costs.	6,210,176
c. The total Defendant costs.	1,103,492
6. In respect of the claims identified in 4, please state:	
a. The number of claims where the damages did not exceed £25,000 and in respect of those cases:	84
b. The total damages paid.	933,398
c. The total Claimant costs.	1,771,127
d. The Total Defendant costs.	323,354
7. In respect of the Claims identified in 4, please state:	
a. The number of claims where the damages exceeded £25,000 but did not exceed £100,000 and in respect of those cases:	65
b. The total damages paid.	3,424,352
c. The total Claimant costs.	2,430,195
d. The total Defendant costs.	394,101
8. The number of clinical negligence claims closed after the issue of proceedings with no payment of damages.	14
9. The number of clinical negligence claims closed or settled with a PPO after the issue of proceedings with payment of damages.	65
10. In respect of the claims identified in 9, please state	
a. The total damages paid	13,588,794
b. The total Claimant costs	6,245,019
c. The total Defendant costs	1,930,426
11. In respect of the claims identified in 9, please state	
a. The number of claims where the damages did not exceed £25,000 and in respect of those cases:	25
b. The total damages paid.	298,266
c. The total Claimant costs.	1,016,522
d. The total Defendant costs.	218,548
12. In respect of the claims identified in 9, please state	
a. The number of claims where the damages exceeded £25,000 but did not exceed £100,000 and in respect of those cases:	20
b. The total damages paid.	862,923
c. The total Claimant costs.	1,442,847
d. The total Defendant costs.	459,801