



Resolution

8th Floor,
10 South Colonnade
Canary Wharf
London
E14 4PU
Telephone: 020 7811 2700

March 2025
FOI_6940

The following information was requested on 30 November 2024 and clarified on 8 January 2025:

[You requested on 30 November 2024]:

Are you able to disclose how many NHS Resolution claims are responded to on average within the 4 month timeframe please?

Information about typical response times would be useful if there is no specific data to accompany this.

If a statutory duty deadline is missed is there any guidance for the process or policy around this please?

[We sought clarification on 9 December 2024]:

Thank you for your request to NHS Resolution.

Before we can respond, please can you clarify:

- a. Whether your ask is in relation to how many claims receive a response, such as an acknowledgement within 4 months, or if you're seeking to know how many claims that have a Letter of Claim receive a Letter of Response within the 4 month period?*
- b. What timeframe this information is requested for?*
- c. Whether the request relates to all Claims, or just Clinical Claims?*

We look forward to hearing from you.

[You replied on 8 January 2025 with]:

Thank you so much for the response.

- a. Whether your ask is in relation to how many claims receive a response, such as an acknowledgement within 4 months, or if you're seeking to know how many claims that have a Letter of Claim receive a Letter of Response within the 4 month period? - **Letter of response please.***
- b. What timeframe this information is requested for? - **The past 2 years/ 3 years. (What information you hold is fine, I just want a picture of the past 2 years really)***
- c. Whether the request relates to all Claims, or just Clinical Claims? - **Clinical claims please.***

Thank you,

Our Response

Please note that we only hold claims data for England and not the rest of the UK.

Although NHS Resolution may hold some information relating to claims such as these, due to the way claims are recorded on our claims database, we will not be able to identify such specific cases accurately, within a reasonable time. Our Claims database was designed primarily as a claims management tool, and records information in a way which would mean it would involve a manual review of all cases to identify which claims that have a Letter of Claim and receive a Letter of Response within the 4-month period. This would involve reviewing each case to determine the date a valid Letter of Claim was received, and when the Letter of response was sent (as there will be occasions where it is recorded that a Letter of Claim has been received, but it does not meet the requirements). We would also need to review every claim to see where extensions to response times were sought and granted. NHS Resolution receives thousands of claims each year.

Therefore, we estimate that the cost of complying with the request in its entirety would exceed the 'appropriate limit.' Section 12(1) of the FOIA is a provision which allows a public authority to refuse to comply with a request for information where the cost of compliance is estimated to exceed a set limit (known as the 'appropriate limit'). The 'appropriate limit' for NHS Resolution is £450. This equates to 18 hours of work at the rate of £25 per hour set out in the 'Fees Regulations'.

We estimate that it would take on average 10 minutes to locate, retrieve and extract the requested information from an individual file. It may therefore be the case that we would be able to examine only 108 files within 18 hours.

In addition, given the complexity of clinical negligence claims and their litigation, it is possible for a single electronic or paper-based file to contain hundreds of documents in a variety of formats.

Please also note even if we were able to carry out a review of 108 random files, we may not be able to provide you with the level of detail you require owing to Data Protection grounds.

We would need to suppress low numbers or any information that could possibly lead to the identification of claimants, patients, or individuals where disclosure would breach the General Data Protection Regulation.

For the details of the claims data that we publish please refer to the following link: [Annual statistics - NHS Resolution](#).

In response to: *"If a statutory duty deadline is missed is there any guidance for the process or policy around this please?"*

The provisions which relate to the service of Letters of Claim and Letters of Response may be found within the Pre-Action Protocols of The Civil Procedure Rules 1998.

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 [Joanne Appleby](#), 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

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