



Resolution

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FOI_7066

The following information was requested on 23 February 2025 and clarified on 27 February 2025:

[You requested on 23 February 2025]

I request readily retrievable information regarding the number, nature, and value of claims you have received relating to Medical Associate Professionals, namely physician associates and anaesthesia associates. I understand NHR is aware of claims involving MAPs, so I request this data be provided.

I am not asking you to exhaustively search all individual claim files, as this would exceed the cost limit.

[We replied on 24 February 2025]

Thank you for your request to NHS Resolution.

We have provided similar responses in the past – please see below:

[FOI 6621 Claims-against-Physician-Associates.pdf](#)

[FOI 6221 Claims-against-Physician-Associates final.pdf](#)

[FOI 6417 Claims-against-Physician-Associates.pdf](#)

I would like to clarify that when we received a notification of a claim, they are recorded against a member organisation, i.e. NHS trust and not against individual practitioner.

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).

Do the below responses answer your query? Please, do let us know if you require any further information.

[You replied on 27 February 2025 with]

In those responses, you have declined to provide any information in two of the responses, and the third response yielded no results from a free text search.

However, I would like to clarify that my current request is different. I am asking for readily retrievable information you hold about claims involving Medical Associate Professionals (MAPs).

I had an informal conversation with one of your claims handlers who indicated that such claims exist, but they may not be categorised under the usual staff designations or identified by a simple free text search.

I would appreciate it if you could consider a straightforward approach, such as sending an email to all your claims handlers (or their managers), to see whether any of them hold or have dealt with claims involving MAPs. This might help locate relevant information without incurring significant costs, so hopefully, it can be done within the statutory cost limits for FOI requests.

Our Response

Our data team has carried out the following search:

An incident description field search of claims received or closed between the financial years 2019/20 - 2023/24 where the following precise terms, individually appear:

“Medical Associate Professionals”

“MAPs”

“Physician associates” and

“Anaesthesia associates

We found **no** claims which had the above terms mentioned in the incident description field.

Please note that whilst we found no claims using the search described above, we would reiterate that although NHS Resolution may hold some information relating to claims such as what you have requested, due to the way claims are recorded on our claims database, we will not be able to identify such specific cases. It might be helpful to explain that when claims are notified to NHS Resolution they are categorised against pre-defined cause, injury and speciality [codes](#). We do not have codes for: *Physician Associates, Medical Associate or Anaesthesia associate*. Therefore, while there may be information held in our records, we are not readily able to identify the relevant files by searching the database. To do so would involve a manual review of all cases to identify which ones relate to claims involving *Physician Associates, Medical Associate or Anaesthesia associate*. NHS Resolution receives thousands of claims each year.

Claims are recorded against the legal defendant which will either be an NHS Trust or, in the case of General Practice, the individual or practice. The incidents which lead to claims can however involve a range of healthcare professionals. These are not coded separately given that the data is collected primarily for the management of the claim, however, we do identify the healthcare specialty to support the pricing of the indemnity schemes which also enables us to derive insights and trends. Please refer to the learning codes mentioned above.

We are not able to do as you suggest and approach individual claims managers. There are over 200 claims managers, and each manages on average over 100 claims each. Even if we asked each claims manager to do a quick search this would be a disproportionate exercise as it would entail each claims manager spending an estimated 10 minutes per claim to carry out the check and this would certainly exceed the 18 hours limit. We would not expect our claims managers to rely on memory alone to capture this information.

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.

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
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