



Resolution

8th Floor,
10 South Colonnade
Canary Wharf
London
E14 4PU

Telephone: 020 7811 2700

April 2025
FOI_7092

The following information was requested on 11 March 2025:

I am writing to request information under the Freedom of Information Act 2000.

I would like to request data relating to claims made in the specialty of Obstetrics and Gynaecology from financial years 2006/07 up to and including 2024/25. I would like to specifically request information on:

- (i) the number of clinical claims/incidents made per financial year.*
- (ii) the number of clinical claims closed (or settled as a PPO) per financial year and the associated costs (damages paid, NHS legal costs paid, claimant legal costs paid) incurred per financial year.*
- (iii) Of all the clinical claims closed/settled during this period (2006/07-2022/23), a breakdown of the primary causes as well as the costs (damages paid, NHS legal costs paid, claimant legal costs paid) associated with each primary cause.*
- (iv) the number of unsuccessful (i.e. with nil damages paid) clinical claims during this period (2006/07-2024/25) with their associated NHS legal costs paid and claimant legal costs paid.*

Our Response

Please find attached the requested information. Please note we only hold information for England and not for the rest of the UK.

We are able to provide claims data in respect of complete financial years. We have provided the information for the financial years 2006/07 – 2023/24 in relation to the specialty: **Obstetrics' or 'Gynaecology'**.

The data for the financial year 2024/25 is currently unavailable and will be available on request from August 2025.

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 [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 unsuccessful), 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.

For information about our Clinical Negligence Schemes, please visit our website here: [Clinical schemes - NHS Resolution](#)

Table 1 shows: Number of Clinical Claims and Incidents received between financial years '2006/07' and '2023/24' where the Specialty is '**Obstetrics**' or '**Gynaecology**'.

Table 2 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is '**Obstetrics**' or '**Gynaecology**'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

Table 3 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is '**Obstetrics**' or '**Gynaecology**'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Specialty and Primary Cause.

Table 4 shows: - Number and Cost of Clinical Claims Closed between financial years '2006/07' and '2023/24' with **NIL** damages paid where the Specialty is '**Obstetrics**' or '**Gynaecology**'.

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.

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 [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

<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 '2023/24' where the Specialty is 'Obstetrics' or 'Gynaecology'.

Table 2: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

Table 3: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Specialty and Cause.

Table 4: Number and Cost of Clinical Claims Closed between financial years '2006/07' and '2023/24' with NIL damages paid where the Specialty is 'Obstetrics' or 'Gynaecology'.

Table 1: Number of Clinical Claims and Incidents received between financial years '2006/07' and '2023/24' where the Specialty is 'Obstetrics' or 'Gynaecology'.

Notified	Y
Year of Notification -- Specialty	No. of Claims
2006/07	
Gynaecology	274
Obstetrics	705
2007/08	
Gynaecology	291
Obstetrics	677
2008/09	
Gynaecology	322
Obstetrics	756
2009/10	
Gynaecology	232
Obstetrics	732
2010/11	
Gynaecology	380
Obstetrics	1,054
2011/12	
Gynaecology	474
Obstetrics	1,057
2012/13	
Gynaecology	503
Obstetrics	1,178
2013/14	
Gynaecology	684
Obstetrics	1,292
2014/15	
Gynaecology	671
Obstetrics	1,193
2015/16	
Gynaecology	615
Obstetrics	1,114
2016/17	
Gynaecology	582
Obstetrics	1,116
2017/18	
Gynaecology	554
Obstetrics	1,091
2018/19	
Gynaecology	569
Obstetrics	1,076
2019/20	
Gynaecology	761
Obstetrics	1,013
2020/21	
Gynaecology	981
Obstetrics	1,157
2021/22	
Gynaecology	751
Obstetrics	1,243
2022/23	
Gynaecology	623
Obstetrics	1,392
2023/24	
Gynaecology	623
Obstetrics	1,393
Grand Total	29,129

Table 2: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

ClosedSettled	Y
Claim_Outcome	Damages Paid

Year of Closure (Settlement Year for PPOs) -- Specialty	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
2006/07					
Gynaecology	198	8,486,586	1,642,584	4,294,990	14,424,160
Obstetrics	433	180,444,408	12,964,747	22,756,144	216,165,299
2007/08					
Gynaecology	237	12,076,935	2,542,553	6,745,980	21,365,469
Obstetrics	504	241,607,085	15,517,769	33,238,215	290,363,069
2008/09					
Gynaecology	155	6,785,355	1,516,510	4,160,405	12,462,270
Obstetrics	447	254,284,326	17,959,275	36,087,375	308,330,976
2009/10					
Gynaecology	232	10,827,320	1,596,109	6,410,539	18,833,969
Obstetrics	493	215,108,156	15,978,263	31,358,521	262,444,940
2010/11					
Gynaecology	270	15,318,575	2,437,224	9,602,848	27,358,646
Obstetrics	697	275,878,846	19,396,459	44,752,285	340,027,590
2011/12					
Gynaecology	224	14,166,712	1,887,849	9,107,628	25,162,188
Obstetrics	716	295,606,277	19,551,997	51,913,699	367,071,973
2012/13					
Gynaecology	230	15,600,989	1,849,274	8,795,066	26,245,329
Obstetrics	742	311,002,549	18,440,521	53,686,758	383,129,828
2013/14					
Gynaecology	312	12,889,937	1,860,624	9,970,394	24,720,954
Obstetrics	690	304,293,353	16,676,584	51,669,798	372,639,735
2014/15					
Gynaecology	352	14,619,962	1,835,390	11,381,622	27,836,973
Obstetrics	683	234,439,719	16,437,853	50,772,358	301,649,930
2015/16					
Gynaecology	352	22,045,201	2,932,039	15,756,756	40,733,996
Obstetrics	608	247,977,909	17,060,743	56,051,794	321,090,447
2016/17					
Gynaecology	425	20,611,636	3,838,470	19,878,507	44,328,612
Obstetrics	727	285,864,749	19,817,399	65,766,819	371,448,967
2017/18					
Gynaecology	492	31,173,588	4,725,832	21,525,038	57,424,457
Obstetrics	744	452,588,754	21,952,896	73,500,989	548,042,639
2018/19					
Gynaecology	407	29,617,842	4,708,841	19,285,336	53,612,018
Obstetrics	721	605,688,009	25,560,735	78,394,471	709,643,216
2019/20					
Gynaecology	435	27,968,153	4,313,123	18,884,695	51,165,971
Obstetrics	770	495,458,879	22,536,708	72,295,468	590,291,055
2020/21					
Gynaecology	351	29,902,979	4,210,660	17,696,526	51,810,164
Obstetrics	673	501,965,729	22,080,962	68,796,850	592,843,541
2021/22					
Gynaecology	419	35,286,989	5,489,908	22,948,623	63,725,519
Obstetrics	763	503,741,949	21,897,291	78,114,994	603,754,235
2022/23					
Gynaecology	403	33,477,126	4,513,197	21,209,510	59,199,834
Obstetrics	687	596,598,917	25,039,074	84,939,593	706,577,584
2023/24					
Gynaecology	398	50,341,580	5,581,943	23,979,219	79,902,743
Obstetrics	708	654,888,855	27,457,407	88,497,171	770,843,433
Grand Total	17,698	7,048,635,932	413,808,814	1,294,226,983	8,756,671,729

Table 3: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Specialty and Cause.

ClosedSettled Claim_Outcome	Y Damages Paid
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Specialty -- Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Costs Paid	Total Paid
Gynaecology	5,892	391,197,463	57,482,129	251,633,680	700,313,272
Fail / Delay Treatment	898	56,369,604	8,949,350	40,417,240	105,736,194
Intra-Op Problems	888	64,793,129	10,766,637	44,430,886	119,990,652
Failure/Delay Diagnosis	735	65,139,744	8,554,084	35,770,865	109,464,693
Fail To Warn-Informed Consent	558	32,144,142	6,191,451	27,106,185	65,441,778
Inappropriate Treatment	476	38,009,942	4,877,617	20,911,178	63,798,737
Fail To Recog. Complication Of Operator Error	287 260	29,254,555 14,362,841	4,133,455 2,243,060	16,588,286 11,314,204	49,976,295 27,920,105
Wrong Diagnosis	203	10,103,346	993,710	3,903,617	15,000,673
Failed Sterilisation	188	5,992,815	959,826	4,362,025	11,314,667
Foreign Body Left In Situ	174	2,021,665	350,996	2,485,263	4,857,923
Failure To Perform Tests	85	8,008,375	671,541	2,741,863	11,421,779
Diathermy Burns/react. To Prep	80	2,483,594	278,748	1,808,571	4,570,913
Perform. Of Op. Not Indicated	77	3,555,897	841,022	3,477,605	7,874,524
Failure To Perform Operation	76	1,624,029	389,424	2,043,743	4,057,196
Delay In Performing Operation	75	2,484,439	430,752	2,482,158	5,397,349
Fail To Follow-Up Arrangements	58	3,223,902	317,725	1,692,508	5,234,134
Fail To Act On Abnorm Test Res	56	6,745,070	787,051	3,313,703	10,845,824
Medication Errors	48	1,640,940	235,959	1,279,775	3,156,674
Inadequate Nursing Care	43	1,260,767	168,528	900,991	2,330,286
Err With Agnt/Dose/Route/Selec	40	2,817,060	276,181	1,419,916	4,513,156
Inadequate Monitoring Intra-Op	40	3,766,527	657,479	2,256,435	6,680,441
Fail To Carry Out PO Observs.	36	1,686,496	511,076	1,859,152	4,056,724
Inappropriate Discharge	36	1,809,017	249,274	1,328,646	3,386,937
Retained Instrument Post-Operation	35	618,100	64,832	648,412	1,331,344
Wrong Site Surgery	31	2,193,488	235,648	804,845	3,233,981
Other	30	596,405	123,453	890,528	1,610,386
Lack Of Pre-Op Evaluation	29	1,633,219	177,054	1,214,944	3,025,216
Fail To Infrm Test RsIts	28	1,231,023	172,542	867,640	2,271,205
Lack Of Assistance/Care	28	479,939	99,238	859,428	1,438,604
Equipment Malfunction	27	366,255	65,727	369,559	801,541
Fail To Interpret USS	26	550,690	164,417	682,438	1,397,545
Bacterial Infection	22	1,464,760	298,411	1,092,851	2,856,022
Surg Foreign Body Left In Situ	22	332,525	17,446	227,915	577,885
Inapprop. Case Selection	15	602,654	208,324	739,403	1,550,382
Op. On Wrong Patient/Body Part	14	573,719	125,595	315,974	1,015,288
Fail Antenatal Screening	14	2,643,912	263,330	1,466,476	4,373,718
Fail To Supervise	13	473,050	70,232	353,874	897,155
Failure To Interpret X-Ray	12	283,400	71,075	206,500	560,975
Fail To Monitor 2nd Stg Labour	11	9,265,856	374,168	1,576,970	11,216,994
Perineal Tear-1st,2nd,3rd Deg	10	1,161,309	152,714	634,783	1,948,806
Fail/Delay Referring To Hosp.	9	1,222,261	115,780	904,191	2,242,233
Application Of Excess Force	9	230,500	101,549	454,500	786,549
Failure To X-Ray	8	182,000	15,652	161,750	359,402
Fail/Delay Admitting To Hosp.	7	314,195	60,038	158,375	532,608
Removal & Retention Of Organs	5	96,392	43,237	256,900	396,529
Improp. Delegation To Junior	5	229,500	79,413	281,750	590,663
Re-Canalisation	#	#	#	#	#
Fail To Monitor 1st Stg Labour	#	#	#	#	#
Unexpected Death	#	#	#	#	#
Birth Defects	#	#	#	#	#
Sexual Abuse	#	#	#	#	#
Infusion Problems	#	#	#	#	#
Assault, Etc By Hospital Staff	#	#	#	#	#
Incorrect Injection Site	#	#	#	#	#
Cross Infection	#	#	#	#	#
Labial Tear	#	#	#	#	#
Fail/Delay Avail Op Thtre	#	#	#	#	#
Lack Of Facilities/Equipment	#	#	#	#	#
Inapp Use Of Forceps/Ventouse	#	#	#	#	#
Inadqte Monitor In Recov Room	#	#	#	#	#
Not Specified	#	#	#	#	#
Unknown	#	#	#	#	#

Table 3: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Specialty and Cause.

ClosedSettled	Y
Claim_Outcome	Damages Paid

Specialty -- Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Costs Paid	Total Paid
Intubation Problems	#	#	#	#	#
Failed Infection Control Policy/Hospital Hygiene	#	#	#	#	#
Probs With Medical Records	#	#	#	#	#
Fail To Diag Pre-Eclampsia	#	#	#	#	#
Injured By Another Patient	#	#	#	#	#
Fail To Make Resp To Abnrm FHR	#	#	#	#	#
Tooth Inj & Patient Posit Prob	#	#	#	#	#
Fail To Correctly Apply Forcep	#	#	#	#	#
Premature Ceasure Of Treatment	#	#	#	#	#
Forceps Delivery	#	#	#	#	#
Problem Blood Fluids	#	#	#	#	#
Obstetrics	11,806	6,657,438,469	356,326,685	1,042,593,303	8,056,358,457
Fail / Delay Treatment	1,943	705,627,392	39,489,919	134,039,660	879,156,971
Failure/Delay Diagnosis	1,042	252,079,277	21,054,981	74,371,532	347,505,791
Fail To Make Resp To Abnrm FHR	931	1,528,120,248	69,675,896	156,425,077	1,754,221,220
Fail To Recog. Complication Of	869	450,681,260	26,447,928	77,591,231	554,720,419
Fail To Monitor 2nd Stg Labour	792	995,005,787	44,474,778	113,855,977	1,153,336,542
Fail To Monitor 1st Stg Labour	456	499,972,011	24,902,014	61,491,316	586,365,341
Inappropriate Treatment	445	74,490,159	6,435,665	25,982,215	106,908,038
Fail Antenatal Screening	409	356,070,862	13,896,512	51,815,942	421,783,315
Intra-Op Problems	407	50,760,097	5,660,821	21,998,693	78,419,611
Foreign Body Left In Situ	364	5,219,016	843,068	5,023,620	11,085,705
Application Of Excess Force	313	93,632,441	12,081,978	28,780,595	134,495,015
Inadequate Nursing Care	285	42,003,188	2,753,988	10,679,552	55,436,727
Perineal Tear-1st,2nd,3rd Deg	281	41,073,186	5,094,331	21,942,878	68,110,395
Delay In Performing Operation	267	204,196,411	10,554,609	28,370,874	243,121,894
Fail To Act On Abnrm Test Res	231	120,047,198	5,581,503	18,036,726	143,665,427
Operator Error	224	20,477,063	1,957,654	9,372,850	31,807,568
Fail To Warn-Informed Consent	222	114,841,302	5,022,813	18,885,855	138,749,970
Inapp Use Of Forceps/Ventouse	141	66,705,255	4,959,194	12,538,333	84,202,781
Lack Of Assistance/Care	124	29,203,151	2,811,922	9,520,458	41,535,530
Failure To Perform Tests	124	89,673,439	3,618,167	12,096,949	105,388,554
Birth Defects	114	219,064,485	8,279,432	20,584,992	247,928,909
Forceps Delivery	111	51,913,975	3,626,316	12,876,630	68,416,921
Medication Errors	95	14,962,762	883,004	3,686,394	18,532,161
Fail/Delay Admitting To Hosp.	90	45,270,812	2,118,384	5,802,434	53,191,630
Fail To Interpret USS	86	58,975,993	2,903,086	9,736,491	71,615,570
Failure To Perform Operation	83	20,319,617	2,228,341	7,671,589	30,219,547
Fail To Diag Pre-Eclampsia	83	42,237,723	2,440,754	6,817,758	51,496,235
Err With Agnt/Dose/Route/Selec	72	29,564,445	1,205,507	5,325,437	36,095,390
Fail To Correctly Apply Forcep	70	33,182,078	2,021,339	6,191,907	41,395,323
Other	66	10,680,330	840,320	2,801,051	14,321,701
Fail Mon Dose/rate Syntocinon	62	99,916,064	4,033,893	9,870,672	113,820,630
Failed Sterilisation	56	1,166,245	216,484	1,038,464	2,421,193
Wrong Diagnosis	55	12,768,180	568,715	2,128,932	15,465,827
Retained Instrument Post-Operation	53	1,402,714	142,950	1,042,915	2,588,580
Fail To Supervise	52	12,808,875	754,653	2,187,794	15,751,321
Fail To Carry Out PO Observs.	52	22,490,394	1,245,885	4,629,472	28,365,751
Inappropriate Discharge	51	14,001,713	975,318	3,032,620	18,009,651
Bacterial Infection	49	35,711,630	2,025,405	5,374,693	43,111,728
Fail/Delay Referring To Hosp.	49	25,366,987	1,210,060	3,836,214	30,413,261
Labial Tear	47	2,252,469	374,487	2,552,433	5,179,389
Unexpected Death	46	4,929,358	534,527	3,131,472	8,595,357
Fail To Follow-Up Arrangements	45	7,025,826	642,425	1,572,904	9,241,155
Diathermy Burns/react. To Prep	35	412,485	88,197	634,563	1,135,245
Inadequate Monitoring Intra-Op	34	1,201,096	405,816	1,307,721	2,914,632
Infusion Problems	33	6,113,481	316,371	1,482,378	7,912,230
Surg Foreign Body Left In Situ	33	283,694	40,307	218,081	542,082
Equipment Malfunction	32	7,098,807	457,864	1,638,492	9,195,163
Repeat Attempt Forcep/Ventouse	25	14,208,793	954,839	2,305,209	17,468,841
Not Specified	23	829,018	220,879	630,050	1,679,947
Fail To Infrm Test RsIts	22	19,007,942	444,405	1,334,516	20,786,863
Inapprop. Case Selection	21	17,351,291	995,642	2,337,304	20,684,237

Table 3: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2023/24' with a damages payment, where the Specialty is 'Obstetrics' or 'Gynaecology'. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Specialty and Cause.

ClosedSettled	Y
Claim_Outcome	Damages Paid

Specialty -- Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Costs Paid	Total Paid
Perform. Of Op. Not Indicated	21	7,277,678	387,568	1,227,321	8,892,567
Fail/Delay Resus By Paediatric	16	23,426,109	1,670,294	3,435,829	28,532,233
Cross Infection	16	5,295,043	358,387	849,550	6,502,979
Improp. Delegation To Junior	15	939,250	239,551	1,186,875	2,365,676
Fail/Delay Avail Op Thtre	14	5,406,887	386,336	1,157,360	6,950,583
Lack Of Pre-Op Evaluation	13	299,450	156,191	408,333	863,974
Failure To X-Ray	11	3,213,605	147,074	503,062	3,863,741
Inadqte Monitor In Recov Room	11	4,544,632	442,619	1,496,835	6,484,086
Lack Of Facilities/Equipment	9	7,661,099	343,534	862,637	8,867,271
Fail/Delay Of Avail Emgy Anaes	7	5,776,616	333,222	739,989	6,849,827
Intubation Problems	5	4,483,000	163,196	422,973	5,069,169
InhospMaternalDeathPostPartumHaemorrCS	#	#	#	#	#
Failure To Interpret X-Ray	#	#	#	#	#
Fail/Delay Obtain Cord PH	#	#	#	#	#
Incorrect Injection Site	#	#	#	#	#
Assault, Etc By Hospital Staff	#	#	#	#	#
Premature Ceasure Of Treatment	#	#	#	#	#
Injured By Another Patient	#	#	#	#	#
Removal & Retention Of Organs	#	#	#	#	#
Failed Infection Control Policy/Hospital Hygiene	#	#	#	#	#
Re-Canalisation	#	#	#	#	#
Probs With Medical Records	#	#	#	#	#
Problem Blood Fluids	#	#	#	#	#
Wrong Site Surgery	#	#	#	#	#
Fail/Delay Avail Of SCBU Beds	#	#	#	#	#
Wrong Application Of Electrode	#	#	#	#	#
Poor Application Of Plstr Cast	#	#	#	#	#
Op. On Wrong Patient/Body Part	#	#	#	#	#
(blank)	#	#	#	#	#
Burns/Scalds	#	#	#	#	#
Unknown	#	#	#	#	#
Grand Total	17,698	7,048,635,932	413,808,814	1,294,226,983	8,756,671,729

Table 4: Number and Cost of Clinical Claims Closed between financial years '2006/07' and '2023/24' with NIL damages paid where the Specialty is 'Obstetrics' or 'Gynaecology'.

ClosedSettled	Y
Claim_Outcome	Nil Damages

Year of Closure -- Specialty	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
2006/07			
Gynaecology	146	339,125	#
Obstetrics	598	3,528,423	#
2007/08			
Gynaecology	145	387,788	#
Obstetrics	484	3,969,151	16,046
2008/09			
Gynaecology	123	336,625	#
Obstetrics	398	2,352,943	40,836
2009/10			
Gynaecology	96	135,916	8,818
Obstetrics	353	2,385,367	11,350
2010/11			
Gynaecology	85	136,830	0
Obstetrics	422	3,870,987	50,961
2011/12			
Gynaecology	98	233,985	#
Obstetrics	460	2,074,494	14,871
2012/13			
Gynaecology	140	173,613	61,876
Obstetrics	450	2,744,138	#
2013/14			
Gynaecology	206	304,120	195,498
Obstetrics	546	2,648,639	#
2014/15			
Gynaecology	258	394,632	482,520
Obstetrics	593	2,572,113	35,274
2015/16			
Gynaecology	265	503,917	204,387
Obstetrics	547	2,977,867	21,802
2016/17			
Gynaecology	260	791,783	305,603
Obstetrics	583	4,766,590	55,462
2017/18			
Gynaecology	252	746,222	284,039
Obstetrics	494	3,679,139	98,627
2018/19			
Gynaecology	239	703,366	72,479

Table 4: Number and Cost of Clinical Claims Closed between financial years '2006/07' and '2023/24' with NIL damages paid where the Specialty is 'Obstetrics' or 'Gynaecology'.

ClosedSettled	Y
Claim_Outcome	Nil Damages

Year of Closure -- Specialty	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Obstetrics	493	3,535,745	44,471
2019/20			
Gynaecology	248	1,091,312	202,786
Obstetrics	435	3,829,274	60,243
2020/21			
Gynaecology	259	855,420	32,401
Obstetrics	358	3,159,148	#
2021/22			
Gynaecology	304	790,639	25,238
Obstetrics	452	4,370,945	45,050
2022/23			
Gynaecology	372	851,155	19,300
Obstetrics	575	5,590,726	50,006
2023/24			
Gynaecology	290	845,809	38,900
Obstetrics	496	4,045,448	28,700
Grand Total	12,523	71,723,395	2,524,544