



Resolution

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

Telephone: 020 7811 2700

May 2025

FOI_7201

The following information was requested on 5 May 2025 and clarified on 6 May 2025:

[You requested on 5 May 2025]

*I am writing to ask for the following information under the Freedom of Information Act 2000, relating to litigation claims involving **vascular surgery**.*

- 1) The total number of claims involving vascular surgery for each of the last ten financial years (2014/15 to 2024/25).*
- 2) The number of successful claims (i.e., those settled with payment) involving vascular surgery during the same period for each financial year.*
- 3) The total cost of these claims for each financial year, broken down by:*
 - Damages paid*
 - Claimant legal costs*
 - NHS legal costs*
- 4) A summary or breakdown of the primary causes of claims in vascular surgery during this period, broken down for each financial year*
- 5) A summary or breakdown of the primary injuries of claims in vascular surgery during this period broken down for each financial year*
- 6) If available, a list of NHS Trusts with the highest number of vascular surgery-related claims over this period. (if NHS trust breakdown is not appropriate or risks damaging confidentiality, could you provide regions with the highest rate of litigation instead please?)*

[On 6 May 2025 we informed you]

Thank you for your request to NHS Resolution.

We received it and are now working on our response.

I wanted to clarify that we can provide the data up to 2023/24. Information for 2024/25 is not available yet – it will be available from August, on request.

Our Response

Please find attached the requested information we are able to provide. We only hold claims data for England, 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.

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

The data is provided for all types of Trusts in England, including Acute, Foundation and Community Trusts. Please note: Cover under the Clinical Negligence Scheme for Trusts (CNST) has also been available to independent sector providers (ISPs) of NHS care since 1st April 2013, but data relating to these ISPs has not been included in our response, as the request was for a breakdown by Trust.

Table 1 shows: - Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is '**Vascular Surgery**'.

Table 2 shows: - Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is '**Vascular Surgery**'. Broken down by Year and Primary Cause.

Table 3 shows: - Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is '**Vascular Surgery**'. Broken down by Year and Primary Injury.

Table 4 shows: - Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is '**Vascular Surgery**'. Broken down by NHS Trust.

Table 5 shows: - Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years 2014/15 and 2023/24 with a damages payment, where the Specialty is '**Vascular Surgery**'. 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.

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

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 CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'.

Table 2: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Cause.

Table 3: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Injury.

Table 4: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by NHS Trust.

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Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 1: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'.

Notified scheme	Y CNST
Year of Notification	
No. of Claims	
2014/15	112
2015/16	132
2016/17	136
2017/18	123
2018/19	128
2019/20	147
2020/21	135
2021/22	102
2022/23	137
2023/24	136
Grand Total	1,288

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 2: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Cause.

Notified scheme	Y CNST
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Year of Notification --- Primary Cause	No. of Claims
2014/15	
Fail / Delay Treatment	36
Inappropriate Treatment	12
Intra-Op Problems	9
Delay In Performing Operation	8
Fail To Warn-Informed Consent	8
Failure/Delay Diagnosis	6
Operator Error	5
Fail To Recog. Complication Of	#
Inadequate Nursing Care	#
Failure To Perform Operation	#
Retained Instrument Post-Operation	#
Medication Errors	#
Fail To Carry Out PO Observs.	#
Fail/Delay Referring To Hosp.	#
Re-Canalisation	#
Fail/Delay Admitting To Hosp.	#
Foreign Body Left In Situ	#
Diathermy Burns/react. To Prep	#
Other	#
Unexpected Death	#
Fail To Follow-Up Arrangements	#
Bacterial Infection	#
Failure To Perform Tests	#
Fail To Supervise	#
2015/16	
Fail / Delay Treatment	44
Failure/Delay Diagnosis	15
Inappropriate Treatment	11
Operator Error	7
Inadequate Nursing Care	7
Delay In Performing Operation	5
Intra-Op Problems	5
Fail To Warn-Informed Consent	#
Fail To Follow-Up Arrangements	#
Other	#
Perform. Of Op. Not Indicated	#
Fail/Delay Admitting To Hosp.	#
Medication Errors	#
Inappropriate Discharge	#
Fail To Recog. Complication Of	#
Failure To Perform Operation	#
Failure To Perform Tests	#
Foreign Body Left In Situ	#
Fail To Act On Abnorm Test Res	#
Wrong Site Surgery	#
Re-Canalisation	#
Fail To Supervise	#
Inadequate Monitoring Intra-Op	#

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Notified scheme	Y CNST
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Year of Notification --- Primary Cause	No. of Claims
Bacterial Infection	#
Problem Blood Fluids	#
Application Of Excess Force	#
Unexpected Death	#
Not Specified	#
Failed Sterilisation	#
Clinical Trial	#
2016/17	
Fail / Delay Treatment	55
Failure/Delay Diagnosis	14
Inappropriate Treatment	8
Inadequate Nursing Care	7
Fail To Warn-Informed Consent	7
Intra-Op Problems	5
Fail To Recog. Complication Of	#
Failure To Perform Operation	#
Fail To Act On Abnorm Test Res	#
Inappropriate Discharge	#
Foreign Body Left In Situ	#
Delay In Performing Operation	#
Failure To Perform Tests	#
Medication Errors	#
Inapprop. Case Selection	#
Operator Error	#
Fail/Delay Admitting To Hosp.	#
Wrong Site Surgery	#
Fail To Carry Out PO Observs.	#
Perform. Of Op. Not Indicated	#
Fail To Follow-Up Arrangements	#
Equipment Malfunction	#
Fail To Supervise	#
Lack Of Pre-Op Evaluation	#
Failure To X-Ray	#
2017/18	
Fail / Delay Treatment	47
Failure/Delay Diagnosis	13
Fail To Warn-Informed Consent	12
Inappropriate Treatment	9
Intra-Op Problems	6
Inadequate Nursing Care	5
Failure To Perform Tests	#
Medication Errors	#
Operator Error	#
Fail/Delay Referring To Hosp.	#
Delay In Performing Operation	#
Fail To Act On Abnorm Test Res	#
Fail To Follow-Up Arrangements	#
Diathermy Burns/react. To Prep	#
Inappropriate Discharge	#

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Year of Notification --- Primary Cause	No. of Claims
Fail To Carry Out PO Observs.	#
Bacterial Infection	#
Inadequate Monitoring Intra-Op	#
Foreign Body Left In Situ	#
Failure To Interpret X-Ray	#
Failure To Perform Operation	#
2018/19	
Fail / Delay Treatment	48
Inappropriate Treatment	12
Failure/Delay Diagnosis	11
Inadequate Nursing Care	8
Delay In Performing Operation	7
Fail To Warn-Informed Consent	7
Intra-Op Problems	#
Foreign Body Left In Situ	#
Medication Errors	#
Operator Error	#
Failure To Perform Operation	#
Err With Agnt/Dose/Route/Selec	#
Fail To Recog. Complication Of	#
Fail To Act On Abnorm Test Res	#
Bacterial Infection	#
Failure To Perform Tests	#
Other	#
Fail/Delay Admitting To Hosp.	#
Wrong Site Surgery	#
Fail To Supervise	#
Diathermy Burns/react. To Prep	#
Fail To Infrm Test Rslts	#
Wrong Diagnosis	#
Lack Of Assistance/Care	#
Inappropriate Discharge	#
Lack Of Pre-Op Evaluation	#
2019/20	
Fail / Delay Treatment	56
Failure/Delay Diagnosis	20
Inappropriate Treatment	10
Inadequate Nursing Care	8
Delay In Performing Operation	6
Medication Errors	5
Intra-Op Problems	5
Fail To Warn-Informed Consent	#
Operator Error	#
Foreign Body Left In Situ	#
Fail To Recog. Complication Of	#
Fail/Delay Referring To Hosp.	#
Equipment Malfunction	#
Fail To Act On Abnorm Test Res	#
Fail To Follow-Up Arrangements	#

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Notified scheme	Y CNST
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Year of Notification --- Primary Cause	No. of Claims
Inappropriate Discharge	#
Lack Of Assistance/Care	#
Other	#
Fail/Delay Admitting To Hosp.	#
Failure To Perform Operation	#
Retained Instrument Post-Operation	#
Inapprop. Case Selection	#
Wrong Site Surgery	#
Fail To Supervise	#
Incorrect Injection Site	#
2020/21	
Fail / Delay Treatment	40
Failure/Delay Diagnosis	17
Delay In Performing Operation	13
Fail To Warn-Informed Consent	9
Inadequate Nursing Care	7
Inappropriate Treatment	6
Failure To Perform Tests	5
Intra-Op Problems	#
Inappropriate Discharge	#
Fail To Follow-Up Arrangements	#
Fail To Recog. Complication Of	#
Foreign Body Left In Situ	#
Lack Of Assistance/Care	#
Failure To Interpret X-Ray	#
Operator Error	#
Inadequate Monitoring Intra-Op	#
Failure To Perform Operation	#
Retained Instrument Post-Operation	#
Not Specified	#
Medication Errors	#
Bacterial Infection	#
Err With Agnt/Dose/Route/Selec	#
Fail/Delay Referring To Hosp.	#
Lack Of Facilities/Equipment	#
Fail To Infrm Test Rslts	#
2021/22	
Fail / Delay Treatment	39
Failure/Delay Diagnosis	11
Fail To Warn-Informed Consent	9
Inadequate Nursing Care	7
Intra-Op Problems	6
Delay In Performing Operation	5
Inappropriate Treatment	#
Medication Errors	#
Lack Of Assistance/Care	#
Fail To Recog. Complication Of	#
Lack Of Pre-Op Evaluation	#
Wrong Diagnosis	#

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Table 2: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Cause.

Notified scheme	Y CNST
Year of Notification	
--- Primary Cause	No. of Claims
Failure To X-Ray	#
Fail/Delay Referring To Hosp.	#
Foreign Body Left In Situ	#
Probs With Medical Records	#
Wrong Site Surgery	#
Premature Ceasure Of Treatment	#
Fail/Delay Admitting To Hosp.	#
Retained Instrument Post-Operation	#
Inappropriate Discharge	#
Failure To Perform Tests	#
Failure To Perform Operation	#
Inadequate Monitoring Intra-Op	#
2022/23	
Fail / Delay Treatment	44
Failure/Delay Diagnosis	22
Failure To Perform Tests	9
Inadequate Nursing Care	9
Delay In Performing Operation	6
Intra-Op Problems	5
Inappropriate Treatment	#
Fail To Follow-Up Arrangements	#
Fail To Recog. Complication Of	#
Fail To Act On Abnorm Test Res	#
Medication Errors	#
Lack Of Assistance/Care	#
Inappropriate Discharge	#
Fail/Delay Admitting To Hosp.	#
Operator Error	#
Wrong Site Surgery	#
Not Specified	#
Problem Blood Fluids	#
Other	#
Fail/Delay Referring To Hosp.	#
Fail/Delay Avail Op Thtre	#
Failure To Perform Operation	#
Fail To Interpret USS	#
Err With Agnt/Dose/Route/Selec	#
Premature Ceasure Of Treatment	#
Fail To Warn-Informed Consent	#
Unexpected Death	#
Lack Of Pre-Op Evaluation	#
Wrong Diagnosis	#
Foreign Body Left In Situ	#
Inadequate Monitoring Intra-Op	#
2023/24	
Fail / Delay Treatment	63
Failure/Delay Diagnosis	9
Inadequate Nursing Care	8
Inappropriate Treatment	8

Freedom of Information Request# 7201

Data correct as at: The end of every financial year



Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 2: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Cause.

Notified scheme	Y CNST
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Year of Notification --- Primary Cause	No. of Claims
Fail To Recog. Complication Of	5
Failure To Perform Tests	5
Intra-Op Problems	#
Medication Errors	#
Fail To Follow-Up Arrangements	#
Not Specified	#
Inappropriate Discharge	#
Fail/Delay Admitting To Hosp.	#
Fail/Delay Referring To Hosp.	#
Fail To Warn-Informed Consent	#
Failure To Perform Operation	#
Wrong Diagnosis	#
Fail To Act On Abnorm Test Res	#
Operator Error	#
Delay In Performing Operation	#
Retained Instrument Post-Operation	#
Bacterial Infection	#
Failed Infection Control Policy/Hospital Hygiene	#
Fail To Carry Out PO Observs.	#
Perform. Of Op. Not Indicated	#
Err With Agnt/Dose/Route/Selec	#
Wrong Site Surgery	#
Lack Of Pre-Op Evaluation	#
Foreign Body Left In Situ	#
Failure To X-Ray	#
Grand Total	1,288

Freedom of Information Request# 7201

Data correct as at: The end of every financial year

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.



Table 3: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Injury.

Notified scheme	Y CNST
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Year of Notification --- Primary Injury	No. of Claims
2014/15	
Amputation - Lower	42
Fatality	12
Adtnl/unnecessary Operation(s)	9
Unnecessary Pain	9
Nerve Damage	5
Stroke	#
Partial Paralysis	#
Paraplegia	#
Tissue Damage	#
Amputation - Upper	#
Psychiatric/Psychological Dmge	#
Pressure Sores	#
Foot Drop	#
Aneurysm	#
Compartment Syndrome	#
Tendon Damage	#
Fracture	#
Renal Damage/ Failure	#
Burn(s)	#
Perforation	#
Arterial Damage	#
Bruising/ Extravasation	#
Not Specified	#
Bowel Damage/ Dysfunction	#
Other	#
2015/16	
Amputation - Lower	41
Fatality	13
Adtnl/unnecessary Operation(s)	13
Unnecessary Pain	10
Pressure Sores	8
Amputation - Upper	7
Thrombosis/Embolism	6
Nerve Damage	6
Cardiac Arrest	#
Arterial Damage	#
Scarring	#
Hospital Acquired Infection	#
Other Infection	#
Perforation	#
Compartment Syndrome	#
Renal Damage/ Failure	#
Anal Fissure	#
Tissue Damage	#
Bladder Damage	#
Burn(s)	#
Cancer	#
Respiratory Disorder/ Failure	#

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Table 3: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Injury.

Notified scheme	Y CNST
Year of Notification	
--- Primary Injury	No. of Claims
Foot Drop	#
Stroke	#
Paraplegia	#
Partial Paralysis	#
Other Visual Problems	#
Joint Damage	#
Limb Deformity	#
2016/17	
Amputation - Lower	39
Unnecessary Pain	19
Fatality	18
Adtnl/unnecessary Operation(s)	11
Amputation - Upper	9
Pressure Sores	6
Foot Drop	#
Stroke	#
Nerve Damage	#
Thrombosis/Embolism	#
Tissue Damage	#
Rupture	#
Other	#
Multiple Injuries	#
Arterial Damage	#
Burn(s)	#
Bowel Damage/ Dysfunction	#
Other Infection	#
Scarring	#
Perforation	#
Hernia	#
Cancer	#
Brain Damage	#
Renal Damage/ Failure	#
Aneurysm	#
2017/18	
Amputation - Lower	34
Unnecessary Pain	19
Fatality	13
Adtnl/unnecessary Operation(s)	7
Pressure Sores	6
Nerve Damage	6
Aneurysm	#
Amputation - Upper	#
Stroke	#
Burn(s)	#
Cardiac Arrest	#
Tissue Damage	#
Spinal Damage	#
Thrombosis/Embolism	#
Bladder Damage	#

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Data correct as at: The end of every financial year

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Notified scheme	Y CNST
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Year of Notification --- Primary Injury	No. of Claims
Cardiovascular Condition	#
Reduced Life Expectancy	#
Compartment Syndrome	#
Poor Outcome - Fractures Etc.	#
Cosmetic Disfigurement	#
Psychiatric/Psychological Dmge	#
Other Visual Problems	#
Cancer	#
Paraplegia	#
Perforation	#
Unknown	#
Bowel Damage/ Dysfunction	#
Arterial Damage	#
Not Specified	#
Fistula	#
2018/19	
Amputation - Lower	49
Unnecessary Pain	15
Fatality	15
Adtnl/unnecessary Operation(s)	10
Nerve Damage	7
Pressure Sores	#
Fracture	#
Arterial Damage	#
Renal Damage/ Failure	#
Tissue Damage	#
Cardiac Arrest	#
Aneurysm	#
Thrombosis/Embolism	#
Scarring	#
Psychiatric/Psychological Dmge	#
Amputation - Upper	#
Stroke	#
Compartment Syndrome	#
Foot Drop	#
Spinal Damage	#
Cancer	#
Bladder Damage	#
Not Specified	#
Burn(s)	#
Other Infection	#
Partial Paralysis	#
2019/20	
Amputation - Lower	52
Fatality	21
Unnecessary Pain	13
Adtnl/unnecessary Operation(s)	12
Pressure Sores	10
Thrombosis/Embolism	9

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Notified scheme	Y CNST
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Year of Notification --- Primary Injury	No. of Claims
Nerve Damage	5
Stroke	#
Brain Damage	#
Cancer	#
Arterial Damage	#
Renal Damage/ Failure	#
Bowel Damage/ Dysfunction	#
Rupture	#
Psychiatric/Psychological Dmge	#
Tissue Damage	#
Cardiovascular Condition	#
Bladder Damage	#
Other	#
Compartment Syndrome	#
Other Infection	#
Cardiac Arrest	#
Not Specified	#
Fracture	#
Loss Of Kidney	#
2020/21	
Amputation - Lower	46
Unnecessary Pain	15
Fatality	14
Adtnl/unnecessary Operation(s)	10
Pressure Sores	6
Amputation - Upper	5
Thrombosis/Embolism	#
Perforation	#
Stroke	#
Aneurysm	#
Nerve Damage	#
Not Specified	#
Cancer	#
Infection (bacterial)	#
Incontinence	#
Respiratory Disorder/ Failure	#
Psychiatric/Psychological Dmge	#
Limb Deformity	#
Arterial Damage	#
Bowel Damage/ Dysfunction	#
Compartment Syndrome	#
Anaphylact Shock/Allergic Shock/allergy	#
Reduced Life Expectancy	#
Other	#
Spinal Damage	#
Other Infection	#
Fracture	#
Paraplegia	#
Blindness	#

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 3: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Injury.

Notified scheme	Y CNST
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Year of Notification --- Primary Injury	No. of Claims
Cardiac Arrest	#
2021/22	
Amputation - Lower	35
Fatality	18
Unnecessary Pain	8
Adtnl/unnecessary Operation(s)	6
Pressure Sores	#
Nerve Damage	#
Stroke	#
Thrombosis/Embolism	#
Sepsis	#
Burn(s)	#
Cancer	#
Cardiac Arrest	#
Compartment Syndrome	#
Infection (bacterial)	#
Bowel Damage/ Dysfunction	#
Rupture	#
Respiratory Disorder/ Failure	#
Loss Of Kidney	#
Liver Damage	#
Bruising/ Extravasation	#
Blindness	#
Arterial Damage	#
Amputation - Upper	#
Fracture	#
2022/23	
Amputation - Lower	43
Fatality	26
Unnecessary Pain	9
Pressure Sores	6
Adtnl/unnecessary Operation(s)	#
Stroke	#
Amputation - Upper	#
Other	#
Cardiac Arrest	#
Thrombosis/Embolism	#
Sepsis	#
Compartment Syndrome	#
Arterial Damage	#
Brain Damage	#
Psychiatric/Psychological Dmge	#
Infection (bacterial)	#
Bowel Damage/ Dysfunction	#
Nerve Damage	#
Tissue Damage	#
Fracture	#
Cardiovascular Condition	#
Renal Damage/ Failure	#

Freedom of Information Request# 7201

Data correct as at: The end of every financial year

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.



Table 3: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by Year and Primary Injury.

Notified scheme	Y CNST
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Year of Notification --- Primary Injury	No. of Claims
Burn(s)	#
Paraplegia	#
Rupture	#
Partial Paralysis	#
Joint Damage	#
Advanced Stage Cancer	#
Cancer	#
Bruising/ Extravasation	#
Addiction/Dependency	#
Fistula	#
2023/24	
Amputation - Lower	55
Fatality	24
Unnecessary Pain	10
Pressure Sores	9
Amputation - Upper	#
Cardiac Arrest	#
Adtnl/unnecessary Operation(s)	#
Stroke	#
Nerve Damage	#
Thrombosis/Embolism	#
Tissue Damage	#
Aneurysm	#
Arterial Damage	#
Infection (bacterial)	#
Cancer	#
Spinal Damage	#
Multiple Injuries	#
Compartment Syndrome	#
Brain Damage	#
Psychiatric/Psychological Dmge	#
Limb Deformity	#
Renal Damage/ Failure	#
Advanced Stage Cancer	#
Sepsis	#
Grand Total	1,288

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 4: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by NHS Trust.

Notified scheme	Y CNST
NHS Trust Name	No. of Claims
Manchester University NHS Foundation Trust	80
Sheffield Teaching Hospitals NHS Foundation Trust	52
Hull University Teaching Hospitals NHS Trust	38
University Hospitals Birmingham NHS Foundation Trust	34
Nottingham University Hospitals NHS Trust	32
The Leeds Teaching Hospitals NHS Trust	31
University Hospitals of North Midlands NHS Trust	31
United Lincolnshire Hospitals NHS Trust	29
Liverpool University Hospitals NHS Foundation Trust	26
Royal Free London NHS Foundation Trust	26
Newcastle Upon Tyne Hospitals NHS Foundation Trust (The)	26
East Lancashire Hospitals NHS Trust	23
Mid and South Essex NHS Foundation Trust	23
Countess of Chester Hospital NHS Foundation Trust	23
Lancashire Teaching Hospitals NHS Foundation Trust	23
University Hospitals Sussex NHS Foundation Trust	20
South Tees Hospitals NHS Foundation Trust	20
University Hospitals Coventry & Warwickshire NHS Trust	19
Ashford & St Peter's Hospitals NHS Foundation Trust	19
Dudley Group NHS Foundation Trust (The)	19
Medway NHS Foundation Trust	19
Imperial College Healthcare NHS Trust	18
Barts Health NHS Trust	18
University Hospitals of Leicester NHS Trust	17
York and Scarborough Teaching Hospitals NHS Foundation Trust	17
Bedfordshire Hospitals NHS Foundation Trust	17
Guy's and St Thomas' NHS Foundation Trust	16
London North West University Healthcare NHS Trust	15
Mid Yorkshire Teaching NHS Trust	15
East Suffolk and North Essex NHS Foundation Trust	15
East Kent Hospitals University NHS Foundation Trust	15
University Hospitals Plymouth NHS Trust	14
Blackpool Teaching Hospitals NHS Foundation Trust	14
Northampton General Hospital NHS Trust	13
Bradford Teaching Hospitals NHS Foundation Trust	13
Oxford University Hospitals NHS Foundation Trust	13
County Durham and Darlington NHS Foundation Trust	13
Norfolk & Norwich University Hospitals NHS Foundation Trust	13
Doncaster and Bassetlaw Teaching Hospitals NHS Foundation Trust	13
Cambridge University Hospitals NHS Foundation Trust	12
Royal Devon University Healthcare NHS Foundation Trust	11
University Hospitals of Derby and Burton NHS Foundation Trust	11
Calderdale & Huddersfield NHS Foundation Trust	11
Worcestershire Acute Hospitals NHS Trust	11
Barking, Havering and Redbridge University Hospitals NHS Trust	11
Royal Cornwall Hospitals NHS Trust	11
North Bristol NHS Trust	11
Wirral University Teaching Hospital NHS Foundation Trust	10
Gloucestershire Hospitals NHS Foundation Trust	10
Gateshead Health NHS Foundation Trust	10
South Tyneside and Sunderland NHS Foundation Trust	9
Somerset NHS Foundation Trust	9
St George's University Hospitals NHS Foundation Trust	8
North West Anglia NHS Foundation Trust	8
University Hospital Southampton NHS Foundation Trust	8
Frimley Health NHS Foundation Trust	8
Mersey and West Lancashire Hospitals NHS Trust	8

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 4: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by NHS Trust.

Notified scheme	Y CNST
NHS Trust Name	No. of Claims
King's College Hospital NHS Foundation Trust	8
Royal Wolverhampton NHS Trust (The)	7
Warrington and Halton Hospitals NHS Foundation Trust	7
Shrewsbury and Telford Hospital NHS Trust	7
Portsmouth Hospitals NHS Trust	7
University Hospitals Bristol & Weston NHS Foundation Trust	7
Bolton NHS Foundation Trust	6
Milton Keynes Hospital NHS Foundation Trust	6
University Hospitals Dorset NHS Foundation Trust	6
Northern Lincolnshire & Goole Hospitals NHS Foundation Trust	6
Princess Alexandra Hospital NHS Trust (The)	6
University Hospitals of Morecambe Bay NHS Foundation Trust	6
Royal Berkshire NHS Foundation Trust	6
Wrightington, Wigan and Leigh NHS Foundation Trust	6
Croydon Health Services NHS Trust	6
East and North Hertfordshire NHS Trust	6
North Cumbria Integrated Care NHS Foundation Trust	5
Northern Care Alliance NHS Foundation Trust	5
Walton Centre NHS Foundation Trust (The)	5
Chesterfield Royal Hospital NHS Foundation Trust	5
West Hertfordshire Hospitals NHS Trust	5
Dartford and Gravesham NHS Trust	5
Maidstone and Tunbridge Wells NHS Trust	5
Royal United Hospitals Bath NHS Foundation Trust	#
Chelsea & Westminster Hospital NHS Foundation Trust	#
East Sussex Healthcare NHS Trust	#
Tameside and Glossop Integrated Care NHS Foundation Trust	#
Walsall Healthcare NHS Trust	#
Hillingdon Hospitals NHS Foundation Trust (The)	#
Mid Cheshire Hospitals NHS Foundation Trust	#
James Paget University Hospitals NHS Foundation Trust	#
Salisbury NHS Foundation Trust	#
Dorset County Hospital NHS Foundation Trust	#
Sherwood Forest Hospitals NHS Foundation Trust	#
Airedale NHS Foundation Trust	#
Buckinghamshire Healthcare NHS Trust	#
The Rotherham NHS Foundation Trust	#
Lewisham & Greenwich NHS Trust	#
Kingston Hospital NHS Foundation Trust	#
University College London Hospitals NHS Foundation Trust	#
Wye Valley NHS Trust	#
Homerton Healthcare NHS Foundation Trust	#
Stockport NHS Foundation Trust	#
The Queen Elizabeth Hospital King's Lynn NHS Foundation Trust	#
Hampshire Hospitals NHS Foundation Trust	#
Southern Health NHS Foundation Trust	#
Wirral Community NHS Foundation Trust	#
West London NHS Trust	#
Torbay & South Devon NHS Foundation Trust	#
Royal Marsden NHS Foundation Trust (The)	#
Harrogate & District NHS Foundation Trust	#
Kettering General Hospital NHS Foundation Trust	#
Royal National Orthopaedic Hospital NHS Trust	#
West Suffolk NHS Foundation Trust	#
North Middlesex University Hospital NHS Trust	#
Essex Partnership University NHS Foundation Trust	#
Herefordshire and Worcestershire Health and Care NHS Trust	#

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 4: Number of CNST Claims and Incidents received between financial years 2014/15 and 2023/24 where the Specialty is 'Vascular Surgery'. Broken down by NHS Trust.

Notified scheme	Y CNST
NHS Trust Name	No. of Claims
Coventry and Warwickshire Partnership NHS Trust	#
North Tees & Hartlepool NHS Foundation Trust	#
Oxford Health NHS Foundation Trust	#
Hertfordshire Community Services NHS Trust	#
Great Western Hospitals NHS Foundation Trust	#
Lancashire and South Cumbria NHS Foundation Trust	#
West Midlands Ambulance Service NHS Foundation Trust	#
NHS England	#
Whittington Health NHS Trust	#
Pennine Care NHS Foundation Trust	#
Epsom and St Helier University Hospitals NHS Trust	#
South Western Ambulance Service NHS Foundation Trust	#
Barnsley Hospital NHS Foundation Trust	#
Bristol, North Somerset and South Gloucestershire Integrated Care Board	#
Humber Teaching NHS Foundation Trust	#
Bridgewater Community Healthcare NHS Trust	#
Sandwell & West Birmingham Hospitals NHS Trust	#
Grand Total	1,288

Please note: the tables broken down by Trusts should not be interpreted as a league table. Larger member organisations and those which provide more complex treatments may receive more claims than smaller organisations or those providing low risk care. Inevitably, different institutions face different levels of risk because of the variations in the nature and complexity of the procedures they perform. In some circumstances, volumes of reported cases may be impacted by multiple claims notified in relation to one cause of action.

Table 5: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years 2014/15 and 2023/24 with a damages payment, where the Specialty is 'Vascular Surgery'. 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 scheme	Y CNST
Claim_Outcome	Damages Paid

Year of Closure (Settlement Year for PPOs)	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
2014/15	62	9,310,482	1,132,550	4,417,179	14,860,211
2015/16	54	6,358,352	820,621	3,654,655	10,833,627
2016/17	83	5,898,189	1,305,138	4,934,768	12,138,095
2017/18	70	13,407,652	1,859,632	7,926,106	23,193,390
2018/19	93	18,067,234	2,114,226	7,591,753	27,773,213
2019/20	93	15,275,876	1,832,100	7,476,507	24,584,483
2020/21	90	11,526,911	1,715,065	6,647,145	19,889,121
2021/22	94	25,430,677	2,007,826	8,849,108	36,287,611
2022/23	91	12,464,264	1,941,039	6,328,281	20,733,584
2023/24	84	8,401,653	1,286,342	5,005,513	14,693,508
Grand Total	814	126,141,290	16,014,538	62,831,015	204,986,842