



Resolution

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October 2025
FOI_7458

The following information was requested on 24 September and clarified on 01 October 2025:

[On the 24 September, you requested]

Perhaps you might be able to help me.

With reference to 'Informed Consent', is Informed Consent a legal requirement supported by UK law or just limited to NHS guidelines?.

If you can forgive a request for a little more information how many complaints and/or cases have been reported where Informed Consent was the focus?.

Many thanks,

[We replied on the 26 September with]

Thank you for your request for information. We will require clarification before we can progress your request.

We do not hold all of the information you have requested. We do hold claims data about consent. However, this will not cover all consent cases, only those relating to claims and incidents notified to NHS Resolution.

Are you interested in claims about consent? If so, we can provide the following:

- * The number of claims received where the cause was consent/informed consent,*
- * The number of claims closed/settled where the cause was consent/informed consent and the cost associated,*
- * The number of claims closed with nil damages where the cause was consent/informed consent.*

If you are interested in the above information, please provide the date range you would like the data to cover e.g. 2015/16 to 2024/25. We report in financial years, and we can only provide data from 2006/07 to 2024/25.

It may be helpful to understand the role of NHS Resolution. NHS Resolution was established to provide the following service:

- Claims Management – providing indemnity schemes for the NHS in England and resolving claims for compensation fairly.*

•Practitioner Performance Advice – assisting healthcare organisations with resolving concerns about the performance of individual practitioners.

•Primary Care Appeals – ensuring the prompt and fair resolution of appeals and disputes between primary care contractors and NHS England.

•Safety and Learning – supports our Claims Management service members to better understand their claims risk profiles to target their safety activity while sharing learning across the system.

Please refer to our publication:<https://resolution.nhs.uk/resources/understanding-nhs-resolution-data/> and a set of codes against which claims are logged:

<https://view.officeapps.live.com/op/view.aspx?src=https%3A%2F%2Fresolution.nhs.uk%2Fwp-content%2Fuploads%2F2022%2F02%2FCNST-Codes.xlsx&wdOrigin=BROWSELINK>

If you are interested in all consent cases, you may wish to contact NHS England who may hold the information you require.

You can contact NHS England here: <https://www.england.nhs.uk/contact-us/>

We feel it may also be helpful for you to take a look at our Freedom of Information Disclosure log and the responses we publish: <https://resolution.nhs.uk/foi-disclosure-log/>

Your request would be put on hold until we receive the clarification requested above.

[You replied on the 28 September with]

Thank you for your very kind response to me email data request, very much appreciated.

The information given to the barrister was, ..., passed on to the then Health Secretary, Virginia Bottomley, and was included in her report, 'Being Heard', which helped drive the 'Informed Consent' initiative we now have (and not before time).

I note from Table 3 (Gynaecology) the number of 'Fail to Warn-Informed Consent' claims in 2011/22 is around 50% of the totals claims, in 2022/23 around 40% which seems to suggest there might be a tendency for females undergoing surgery being denied information although some might be falsified for financial reasons

I am now researching the three categories you mention below across as many years as possible including where the issue originated and what surgical procedure was involved, hopefully this should enable me to compile some sort of meaningful analysis.

I assume any data before the dates you list might be best pursued through the NHS contact you kindly supplied.

I apologise for the length of this reply and request but in this case the change(s) over time and specifics of the complaint(s) together with the historical link should enable some interesting data to be compiled.

Best regards and again grateful thanks,

[We replied on the 30 September with]

Thank you for your response. Please can you clarify whether you would like claims relating to female patients only in regards to informed consent?

Or do you require all claims including male patients regarding informed consent?

Also, are you only interested in the specialty Gynaecology?

We are limited in what we can provide, for instance we will not be able to provide a definitive comment on whether or not there is a tendency for females undergoing surgery being denied information.

We also will not be able to provide the issue originated and what surgical procedure was involved, owing to the FOI cost limit.

There is also some learning material on our website about consent, please see the following link <https://resolution.nhs.uk/resources/the-benefits-of-supported-decision-making-consent/>

Your request would be put on hold until we hear from you.

[You replied on the 30 September with]

Apologies, I appear to have caused a little confusion, the objective is to compile a table showing how many gynaecological female surgical patients complain about a lack of information.

I understand the limitations of the information available and therefore will limit my request just to the numbers complaining.

I am aware of the suggestion of some vexatious complaints potentially skewing the statistics, however, the overall data which includes such represents a constant element and therefore can be ignored for this study targeted to enable me to establish trends.

Potentially this data might already be in a study available somewhere suggesting that looking at the academic world might also be advantageous, if others have asked for information along the same lines perhaps you might be able to let me know.

Thank you for access to the 'Learning Material' which I'll enjoy viewing over the next day or two.

Grateful thanks and best regards,

[We replied on the 01 October with]

Thank you for your response. Please note that we will only be able to provide information on claims related to informed consent and not information on complaints made to the NHS relating to informed consent.

*If you require details of all complains made about consent to the NHS, you will need to contact NHS England who may be able to provide you with this information.
<https://www.england.nhs.uk/contact-us/>*

We will proceed to provide the relevant claims data.

Our Response

Please find attached the requested information. This information only covers England and not the rest of the UK.

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 [Guidance-note-Understanding-NHS-Resolution-data-updated](#)

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 received. 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.

Please find attached the following tables:

Table 1: Number of Clinical Claims and Incidents received between financial years 2006/07 and 2024/25 where the Primary Specialty is '**Gynaecology**' and the Primary Cause is '**Fail to Warn-Informed Consent**'.

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

<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 2024/25 where the Primary Specialty is 'Gynaecology' and the Primary Cause is 'Fail to Warn-Informed Consent'.

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Notified Y

Year of Notification	No. of Claims
2006/07	6
2007/08	17
2008/09	19
2009/10	13
2010/11	20
2011/12	25
2012/13	33
2013/14	50
2014/15	54
2015/16	53
2016/17	89
2017/18	55
2018/19	70
2019/20	196
2020/21	434
2021/22	337
2022/23	211
2023/24	146
2024/25	162
Grand Total	1,990