



Resolution

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

Telephone: 020 7811 2700

January 2026
FOI_7590

The following information was requested on 03 December and further clarified on 18 December 2025:

I am writing to request information under the Freedom of Information Act 2000. Please could you provide the following information regarding claims against NHS Trusts pertaining to maternity claims related to anaesthetic care/issues:

1. Number of claims by Trust and year

- The number of claims against NHS Trusts for anaesthesia care in maternity/obstetric claims, broken down by NHS Trust and by financial year.*
- Please provide this data for all available financial years*

2. Number of claims by cause and year

- The number of claims against NHS Trusts for anaesthesia care in maternity/obstetric claims, broken down by cause and by financial year.*
- Please provide for all available financial years.*

3. Number of claims by injury and year

- The number of claims against NHS Trusts for anaesthesia care in maternity/obstetric claims, broken down by cause and by financial year.*
- Please provide for all available financial years.*

4. Cost of claims by injury and year

- The number of claims against NHS Trusts for anaesthesia care in maternity/obstetric claims, broken down by cause and by financial year.*
- Please provide for all available financial years.*

5. Any information to the individual cases including coded fields of cause, incident description, free text description fields included with the data, location

6. Cost of claims by Trust and year

- The number and cost of claims against NHS Trusts for anaesthesia care in maternity/obstetric claims, broken down by NHS Trust and financial year.*

Please include:

- Number of claims*
- Damages paid*
- NHS legal costs paid*
- Claimant legal costs paid*
- Total paid*

[We replied on the 18 December with]

We wanted to update you regarding your request. Our initial search indicates that breaking the data down by individual financial years results in very low numbers, which would require redaction on data protection grounds.

However, if we aggregate the data without breaking it down by financial years, we can provide you with more meaningful information.

Would you be happy for us to proceed on this basis?

[You replied on the 18 December with]

Yes I am happy for you to aggregate the data without breaking it down by financial years.

Our Response

Please find attached the information requested. Please note we only hold information for England and not for 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 [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.

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.

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.

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

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.

Please note that we do not have a specific code for “*anaesthesia care in maternity/obstetric claims.*” The data provided is for cases in which both obstetrics and anaesthesia speciality codes are attached to the case.

Table 1 shows: - Number of CNST Claims and Incidents received between financial years ‘2006/07’ and ‘2024/25’ where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’ Broken down by **NHS Trust**.

Table 2 shows: - Number of CNST Claims and Incidents received between financial years ‘2006/07’ and ‘2024/25’ where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’. Broken down by **Primary Cause**.

Table 3 shows: - Number of CNST Claims and Incidents received between financial years ‘2006/07’ and ‘2024/25’ where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’. Broken down by **Primary Injury**.

Table 4 shows: - Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years ‘2006/07’ and ‘2024/25’ with a damages payment, where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’. 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 **NHS Trust**.

Table 5 shows: - Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years ‘2006/07’ and ‘2024/25’ with a damages payment, where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’. 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 **Primary Cause**.

Table 6 shows: - Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years ‘2006/07’ and ‘2024/25’ with a damages payment, where the Specialty at any level contains ‘Obstetrics’ and ‘Anaesthesia’. 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 **Primary Injury**.

We cannot provide incident descriptions, locations, or other granular details for individual cases as requested in **Question 5**. Disclosure of **this information when combined with other publicly available information could identify the individuals involved** and contravene data protection principles under Section 40(2) of the FOI Act. Please refer to our low numbers refusal notice below for further details.

PPOs

The information disclosed includes damages 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 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 and details of Individual claims

We have not provided the information for low figures involved and details for individual cases e.g. description fields and location, 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 and individual claims details, 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 '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia' Broken down by NHS Trust.

Table 2: Number of CNST Claims and Incidents received between financial years '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. Broken down by Primary Cause.

Table 3: Number of CNST Claims and Incidents received between financial years '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. Broken down by Primary Injury.

Table 4: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 NHS Trust.

Table 5: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 Primary Cause.

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Table 6: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 Primary Injury.

Freedom of Information Request# 7590

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 1: Number of CNST Claims and Incidents received between financial years '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia' Broken down by NHS Trust.

Notified	Y
NHS Trust Name	No. of Claims
Newcastle Upon Tyne Hospitals NHS Foundation Trust (The)	5
Mid Yorkshire Teaching NHS Trust	#
Hull University Teaching Hospitals NHS Trust	#
Chelsea & Westminster Hospital NHS Foundation Trust	#
University Hospitals Birmingham NHS Foundation Trust	#
Mid and South Essex NHS Foundation Trust	#
Kingston and Richmond NHS Foundation Trust	#
South Tyneside and Sunderland NHS Foundation Trust	#
Sherwood Forest Hospitals NHS Foundation Trust	#
University Hospitals Dorset NHS Foundation Trust	#
Frimley Health NHS Foundation Trust	#
James Paget University Hospitals NHS Foundation Trust	#
Guy's and St Thomas' NHS Foundation Trust	#
Barts Health NHS Trust	#
Lewisham & Greenwich NHS Trust	#
Buckinghamshire Healthcare NHS Trust	#
West Suffolk NHS Foundation Trust	#
St George's University Hospitals NHS Foundation Trust	#
Sheffield Teaching Hospitals NHS Foundation Trust	#
Maidstone and Tunbridge Wells NHS Trust	#
Airedale NHS Foundation Trust	#
Barking, Havering and Redbridge University Hospitals NHS Trust	#
University Hospitals of Derby and Burton NHS Foundation Trust	#
Great Western Hospitals NHS Foundation Trust	#
East Cheshire NHS Trust	#
Liverpool Women's Hospital NHS Foundation Trust	#
Royal Devon University Healthcare NHS Foundation Trust	#
West Hertfordshire Hospitals NHS Trust	#
Bradford Teaching Hospitals NHS Foundation Trust	#
London North West University Healthcare NHS Trust	#
Imperial College Healthcare NHS Trust	#
South Tees Hospitals NHS Foundation Trust	#
Chesterfield Royal Hospital NHS Foundation Trust	#
Isle of Wight NHS Trust	#
Stockport NHS Foundation Trust	#
Shrewsbury and Telford Hospital NHS Trust	#
Manchester University NHS Foundation Trust	#
Wrightington, Wigan and Leigh NHS Foundation Trust	#
Worcestershire Acute Hospitals NHS Trust	#
Dudley Group NHS Foundation Trust (The)	#
University Hospitals of Morecambe Bay NHS Foundation Trust	#
Medway NHS Foundation Trust	#
University Hospitals of Leicester NHS Trust	#
North Tees & Hartlepool NHS Foundation Trust	#
Wye Valley NHS Trust	#
United Lincolnshire Teaching Hospitals NHS Trust	#
University Hospitals of North Midlands NHS Trust	#
Somerset NHS Foundation Trust	#
King's College Hospital NHS Foundation Trust	#
Northern Lincolnshire & Goole Hospitals NHS Foundation Trust	#
Lancashire Teaching Hospitals NHS Foundation Trust	#
East Kent Hospitals University NHS Foundation Trust	#
Bedfordshire Hospitals NHS Foundation Trust	#
Warrington and Halton Hospitals NHS Foundation Trust	#
Walsall Healthcare NHS Trust	#
University Hospitals Coventry & Warwickshire NHS Trust	#
Sandwell & West Birmingham Hospitals NHS Trust	#
East and North Hertfordshire NHS Trust	#
Nottingham University Hospitals NHS Trust	#
Grand Total	93

Table 2: Number of CNST Claims and Incidents received between financial years '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. Broken down by Primary Cause.

Notified	Y
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Primary Cause	No. of Claims
Fail / Delay Treatment	13
Err With Agnt/Dose/Route/Selec	12
Medication Errors	9
Fail To Recog. Complication Of	9
Inappropriate Treatment	7
Fail To Warn-Informed Consent	6
Intra-Op Problems	5
Equipment Malfunction	#
Fail/Delay Of Avail Emgy Anaes	#
Operator Error	#
Inadequate Nursing Care	#
Fail Antenatal Screening	#
Fail To Monitor 1st Stg Labour	#
Delay In Performing Operation	#
Failure/Delay Diagnosis	#
Fail To Carry Out PO Observs.	#
Fail To Act On Abnorm Test Res	#
Failure To Perform Tests	#
Fail To Make Resp To Abnrm FHR	#
Lack Of Assistance/Care	#
Inadequate Monitoring Intra-Op	#
Cross Infection	#
Diathermy Burns/react. To Prep	#
Fail To Supervise	#
Grand Total	93

Table 3: Number of CNST Claims and Incidents received between financial years '2006/07' and '2024/25' where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. Broken down by Primary Injury.

Notified	Y
Primary Injury	No. of Claims
Unnecessary Pain	29
Psychiatric/Psychological Dmge	16
Nerve Damage	9
Anaesthetic	5
Brain Damage	#
Adtnl/unnecessary Operation(s)	#
Thrombosis/Embolism	#
Fatality	#
Cardiac Arrest	#
Cardiovascular Condition	#
Other	#
Bruising/ Extravasation	#
Renal Damage/ Failure	#
Multiple Disabilities	#
Scarring	#
Burn(s)	#
Meningitis	#
Oedema	#
Respiratory Disorder/ Failure	#
Foot Drop	#
Spinal Damage	#
Other Infection	#
Pressure Sores	#
Not Specified	#
Grand Total	93

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 and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 NHS Trust.

ClosedSettled ClaimOutcome	Y Damages Paid					
NHS Trust Name	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid	
Mid Yorkshire Teaching NHS Trust	#	#	#	#	#	
South Tyneside and Sunderland NHS Foundation Trust	#	#	#	#	#	
University Hospitals Birmingham NHS Foundation Trust	#	#	#	#	#	
Sherwood Forest Hospitals NHS Foundation Trust	#	#	#	#	#	
United Lincolnshire Teaching Hospitals NHS Trust	#	#	#	#	#	
Newcastle Upon Tyne Hospitals NHS Foundation Trust (The)	#	#	#	#	#	
James Paget University Hospitals NHS Foundation Trust	#	#	#	#	#	
University Hospitals Dorset NHS Foundation Trust	#	#	#	#	#	
Chelsea & Westminster Hospital NHS Foundation Trust	#	#	#	#	#	
Frimley Health NHS Foundation Trust	#	#	#	#	#	
Royal Wolverhampton NHS Trust (The)	#	#	#	#	#	
Airedale NHS Foundation Trust	#	#	#	#	#	
Stockport NHS Foundation Trust	#	#	#	#	#	
Mid and South Essex NHS Foundation Trust	#	#	#	#	#	
Lewisham & Greenwich NHS Trust	#	#	#	#	#	
University Hospitals of Derby and Burton NHS Foundation Trust	#	#	#	#	#	
West Suffolk NHS Foundation Trust	#	#	#	#	#	
Chesterfield Royal Hospital NHS Foundation Trust	#	#	#	#	#	
Hull University Teaching Hospitals NHS Trust	#	#	#	#	#	
Maidstone and Tunbridge Wells NHS Trust	#	#	#	#	#	
Great Western Hospitals NHS Foundation Trust	#	#	#	#	#	
London North West University Healthcare NHS Trust	#	#	#	#	#	
Liverpool Women's Hospital NHS Foundation Trust	#	#	#	#	#	
St George's University Hospitals NHS Foundation Trust	#	#	#	#	#	
Guy's and St Thomas' NHS Foundation Trust	#	#	#	#	#	
University Hospitals of Morecambe Bay NHS Foundation Trust	#	#	#	#	#	
Barts Health NHS Trust	#	#	#	#	#	
University Hospitals of North Midlands NHS Trust	#	#	#	#	#	
Bedfordshire Hospitals NHS Foundation Trust	#	#	#	#	#	
King's College Hospital NHS Foundation Trust	#	#	#	#	#	
Tameside and Glossop Integrated Care NHS Foundation Trust	#	#	#	#	#	
University Hospitals Coventry & Warwickshire NHS Trust	#	#	#	#	#	
Lancashire Teaching Hospitals NHS Foundation Trust	#	#	#	#	#	
Somerset NHS Foundation Trust	#	#	#	#	#	
Grand Total	47	9,036,268	696,460	2,291,901	12,024,630	

Table 5: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 Primary Cause.

ClosedSettled	Y
ClaimOutcome	Damages Paid

Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Err With Agnt/Dose/Route/Selec	9	155,000	52,056	260,421	467,478
Fail / Delay Treatment	7	1,095,975	81,324	386,003	1,563,302
Intra-Op Problems	#	#	#	#	#
Fail To Recog. Complication Of	#	#	#	#	#
Medication Errors	#	#	#	#	#
Fail To Warn-Informed Consent	#	#	#	#	#
Inappropriate Treatment	#	#	#	#	#
Operator Error	#	#	#	#	#
Inadequate Nursing Care	#	#	#	#	#
Failure/Delay Diagnosis	#	#	#	#	#
Fail To Carry Out PO Observs.	#	#	#	#	#
Fail To Monitor 1st Stg Labour	#	#	#	#	#
Application Of Excess Force	#	#	#	#	#
Inapp Use Of Forceps/Ventouse	#	#	#	#	#
Equipment Malfunction	#	#	#	#	#
Fail To Make Resp To Abnrm FHR	#	#	#	#	#
Diathermy Burns/react. To Prep	#	#	#	#	#
Fail To Act On Abnorm Test Res	#	#	#	#	#
Delay In Performing Operation	#	#	#	#	#
Fail/Delay Of Avail Emgy Anaes	#	#	#	#	#
Grand Total	47	9,036,268	696,460	2,291,901	12,024,630

Table 6: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2006/07' and '2024/25' with a damages payment, where the Specialty at any level contains 'Obstetrics' and 'Anaesthesia'. 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 Primary Injury.

ClosedSettled	Y
ClaimOutcome	Damages Paid

Primary Injury	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Psychiatric/Psychological Dmge	13	352,000	61,600	340,465	754,065
Unnecessary Pain	10	114,168	29,503	167,750	311,421
Nerve Damage	#	#	#	#	#
Anaesthetic	#	#	#	#	#
Bruising/ Extravasation	#	#	#	#	#
Brain Damage	#	#	#	#	#
Thrombosis/Embolism	#	#	#	#	#
Other Infection	#	#	#	#	#
Not Specified	#	#	#	#	#
Cardiovascular Condition	#	#	#	#	#
Respiratory Disorder/ Failure	#	#	#	#	#
Oedema	#	#	#	#	#
Pressure Sores	#	#	#	#	#
Multiple Disabilities	#	#	#	#	#
Cerebral Palsy	#	#	#	#	#
Cardiac Arrest	#	#	#	#	#
Fatality	#	#	#	#	#
Adtnl/unnecessary Operation(s)	#	#	#	#	#
Loss Of Sexual Function	#	#	#	#	#
Grand Total	47	9,036,268	696,460	2,291,901	12,024,630