NHS Resolution

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January 2026
FOI_7638

The following information was requested on 29 December and further clarified on 30 December 2025:

[On the 29 December, you requested]

I understand from your website that you publish extensive claims data and learning information, including by specialty and Trust. I have reviewed the annual statistics, factsheets, and learning codes, and I am requesting information that I could not locate in the public domain.
Under the Freedom of Information Act 2000, please provide the following for the period 2020–2025:

1. *The number of clinical negligence claims received where:*
    - *The clinical area was headache, migraine, or neurology*
    - *The claimant had a psychiatric diagnosis (e.g. bipolar disorder, psychosis)*
    - *The claim included allegations that:*
        - *A steroid-containing nerve block triggered psychiatric harm (e.g. mania)*
        - *A tricyclic antidepressant (e.g. amitriptyline, nortriptyline) was prescribed without appropriate psychiatric assessment or consent*
2. *Up to five anonymised summaries of claims (settled, upheld, or ongoing) involving:*
    - *Psychiatric harm following migraine-related prescribing*
    - *Allegations that prescribers failed to consider psychiatric contraindications or failed to inform the patient of psychiatric risks*
3. *Any internal thematic reviews, patient safety reports, or learning summaries (not publicly available on your website) that relate to:*
    - *Prescribing to patients with known psychiatric conditions*
    - *Use of tricyclics or corticosteroids in patients with bipolar disorder or psychosis*
    - *Failures in informed consent or multidisciplinary review in neurological prescribing*
4. *Any guidance or recommendations (including unpublished documents) issued by NHS Resolution to NHS Trusts about:*
    - *The need to assess or document psychiatric risk prior to prescribing migraine treatments*
    - *Advising clinicians to involve mental health services in complex prescribing decisions*

I appreciate that much of your data is published, so I am only seeking non-public data not already covered by your publication scheme or annual reports.
If this request risks exceeding the cost threshold under Section 12, please advise how I can narrow it. I am happy to receive documents in digital format and to accept partial disclosure if full responses are not possible.

[We replied on the 30 December with]

Thank you for your request. It was passed to our team to deal with.

Before we can respond I would like to clarify what information we hold and are able to provide.

Please refer to our publication: Guidance-note-Understanding-NHS-Resolution-data-updated and a set of codes against which claims are logged: CNST-Codes.xlsx (see the three tabs in the spreadsheet).

We can provide data for specialties, such as neurology or psychiatry broken down by cause and/or injury but we don't hold the level of details you are asking, i.e. type of medication used. We could provide high level of data, such as the number of claims received for the specialty and also the number closed with nil damages paid, number closed with a damages payment and associated costs, breakdown by primary cause, breakdown by primary injury or by trust.

We would like to advise you that we would be unable to disclose any details that would allow the identification of the individual claim, where it could lead to the breach of the Data Protection requirements.

Please, could you review the above guidance and codes and let us know if you are interested in any of the information we can provide?

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

[You replied on the 30 December with]

Thank you for your email and for the guidance documents.

I understand you cannot provide medication-specific details. I am happy to narrow my request to the high-level data you can provide.

Please provide the following for the period 2020-2025:

1. For the specialty of NEUROLOGY:
- *Total number of claims received*
- *Number closed with damages paid*
- *Number closed with nil damages*
- *Associated costs (where damages were paid)*

2. Breakdown by PRIMARY CAUSE for neurology claims:
Using your CNST cause codes, please provide the number of claims where the primary cause was related to:
- *Prescribing/medication errors*
- *Failure to obtain informed consent*
- *Failure to refer or consult with another specialty*
- *Inadequate assessment*

3. Breakdown by PRIMARY INJURY for neurology claims:
Using your CNST injury codes, please provide the number of claims where the primary injury involved:
- *Psychiatric/psychological harm*
- *Drug reaction/side effects*

• Exacerbation of pre-existing condition

4. If possible, any breakdown showing neurology claims where BOTH:
• The cause was prescribing-related AND
• The injury was psychiatric/psychological

5. Any thematic reviews, patient safety reports, or learning summaries (not publicly available on your website) that reference:
• Prescribing safety in patients with psychiatric comorbidities
• Neurology or headache services
• Multidisciplinary consultation in complex prescribing

6. Any guidance or recommendations (including unpublished documents) issued by NHS Resolution to NHS trusts regarding:
• Assessment of psychiatric risk prior to prescribing
• Involving mental health services in prescribing decisions

I understand you cannot disclose details that would identify individual claims. Aggregated, anonymised data is acceptable.

If providing all of the above risks exceeding the cost threshold, please prioritise points 1-4 (the claims data) and advise whether points 5-6 can be provided separately.

Our Response

Please find attached the information we are able to provide. 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.

The data provided covers our Clinical schemes. For information about our Clinical Negligence Scheme, please visit our website here: Clinical schemes - NHS Resolution

Please find below the following tables which answer Q1 – Q4:

Table 1 shows: - Number of Clinical claims and Incidents received between financial years **2020/21** and **2024/25** where the specialty is **Neurology**, broken down by **Primary Cause**.

Table 2 shows: - Number of Clinical claims and Incidents received between financial years **2020/21** and **2024/25** where the specialty is **Neurology**, broken down by **Primary Injury**.

Table 3 shows: - Number of Clinical claims received between financial years **2020/21** and **2024/25** where the specialty is **Neurology**, Primary Injury is **"Psychiatric/Psychological dmge"** and the Primary Cause is either **"Medication errors", "Incorrect Injection Site" or "Err with Agnt/Dose/Route/Selec".**

Table 4 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years **2020/21** and **2024/25** with a damages payment where the Specialty is **Neurology**, broken down by **Primary Cause**. 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 5 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years **2020/21** and **2024/25** with a damages payment where the Specialty is **Neurology**, broken down by **Primary Injury**. 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 6 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years **2020/21** and **2024/25** with a damages payment where the Specialty is **Neurology**, Primary Injury is **"Psychiatric/Psychological dmge"** and the Primary Cause is either **"Medication errors", "Incorrect Injection Site" or "Err With Agnt/Dose/Route/Selec"**.

There was no data that met the above criteria.

Table 7 shows: - Number and Cost of Clinical Claims Closed between financial years **2020/21** and **2024/25** with **NIL** damages, where the Specialty is **Neurology**, broken

down by **Primary Cause**. The data includes the legal costs paid up until the end of each relevant financial year of closure.

Table 8 shows: - Number and Cost of Clinical Claims Closed between financial years **2020/21** and **2024/25** with **NIL** damages, where the Specialty is **Neurology**, broken down by **Primary Injury**. The data includes the legal costs paid up until the end of each relevant financial year of closure.

Table 9 shows: - Number and Cost of Clinical Claims Closed between financial years **2020/21** and **2024/25** with **NIL** damages, where the Specialty is **Neurology**, Primary Injury is **"Psychiatric/Psychological dmge"** and the Primary Cause is either **"Medication errors", "Incorrect Injection Site" or "Err with Agnt/Dose/Route/Selec"**. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure.

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 Numbers

Please note we have supressed low figures 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 Freedom of Information Act 2000, 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. Where we are in the territory of such small numbers in the attached, we have used a '#' symbol in the relevant field.

In terms of part of Q3, although NHS Resolution may hold some information relating to claims such as what you have requested (England only claims), due to the way claims are recorded on our claims database, we will not be able to identify such specific cases. It might be helpful to explain that when claims are notified to NHS Resolution they are categorised against pre-defined cause, injury and speciality codes. Unfortunately, we do not have a code for *"drug reaction/side effects", "exacerbation of pre-existing condition"*. Therefore, while there may be information held in our records, we are not readily able to identify the relevant files by searching the database. To do so would involve a manual review of Neurology cases to identify which ones relate to claims involving *"drug reaction/side effects", "exacerbation of pre-existing condition".*

Therefore, we estimate that the cost of complying with the request in its entirety would exceed the 'appropriate limit.' Section 12(1) of the FOIA is a provision which allows a public authority to refuse to comply with a request for information where the cost of compliance is estimated to exceed a set limit (known as the 'appropriate limit'). The 'appropriate limit' for NHS Resolution is £450. This equates to 18 hours of work at the rate of £25 per hour set out in the 'Fees Regulations'. We have provided the information that is readily available within the FOI cost limit.

In terms of Q5 and 6 - We do not hold this information. You may wish to refer to our thematic review on Learning from medication errors - NHS Resolution. However, it does not cover the specific topics you are interested in.

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/

Freedom of Information Request# 7638
Data correct as at: The end of every financial year

NHS Resolution

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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.

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Freedom of Information Request# 7638
Data correct as at: The end of every financial year

Table 1: Number of Clinical claims and Incidents received between financial years 2020/21 and 2024/25 where the specialty is Neurology, broken down by Primary Cause.

Notified	Y
ClinicalNonClinical	Clinical

Primary cause	No. of Claims
Fail / Delay Treatment	185
Failure/Delay Diagnosis	174
Fail To Warn-Informed Consent	48
Failure To Perform Tests	38
Medication Errors	37
Inadequate Nursing Care	30
Inappropriate Treatment	29
Wrong Diagnosis	25
Fail To Follow-Up Arrangements	22
Fail To Supervise	15
Fail To Act On Abnorm Test Res	14
Delay In Performing Operation	10
Inappropriate Discharge	8
Failure To Interpret X-Ray	8
Failure To X-Ray	7
Lack Of Assistance/Care	6
Fail To Recog. Complication Of	6
Fail/Delay Admitting To Hosp.	5
Fail To Infrm Test Rslts	#
Intra-Op Problems	#
Err With Agnt/Dose/Route/Selec	#
Other	#
Fail To Carry Out PO Observs.	#
Bacterial Infection	#
Not Specified	#
Birth Defects	#
Probs With Medical Records	#
Fail/Delay Referring To Hosp.	#
Perform. Of Op. Not Indicated	#
Operator Error	#
Infusion Problems	#
Fail Mon Dose/rate Syntocinon	#
Inadequate Monitoring Intra-Op	#
Removal & Retention Of Organs	#
Premature Ceasure Of Treatment	#
Clinical Trial	#
Incorrect Injection Site	#
Cross Infection	#
Assault, Etc By Hospital Staff	#
Failure To Perform Operation	#
Grand Total	**706**

Table 2: Number of Clinical claims and Incidents received between financial years 2020/21 and 2024/25 where the specialty is Neurology, broken down by Primary Injury.

Notified	Y
ClinicalNonClinical	Clinical

Primary Injury	No. of Claims
Unnecessary Pain	100
Brain Damage	67
Stroke	61
Nerve Damage	54
Fatality	53
Psychiatric/Psychological Dmge	48
Spinal Damage	29
Fracture	22
Adtnl/unnecessary Operation(s)	17
Epilepsy	16
Other	16
Developmental Delay	15
Advanced Stage Cancer	13
Multiple Disabilities	12
Other Visual Problems	12
Pressure Sores	12
Paraplegia	9
Benign Tumour	9
Foetal Anti-Convulsant Syndr.	9
Poor Outcome - Fractures Etc.	8
Multiple Injuries	7
Cardiac Arrest	7
Blindness	7
Partial Paralysis	6
Sepsis	6
Not Specified	6
Amputation - Lower	5
Aneurysm	5
Foot Drop	#
Malignant Tumour	#
Unknown	#
Infection (bacterial)	#
Incontinence	#
Perforation	#
Foetal Abnormality	#
Infertility	#
Cancer	#
Limb Deformity	#
Bladder Damage	#
Cardiovascular Condition	#
Anaphylact Shock/Allergic Shock/allergy	#
Cystic Growth	#
Meningitis	#
Respiratory Disorder/ Failure	#
Viral Infection	#
Tetraplegia/ Quadraplegia	#
Thrombosis/Embolism	#
Loss Of Baby	#
Dislocation	#
Bowel Damage/ Dysfunction	#

Table 2: Number of Clinical claims and Incidents received between financial years 2020/21 and 2024/25 where the specialty is Neurology, broken down by Primary Injury.

Notified	Y
ClinicalNonClinical	Clinical

Primary Injury	No. of Claims
Sexual Abuse	#
Joint Damage	#
Partial Hearing Loss	#
Amputation - Upper	#
Hypoxia	#
Thyroid Condition	#
Impotence	#
Osteoporosis	#
Deafness	#
Learning Difficulties	#
Reduced Life Expectancy	#
Cerebral Palsy	#
Bruising/ Extravasation	#
Burn(s)	#
Addiction/Dependency	#
Infectious Diseases	#
Grand Total	**706**

Table 3: Number of Clinical claims received between financial years 2020/21 and 2024/25 where the Specialty is Neurology, Primary Injury is "Psychiatric/Psychological dmge" and the Primary Cause is either "Medication errors", "Incorrect Injection Site" or "Err With Agnt/Dose/Route/Selec".

Notified	Y
ClinicalNonClinical	Clinical
Psyc_Prescribe_flag	Y

Primary Injury	No. of Claims
Psychiatric/Psychological Dmge	#
Grand Total	**#**

Table 4: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years 2020/21 and 2024/25 with a damages payment where the Specialty is Neurology, broken down by Primary Cause. 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
ClaimOutcome	Damages Paid
ClinicalNonClinical	Clinical

Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Failure/Delay Diagnosis	100	46,615,502	3,874,398	13,762,794	64,252,693
Fail / Delay Treatment	90	30,072,540	2,741,798	9,688,452	42,502,790
Inadequate Nursing Care	28	5,996,181	440,820	1,942,591	8,379,593
Inappropriate Treatment	15	3,560,484	279,545	976,744	4,816,773
Wrong Diagnosis	15	718,633	158,969	830,386	1,707,989
Medication Errors	14	8,998,820	481,174	1,519,750	10,999,744
Fail To Follow-Up Arrangements	12	4,349,785	381,467	1,171,350	5,902,602
Failure To Perform Tests	12	2,477,794	421,593	1,833,700	4,733,088
Fail To Supervise	8	348,750	54,042	222,350	625,142
Delay In Performing Operation	6	1,397,985	196,450	798,581	2,393,016
Lack Of Assistance/Care	6	207,500	38,648	171,625	417,773
Failure To Interpret X-Ray	6	1,806,390	244,140	1,082,250	3,132,780
Failure To X-Ray	5	1,144,743	283,938	864,891	2,293,572
Fail/Delay Referring To Hosp.	#	#	#	#	#
Fail To Warn-Informed Consent	#	#	#	#	#
Fail To Act On Abnorm Test Res	#	#	#	#	#
Fail To Infrm Test Rslts	#	#	#	#	#
Intra-Op Problems	#	#	#	#	#
Incorrect Injection Site	#	#	#	#	#
Inappropriate Discharge	#	#	#	#	#
Fail To Recog. Complication Of	#	#	#	#	#
Other	#	#	#	#	#
Operator Error	#	#	#	#	#
Equipment Malfunction	#	#	#	#	#
Perform. Of Op. Not Indicated	#	#	#	#	#
Err With Agnt/Dose/Route/Selec	#	#	#	#	#
Infusion Problems	#	#	#	#	#
Fail/Delay Admitting To Hosp.	#	#	#	#	#
Grand Total	**345**	**113,941,900**	**10,175,447**	**36,888,281**	**161,005,628**

Table 5: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years 2020/21 and 2024/25 with a damages payment where the Specialty is Neurology, broken down by Primary Injury. 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
ClaimOutcome	Damages Paid
ClinicalNonClinical	Clinical

Primary Injury	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Unnecessary Pain	49	3,368,666	533,258	2,288,800	6,190,724
Brain Damage	40	21,411,763	1,724,398	6,654,761	29,790,923
Stroke	28	15,317,988	1,408,252	5,207,929	21,934,170
Nerve Damage	26	9,086,382	903,378	3,158,317	13,148,076
Fatality	24	2,187,004	374,528	1,353,745	3,915,277
Fracture	20	3,650,190	189,428	979,200	4,818,818
Psychiatric/Psychological Dmge	17	545,867	127,026	491,235	1,164,127
Spinal Damage	17	19,996,776	1,155,372	3,850,536	25,002,684
Adtnl/unnecessary Operation(s)	14	784,269	159,934	701,287	1,645,490
Partial Paralysis	12	7,293,294	581,128	2,107,500	9,981,922
Pressure Sores	11	2,206,715	232,164	1,329,891	3,768,771
Multiple Injuries	7	167,590	66,419	257,759	491,768
Multiple Disabilities	6	6,121,344	218,472	784,400	7,124,216
Other Visual Problems	6	3,376,545	240,281	785,000	4,401,826
Blindness	6	5,428,366	496,050	1,300,400	7,224,817
Aneurysm	5	561,461	56,986	444,104	1,062,551
Other	5	204,479	76,235	401,000	681,714
Epilepsy	#	#	#	#	#
Bladder Damage	#	#	#	#	#
Foot Drop	#	#	#	#	#
Advanced Stage Cancer	#	#	#	#	#
Benign Tumour	#	#	#	#	#
Vocal Cord Damage	#	#	#	#	#
Cystic Growth	#	#	#	#	#
Thrombosis/Embolism	#	#	#	#	#
Cancer	#	#	#	#	#
Paraplegia	#	#	#	#	#
Cardiovascular Condition	#	#	#	#	#
Tetraplegia/ Quadriplegia	#	#	#	#	#
Malignant Tumour	#	#	#	#	#
Incontinence	#	#	#	#	#
Respiratory Disorder/ Failure	#	#	#	#	#
Deafness	#	#	#	#	#
Bruising/ Extravasation	#	#	#	#	#
Partial Hearing Loss	#	#	#	#	#
Burn(s)	#	#	#	#	#
Meningitis	#	#	#	#	#
Sepsis	#	#	#	#	#
Poor Outcome - Fractures Etc.	#	#	#	#	#
Osteoporosis	#	#	#	#	#
Bowel Damage/ Dysfunction	#	#	#	#	#
Dislocation	#	#	#	#	#
Arterial Damage	#	#	#	#	#
Renal Damage/ Failure	#	#	#	#	#
Addiction/Dependency	#	#	#	#	#
Joint Damage	#	#	#	#	#
Grand Total	**345**	**113,941,900**	**10,175,447**	**36,888,281**	**161,005,628**

Table 6: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years 2020/21 and 2024/25 with a damages payment where the Specialty is Neurology, Primary Injury is "Psychiatric/Psychological dmge" and the Primary Cause is either "Medication errors", "Incorrect Injection Site" or "Err With Agnt/Dose/Route/Selec".

ClosedSettled	Y
ClaimOutcome	Damages Paid
ClinicalNonClinical	Clinical
Psyc_Prescribe_flag	Y

Primary Injury	No. of Claims		NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Grand Total	**0**	**0**	**0**	**0**	**0**

Freedom of Information Request# 7638
Data correct as at: The end of every financial year

NHS Resolution

Table 7: Number and Cost of Clinical Claims Closed between financial years 2020/21 and 2024/25 with NIL damages, where the Specialty is Neurology, broken down by Primary Cause. The data includes the legal costs paid up until the end of each relevant financial year of closure.

ClosedSettled	Y
ClaimOutcome	Nil Damages
ClinicalNonClinical	Clinical

Primary Cause	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Fail / Delay Treatment	100	862,623	0
Failure/Delay Diagnosis	75	641,375	0
Failure To Perform Tests	21	167,704	0
Inappropriate Treatment	19	174,057	0
Medication Errors	18	77,900	0
Fail To Warn-Informed Consent	14	145,546	0
Wrong Diagnosis	12	87,690	0
Fail To Follow-Up Arrangements	11	45,504	0
Inadequate Nursing Care	9	38,134	0
Inappropriate Discharge	6	64,162	0
Fail To Act On Abnorm Test Res	6	20,402	0
Failure To X-Ray	#	#	#
Failure To Interpret X-Ray	#	#	#
Fail To Recog. Complication Of	#	#	#
Fail To Infrm Test Rslts	#	#	#
Premature Ceasure Of Treatment	#	#	#
Bacterial Infection	#	#	#
Other	#	#	#
Fail Mon Dose/rate Syntocinon	#	#	#
Err With Agnt/Dose/Route/Selec	#	#	#
Delay In Performing Operation	#	#	#
Fail/Delay Referring To Hosp.	#	#	#
Fail To Supervise	#	#	#
Cross Infection	#	#	#
Assault, Etc By Hospital Staff	#	#	#
Not Specified	#	#	#
Failure To Perform Operation	#	#	#
Perform. Of Op. Not Indicated	#	#	#
Intra-Op Problems	#	#	#
Probs With Medical Records	#	#	#
Lack Of Assistance/Care	#	#	#
Fail To Carry Out PO Observs.	#	#	#
Fail/Delay Admitting To Hosp.	#	#	#
Grand Total	**329**	**2,524,964**	**0**

Freedom of Information Request# 7638
Data correct as at: The end of every financial year

NHS Resolution

Table 8: Number and Cost of Clinical Claims Closed between financial years 2020/21 and 2024/25 with NIL damages, where the Specialty is Neurology, broken down by Primary Injury. The data includes the legal costs paid up until the end of each relevant financial year of closure.

ClosedSettled	Y
ClaimOutcome	Nil Damages
ClinicalNonClinical	Clinical

Primary Injury	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Unnecessary Pain	54	204,080	0
Stroke	35	356,029	0
Brain Damage	28	388,947	0
Fatality	28	134,030	0
Psychiatric/Psychological Dmge	25	125,402	0
Nerve Damage	21	129,001	0
Spinal Damage	10	109,851	0
Epilepsy	8	51,406	0
Other	8	27,907	0
Other Visual Problems	6	52,349	0
Cardiac Arrest	6	41,586	0
Multiple Injuries	6	15,689	0
Adtnl/unnecessary Operation(s)	6	103,644	0
Not Specified	5	27,404	0
Advanced Stage Cancer	5	8,819	0
Benign Tumour	5	34,152	0
Fracture	5	31,633	0
Paraplegia	#	#	#
Multiple Disabilities	#	#	#
Foot Drop	#	#	#
Amputation - Lower	#	#	#
Poor Outcome - Fractures Etc.	#	#	#
Partial Paralysis	#	#	#
Developmental Delay	#	#	#
Blindness	#	#	#
Aneurysm	#	#	#
Sepsis	#	#	#
Cancer	#	#	#
Meningitis	#	#	#
Bladder Damage	#	#	#
Bowel Damage/ Dysfunction	#	#	#
Infection (bacterial)	#	#	#
Infertility	#	#	#
Sexual Abuse	#	#	#
Anaphylact Shock/Allergic Shock/allergy	#	#	#
Tetraplegia/ Quadraplegia	#	#	#
Cerebral Palsy	#	#	#
Respiratory Disorder/ Failure	#	#	#
Hemiparesis	#	#	#

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Data correct as at: The end of every financial year

Table 8: Number and Cost of Clinical Claims Closed between financial years 2020/21 and 2024/25 with NIL damages, where the Specialty is Neurology, broken down by Primary Injury. The data includes the legal costs paid up until the end of each relevant financial year of closure.

ClosedSettled	Y
ClaimOutcome	Nil Damages
ClinicalNonClinical	Clinical

Primary Injury	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Foetal Abnormality	#	#	#
Osteoporosis	#	#	#
Foetal Anti-Convulsant Syndr.	#	#	#
Hypoxia	#	#	#
Renal Damage/ Failure	#	#	#
Incontinence	#	#	#
Loss Of Baby	#	#	#
Cystic Growth	#	#	#
Malignant Tumour	#	#	#
Infectious Diseases	#	#	#
Tendon Damage	#	#	#
Viral Infection	#	#	#
Thrombosis/Embolism	#	#	#
Pressure Sores	#	#	#
Unwanted Pregnancy	#	#	#
Addiction/Dependency	#	#	#
Reduced Life Expectancy	#	#	#
Joint Damage	#	#	#
Grand Total	**329**	**2,524,964**	**0**

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Data correct as at: The end of every financial year

Table 9: Number and Cost of Clinical Claims Closed between financial years 2020/21 and 2024/25 with NIL damages, where the Specialty is Neurology, Primary Injury is "Psychiatric/Psychological dmge" and the Primary Cause is either "Medication errors", "Incorrect Injection Site" or "Err With Agnt/Dose/Route/Selec". The data includes the damages and legal costs paid up until the end of each relevant financial year of closure

ClosedSettled	Y
ClaimOutcome	Nil Damages
ClinicalNonClinical	Clinical
Psyc_Prescribe_flag	Y

Primary Injury	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Psychiatric/Psychological Dmge	5	18,956	0
Grand Total	**5**	**18,956**	**0**