



Resolution

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March 2026
FOI_7730

The following information was requested on 17 February 2026 and clarified on 24 February 2026:

[On 17 February 2026] you requested:

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

Please provide any recorded data, summaries, reports, or analyses held by NHS Resolution concerning the number of clinical negligence claims in which technology, software, or artificial intelligence systems were identified as a primary cause in the alleged incident.

For example:

- Claims where AI systems, or automated decision-making tools were alleged to have caused patient harm or error;*
- Claims involving system failures, data loss, or errors in electronic patient record systems that led to harm;*
- Claims involving medical devices, diagnostic systems, or digital health tools where malfunction or incorrect operation was the causal factor in the incident.*

Please provide the information by financial year, from 2014/2015 to 2024/25.

If possible, please include:

- The number of such claims recorded each year*
- The status of the claim (e.g., settled, ongoing)*
- Any internal analyses, reports, or reviews discussing technology or AI-related a factor in claims*

Look forward to hearing from you.

[We replied on 23 February 2026 with]

Thank you for contacting NHS Resolution.

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 do not have a code for artificial intelligence or technology.

You may check our previous responses to similar requests:

[FOI 5302 Medical-Devices.pdf](#)

[FOI 6764 Artificial-Intelligence.pdf](#)

[FOI 7543 Negligence-related-to-Artificial-Intelligence.pdf](#)

Some of the codes I linked above may provide you with the information you are looking for, e.g. Equipment Malfunction and Probs with Medical Records. Please can you also review the codes for any others that may be of interest to you.

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

[You responded on 24 February 2026 with]

Thank you for your prompt response.

In that case, can you please provide the number of claims received from 2015/2016 to 2024/2025 broken down by primary injury, numbers settled with associated costs, numbers with no damages paid and numbers currently open for the following cause codes:

- *Equipment malfunction*
- *Problems with Medical Records*
- *Lack of Facilities/Equipment*

If possible, can you also provide the definition of the three cause codes requested above.

Looking forward to hearing back.

Our Response

Please find attached the requested information we are able to provide. This information only covers England and 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. We strongly recommend exercising caution when trying to compare previous similar requests to establish any trend patterns, such as increase or decreases in volumes and values. For further information, please refer to <https://resolution.nhs.uk/resources/understanding-nhs-resolution-data>.

For this request we have used our Supplementary Annual Statistics (SAS) dataset to ensure the averages represent the most up to date information. For further information about our SAS dataset please see: [Annual statistics \(including Factsheet 5\) - NHS Resolution](#). Therefore, our response to this request may not align with other publications on our website.

The data provided covers our Clinical schemes. For information about our Clinical Negligence Scheme, please visit our website here: [Clinical schemes - NHS Resolution](#). Specifically, please note that since April 2019 NHS Resolution has administered general practice indemnity under the following schemes:

- **Clinical Negligence Scheme for General Practice (CNSGP)**, which covers clinical negligence claims for incidents occurring in general practice on or after 1 April 2019.

- **Existing Liabilities Scheme for General Practice (ELSGP)** which covers historic NHS clinical negligence of staff of GP members of participating medical defence organisations occurring before 1 April 2019. This scheme currently covers historical liabilities for those who were members of the Medical and Dental Defence Union of Scotland or the Medical Protection Society at the time of the, and general practice staff working for members at the time of that incident.

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, when compared with other previous responses, may show a variation in numbers of cases 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, any fluctuations cannot be interpreted as trends.

Please find attached the following tables -

Table 1 shows: - Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is '**Equipment Malfunction**' or '**Probs with Medical Records**' or '**Lack of Facilities/Equipment**'. Broken down by **Year** and **Primary Injury**.

Table 2 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Primary Cause is '**Equipment Malfunction**' or '**Probs with Medical Records**' or '**Lack of Facilities/Equipment**'. The data includes the damages and legal costs paid up until the end of the 2024/25 financial year. Broken down by **Year** and **Primary Injury**.

Table 3 shows: - Number of Clinical Claims Closed between financial years '2015/16' and '2024/25' with **NIL** damages paid where the Primary Cause is '**Equipment Malfunction**' or '**Probs with Medical Records**' or '**Lack of Facilities/Equipment**'. Broken down by **Year** and **Primary Injury**.

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Table 5 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Primary Cause is '**Equipment Malfunction**' or '**Probs**

with Medical Records' or 'Lack of Facilities/Equipment'. The data includes the damages and legal costs paid up until the end of the 2024/25 financial year. Broken down by **Primary Cause** and **Primary Injury**.

Table 6 shows: - Number of Clinical Claims Closed between financial years '2015/16' and '2024/25' with **NIL** damages paid where the Primary Cause is '**Equipment Malfunction**' or '**Probs with Medical Records**' or '**Lack of Facilities/Equipment**'. Broken down by **Primary Cause** and **Primary Injury**.

Table 7 shows: - Number of Open Clinical Claims as at the end of the 2024/25 financial year where the Primary Cause is '**Equipment Malfunction**' or '**Probs with Medical Records**' or '**Lack of Facilities/Equipment**'. Broken down by Primary Injury.

In regard to your question on **internal analyses, reports, or reviews discussing technology or AI in relation to claims**, we do hold any specific documents addressing these categories.

In relation to your question regarding the definition of the three cause codes listed – NHS Resolution does not have a document that provides definitions for the codes listed. NHS Resolution does not operate a standardised framework for applying clinical or cause/injury codes. Instead, we rely on judgement based on information about the incident obtained when submitting a claim and through investigation. Where information is incomplete or where clarification is needed, our claims handlers review the available documentation and apply the most appropriate cause and injury codes from the options available within our system. This process is based on the handler's professional judgement and the details of the case; there is no prescribed methodology beyond interpreting the incident information.

PPOs

The attached data includes PPOs. 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 the costs paid up until the end of the financial year 2024/25.

Low Numbers

Please note we have suppressed 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. You should still be able to see aggregate/total details for higher level fields containing this data.

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 '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

Table 2: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/2025' with a damages payment, where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. The data includes the damages and legal costs paid up until the end of the 2024/25 financial year. Broken down by Year and Primary Injury.

Table 3: Number of Clinical Claims Closed between financial years '2015/16' and '2024/25' with NIL damages paid where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

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Table 7: Number of Open Clinical Claims as at the end of the 2024/25 financial year where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Primary Injury.

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Table 1: Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

Notified	Y
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Year of Notification -- Primary Injury	No. of Claims
2015/16	79
Injuries with less than 5 claims	26
Unnecessary Pain	15
Adtnl/unnecessary Operation(s)	15
Burn(s)	11
Scarring	7
Fatality	5
2016/17	80
Injuries with less than 5 claims	30
Adtnl/unnecessary Operation(s)	19
Unnecessary Pain	11
Burn(s)	8
Bruising/ Extravasation	6
Fracture	6
2017/18	65
Injuries with less than 5 claims	30
Adtnl/unnecessary Operation(s)	14
Unnecessary Pain	9
Burn(s)	7
Fracture	5
2018/19	86
Injuries with less than 5 claims	31
Unnecessary Pain	17
Adtnl/unnecessary Operation(s)	11
Burn(s)	8
Scarring	7
Pressure Sores	6
Fatality	6
2019/20	88
Injuries with less than 5 claims	35
Unnecessary Pain	15
Adtnl/unnecessary Operation(s)	13

Table 1: Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

Notified Y

Year of Notification -- Primary Injury	No. of Claims
Burn(s)	11
Fatality	9
Other Visual Problems	5
2020/21	73
Injuries with less than 5 claims	37
Adtnl/unnecessary Operation(s)	11
Unnecessary Pain	8
Other	6
Burn(s)	6
Fatality	5
2021/22	77
Injuries with less than 5 claims	32
Adtnl/unnecessary Operation(s)	13
Unnecessary Pain	12
Psychiatric/Psychological Dmge	9
Burn(s)	6
Fatality	5
2022/23	81
Injuries with less than 5 claims	39
Unnecessary Pain	13
Adtnl/unnecessary Operation(s)	9
Psychiatric/Psychological Dmge	8
Cardiac Arrest	7
Burn(s)	5
2023/24	76
Injuries with less than 5 claims	25
Fatality	14
Unnecessary Pain	10
Burn(s)	7
Adtnl/unnecessary Operation(s)	5
Other Visual Problems	5
Psychiatric/Psychological Dmge	5

Table 1: Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

Notified	Y
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Year of Notification -- Primary Injury	No. of Claims
Brain Damage	5
2024/25	63
Injuries with less than 5 claims	32
Unnecessary Pain	13
Adtnl/unnecessary Operation(s)	7
Other Visual Problems	6
Psychiatric/Psychological Dmge	5
Grand Total	768

Table 2: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/2025' with a damages payment, where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. The data includes the damages and legal costs paid up until the end of the 2024/25 financial year. Broken down by Year and Primary Injury.

ClaimOutcome Closed/Settled	Damages Paid Y				
Year of Closure (Settlement Year for PPOs) -- Primary Injury	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
2015/16	43	4,017,561	258,074	1,218,249	5,493,884
Injuries with less than 5 claims	16	3,651,331	185,966	815,578	4,652,876
Burn(s)	13	156,565	11,307	164,657	332,529
Adtnl/unnecessary Operation(s)	9	148,580	33,124	98,425	280,129
Unnecessary Pain	5	61,085	27,677	139,589	228,351
2016/17	66	2,240,548	355,446	1,702,473	4,298,467
Injuries with less than 5 claims	24	388,988	179,689	746,676	1,315,354
Adtnl/unnecessary Operation(s)	14	1,525,623	102,365	453,816	2,081,803
Burn(s)	12	91,750	9,509	39,949	141,208
Unnecessary Pain	11	63,318	28,802	143,719	235,838
Fatality	5	170,869	35,082	318,313	524,264
2017/18	33	2,174,573	433,046	1,350,571	3,958,191
Injuries with less than 5 claims	20	1,994,528	382,247	1,033,874	3,410,649
Unnecessary Pain	8	77,695	16,839	105,508	200,042
Burn(s)	5	102,350	33,959	211,190	347,499
2018/19	48	13,236,804	687,239	3,416,171	17,340,213
Injuries with less than 5 claims	34	12,927,385	633,096	3,118,850	16,679,331
Adtnl/unnecessary Operation(s)	14	309,419	54,142	297,321	660,882
2019/20	55	2,543,530	276,328	1,332,097	4,151,955
Injuries with less than 5 claims	27	2,252,598	213,961	997,496	3,464,055
Burn(s)	8	106,415	11,730	113,450	231,595
Unnecessary Pain	7	20,665	15,472	24,981	61,118
Scarring	7	38,352	17,806	80,163	136,321
Adtnl/unnecessary Operation(s)	6	125,500	17,359	116,008	258,867
2020/21	64	6,186,915	396,317	2,098,532	8,681,764
Injuries with less than 5 claims	28	5,505,371	239,394	1,238,670	6,983,435
Burn(s)	11	86,450	13,193	112,236	211,879
Unnecessary Pain	10	101,700	40,468	152,000	294,168
Adtnl/unnecessary Operation(s)	10	427,515	100,198	490,950	1,018,663
Pressure Sores	5	65,879	3,064	104,677	173,620
2021/22	45	3,872,370	414,843	1,753,238	6,040,450
Injuries with less than 5 claims	27	3,157,427	298,885	1,313,193	4,769,505
Burn(s)	7	105,322	11,938	125,755	243,015
Adtnl/unnecessary Operation(s)	6	330,670	33,770	160,301	524,742
Unnecessary Pain	5	278,951	70,249	153,989	503,189
2022/23	44	4,070,298	361,350	1,413,460	5,845,108
Injuries with less than 5 claims	24	3,661,055	252,563	834,710	4,748,328
Adtnl/unnecessary Operation(s)	8	121,750	56,883	272,288	450,921
Burn(s)	7	136,846	13,479	147,961	298,286
Pressure Sores	5	150,647	38,425	158,500	347,572
2023/24	41	4,725,632	389,936	1,631,581	6,747,149
Injuries with less than 5 claims	31	4,198,326	326,051	1,390,652	5,915,029
Psychiatric/Psychological Dmge	5	78,725	5,952	86,200	170,877
Adtnl/unnecessary Operation(s)	5	448,581	57,934	154,729	661,244
2024/25	40	2,308,977	236,453	1,777,105	4,322,535
Injuries with less than 5 claims	23	1,847,550	161,071	1,218,855	3,227,476
Unnecessary Pain	7	156,418	39,001	274,500	469,919
Burn(s)	5	92,009	19,414	123,000	234,423
Fatality	5	213,000	16,967	160,750	390,717
Grand Total	479	45,377,209	3,809,031	17,693,477	66,879,717

Table 3: Number of Clinical Claims Closed between financial years '2015/16' and '2024/25' with NIL damages paid where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Year and Primary Injury.

ClaimOutcome Closed/Settled	Nil Damages Y
Year of Closure -- Primary Injury	No. of Claims
2015/16	29
Injuries with less than 5 claims	20
Unnecessary Pain	9
2016/17	27
Injuries with less than 5 claims	14
Unnecessary Pain	7
Adtnl/unnecessary Operation(s)	6
2017/18	26
Injuries with less than 5 claims	15
Adtnl/unnecessary Operation(s)	11
2018/19	21
Injuries with less than 5 claims	8
Adtnl/unnecessary Operation(s)	13
2019/20	29
Injuries with less than 5 claims	18
Unnecessary Pain	6
Fatality	5
2020/21	27
Injuries with less than 5 claims	21
Unnecessary Pain	6
2021/22	38
Injuries with less than 5 claims	21
Unnecessary Pain	6
Adtnl/unnecessary Operation(s)	6
Fatality	5
2022/23	24
Injuries with less than 5 claims	24
2023/24	24
Injuries with less than 5 claims	24
2024/25	33
Injuries with less than 5 claims	24
Unnecessary Pain	9
Grand Total	278

Table 4: Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Primary Cause and Primary Injury.

Notified	Y
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Primary Cause -- Primary Injury	No. of Claims
Equipment Malfunction	541
Injuries with less than 5 claims	81
Unnecessary Pain	94
Adtnl/unnecessary Operation(s)	84
Burn(s)	67
Fatality	34
Scarring	27
Fracture	23
Other Visual Problems	23
Cardiac Arrest	18
Brain Damage	16
Psychiatric/Psychological Dmge	14
Bruising/ Extravasation	14
Other	13
Tissue Damage	10
Pressure Sores	10
Nerve Damage	8
Infection (bacterial)	5
Lack Of Facilities/Equipment	140
Injuries with less than 5 claims	50
Adtnl/unnecessary Operation(s)	27
Unnecessary Pain	20
Pressure Sores	11
Fatality	9
Poor Outcome - Fractures Etc.	7
Fracture	6
Other	5
Nerve Damage	5
Probs With Medical Records	87
Injuries with less than 5 claims	36
Psychiatric/Psychological Dmge	23
Fatality	13

Table 4: Number of Clinical Claims and Incidents received between financial years '2015/16' and '2024/25' where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Primary Cause and Primary Injury.

Notified	Y
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Primary Cause -- Primary Injury	No. of Claims
Unnecessary Pain	9
Adtnl/unnecessary Operation(s)	6
Grand Total	768

Table 5: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/2025' with a damages payment, where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. The data includes the damages and legal costs paid up until the end of the 2024/25 financial year. Broken down by Primary Cause and Primary Injury.

ClaimOutcome Closed/Settled	Damages Paid Y				
Primary Cause -- Primary Injury	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Equipment Malfunction	356	32,628,677	2,958,845	13,666,995	49,254,518
Injuries with less than 5 claims	49	12,783,172	818,603	3,689,489	17,291,264
Burn(s)	72	925,422	131,241	1,100,437	2,157,101
Adtnl/unnecessary Operation(s)	52	3,322,663	413,592	1,879,125	5,615,380
Unnecessary Pain	49	508,657	179,609	918,027	1,606,293
Scarring	22	182,247	39,763	430,389	652,399
Fatality	20	987,603	153,150	883,063	2,023,815
Fracture	20	1,659,488	190,691	740,622	2,590,801
Psychiatric/Psychological Dmge	13	216,464	136,567	602,700	955,731
Bruising/ Extravasation	10	144,235	25,365	206,000	375,600
Other	10	167,700	70,506	308,600	546,806
Pressure Sores	10	218,026	56,383	329,477	603,886
Other Visual Problems	10	285,615	26,065	182,875	494,555
Nerve Damage	8	2,998,169	307,080	646,950	3,952,199
Cardiac Arrest	6	285,016	84,362	379,010	748,388
Brain Damage	5	7,944,200	325,870	1,370,231	9,640,301
Lack Of Facilities/Equipment	79	9,948,333	545,190	2,738,115	13,231,638
Injuries with less than 5 claims	33	9,291,800	428,366	2,024,033	11,744,199
Adtnl/unnecessary Operation(s)	24	320,238	64,612	345,119	729,969
Unnecessary Pain	8	70,968	7,061	88,492	166,520
Pressure Sores	8	153,500	25,345	149,721	328,566
Fracture	6	111,828	19,806	130,750	262,383
Probs With Medical Records	44	2,800,199	304,996	1,288,366	4,393,561
Injuries with less than 5 claims	25	2,390,936	206,026	978,566	3,575,528
Psychiatric/Psychological Dmge	12	154,812	29,193	169,450	353,455
Unnecessary Pain	7	254,451	69,777	140,350	464,578
Grand Total	479	45,377,209	3,809,031	17,693,477	66,879,717

Table 6: Number of Clinical Claims Closed between financial years '2015/16' and '2024/25' with NIL damages paid where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Primary Cause and Primary Injury.

ClaimOutcome	Nil Damages
Closed/Settled	Y

Primary Cause -- Primary Injury	No. of Claims
Equipment Malfunction	196
Injuries with less than 5 claims	50
Unnecessary Pain	47
Adtnl/unnecessary Operation(s)	46
Fatality	16
Cardiac Arrest	9
Tissue Damage	6
Fracture	6
Other Visual Problems	6
Burn(s)	5
Bruising/ Extravasation	5
Lack Of Facilities/Equipment	44
Injuries with less than 5 claims	27
Unnecessary Pain	6
Adtnl/unnecessary Operation(s)	6
Fatality	5
Probs With Medical Records	38
Injuries with less than 5 claims	20
Psychiatric/Psychological Dmge	12
Fatality	6
Grand Total	278

Table 7: Number of Open Clinical Claims as at the end of the 2024/25 financial year where the Primary Cause is 'Equipment Malfunction' or 'Probs with Medical Records' or 'Lack of Facilities/Equipment'. Broken down by Primary Injury.

CurrentStatusFlag	Open
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Primary Injury	No. of Claims
Injuries with less than 5 claims	61
Unnecessary Pain	20
Adtnl/unnecessary Operation(s)	19
Brain Damage	15
Fatality	11
Other Visual Problems	9
Burn(s)	6
Fracture	6
Grand Total	147