NHS Resolution

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April 2026
FOI_7774

The following information was requested on 09 March and clarified 19 March 2026:

[On the 09 March, you requested]

In support of a women's health and environmental piece of proposed research (Xenon/oxygen vs Entonox for maternal analgesia) please may you inform as to the following between 2015 and 2025:

1. Total cost of litigation to the NHS relating to the use of both entonox and nitrous oxide initiated by either patients or employees.
2. The total number of claims defended by the NHS relating to the use of both entonox and nitrous oxide over the same time period.

[On the 09 March, we responded with]

Thank you for your request to NHS Resolution. 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 confirm that we do not have a code for: maternal analgesia. To enable us to identify the most relevant information, please review the guidance and advise which code best reflects the information that could assist with your research.

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

[On the 09 March, you replied with]

It looks like the code "Anaesthesia" is likely to be the most relevant code please –

[On the 19 March, we sought further clarification with]

I am writing further to you regarding your request below.

The learning codes available within our claims management system do not allow us to identify the specific cases you're seeking. We can provide information for the specialty of Anaesthesia, but this will include all claims related to that area and will not offer the detailed breakdown by the type of medication that you have requested. What we are able to share is the volumes and costs of claims associated with Anaesthesia, broken down by the cause involved for the time period requested.

Please, could you confirm if you are interested in this data?

[On the 19 March, you replied with]

Yes please - that could be very useful for this research project.

Our Response

Please find attached the requested information. 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. Not all claims received will result in an award of compensation.

The data shows 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, 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

Table 1 shows: - Number of Clinical Claims and Incidents received between financial years ‘2014/15’ and ‘2024/25’ where the Specialty is 'Anaesthesia'. Broken down by Patient Sex and Primary Cause.

Table 2 shows: - Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years ‘2014/15’ and ‘2024/25’ with a damages payment, where the Specialty is '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 Patient Sex and Primary Cause.

Table 3 shows: - Number and Cost of Clinical Claims Closed between financial years '2014/15' and '2025/26' with NIL damages paid where the Specialty is 'Anaesthesia'. Broken down by Patient Sex and primary Cause.

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
We have not provided the information for low figures involved (and high figures that would make it possible to work out low numbers), 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/

Freedom of Information Request# 7774
Data correct as at: The end of every financial year

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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 '2014/15' and '2024/25' where the Specialty is 'Anaesthesia'. Broken down by Patient Sex and Primary Cause.

Notified	Y

Primary Cause ---Patient Sex	No. of Claims
Female	**796**
Causes with less than 5 claims	**37**
Medication Errors	100
Err With Agnt/Dose/Route/Selec	82
Fail To Warn-Informed Consent	66
Intra-Op Problems	63
Operator Error	57
Inappropriate Treatment	57
Fail / Delay Treatment	49
Fail To Recog. Complication Of	43
Intubation Problems	34
Inadequate Monitoring Intra-Op	28
Incorrect Injection Site	23
Other	16
Failure/Delay Diagnosis	16
Infusion Problems	16
Lack Of Pre-Op Evaluation	14
Foreign Body Left In Situ	13
Equipment Malfunction	12
Inadequate Nursing Care	10
Fail/Delay Of Avail Emgy Anaes	9
Tooth Inj & Patient Posit Prob	8
Lack Of Assistance/Care	8
Fail To Supervise	7
Delay In Performing Operation	7
Failure To Perform Tests	6
Re-Canalisation	5
Failure To Perform Operation	5
Diathermy Burns/react. To Prep	5
Male	**418**
Causes with less than 5 claims	**42**
Medication Errors	45
Inappropriate Treatment	45
Intra-Op Problems	39
Intubation Problems	37
Operator Error	27
Fail / Delay Treatment	26
Fail To Warn-Informed Consent	25
Err With Agnt/Dose/Route/Selec	23
Inadequate Monitoring Intra-Op	20
Fail To Recog. Complication Of	11
Tooth Inj & Patient Posit Prob	10
Lack Of Pre-Op Evaluation	9
Incorrect Injection Site	9
Other	8
Failure/Delay Diagnosis	7
Lack Of Assistance/Care	6
Inadequate Nursing Care	6
Foreign Body Left In Situ	6
Infusion Problems	6
Application Of Excess Force	6
Delay In Performing Operation	5
Grand Total	**1,214**

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Table 2: Number and Cost of Clinical Claims Closed (or settled with a periodical payment order) between financial years '2014/15' and '2024/25' with a damages payment, where the Specialty is '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 Patient Sex and Primary Cause.

ClaimOutcome	Damages Paid
ClosedSettled	Y

Patient Sex ---Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Female	**601**	**72,250,344**	**7,201,231**	**29,473,482**	**108,925,056**
Causes with less than 5 claims	**37**	**4,422,137**	**647,977**	**2,805,906**	**7,876,020**
Medication Errors	88	5,933,392	682,945	3,751,838	10,368,174
Err With Agnt/Dose/Route/Selec	85	14,046,033	749,663	3,407,066	18,202,762
Inappropriate Treatment	49	4,024,799	705,098	2,345,509	7,075,407
Intra-Op Problems	47	5,391,657	758,656	2,495,617	8,645,929
Operator Error	46	3,454,450	387,663	1,652,441	5,494,554
Fail To Warn-Informed Consent	36	3,533,643	527,101	2,063,489	6,124,233
Fail / Delay Treatment	33	8,588,459	487,971	2,293,666	11,370,096
Fail To Recog. Complication Of	30	3,541,782	486,622	2,080,507	6,108,911
Inadequate Monitoring Intra-Op	27	2,579,876	657,840	2,272,807	5,510,523
Intubation Problems	19	500,057	140,624	732,962	1,373,643
Incorrect Injection Site	15	3,579,100	191,776	851,112	4,621,988
Failure/Delay Diagnosis	12	706,379	129,163	518,955	1,354,497
Inadequate Nursing Care	10	6,541,312	230,390	496,084	7,267,785
Foreign Body Left In Situ	10	528,056	42,154	303,874	874,084
Lack Of Pre-Op Evaluation	8	166,152	33,164	299,000	498,316
Other	7	88,000	11,299	114,257	213,556
Lack Of Assistance/Care	7	537,930	31,964	161,638	731,532
Infusion Problems	7	81,300	13,029	132,250	226,579
Equipment Malfunction	6	90,700	7,683	53,250	151,633
Delay In Performing Operation	6	124,000	33,451	188,699	346,150
Fail/Delay Of Avail Emgy Anaes	6	3,656,056	229,192	364,706	4,249,954
Fail To Supervise	5	107,375	8,959	61,600	177,934
Tooth Inj & Patient Posit Prob	5	27,700	6,846	26,250	60,796
Male	**318**	**50,872,226**	**5,186,589**	**#**	**#**
Causes with less than 5 claims	**43**	**5,557,560**	**475,707**	**2,075,987**	**8,109,254**
Intra-Op Problems	35	6,743,739	707,610	2,602,314	10,053,663
Err With Agnt/Dose/Route/Selec	30	6,598,089	502,384	2,615,020	9,715,493
Medication Errors	30	3,715,142	441,992	1,657,171	5,814,305
Inappropriate Treatment	25	628,722	294,916	781,895	1,705,533
Intubation Problems	22	1,368,264	173,583	845,084	2,386,931
Operator Error	22	1,346,173	257,080	632,650	2,235,903
Fail / Delay Treatment	17	3,419,385	367,388	1,031,000	4,817,772
Inadequate Monitoring Intra-Op	17	7,532,188	618,405	2,070,228	10,220,821
Fail To Warn-Informed Consent	16	4,093,980	280,409	1,106,566	5,480,955
Fail To Recog. Complication Of	15	8,057,164	559,314	2,195,017	10,811,495
Incorrect Injection Site	9	174,269	142,453	253,693	570,415
Failure/Delay Diagnosis	8	950,849	226,008	916,835	2,093,692
Lack Of Pre-Op Evaluation	7	441,379	106,629	457,450	1,005,458
Foreign Body Left In Situ	6	67,925	9,914	80,214	158,053
Infusion Problems	6	97,663	15,134	115,600	228,397
Tooth Inj & Patient Posit Prob	5	12,600	0	#	#
Lack Of Assistance/Care	5	67,135	7,663	44,550	119,348
Grand Total	**919**	**123,122,571**	**12,387,819**	**#**	**#**

Freedom of Information Request# 7774
Data correct as at: The end of every financial year

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Table 3: Number and Cost of Clinical Claims Closed between financial years '2014/15' and '2025/26' with NIL damages paid where the Specialty is 'Anaesthesia'. Broken down by Patient Sex and primary Cause.

ClaimOutcome	Nil Damages
ClosedSettled	Y

Patient Sex ---Primary Cause	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
Female	**343**	#	#
Causes with less than 5 claims	**47**	**294,806**	#
Intra-Op Problems	34	93,732	0
Fail To Warn-Informed Consent	34	78,677	0
Err With Agnt/Dose/Route/Selec	31	245,730	#
Intubation Problems	30	61,720	0
Inappropriate Treatment	24	99,025	0
Operator Error	23	48,369	0
Fail To Recog. Complication Of	23	80,875	0
Fail / Delay Treatment	22	142,574	0
Medication Errors	22	79,190	0
Incorrect Injection Site	11	63,852	0
Inadequate Monitoring Intra-Op	11	16,217	0
Other	9	28,179	0
Failure/Delay Diagnosis	8	25,216	0
Tooth Inj & Patient Posit Prob	7	#	0
Infusion Problems	7	8,942	0
Male	**177**	**721,157**	**0**
Causes with less than 5 claims	**27**	**96,826**	**0**
Intubation Problems	27	54,216	0
Inappropriate Treatment	20	112,302	0
Intra-Op Problems	17	88,620	0
Fail / Delay Treatment	14	55,946	0
Fail To Warn-Informed Consent	13	119,890	0
Medication Errors	11	16,223	0
Inadequate Monitoring Intra-Op	11	85,151	0
Err With Agnt/Dose/Route/Selec	10	25,635	0
Operator Error	9	32,581	0
Other	7	13,746	0
Tooth Inj & Patient Posit Prob	6	5,155	0
Application Of Excess Force	5	14,867	0
Grand Total	**520**	#	#