NHS Resolution

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May 2026
FOI_7710

The following information was requested on 06 February and clarified on 09 February 2026:

[On the 06 February, you requested]

I would like to place the following Freedom of information Request in relation to the number and cost of claims (Number of claims, Damages Paid, NHS Legal Costs paid, Claimant legal costs paid, Total paid) by NHS Trust and financial year (2020/21, 2021/22, 2022/23, 2023/24, 2024/25), under the following CMS Codes:

Primary Injury: Lung cancer

Specialty: Radiology

Primary Cause (Aggregate total and by cause): Fail / Delay Treatment; Failure To Interpret X-Ray; Failure/Delay Diagnosis; Wrong Diagnosis

[We replied on the 06 February with]

Thank you for your request to NHS Resolution. 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 do not have injury: lung cancer. We only have Loss of Lung or Lung disease. We also have the following:

- *Cancer*
- *Advanced stage cancer*
- *Benign tumour*
- *Malignant tumour*

Please, could you review the above guidance and let us know which injury you would be interested in?

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

[You replied on the 09 February with]

Very many thanks for your response, and my apologies for the lack of clarity in the request.

With regards injury I would be grateful if you were able to provide the aggregate totals (Number of claims, Damages Paid, NHS Legal Costs paid, Claimant legal costs paid, Total paid) for the following injury classifications:

- *Cancer*
- *Advanced stage cancer*
- *Malignant tumour*

If I am correct, understand that there is a free-text element to the recording of claims, and I was wishing to explore if it was possible to extract the above, for claims where "lung cancer" was specified under the free-text entry. I appreciate and accept that this may not provide as comprehensive an output as for the formal classifications (above).

I hope this answers your query, although please do feel free to reach out again if you require further clarification.

Our Response

Please find attached the requested 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 Guidance-note-Understanding-NHS-Resolution-data-updated

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 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.

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

Please find attached the following tables:

Table 1: Number of Clinical Claims and Incidents received between financial years '**2020/21**' and '**2024/25**' where the specialty is '**Radiology**', and the Primary Cause is either **'Fail / Delay Treatment', 'Failure To Interpret X-Ray','Failure/Delay Diagnosis' or 'Wrong Diagnosis'**, and the Primary Injury is either **'Cancer'**, **'Advanced stage cancer' or 'Malignant tumor'**. Broken down by **Trust name**.

Table 2: Number and Cost of Clinical Claims Closed between financial years **'2020/21'** and **'2024/25'** with a damages payment, where the specialty is **'Radiology'**, and the Primary Cause is either **'Fail / Delay Treatment', 'Failure To Interpret X-Ray','Failure/Delay Diagnosis' or 'Wrong Diagnosis'**, and the Primary Injury is either **'Cancer', 'Advanced stage cancer' or 'Malignant tumor'**. Broken down by **Trust name**. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure.

Please note: the tables broken down by Trust should <u>not</u> 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.

Low figures

We have not provided the information for low figures involved and grouped trusts with 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 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.

In regard to **question on free text entry for "lung cancer"**

Please note, we do not provide information contained within the free-text field as this information has proven to be incomplete and provided a misleading picture as there are a number of causes for claims and they are settled for a number of multi-factorial reasons and the primary cause and injury may not relate entirely to what has been entered into the short free-text field. We would also have to carry out a manual review of the individual cases identified from the free text description to ensure they are in fact relevant to your search criteria. This would be a time consuming exercise. As such, we have decided not to provide information on the incident description field.

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 estimate that it would take on average 20 minutes to locate, retrieve and extract the requested information from an individual file. It may therefore be the case that we would be able to examine only 54 files within 18 hours. We have provided in the attached tables the information that is readily available within the 18 hour limit.

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/

Freedom of Information Request# 7710
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.

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Data correct as at: The end of every financial year

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Table 1: Number of Clinical Claims and Incidents received between financial years '2020/21' and '2024/25' where the specialty is 'Radiology', and the Primary Cause is either 'Fail / Delay Treatment', 'Failure To Interpret X-Ray','Failure/Delay Diagnosis' or 'Wrong Diagnosis', and the Primary Injury is either 'Cancer', 'Advanced stage cancer' or 'Malignant tumor'. Broken down by Trust name.

Notified	Y
IsTrust	Y

Trust name	No. of Claims
Trusts with less than 5 claims (75 Trusts)	**155**
North Tees & Hartlepool NHS Foundation Trust	13
University Hospitals of Leicester NHS Trust	12
Worcestershire Acute Hospitals NHS Trust	11
Barnsley Hospital NHS Foundation Trust	10
Mid Yorkshire Teaching NHS Trust	10
York and Scarborough Teaching Hospitals NHS Foundation Trust	10
University Hospitals of North Midlands NHS Trust	8
Calderdale & Huddersfield NHS Foundation Trust	7
The Leeds Teaching Hospitals NHS Trust	7
University Hospitals Plymouth NHS Trust	6
United Lincolnshire Teaching Hospitals NHS Trust	6
University Hospitals of Derby and Burton NHS Foundation Trust	6
Northern Care Alliance NHS Foundation Trust	6
University Hospitals Sussex NHS Foundation Trust	5
Cambridge University Hospitals NHS Foundation Trust	5
Wirral University Teaching Hospital NHS Foundation Trust	5
South Tyneside and Sunderland NHS Foundation Trust	5
Grand Total	**287**

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Table 2: Number and Cost of Clinical Claims Closed between financial years '2020/21' and '2024/25' with a damages payment, where the specialty is 'Radiology', and the Primary Cause is either 'Fail / Delay Treatment', 'Failure To Interpret X-Ray','Failure/Delay Diagnosis' or 'Wrong Diagnosis', and the Primary Injury is either 'Cancer', 'Advanced stage cancer' or 'Malignant tumor'. Broken down by Trust name. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure.

ClaimOutcome	Damages Paid
ClosedSettled	Y
IsTrust	Y

Trust Name	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid	Total Paid
Trusts with less than 5 claims (73 Trusts)	**138**	**11,570,717**	**1,515,724**	**7,392,103**	**20,478,544**
Worcestershire Acute Hospitals NHS Trust	12	740,484	79,791	425,283	1,245,558
Barnsley Hospital NHS Foundation Trust	8	872,110	46,113	299,525	1,217,748
University Hospitals Plymouth NHS Trust	8	672,060	77,853	415,500	1,165,414
Mid and South Essex NHS Foundation Trust	7	501,045	67,735	383,409	952,189
Hull University Teaching Hospitals NHS Trust	6	730,974	114,142	286,984	1,132,100
Calderdale & Huddersfield NHS Foundation Trust	6	258,699	77,689	265,600	601,988
North Tees & Hartlepool NHS Foundation Trust	6	212,500	18,884	169,750	401,134
United Lincolnshire Teaching Hospitals NHS Trust	5	493,039	81,770	258,532	833,341
Northern Care Alliance NHS Foundation Trust	5	96,113	16,670	131,000	243,784
Mersey and West Lancashire Hospitals NHS Trust	5	789,151	82,122	334,500	1,205,773
Grand Total	**206**	**16,936,891**	**2,178,493**	**10,362,187**	**29,477,570**