NHS Resolution

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May 2026
FOI_7763

The following information was requested on 4 March and clarified on 6 March 2026:

On 4 March you requested:

Could you help with the following questions please:
1. How many claims per year for the last ten years are over £3m?
*2. How many/what percentage of **those** are to people that have not survived?*
3. Is it possible this has all been dealt with privately and not through NHS Resolution?
4. What percentage of claims go to court?
5. How likely is it NHS Resolution would need to delay payment into the next financial year, are there sufficient cash reserves to pay it this year?

[We replied on 6 March 2026 with]

Thank you for your request for information.

Please can we seek clarification in terms of the information we are able to provide to see if you are interested in the data available.

*In relation to question 2, other than **fatality claims**, we do not record claims outcomes in the manner described. However, we are able to provide aggregated information on all clinical claims with an injury of fatality.*

Will you be interested in the data we are able to provide?

Your request will be put on hold until we hear from you.

[You replied on 6 March 2026 with]

Yes please, anything relevant will be of assistance.

Our Response
We would be unable to comment on any individual claim for data protection reasons.

In terms of your request for general information, our answers are below:

Q1 – We believe that some of this information is publicly available in the following publication: [Annual-Report-Statistics-NHS-Resolution-2024_25-ACC-CHECKED-V2.xlsx]

Please refer to workshee**t C**.

Q2 –
We have carried out a search on the number of Clinical Claims closed between financial years ‘2015/16’ and ‘2024/25’ with a damages payment, where the Damages Paid are over £3,000,000 and the injury at any level is **'Fatality'**. This search resulted in fewer than 5 claims. We are unable to provide you with the low numbers involved. Please refer to our low numbers refusal notice below for further information.

Low figures
We have not provided the information for low figures involved 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.

Q3 – We would be unable to comment on any individual claim for data protection reasons (please see the above paragraph). All NHS Trusts in England are members of our largest clinical indemnity scheme, CNST. Under CNST requirements claims related to clinical negligence should be referred to NHS Resolution. Please see our website for details: Clinical Negligence Scheme for Trusts - NHS Resolution

Q4 – The percentage of claims that go to court is publicly available on our website here: NHS Resolution Annual report and accounts 2024/25 – please refer to page 45.

Q5 – NHS Resolution aims to resolve concerns fairly and swiftly. Claims are paid in line with their agreed settlement terms once all legal and administrative requirements have been met.

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
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