NHS Resolution

Reporting claims to NHS Resolution

June 2026

Contents

Introduction

This document sets out the requirements for when and how a member should report a new claim to NHS Resolution. It also provides other useful information such as what to expect once a claim has been reported and common definitions.

Members are required to have the necessary governance arrangements in place to be able to comply with this document [Sections 5.4 and 8.2 of the CNST Rules and Sections 5.4 and 9.1 of the LTPS rules].

We recommend that you always work from the electronic version of this guide. This is because the guidelines will evolve over time and accessing the electronic version will mean that you are working from the most recent version. We welcome your thoughts/comments on how to improve this document. Please send them to us by email at nhsr.serviceimprovementteam@nhs.net.

When a claim should be reported to NHS Resolution

It is important that you identify and, where appropriate, report potential claims to us as early as possible. This will allow us to consider what, if any, pro-active steps (e.g. an early admission, offer or an apology) could be taken to minimise associated claims and/or will allow us to commence appropriate investigations. The following table sets out the triggers for when a claim should be reported to NHS Resolution and the applicable timescales. NHS Resolution may also accept cases falling outside the reporting criteria at its discretion.

Please note that non-clinical claims received via the MOJ Portal do not need to be reported to us **save for** the two important exceptions detailed below (see 6 & 7).

No	Situation	Action Required	Timescale
1	**Serious incident** where investigations suggest there have been **failings in the care provided;** **and** There is the possibility of a **large-value claim** (i.e. damages >£500,000)	Report to NHS Resolution irrespective of whether or not a claim has been notified, or a disclosure request received. Report via the NHS Resolution Report and Manage a Claim Service.	As soon as possible but no later than 3 months from when you become aware of the matter

2	**Disclosure request (or some other indication that a claim is being considered – e.g. Limitation extension request) received;** **and** Internal investigation (e.g. complaint review or incident investigation) reveals **possibility of a claim with a significant litigation risk regardless of value.**	Report to NHS Resolution via the NHS Resolution Report and Manage a Claim Service.	As soon as possible but no later than 1 month from receipt of the request
3	**Letter of Claim** served; and/or **Part 36 offer** received; and/or **Proceedings** received.	Report to NHS Resolution via the NHS Resolution Report and Manage a Claim Service.	**Within 24 hours** of receipt
4	**Group Action** – i.e. any adverse issue which has the potential to involve a number of patients (e.g. failure of a screening service	Report to NHS Resolution irrespective of whether or not a claim has been notified, or a disclosure request received. Report via the NHS Resolution Report and Manage a Claim Service.	As soon as possible but no later than 1 month from when you become aware of the matter
5	**Serial offender** claims – i.e. claims arising from the alleged negligence and/or serious professional misconduct of a staff member affecting a number of patients.	Report to NHS Resolution irrespective of whether or not claim(s) have been notified Report via the NHS Resolution Report and Manage a Claim Service.	As soon as possible
6	**MOJ PORTAL ONLY: Defendant only – Claim Notification Form** received; **and** The covering letter confirms that **NHS Resolution have not been made aware of the claim via the MOJ Portal**	Report via the NHS Resolution Report and Manage a Claim Service.	Within 24 hours of receipt
7	**MOJ PORTAL ONLY: Defendant only – Claim Notification Form** received; **and** **No NHS Resolution contact received within 3 working days**	Contact NHS Resolution to discuss whether or not to report the claim to NHS Resolution.	No more than 3 working days after receipt of the notification form

8	**Notification of inquest** received; **and** **Civil claim** is or is likely to be pursued **based on the subject matter of the inquest which has a significant risk of succeeding;** **and** You wish to apply to the NHS Resolution for **inquest funding**.	Report to NHS Resolution via the NHS Resolution Report and Manage a Claim Service. or If the request is made during the course of a claim, email a completed Inquest Funding Request form to nhsr.claims.resolution@nhs.net ensuring the NHSR reference number is in the subject line (CLMXXXXXX).	No less than **1 month** from the inquest hearing date

9	**Maternity Incident meeting the Early Notification Scheme criteria*** All Early Notification Scheme referrals must be submitted via the Submit Perinatal Event Notification (SPEN) portal. Trusts are required to report all incidents that meet the Early Notification Scheme criteria* to MNSI via section 1 of the SPEN portal. Once confirmation is received that the case meets the criteria of a potential severe brain injury and MNSI are proceeding with an investigation then complete section 2 on the SPEN portal to report the case to **NHS Resolution**. *The criteria for an investigation by NHS Resolution is narrowed to those cases where the following clinical definition applies: "Babies who have an abnormal MRI scan where there is evidence of changes in relation to intrapartum hypoxic ischaemic encephalopathy (HIE)". This will ensure that the scheme is focused on those cases where there is potential for a high value compensation payment The EN team will not investigate intrapartum stillbirths or early neonatal deaths (within the first 0-6 days) of any cause *Additional information: The Trust are responsible at the Duty of Candour (DOC) stage to inform the family of both the MNSI and ENS investigation. If the family does not proceed with the MNSI investigation, they can request an ENS investigation. In such circumstances, the Trust are required to notify NHS Resolution via the SPEN portal and provide relevant documents to enable preliminary clinical triage and where appropriate, onward clinical review.*	Report to MNSI in accordance with their requirements and reporting criteria via the SPEN portal Report to NHS Resolution via the SPEN portal.	As soon as the incident occurs complete section 1 of the SPEN portal to notify MNSI of the event. Once you have received confirmation that the event meets MNSI's maternity referral criteria, MNSI are proceeding with an investigation, and have provided you with a reference number, please return to the task list and complete section 2 of the SPEN portal to notify NHSR's Early Notification Scheme.

Please do not hesitate to contact your NHS Resolution Operational Team Leader for advice if you are unsure whether or not a potential claim should be reported to us.

All members should be familiar with the NHS Resolution guidance in 'Saying Sorry' which confirms that we will never withhold cover because an apology or explanation has been given. If you need further help or support from NHS Resolution in this area you should not hesitate to contact your NHS Resolution Operational Team Leader.

We recognise that being involved in an incident that may lead to a claim can be extremely stressful. Please refer to the section Support for healthcare staff on our website. Here you will find links to a whole range of organisations that NHS healthcare staff can access for support.

What documents should be sent to NHS Resolution when reporting a claim

Providing us with the correct documents/information at the outset will help us to process the claim without delays. This section will help you to understand the sort of information we require and the documentation we have prepared to help support you in this regard.

The NHS Resolution Report and Manage a Claim Service will capture key information and import this into the case management system on approval.

Requests for inquest funding (excluding EN) should be submitted using the NHS Resolution Report and Manage a Claim Service. Funding can be requested without a letter of claim/proceedings or a disclosure request. However, if the request is made during the course of a claim, email a completed Inquest Funding Request form to nhsr.claims.resolution@nhs.net ensuring the NHSR reference number is in the subject line (CLMXXXXXX).

LTPS claim report forms still need to be submitted and sent in addition to the Useful Documents Guide for claims not reported to us in the MOJ portal.

You have a free text section to add a covering message to the NHS Resolution approver. This should be used to highlight matters such as any agreed limitation extension(s), associated disciplinary issues, whether there are potential third party issues, listed inquest date etc.; and we ask you provide additional data on:

- why the claim is being reported to NHS Resolution;
- when you were first notified of the claimant's intention to pursue a claim;
- where the incident took place;
- whether there was an associated complaint and/or incident investigation;
- the estimated valuation of the claim if successful; and
- the probability of the claim succeeding.

Please provide us with any outstanding information/updated documentation within 2 weeks of reporting the claim to us.

All key documentation should be uploaded at the time of notification as separate enclosures, where possible. If documents are being submitted after this, please send the documents to nhsr.claims.resolution@nhs.net ensuring the NHSR reference number is in the subject line (CLMXXXXXX). For example, an incident investigation should be sent to us in the following format:

- Final investigation report and action plan;
- Final witness comments upon which the investigation report was based; and
- The remaining incident file containing draft reports, draft statements etc.

When reporting a claim using the NHS Resolution Report and Manage a Claim service, upload the following documents, if available:

- Letter of Notification or Letter of Claim or some other request for compensation from the patient or their solicitors;
- Defendant only – Claim Notification Form if the matter is a MOJ Portal claim;
- Claim Form, Particulars of Claim – court documents commencing a negligence claim;
- All correspondence with the patient or their solicitors;
- Investigation Report (Patient Safety Incident Investigation Report, SUI, RCA etc.);
- Complaint correspondence/complaint file; and
- Written comments, witness statements and reports you may have previously prepared, for example in preparation for a complaint response, inquest or regulatory hearing that relates to the relevant incident that is, or may be, the subject of a claim.

Members are required to report all clinical and LTPS (including inquest funding requests) claims to NHS Resolution (NHSR). NHS Resolution Report and Manage a Claim (Login Page) replaces NHSR's Claims Reporting Wizard and has been designed to provide an intuitive and reliable platform to submit new and potential claims (incidents).

All users must register with an individual account to gain access. If you have not yet registered please submit a request on the NHSR website.

Please note, all Early Notification (EN) matters must be reported through SPEN as per section 9 in the table above.

How to report a PES claim to NHS Resolution

Members are required to report a PES claim by completing a PES claim report form and emailing the completed form to your Non-clinical NHS Resolution Operational Team Leader or Technical Lead.

What you can expect from us once a claim has been reported

Members are referred to the Claims Management Membership Charter which we will review and update periodically.

What we expect from you once a claim has been reported

- We will expect you to preserve the necessary notes, records and other key documentation;
- We will expect you to respond promptly to our requests for instructions;
- We will expect you to keep your members of staff updated as to the progress of a particular claim and its outcome;
- We will expect you to help ensure that any learning from this claim is considered by the relevant internal department; and
- We will expect you to contact us to discuss any potential issues as and when they arise.

Key definitions

Terminology	Definition
Notification date	The date you were first made aware of the likelihood that a claim was or was likely to be pursued – e.g. receipt of a request for disclosure of medical records.
Incident date	Date of the incident noting that the earliest date should be provided where multiple allegations are involved. For Early Notification cases this will be the child's date of birth.
Description of incident	Brief summary of the key facts involved in the claim. This should **not** include any information that could identify the patient or any member of staff or contain any specific dates/location details.

Queries

Please do not hesitate to contact us should you wish to discuss the contents of this document. Queries should be directed to your designated Operational Team Leader in the first instance, or one of the Deputy Heads of Claims Operations. For queries relating to Early Notification matters, please direct these to Head of Early Notification (Legal).

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Version control

Date of Change	Version	Brief summary of changes
April 2014	1.0	• Simplification of reporting guidelines for both clinical and non-clinical schemes with merger into one document • Dispensed with the need for Preliminary Analysis to be submitted with new claims • Introduction of Claim Report Forms for clinical and non- clinical claims and updated inquest funding request form • Introduction of Useful Document checklists to be used when reporting claims to NHS Resolution • Introduction of Witness Details Forms • Introduction of LTPS specific documents such as the Earnings Schedule and witness statement templates
May 2017	2.0	• Removal requirement for claim report forms when reporting clinical claims • Change in inquest funding notifications • Addition of Early Notification Reporting
September 2022	3.0	• Removal of requirement for Useful Documents • Updating reference to Extranet documents • Update of Early Notification Reporting • Update of job titles • Routine review
July 2025	4.0	• Update to add CaseHub references and NHS Resolution Report and Manage a Claim (Login Page) service information • Update of branding guidelines
May 2026	5.0	• Updated to add CaseHub references for EN matters and to include reporting via SPEN
June 2026	6.0	• Updated to add CaseHub references for LTPS

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