



Resolution

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April 2020
FOI_4350 & FOI_4351

The following information was requested on 11 February 2020:

Subject: FOI Request - Medication Errors (Part 1)

I would like to obtain specific information regarding any negligence claims related to medication errors received by NHS Resolution. For the purpose of this request, we are defining medication errors as any patient safety incident where there has been an error in the process of prescribing, preparing, dispensing, administering, monitoring or providing advice on medicines.

1) More specifically, we are interested in receiving the following information for each year in the period from 2013 to 2019 (please include total and year-by-year breakdown):

- a. The number of negligence claims received by NHS resolution related to medication errors in the secondary care environment. Please include a breakdown of the categories of medication errors (e.g. wrong medicine administered, wrong prescription, etc.);*
- b. The number of negligence claims related to medication errors in the secondary care environment that have been settled out of court;*

Subject: FOI Request - Medication Errors (Part 2)

- c. The number of claims related to medication errors where payment of damages was made;*
- d. The monetary amount of damages paid by NHS Resolution for claims related to medication errors;*
- e. Details about the share of negligence claims related to medication errors that resulted in severe consequences for the patients.*

Our Response

By way of advice and assistance (and further to our duties under s. 16 FOIA): Our overarching claims management system (CMS) databases is currently set up to primarily record numerical and pre-defined field-based data, rather than free text (which is contained within the individual case files). For example although we do have a pre-defined cause code called medication error, we are not able to drill further into the precise detail of these claims without interrogating each claim file. We are not able to breakdown the categories of medication errors in the way you have suggested.

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'.

As you will see from the attached report we have handled over 1000 cases with a definite 'medication error' element during the period specified. Assuming (and this is optimistic) that it would take only 5 minutes per case to review each case to establish the precise details of the claims, this would exceed 18 hours work and in our view would place a disproportionate burden on NHS Resolution.

This means that we are unable to provide (such as it may be held in that format) the precise detail of the medication error made.

Please find attached the information we are able to provide.

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(3)(a)(i) of the Freedom of Information 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. 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.

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 [Tinku Mitra](#), Head of Corporate and Information Governance 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 Medication Errors Claims received between financial years 2013/14 to 2018/19](#)

[Table 2: Number and Cost of Medication Errors Claims Closed/Settled with damages paid between financial years 2013/14 to 2018/19](#)

[Table 3: Number and Total Cost of Medication Errors Claims Closed/Settled with damages paid settled out of court between financial years 2013/14 to 2018/19](#)

[Table 4: Injury breakdown of Medication Errors Claims received between financial years 2013/14 to 2018/19](#)

**Table 1: Number of Medication Errors Claims received between financial years
2013/14 to 2018/19**

Notifications	Y
Clinical_NonClinical	Clinical

Notification Year	No. of Claims
2013/14	272
2014/15	316
2015/16	340
2016/17	291
2017/18	292
2018/19	269
Grand Total	1,780

Table 2: Number and Cost of Medication Errors Claims Closed/Settled with damages paid between financial years 2013/14 to 2018/19

Year of Closure (Settlement Year for PPOs)	No. of Claims	Damages Paid
2013/14	115	9,200,334
2014/15	144	8,808,712
2015/16	140	6,544,518
2016/17	198	8,160,333
2017/18	188	9,925,828
2018/19	191	8,499,006
Grand Total	976	51,138,731

Table 3: Number and Total Cost of Medication Errors Claims Closed/Settled with damages paid settled out of court between financial years 2013/14 to 2018/19

Year of Closure (Settlement Year for PPOs)	No. of Claims	Total Paid
2013/14	91	3,100,063
2014/15	113	3,997,088
2015/16	100	3,030,756
2016/17	142	4,031,130
2017/18	128	3,517,930
2018/19	133	3,444,875
Grand Total	707	21,121,842

Closed_Settled	Y
Clinical_NonClinical	Clinical
Claim_Outcome_FOI	Damages Paid
Litigated_NotLitigated	Not Litigated

Table 4: Injury breakdown of Medication Errors Claims received between financial years 2013/14 to 2018/19

Closed_Settled	Y
Clinical_NonClinical	Clinical
Claim_Outcome_FOI	Damages Paid

Injury1L1	No. of Claims
Addiction/Dependency	7
Adtnl/unnecessary Operation(s)	25
Advanced Stage Cancer	#
Amputation - Lower	#
Amputation - Upper	#
Anaesthetic	#
Anaphylact Shock/Allergic Shock/allergy	71
Bladder Damage	#
Blindness	5
Bowel Damage/ Dysfunction	#
Brain Damage	16
Bruising/ Extravasation	6
Burn(s)	6
Cancer	#
Cardiac Arrest	28
Cardiovascular Condition	9
Cerebral Palsy	#
Chromosomal Abnormality	#
Chronic Fatigue Syndrome	#
Cosmetic Disfigurement	5
Deafness	6
Dental Damage	#
Epilepsy	9
Fatality	132
Fistula	#
Fracture	8
Hemiparesis	#
Hospital Acquired Infection	#
Incontinence	#
Infectious Diseases	#
Infertility	#
Joint Damage	#
Liver Damage	#
Lung Disease	#
Malnutrition	#
Multiple Disabilities	#
Multiple Injuries	7
Nerve Damage	11
Not Specified	#
Osteoporosis	#
Other	52
Other Infection	12
Other Visual Problems	15
Paraplegia	#
Partial Hearing Loss	#

Table 4: Injury breakdown of Medication Errors Claims received between financial years 2013/14 to 2018/19

Closed_Settled	Y
Clinical_NonClinical	Clinical
Claim_Outcome_FOI	Damages Paid

Injury1L1	No. of Claims
Partial Paralysis	#
Perforation	#
Pressure Sores	5
Psychiatric/Psychological Dmge	106
Reduced Life Expectancy	#
Renal Damage/ Failure	17
Respiratory Disorder/ Failure	21
Scalp Damage	#
Scarring	#
Stillborn	#
Stroke	24
Tardive Dyskinesia	#
Tendon Damage	#
Thrombosis/Embolism	43
Thyroid Condition	#
Tissue Damage	#
Ulcerative Colitis	#
Unnecessary Pain	257
Unwanted Pregnancy	#
Viral Infection	#
Grand Total	976