

INFORMATION  
ANALYSIS  
DIRECTORATE



# Clinical / Social Care Negligence Cases

in Northern Ireland (2018/19)

## Reader Information

Background	This statistical release summarises information collected from Health & Social Care (HSC) Trusts, Agencies and Legacy Health and Social Services (HSS) Boards on clinical/social care negligence cases in Northern Ireland open during the year ending 31 <sup>st</sup> March 2019. Information includes all cases currently open and settled, including those withdrawn or closed with details of any monies paid.
Authors	Michael O'Donnell, Kieran Taggart, Siobhán Morgan.
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Issued by	Hospital Information Branch Information & Analysis Directorate Department of Health Stormont Estate Belfast, BT4 3SQ
Statistician	Michael O'Donnell
Email	<a href="mailto:Michael.O'Donnell@health-ni.gov.uk">Michael.O'Donnell@health-ni.gov.uk</a>
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# Key Points

## Payments in 2018/19

- During 2018/19, £29.2 million was paid on clinical / social care negligence cases in Northern Ireland (Tables 1 & 2).
- Of the £29.2 million paid on clinical / social care negligence cases in 2018/19, almost three quarters (72.7%, £21.2m) was paid in damages, £5.8 million (19.9%) in plaintiff costs and £2.1 million (7.4%) in defence costs (Figure 2, Table 2).
- During the last five years, the amount paid on clinical / social care negligence cases decreased by £12.1 million (29.4%), from £41.4 million in 2014/15 to £29.2 million in 2018/19 (Table 1).

## Payments to date

**704**

New cases opened during 2018/19

**£138.3m**

Paid to date on the 3,995 cases open at any stage during 2018/19

**789**

Cases closed during 2018/19

- During 2018/19, 3,995 clinical / social care negligence cases were open at any stage, 394 (10.9%) more than in 2014/15 (3,601) (Table 3).

- In 2018/19, 704 new cases were opened, 789 cases were closed, whilst 2,995 cases remained open and 211 cases had been settled at 31<sup>st</sup> March 2019 (Figure 5, Tables 4 - 8).
- Clinical / social care negligence cases open at any stage in 2018/19, had been open on average for 2.8 years, slightly longer than 2017/18 (2.6 years) (Figure 11).
- Over half (54.2%, 2,164) of all cases open in 2018/19, related to four specialties; 'Obstetrics' (712), 'Accident & Emergency' (670), 'General Surgery' (413) and 'Trauma and Orthopaedics' (369) (Table 14).
- A total of £138.3 million has been paid to date on the 3,995 clinical / social care negligence cases which were open at any stage during 2018/19. Over three quarters (76.9%, £106.3m) had been paid in damages and £32.0 million (23.1%) paid out in legal costs (defence and plaintiff) (Table 15).
- Over half (56.2%, £77.7m) of the amount paid out on clinical / social care negligence cases open at any stage during 2018/19 related to the 'Obstetrics' speciality, of which, four fifths (80.7%, £62.7m) had been paid in damages (Table 16).

# INTRODUCTION

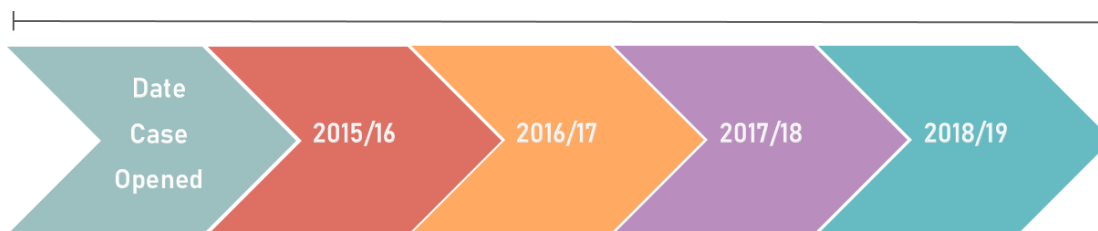
The information presented in this publication is sourced from two Departmental statistical returns:

- (i) **CN1a** - aggregate return that collects information on clinical/social care negligence cases including the **amount paid out each quarter**.
- (ii) **CN1** – annual patient level return on clinical/social care negligence cases open at any stage during the year, including the **amount paid (damages or legal costs) on each case since the case opened**.

## Financial Payments Included in the CN1 and CN1a Information Returns

### CN1

Refers to amount paid in total every year since a case opened until it closed



### CN1a

Refers only to amount paid during a financial year (1<sup>st</sup> April – 31<sup>st</sup> March)

## What is Clinical/Social Care Negligence?

In this statistical report, clinical/social care negligence is defined as:

*“A breach of duty of care by members of the health and social care professions employed by HSC organisations or by others consequent on decisions or judgments made by members of those professions acting in the course of their employment, and which are admitted as negligent by the employer or determined as such through the legal process”.*

# SECTION 1

## PAYMENTS MADE IN 2018/19

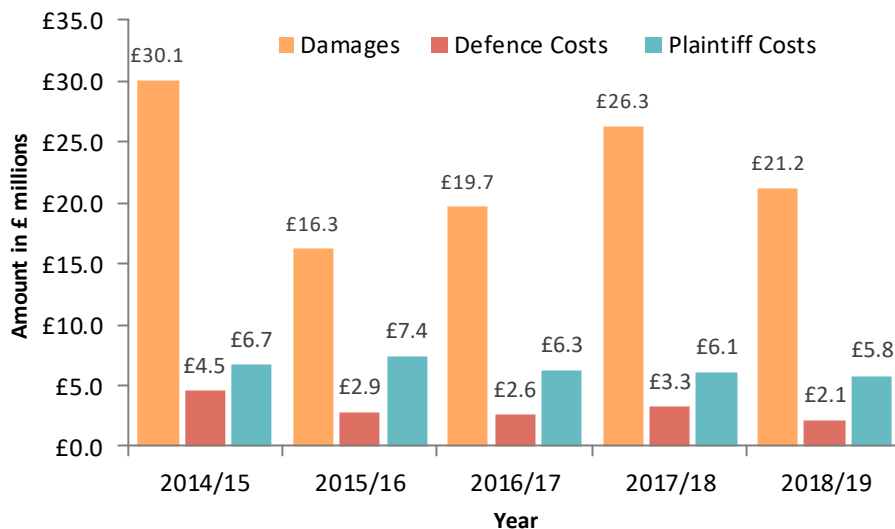
This section details the amount of money paid out during each year, by HSC Trust / Legacy HSS Boards and payment type.

During 2018/19, £29.2 million was paid on clinical / social care negligence cases in Northern Ireland, with almost three quarters (72.7%, £21.2 m) paid in damages, £5.8 million (19.9%) in plaintiff costs and £2.1 million (7.4%) in defence costs (Table 2).

During the last five years, the amount paid on clinical / social care negligence cases decreased by £12.1 million (29.4%), from £41.4 million in 2014/15 to £29.2 million in 2018/19 (Table 1).

The amount paid in damages in 2018/19 was £8.9 million (29.4%) less than in 2014/15, defence costs decreased by £2.4 million (52.6%) and plaintiff costs decreased by £0.9 million (13.3%) (Figure 1).

**Figure 1: Amount paid out during last five years, by type of payment**



Source: CN1a

**£29.2m**  
Paid on cases in  
2018/19

**£12.1 m**  
Decrease in the  
amount paid over  
the last five years

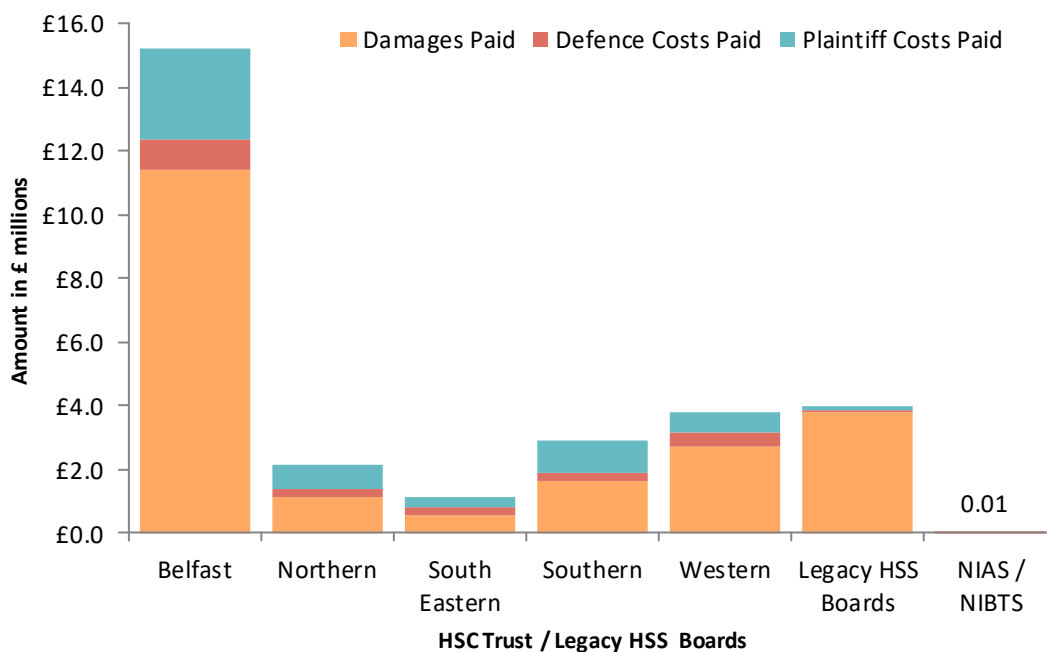
Over half (52.1%, £15.2 m) of all monies paid in 2018/19 were by the Belfast HSC Trust, whilst the Northern Ireland Ambulance Service (NIAS) and the Northern Ireland Blood Transfusion Service (NIBTS) paid the lowest amount (0.03%, £0.01 m) (Figure 2, Table 2).

Between 2014/15 and 2018/19, the South Eastern HSC Trust reported the largest decrease (£5.5m, 82.7%) in the amount paid on clinical / social care negligence cases, from £6.6 million to £1.4 million (Table 1).

During 2018/19, the percentage of all monies paid out in legal costs<sup>1</sup> ranged from 5.6% (£0.2m) of cases in the Legacy HSS Boards<sup>2</sup> to 49.8% (£0.6m) of cases in the South Eastern HSC Trust (Figure 2, Table 2).

**£15.2 m**  
Half of all monies paid in 2018/19 was by the Belfast HSC Trust

**Figure 2: Amount paid out during 2018/19, by HSC Trust / Legacy HSS Board and type of payment**



Source: CN1a

<sup>1</sup> Legal Costs = Defence Costs + Plaintiff Costs

<sup>2</sup> Legacy HSS Boards are responsible for alleged incidents that occurred prior to 1993, regardless of the date the claim is made.



# SECTION 2

## CASES OPEN AT ANY STAGE DURING THE YEAR

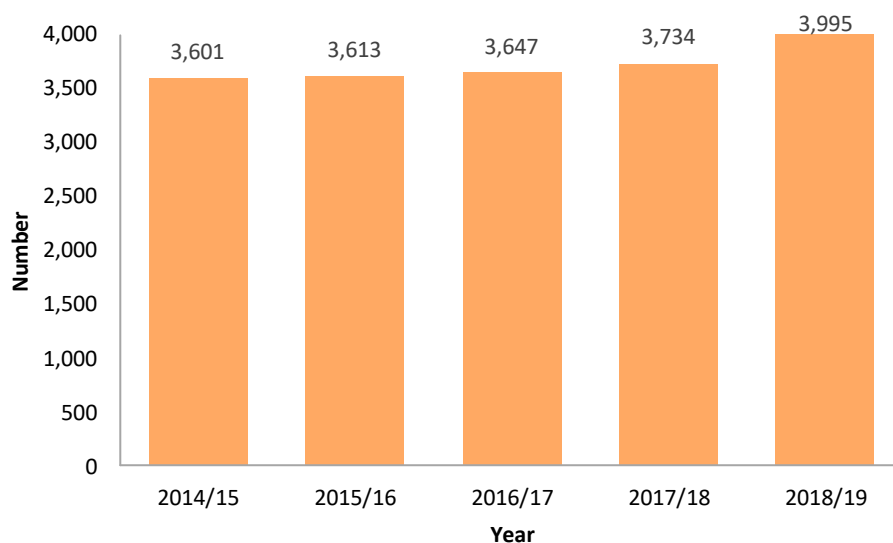
This section details the number of clinical/social care negligence cases open at any stage during each of the last five years. Readers should note that once a case is opened it will be included for each year that it remains open or settled. The year in which a case is closed, is the last year it will be included.

During 2018/19, 3,995 clinical / social care negligence cases were open at any stage, an increase of 394 (10.9%) since 2014/15, from 3,601 to 3,995 (Figure 3, Table 3).

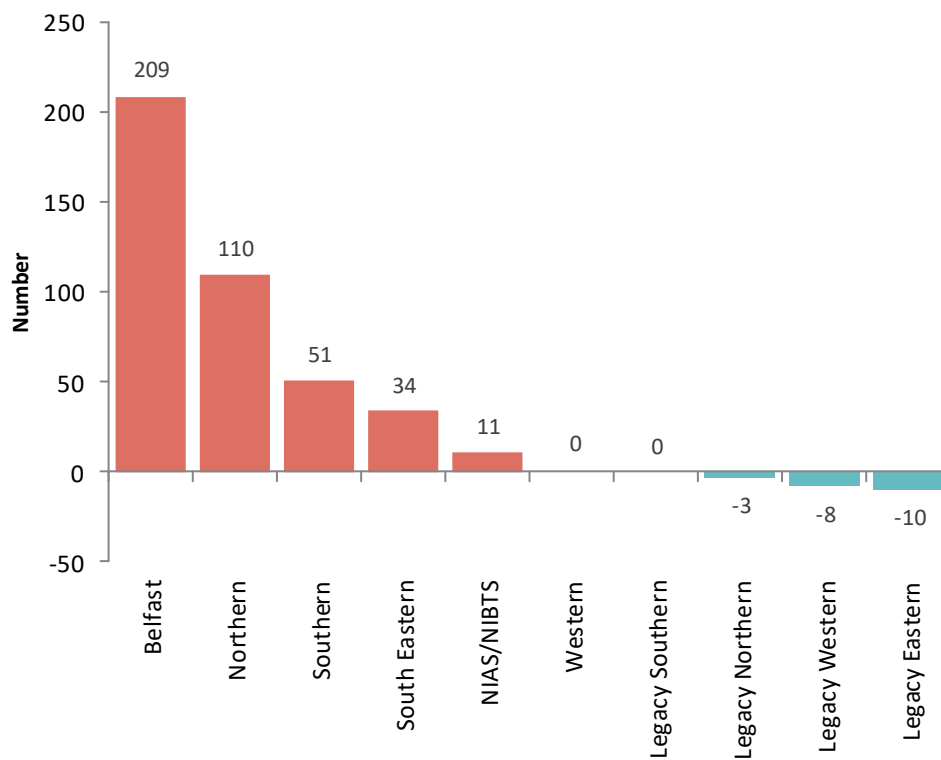
**394**

More cases open in 2018/19 than five years ago

**Figure 3: Cases open at any stage, by HSC Trust / Legacy HSS Boards (2014/15 – 2018/19)**



**Figure 4: Change in the number of cases open during the year, by HSC Trust / Legacy HSS Board (2014/15 - 2018/19)**



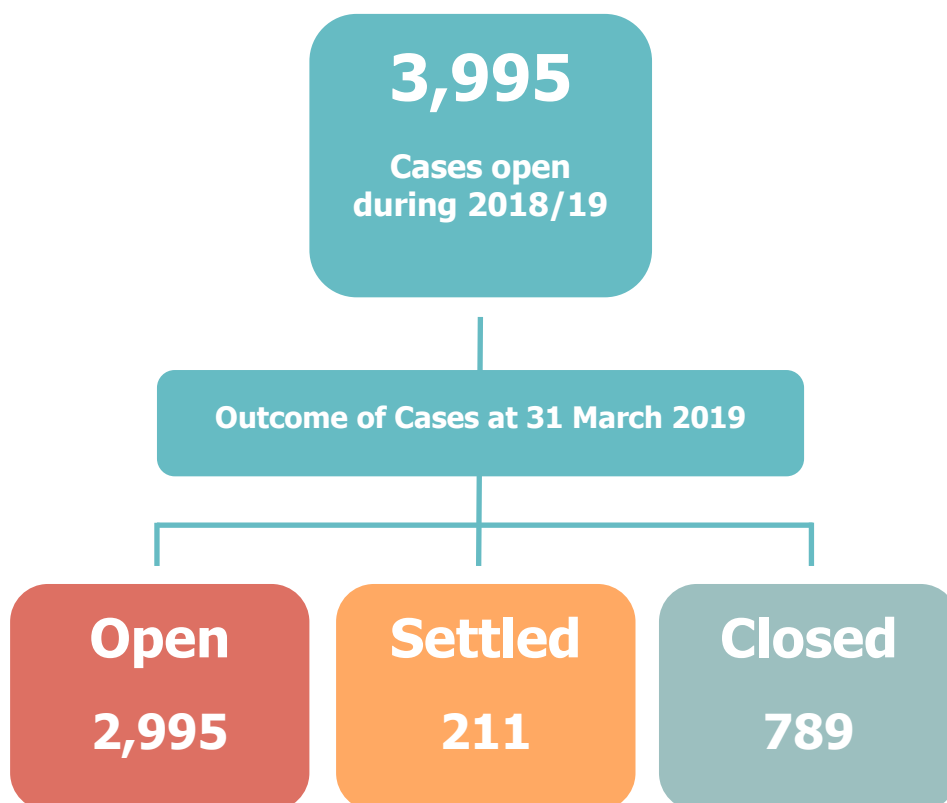
Since 2014/15, the Belfast HSC Trust reported the largest increase in the number of cases open (209, 15%), from 1,395 to 1,604 in 2018/19 (Figure 4, Table 3).

Between 2014/15 and 2018/19, the number of cases which were the responsibility of the Legacy HSS Boards decreased in all Boards with the exception of the Legacy Southern Board, which remained unchanged (10) (Figure 4, Table 3).

## Outcome of cases at 31<sup>st</sup> March 2019<sup>3,4</sup>

Three quarters (75%, 2,995) of the 3,995 cases open at any stage in 2018/19 remained open at 31<sup>st</sup> March 2019, 211 (5.3%) had been settled and 789 (19.7%) had been closed (Figure 5, Table 4).

**Figure 5: Outcome of cases (open / settled / closed) at 31<sup>st</sup> March 2019**



Two fifths (40.2%, 1,604) of all cases open at any stage during 2018/19 were in the Belfast HSC Trust, 599 (15%) in the South Eastern HSC Trust, 595 (14.9%) in the Northern HSC Trust, 558 (14%) in the Southern HSC Trust, 526 (13.2%) in the Western HSC Trust, 92 (2.3%) in the Legacy HSS Boards and 21 (0.5%) in the NIAS / NIBTS (Table 4).

<sup>3</sup> 'Cases Open During' refers to the number of cases that were open at any stage during 2018/19. The number of open, settled and closed cases refers to the position at 31<sup>st</sup> March 2019, the sum of which equals the total number of cases open during the year.

<sup>4</sup> Refer to Definitions, Notes 2, 3 & 4.

## Open cases

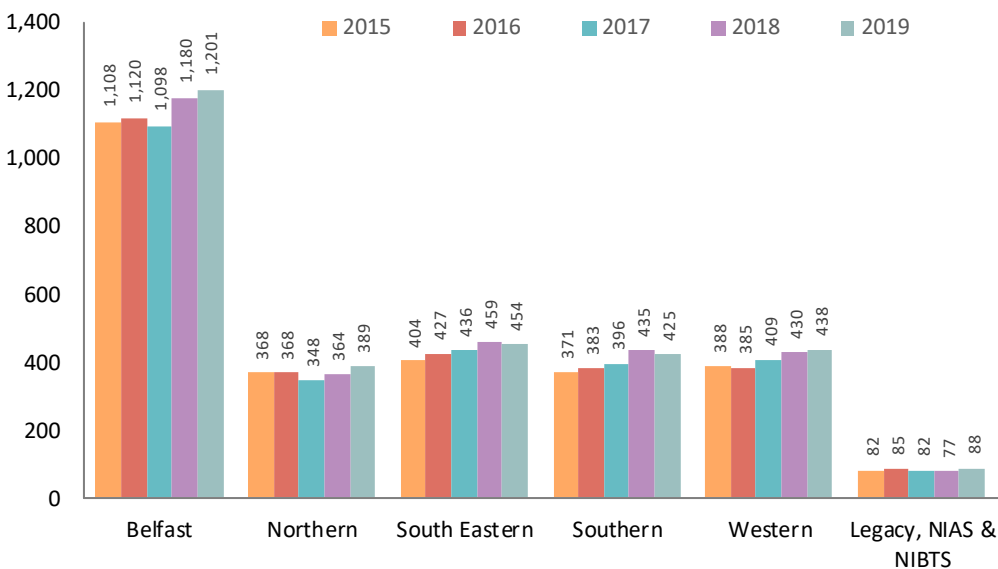
An open case refers to any case for which an official letter of notification of the intention to proceed with a case has been received, and which had not been settled or closed by the last day of the year (31<sup>st</sup> March).

At 31<sup>st</sup> March 2019, 2,995 cases remained open in Northern Ireland. Across HSC Trusts, the number of cases open ranged from 88 in the Legacy HSS Boards, NIAS & NIBTS to 1,201 in Belfast HSC Trust (Figure 6, Table 5).

Since 2015, the Belfast HSC Trust reported the largest increase in the number of cases open at 31<sup>st</sup> March (93, 8.4%), from 1,108 to 1,201 in 2019 (Figure 6, Table 5).

**2,995**  
Cases remained  
open at 31<sup>st</sup>  
March 2019

**Figure 6: Cases open at 31<sup>st</sup> March (2015 – 2019)**



## Settled cases<sup>5</sup>

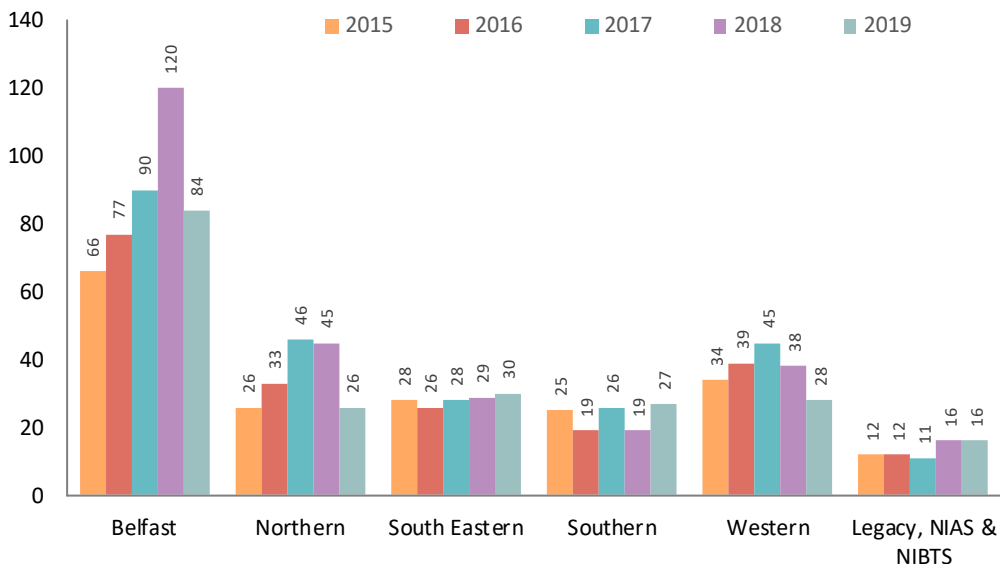
A settled case refers to any settled case that was not subsequently closed by the end of 2018/19. If a case was settled and then closed within the same financial year it is recorded as closed as at 31<sup>st</sup> March.

At 31<sup>st</sup> March 2019, 211 cases were settled in Northern Ireland. Of these, 84 (39.8%) were settled in the Belfast HSC Trust, 30 (14.2%) in the South Eastern HSC Trust, 28 (13.3%) in the Western HSC Trust, 27 (12.8%) in the Southern HSC Trust, 26 (12.3%) in the Northern HSC Trust and 16 (7.6%) in the Legacy HSS Boards, NIAS & NIBTS (Figure 7, Table 6).

The number of cases settled increased or remained the same in each HSC Trust with the exception of the Western HSC Trust since 2015. The Belfast HSC Trust reported the largest increase (27.3%, 18) in cases settled during this period, from 66 to 84 at 31<sup>st</sup> March 2019 (Figure 7, Table 6).

**211**  
Cases were  
settled at 31<sup>st</sup>  
March 2019

**Figure 7: Cases settled at 31<sup>st</sup> March (2015 – 2019)**



<sup>5</sup> Cases settled at 31<sup>st</sup> March 2018 include 'Periodic Payment Order' cases which may have been settled before 1<sup>st</sup> April 2017. For more information see p.27.

## Closed cases

A closed case refers to:

- (i) a case where the decision has been made to withdraw or not proceed with no money being awarded; or
- (ii) a case where all monies awarded have been paid, and there is no longer any activity.

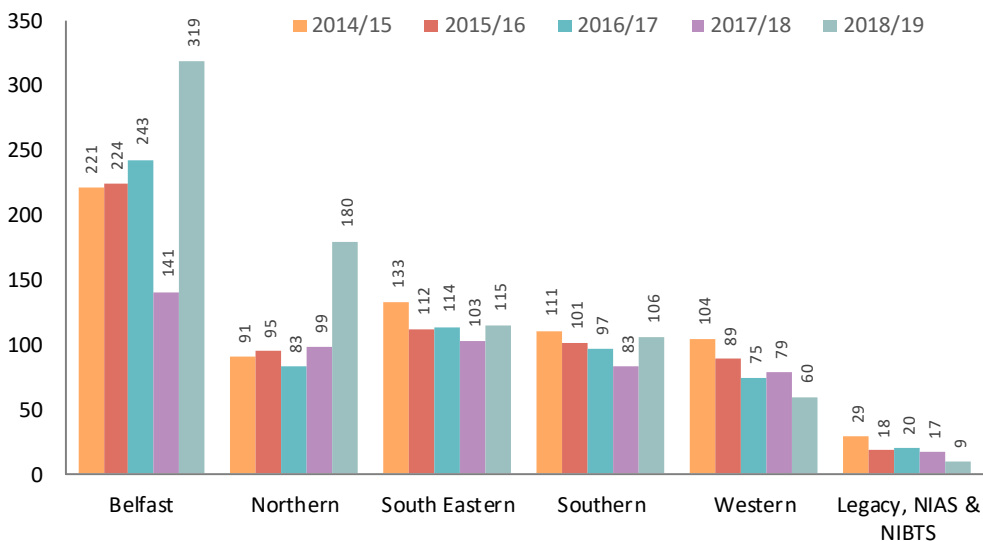
A case is officially closed when the Directorate of Legal Services (DLS) issue a letter stating that the case has been closed.

During 2018/19, 789 cases were closed in Northern Ireland. Of these, 319 cases (40.4%) were closed in the Belfast HSC Trust, 180 (22.8%) in the Northern HSC Trust, 115 (14.6%) in the South Eastern HSC Trust, 106 (13.4%) in the Southern HSC Trust, 60 (7.6%) in the Western HSC Trust and 9 (1.1%) in the Legacy HSS Boards, NIAS & NIBTS (Figure 8, Table 7).

Since 2014/15, the number of cases closed in the Belfast HSC Trust increased from 221 to 319 in 2018/19. During this period, the number closed in the Northern HSC Trust almost doubled, from 91 to 180 (Figure 8, Table 7).

**789**  
Cases were closed  
during 2018/19

**Figure 8: Cases closed during the year (2014/15 - 2018/19)**



## New cases

A new case refers to any case opened during the financial year i.e. 1<sup>st</sup> April 2018 to 31<sup>st</sup> March 2019.

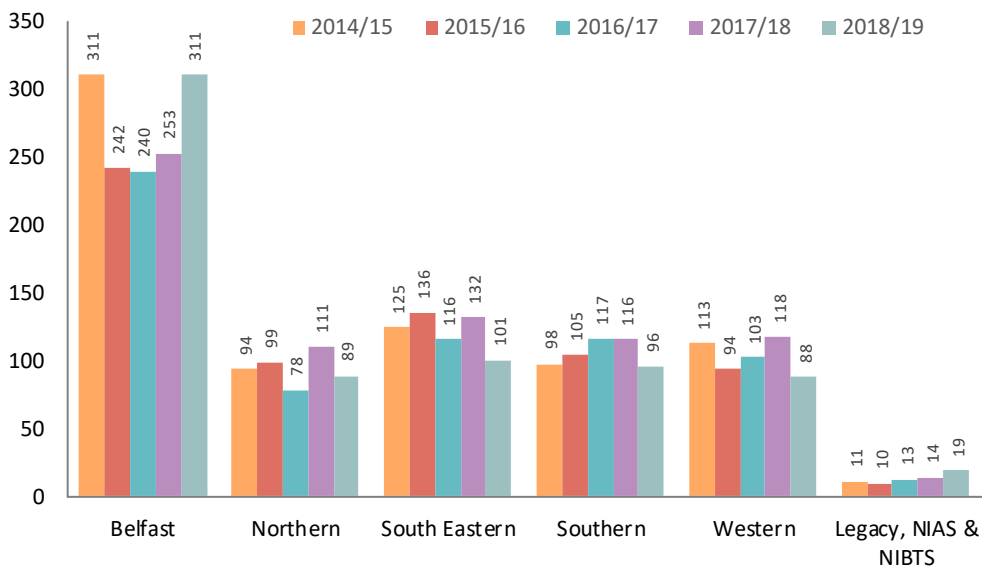
During 2018/19, 704 new cases were opened in Northern Ireland. The number of new cases opened ranged from 19 in the Legacy HSS Boards, NIAS & NIBTS to 311 in the Belfast HSC Trust (Figure 9, Table 8).

Since 2014/15, the number of new cases opened decreased or remained the same in each HSC Trust with the exception of the Legacy HSS Boards, NIAS & NIBTS, which increased slightly from 11 to 19 in 2018/19 (Figure 9, Table 8).

# 704

New cases were opened in 2018/19

**Figure 9: New cases opened during the year (2014/15 - 2018/19)**



## Year of incident

The information below presents the number of clinical/social care negligence cases that were open at any stage during 2018/19, by the year in which the alleged incident occurred.

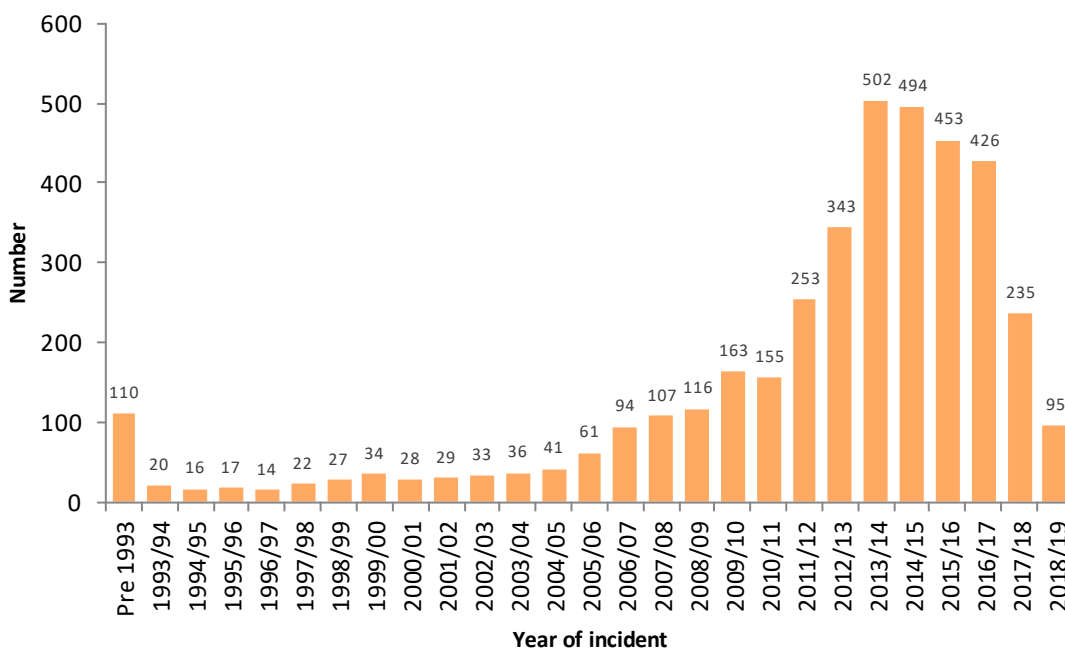
Information on the date of the alleged incident was recorded for 98.2% (3,924) of all cases open in 2018/19<sup>6</sup>, slightly lower than 2017/18 (98.7%) (Table 9).

It should also be noted that cases may not be lodged until several years after the date of the alleged incident. This would be expected in cases such as those relating to pregnancy and childbirth, where there may be a delay in the outcome of the disease or disorder.

Over two fifths (43.4%, 1,703)<sup>7</sup> of cases related to incidents within the last five years, whilst 110 (2.8%) related to incidents prior to 1993 (Figure 10, Table 9).

**43%**  
Of cases open related to incidents that occurred in the last five years

**Figure 10: Cases open by year of incident**



<sup>6</sup> Where the date of the alleged incident was not recorded, the year of incident has been recorded as unknown.

<sup>7</sup> Refers to cases with a known incident date.



## Age of case

The age of a case is based on the difference between the date the case was opened and 31<sup>st</sup> March 2019 or the date the case was settled or closed.

Almost two thirds (62.3%, 1,866) of the 2,995 cases that remained open at 31<sup>st</sup> March 2019, had been open for less than 3 years, whilst 71 (2.4%) had been open for 10 years or more (Table 10).

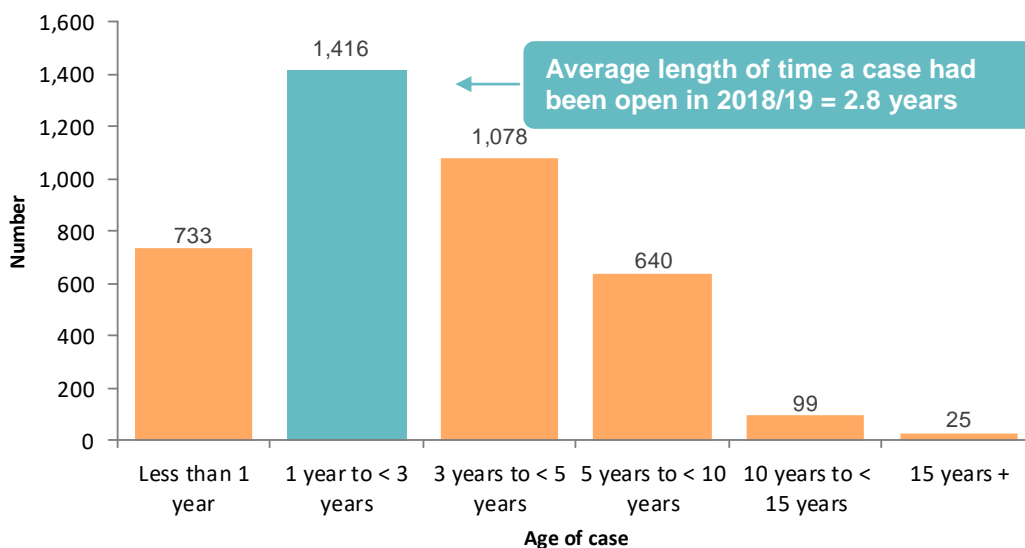
Over three fifths (65.9%, 139) of cases settled had been open for 3 - 10 years at 31<sup>st</sup> March 2019, whilst 59 (28.0%) had been open for less than three years (Table 10).

Almost two thirds (65.6%, 516) of cases closed during 2018/19 had been open for less than 5 years (Table 10).

Cases open at any stage in 2018/19, had been open on average for 2.8 years, slightly longer than 2017/18 (2.6 years) (Figure 11).

**2.8 Years**  
Average time a case had been open in 2018/19

**Figure 11: Cases open at any stage during the year, by age of case (2018/19)<sup>8</sup>**



<sup>8</sup> The age of four cases is unknown

## Age at date of alleged incident<sup>9</sup>

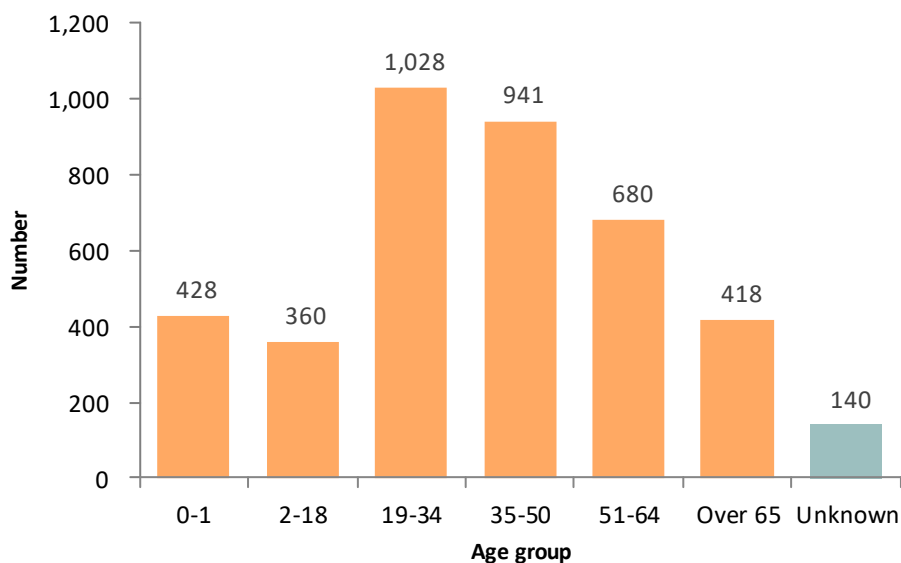
Age, at the time of the alleged incident, was available for 3,855 (96.5%) clinical / social care negligence cases open at any stage during 2018/19. On a few occasions the relevant HSC Trust/ Legacy HSS Board may not initially have been informed of the date of the alleged incident or the date of birth of the patient, in these instances, age at the date of the alleged incident is unknown (Figure 12).

Since 2014/15, the number of cases open has increased in each age group, with the highest number recorded in the 19-34 (1,028) age group (Table 11).

Over the last five years, the number of cases involving persons over 65 years of age increased by 67 (19.1%), from 351 in 2014/15 to 418 in 2018/19 (Table 11).

**26%**  
A quarter of cases open involved persons aged 19 - 34

**Figure 12: Cases open at any stage, by age group (2018/19)**



<sup>9</sup> Age at date of alleged incident was calculated as the difference between the date of birth of the patient and the date of the alleged incident.

## Nature of alleged incident

The nature of the alleged incident was recorded for 3,846 (96.3%) of all cases open at any stage during 2018/19<sup>10</sup> (Table 12).

Almost a third (32.1%, 1,233)<sup>11</sup> of cases open at any stage during 2018/19 related to 'Treatment', 791 (20.6%) to 'Diagnosis & Tests', 399 (10.4%) to 'Pregnancy & Childbirth' and 286 (7.4%) to 'Operation'. These four categories accounted for over two thirds (70.4%, 2,709) of all cases open (Figure 13, Table 12).

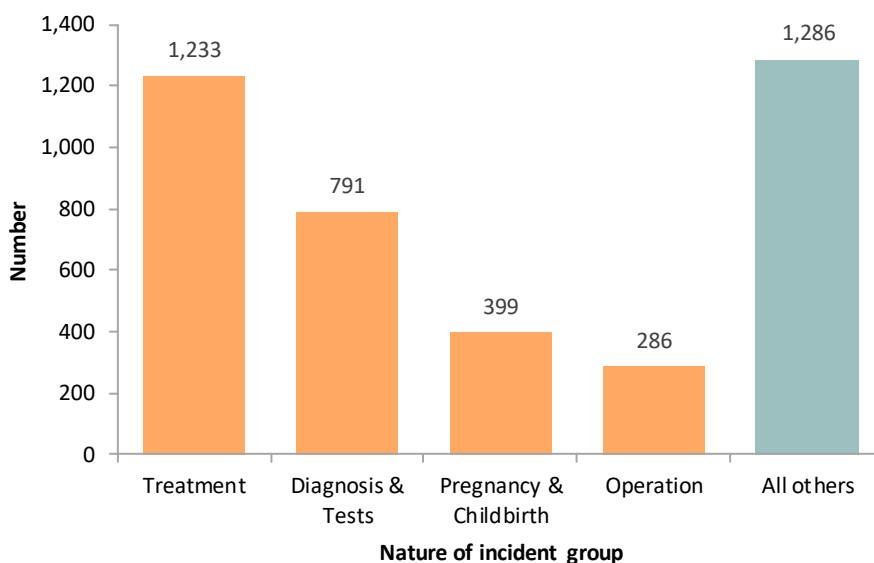
In 2018/19, the highest number of cases in each HSC Trust related to 'Treatment', with the exception of the Southern HSC Trust where the largest incident group was 'Diagnosis & Tests' (154, 27.6%) (Table 23).

Within the Legacy HSS Boards, NIAS & NIBTS group the largest percentage of cases open in 2018/19 related to the 'Pregnancy & Childbirth' incident group (22, 19.5%) (Table 23).

**32%**

Almost a third of cases open during 2018/19 related to 'Treatment'

**Figure 13: Four largest nature of alleged incident groups (2018/19)**



<sup>10</sup> A list of nature of incidents can be found in Appendix 3 with nature of incident group detailed in Appendix 4.

<sup>11</sup> Refers to the number of cases with a known nature of incident.

Of the 1,233 cases related to the 'Treatment' incident group, 75.5% (931) were associated with 'Fail to / Delay Treatment' (Figure 14, Table 13).

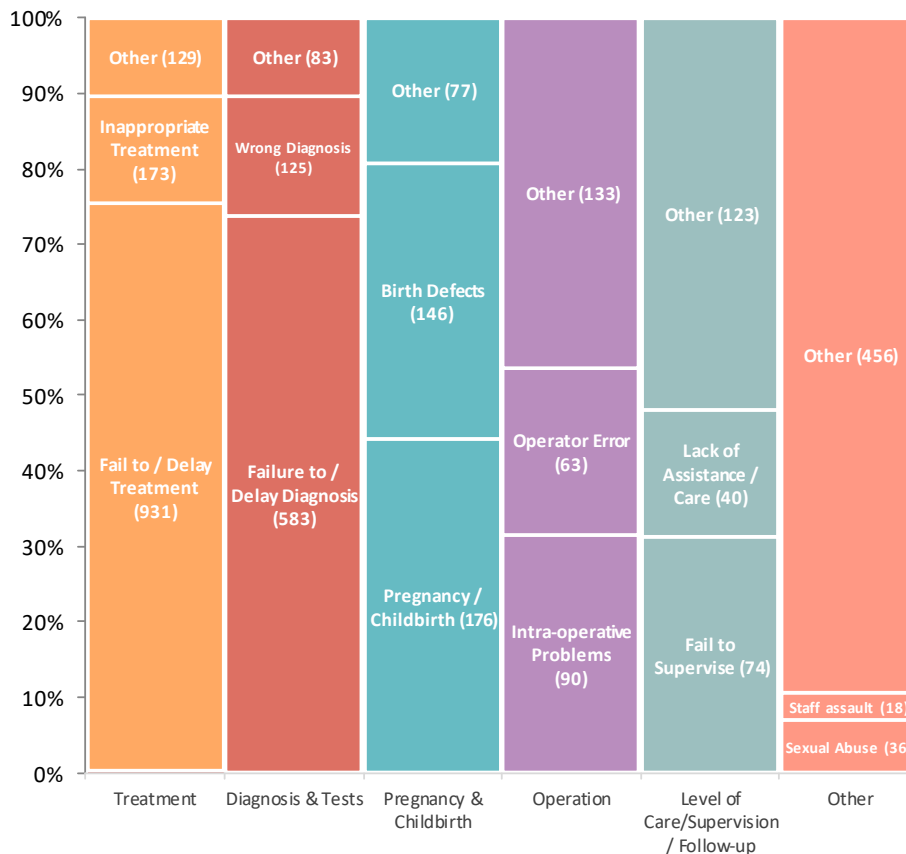
Almost three quarters (73.7%, 583) of cases open in 2018/19 which were reported as 'Diagnosis & Tests' related to 'Failure to / Delay diagnosis' (Figure 14, Table 13).

Of the 399 cases related to 'Pregnancy & Childbirth', over two fifths (44.1%, 176) related to 'Pregnancy / Childbirth' and 146 (36.6%) related to 'Birth Defects' (Figure 14, Table 13).

Almost a third (31.5%, 90) of incidents reported as 'Operation' (286) related to 'Intra-Operative Problems' (Figure 14, Table 13).

Almost a third (31.2%, 74) of 'Level of Care/Supervision/Follow-up' incidents related to 'Fail to supervise' (Figure 14, Table 13).

**Figure 14: Cases open at any stage, grouped by the nature of alleged incident (2018/19)**



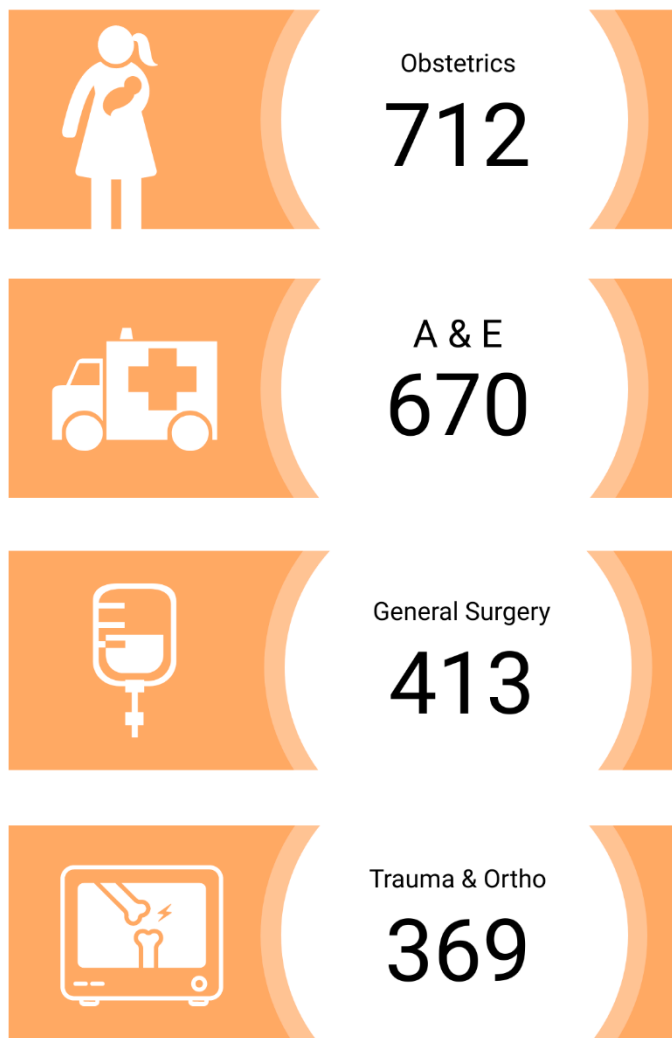
## Specialty <sup>12</sup>

Specialty was recorded for 3,933 (98.4%) of all clinical / social care negligence cases open at any stage during 2018/19 (Table 14).

Since 2014/15, the number of cases relating to the 'Obstetrics' specialty increased by 86 (13.7%), from 626 to 712 in 2018/19 (Table 14).

Over half (55.0%, 2,164)<sup>13</sup> of all cases open in 2018/19, related to four specialties; 'Obstetrics' (712), 'Accident & Emergency' (670), 'General Surgery' (413) and 'Trauma and Orthopaedics' (369) (Figure 15, Table 14).

**Figure 15: Four largest specialties (2018/19)**



**18%**  
Almost a fifth of cases related to the 'Obstetrics' specialty

<sup>12</sup> A list of case specialties can be found in Appendix 5. This list consists of Korner specialties plus additional categories to cover community related incidents.

<sup>13</sup> Refers to the number of cases with a **known** specialty.

# SECTION 3

## PAYMENTS UP TO 31<sup>st</sup> MARCH 2019

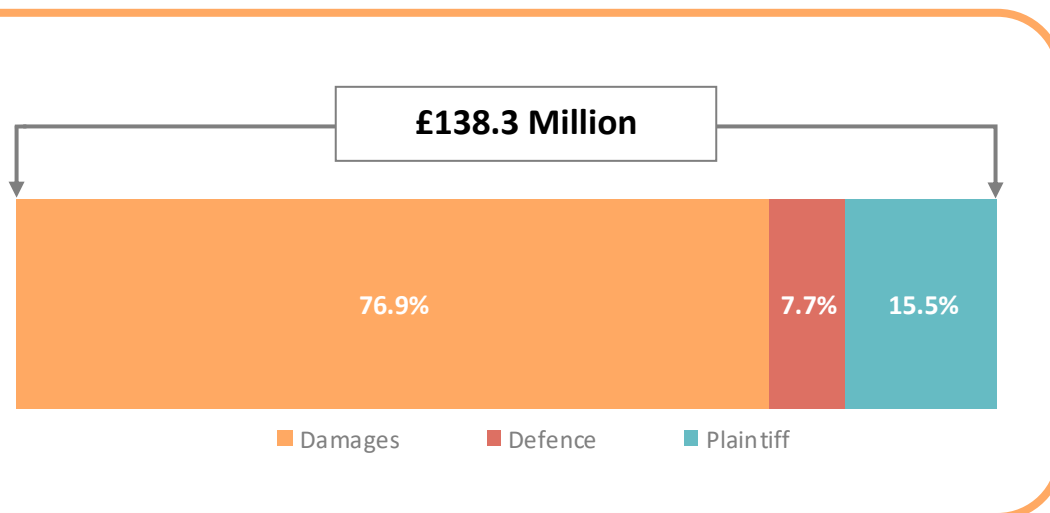
Readers should note that information presented in this section **refers to the total cumulative payments up to 31<sup>st</sup> March 2019** and **not** the amount paid out in 2018/19, which is presented separately in section 1. For example, if a case was opened in 2015 and had not been closed by 1<sup>st</sup> April 2018, payments will be included on this case from the date it opened until 31<sup>st</sup> March 2019 or closed date.

At 31<sup>st</sup> March 2019, £138.3 million had been paid on the 3,995 clinical / social care negligence cases that were open at any stage in 2018/19. Of this, £106.3 million (76.9%) had been awarded in damages, £21.4 million (15.5%) in plaintiff costs and £10.6 million (7.7%) in defence costs (Figure 16, Table 15).

Almost three quarters (74.3%, £79.0m) of the total amount paid in damages<sup>14</sup> related to just 38 (1.0%) of the 3,995 cases open during 2018/19.

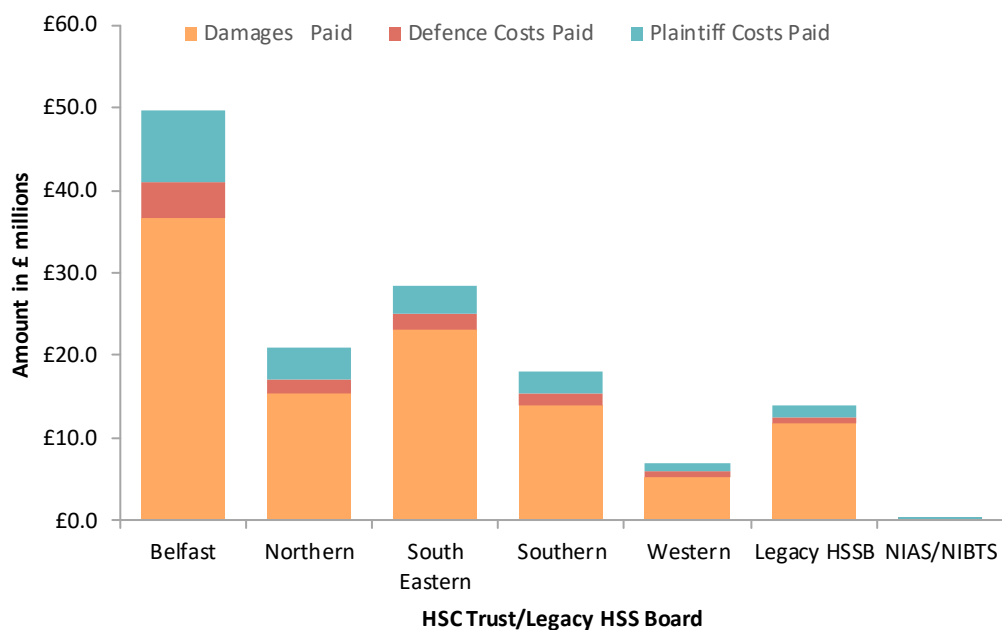
**38 cases**  
Accounted for almost three quarters of damages paid

**Figure 16: Amount paid on cases open at any stage during 2018/19**



<sup>14</sup> Refer to Definitions, Note 8.

**Figure 17: Amount paid on cases open at any stage during 2018/19, by HSC Trust / Legacy HSS Board**



The Belfast HSC Trust paid the largest amount in damages and legal costs (£49.7m) on cases which were open in 2018/19, accounting for over a third (36.0%) of all monies paid (Figure 17, Table 15).

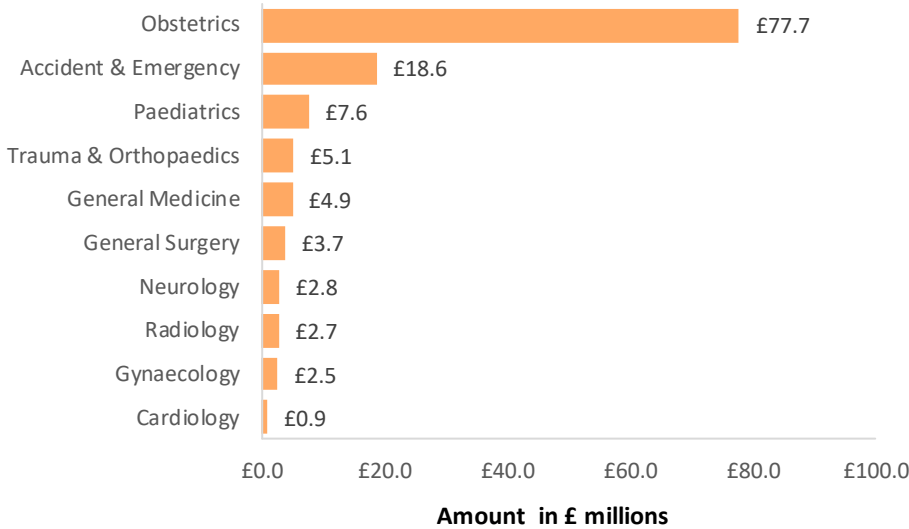
Over two fifths (£13.1m, 40.9%) of the total amount paid in legal costs<sup>15</sup> was paid by the Belfast HSC Trust, £5.6 million (17.4%) by the Northern HSC Trust, £5.3 million (16.5%) by the South Eastern HSC Trust, £4.0 million (12.4%) by the Southern HSC Trust, £2.3 million (7.3%) by the Legacy HSS Boards, £1.7 million (5.3%) by the Western HSC Trust and £61k (0.2%) by the NIAS/NIBTS (Table 15).

<sup>15</sup> Refer to Definitions, Notes 9 and 10.

## Payments by specialty

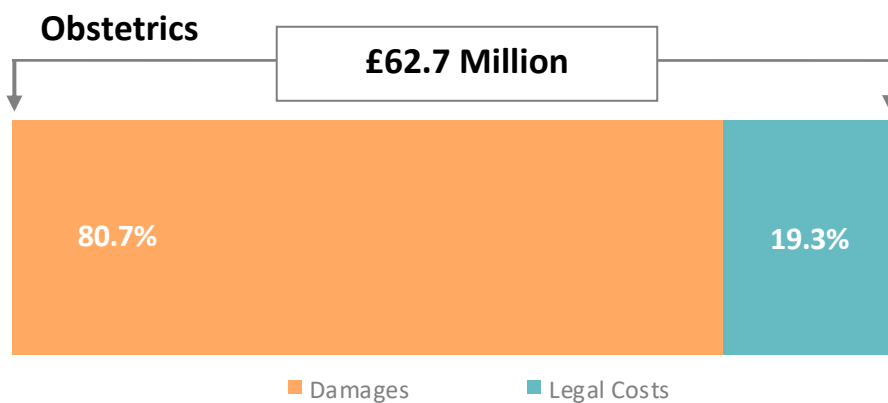
Of the £138.3m paid on clinical / social care negligence cases open at any stage during 2018/19, £126.6m (91.5%), related to 10 specialties (Table 16, Figure 18).

**Figure 18: Amount paid on the 10 largest specialties (2018/19)**



Over half (56.2%, £77.7m) of the amount paid out on cases open at any stage in 2018/19 related to the 'Obstetrics' specialty, of which, four fifths (80.7%, £62.7m) had been paid on damages (Figure 19, Table 16).

**Figure 19: Amount paid on the obstetrics specialty (2018/19)**



**56%**

Over half of the amount paid out related to the 'Obstetrics' specialty

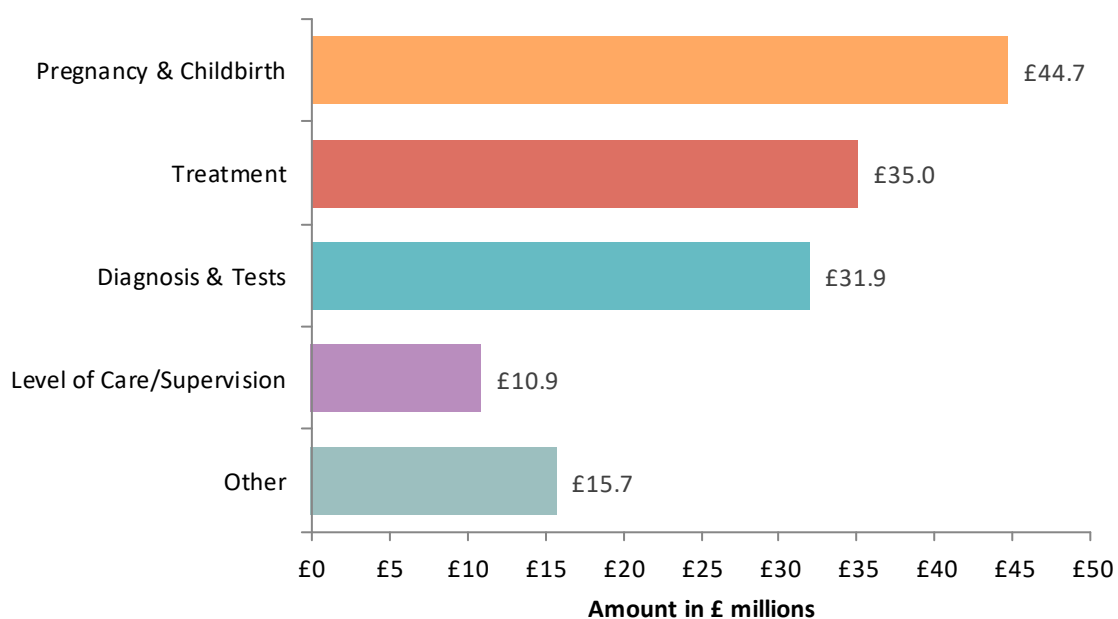


## Payments by nature of alleged incident<sup>16</sup>

Almost a third (32.3%, £44.7m) of the total amount paid to date on clinical / social care negligence cases open at any stage during 2018/19, related to the 'Pregnancy & Childbirth' nature of incident group. Of this, almost four fifths (79.7%, £35.6m) had been paid in damages (Figure 20, Table 17).

Four categories accounted for over four fifths (88.6%, £122.6m) of all monies paid on cases open at any stage during 2018/19. Of this, £95.2 million (77.7%) had been paid in damages and £27.4 million (22.3%) paid in legal costs (Table 17).

**Figure 20: Total amount paid by the largest nature of alleged incident categories (2018/19)**



<sup>16</sup> The nature of the alleged incident was determined by data providers using the list provided in Appendix 3.

## Periodical payment orders

A periodical payment order (PPO), also referred to as a 'structured settlement', is an arrangement whereby the claimant receives a lump sum for their immediate needs up front, followed by periodical payments on an agreed schedule, that is, it provides a stream of future payments (tax-free) guaranteed for life. The decision on whether to proceed with receiving the settlement as a lump sum or through periodical payments is voluntary, and to date a relatively small number of plaintiffs have opted for PPOs in Northern Ireland.

Over half (52.1%, £72.0m) of the £138.3 million paid on cases open at any stage during 2018/19, had been paid on 33 PPO cases (Figure 20, Table 18).

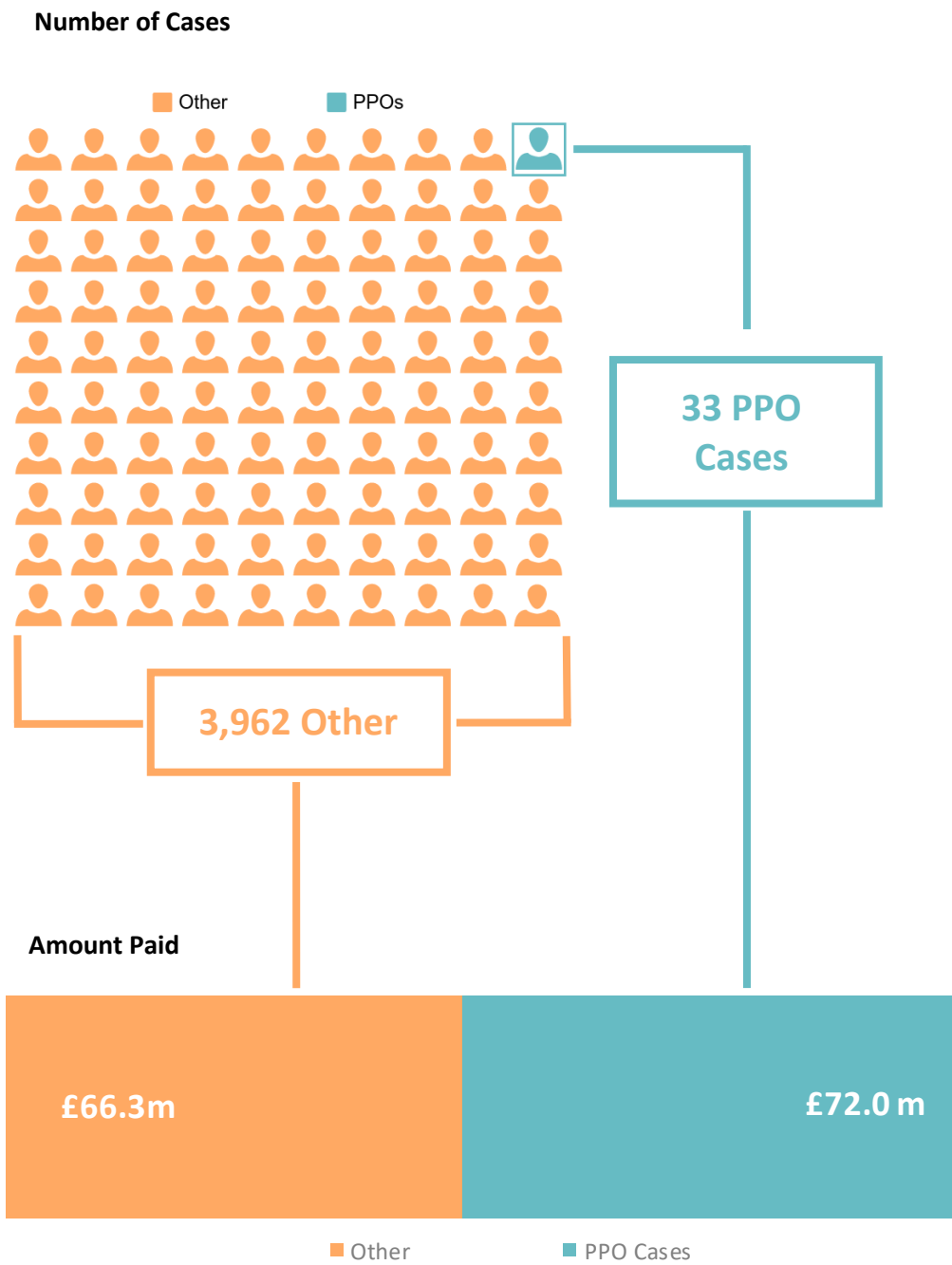
Of the £72.0 million paid by PPOs, £57.6 million (79.9%) had been paid in damages, £10.4 million (14.5%) in plaintiff costs and £4.1 million (5.6%) in defence costs (Table 18).

Over a third (36.7%, £26.4m) of the amount paid by PPOs had been paid by the Belfast HSC Trust, £22.7 million (31.5%) by the South Eastern HSC Trust, £12.9 million (18.0%) by the Southern HSC Trust and £10.0m (13.9%) by the Legacy HSS Boards, NIAS & NIBTS, whilst the Northern and Western HSC Trusts had no PPOs in 2018/19 (Table 18).

**£26.4m**

Over a third of the amount paid by PPOs had been paid by the Belfast HSC Trust

Figure 20: Amount paid on periodic payment order cases (2018/19)



## Payments on closed cases<sup>17</sup>

During 2018/19, 789 (19.7%) cases were closed, with almost two thirds (63.6%, 502) closed without any payment awarded (Table 19).

The Southern HSC Trust closed 106 cases in 2018/19, with over two thirds (69.8%, 74) of these closed without any payments awarded, whilst the Northern HSC Trust made payments on almost half (46.7%) of the cases they closed in 2018/19 (Figure 21, Table 19).

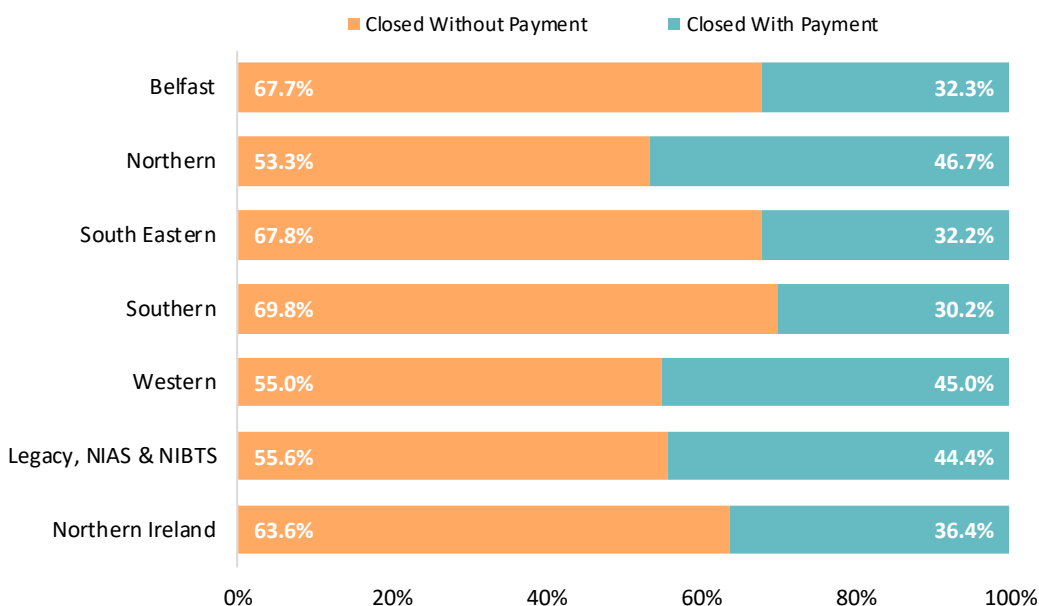
Over a third (36.4%, 287) of cases closed in 2018/19 had payments, totalling £20.6 million. This accounted for 14.9% of all monies paid out on cases open at any stage during the year (Table 20).

Almost half (45.1%, £9.3m) of the amount paid on cases closed in 2018/19, was paid by the Belfast HSC Trust (Table 20).

**502**

**Almost two thirds  
of cases were  
closed in 2018/19  
without payment**

**Figure 21: Cases closed with & without payments (2018/19)**



<sup>17</sup> A payment may include damages awarded, defence costs and plaintiff costs or a combination of any of these three costs.

## Closed cases with legal costs exceeding damages

Almost one in five (19.3%, 152) cases closed in 2018/19 had legal costs (£2.6m) exceeding the amount awarded in damages (£1.3m). This equates to £1.3 million more paid in legal costs than damages, with the Belfast Trust recording the largest difference (£0.7m) (Table 21).

## Payments on cases closed with no damages

Almost one in ten (8.0%, 63) cases closed in 2018/19 had no damages awarded but had legal fees, amounting to £0.2 million. This accounted for 1.1% of all monies paid out on cases closed during 2018/19 (Table 22).

## ADDITIONAL TABLES

**Table 1: Amount paid on clinical / social care negligence cases, by HSC Trust / Legacy HSS Board (2014/15 - 2018/19)**

HSC Trust / Legacy HSS Board	2014/15	2015/16	2016/17	2017/18	2018/19	Change from 2014/15	% Change from 2014/15
Belfast	£13,004,258	£12,506,163	£10,153,969	£10,843,553	£15,230,342	<b>£2,226,084</b>	<b>17.1%</b>
Northern	£4,070,985	£2,150,284	£7,942,506	£8,201,203	£2,157,461	<b>-£1,913,525</b>	<b>-47.0%</b>
South Eastern	£6,627,389	£4,644,462	£2,488,374	£6,776,587	£1,147,087	<b>-£5,480,302</b>	<b>-82.7%</b>
Southern	£6,366,576	£2,373,817	£2,078,193	£5,154,844	£2,912,103	<b>-£3,454,473</b>	<b>-54.3%</b>
Western	£2,149,998	£3,510,655	£1,739,806	£3,228,221	£3,766,075	<b>£1,616,077</b>	<b>75.2%</b>
Legacy HSS Boards	£9,110,734	£1,378,696	£4,119,597	£1,421,614	£3,989,029	<b>-£5,121,706</b>	<b>-56.2%</b>
NIAS / NIBTS	£23,842	£4,361	£18,617	£25,818	£7,437	<b>-£16,405</b>	<b>-68.8%</b>
<b>Northern Ireland</b>	<b>£41,353,782</b>	<b>£26,568,438</b>	<b>£28,541,062</b>	<b>£35,651,840</b>	<b>£29,209,533</b>	<b>-£12,144,249</b>	<b>-29.4%</b>

**Table 2: Amount paid on clinical / social care negligence cases during 2018/19, by HSC Trust / Legacy HSS Board and type of payment**

HSC Trust / Legacy HSS Board	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid
Belfast	£11,444,571	£922,711	£2,863,060	<b>£15,230,342</b>
Northern	£1,154,243	£216,173	£787,045	<b>£2,157,461</b>
South Eastern	£575,521	£229,510	£342,056	<b>£1,147,087</b>
Southern	£1,617,307	£247,607	£1,047,189	<b>£2,912,103</b>
Western	£2,680,019	£448,364	£637,693	<b>£3,766,075</b>
Legacy HSS Boards	£3,763,848	£83,613	£141,567	<b>£3,989,029</b>
NIAS / NIBTS	£5,437	£2,000	£0	<b>£7,437</b>
<b>Northern Ireland</b>	<b>£21,240,946</b>	<b>£2,149,977</b>	<b>£5,818,610</b>	<b>£29,209,533</b>

**Table 3: Cases open during the year, by HSC Trust / Legacy HSS Board<sup>18</sup>  
(2014/15 - 2018/19)**

HSC Trust / Legacy HSS Board	2014/15	2015/16	2016/17	2017/18	2018/19
Belfast	1,395	1,421	1,431	1,441	1,604
Northern	485	496	477	508	595
South Eastern	565	565	578	591	599
Southern	507	503	519	537	558
Western	526	513	529	547	526
Legacy Eastern	58	56	54	51	48
Legacy Northern	16	15	10	9	13
Legacy Southern	10	11	10	9	10
Legacy Western	29	20	22	23	21
NIAS/NIBTS	10	13	17	18	21
<b>Northern Ireland</b>	<b>3,601</b>	<b>3,613</b>	<b>3,647</b>	<b>3,734</b>	<b>3,995</b>

**Table 4: Outcome of cases during the year, by HSC Trust / Legacy HSS Board (2018/19)<sup>19</sup>**

HSC Trust / Legacy HSS Board	Outcome at 31 <sup>st</sup> March 2019			All Cases Open During 2018/19
	Open	Settled	Closed	
Belfast	1,201	84	319	1,604
Northern	389	26	180	595
South Eastern	454	30	115	599
Southern	425	27	106	558
Western	438	28	60	526
Legacy HSS Boards	70	*	*	92
NIAS/NIBTS	18	*	*	21
<b>Northern Ireland</b>	<b>2,995</b>	<b>211</b>	<b>789</b>	<b>3,995</b>

<sup>18</sup> Legacy HSS Boards are responsible for alleged incidents that occurred prior to 1993, regardless of the date the claim is made.

<sup>19</sup> In order to avoid personal disclosure an '\*' represents a cell count of less than 4. When the anonymised figure can be deduced from the totals, the next smallest figure was also anonymised.

**Table 5: Open cases at 31<sup>st</sup> March, by HSC Trust / Legacy HSS Board (2015 - 2019)**

HSC Trust / Legacy HSS Board	Open at 31 <sup>st</sup> March				
	2015	2016	2017	2018	2019
Belfast	1,108	1,120	1,098	1,180	1,201
Northern	368	368	348	364	389
South Eastern	404	427	436	459	454
Southern	371	383	396	435	425
Western	388	385	409	430	438
Legacy, NIAS & NIBTS	82	85	82	77	88
<b>Northern Ireland Total</b>	<b>2,721</b>	<b>2,768</b>	<b>2,769</b>	<b>2,945</b>	<b>2,995</b>

**Table 6: Settled cases at 31<sup>st</sup> March, by HSC Trust / Legacy HSS Boards (2015 - 2019)**

HSC Trust / Legacy HSS Board	Settled at 31 <sup>st</sup> March				
	2015	2016	2017	2018	2019
Belfast	66	77	90	120	84
Northern	26	33	46	45	26
South Eastern	28	26	28	29	30
Southern	25	19	26	19	27
Western	34	39	45	38	28
Legacy, NIAS & NIBTS	12	12	11	16	16
<b>Northern Ireland Total</b>	<b>191</b>	<b>206</b>	<b>246</b>	<b>267</b>	<b>211</b>



**Table 7: Cases closed during 2018/19, by HSC Trust / Legacy HSS Board  
(2014/15 - 2018/19)**

HSC Trust / Legacy HSS Board	Closed During				
	2014/15	2015/16	2016/17	2017/18	2018/19
Belfast	221	224	243	141	319
Northern	91	95	83	99	180
South Eastern	133	112	114	103	115
Southern	111	101	97	83	106
Western	104	89	75	79	60
Legacy, NIAS & NIBTS	29	18	20	17	9
<b>Northern Ireland Total</b>	<b>689</b>	<b>639</b>	<b>632</b>	<b>522</b>	<b>789</b>

**Table 8: New cases opened each year, by HSC Trust / Legacy HSS Board  
(2014/15 - 2018/19)**

HSC Trust / Legacy HSS Board	New Cases				
	2014/15	2015/16	2016/17	2017/18	2018/19
Belfast	311	242	240	253	311
Northern	94	99	78	111	89
South Eastern	125	136	116	132	101
Southern	98	105	117	116	96
Western	113	94	103	118	88
Legacy, NIAS & NIBTS	11	10	13	14	19
<b>Northern Ireland Total</b>	<b>752</b>	<b>686</b>	<b>667</b>	<b>744</b>	<b>704</b>

**Table 9: Cases by year of incident**

Year of Incident	2014/15	2015/16	2016/17	2017/18	2018/19
Pre 1993	136	115	106	103	110
1993/94	22	23	17	19	20
1994/95	31	32	28	22	16
1995/96	18	18	18	16	17
1996/97	16	18	18	17	14
1997/98	28	24	22	20	22
1998/99	30	27	26	27	27
1999/00	35	34	31	31	34
2000/01	39	32	29	26	28
2001/02	47	36	36	32	29
2002/03	59	43	31	31	33
2003/04	67	49	42	40	36
2004/05	81	58	54	41	41
2005/06	124	102	75	68	61
2006/07	192	150	120	103	94
2007/08	255	193	146	108	107
2008/09	270	194	146	122	116
2009/10	384	298	218	176	163
2010/11	414	341	257	184	155
2011/12	439	455	374	292	253
2012/13	401	484	508	406	343
2013/14	329	444	508	546	502
2014/15	126	280	381	451	494
2015/16		118	285	382	453
2016/17			116	316	426
2017/18				108	235
2018/19					95
Unknown	58	45	55	47	71
<b>Total</b>	<b>3,601</b>	<b>3,613</b>	<b>3,647</b>	<b>3,734</b>	<b>3,995</b>

**Table 10: Cases open at any stage during the year, by age of case (2018/19)<sup>20</sup>**

Length of Time Open	Outcome at Year End			No. Open During Year
	Open	Settled	Closed	
Less than 1 year	687	5	41	733
1 year to < 3 years	1,179	54	183	1,416
3 years to < 5 years	706	80	292	1,078
5 years to < 10 years	350	59	231	640
10 years to < 15 years	56	8	35	99
15 years +	15	5	5	25
<b>Total</b>	<b>2,993</b>	<b>211</b>	<b>787</b>	<b>3,991</b>

**Table 11: Cases open at any stage, by age group (2014/15 – 2018/19)**

Age Group (Years)	2014/15	2015/16	2016/17	2017/18	2018/19	Change since 2014/15
0-1	395	386	392	422	428	↑
2-18	344	345	354	336	360	↑
19-34	920	909	954	979	1,028	↑
35-50	883	888	878	877	941	↑
51-64	614	624	591	630	680	↑
Over 65	351	363	360	375	418	↑
Unknown	94	98	118	115	140	↑
<b>Total</b>	<b>3,601</b>	<b>3,613</b>	<b>3,647</b>	<b>3,734</b>	<b>3,995</b>	<b>↑</b>

<sup>20</sup> The age of the case was unknown in four instances.

**Table 12: Cases open at any stage, by nature of alleged incident group  
(2014/15 – 2018/19)**

Nature of Incident Group	2014/15	2015/16	2016/17	2017/18	2018/19	Change since 2014/15
Admissions/Referral	16	19	19	20	25	↑
Assault (to or by patient)	10	9	7	6	10	↔
Consent/Failure to warn	32	27	25	43	58	↑
Diagnosis & Tests	712	711	690	702	791	↑
Discharge	24	18	18	17	16	↓
Facilities & Equipment	43	51	52	59	63	↑
Infections	89	87	72	78	79	↓
LevelofCare/Supervision/Follow-up	223	233	231	219	237	↑
Medication/Bloods/Fluids	100	101	106	113	118	↑
Operation	286	295	288	289	286	↔
Pregnancy & Childbirth	282	296	324	359	399	↑
Treatment	1,046	1121	1,158	1,136	1,233	↑
Unexpected death	15	17	16	17	21	↑
Other	393	368	425	509	510	↑
Unknown	330	260	216	167	149	↓
<b>Total</b>	<b>3,601</b>	<b>3,613</b>	<b>3,647</b>	<b>3,734</b>	<b>3,995</b>	<b>↑</b>

**Table 13: Cases open at any stage, grouped by the nature of the alleged incident (2018/19)<sup>21</sup>**

Nature of Incident	No. of Cases	% of Nature of Incident Group
<b>Treatment</b>		
Fail to / Delay treatment	931	75.5%
Inappropriate treatment	173	14.0%
Others under Treatment	129	10.5%
<b>Total</b>	<b>1,233</b>	<b>100.0%</b>
<b>Diagnosis &amp; Tests</b>		
Failure to / Delay diagnosis	583	73.7%
Wrong diagnosis made	125	15.8%
Others under diagnosis & tests	83	10.5%
<b>Total</b>	<b>791</b>	<b>100.0%</b>
<b>Pregnancy &amp; Childbirth</b>		
Pregnancy/Childbirth	176	44.1%
Birth Defects	146	36.6%
Others under Pregnancy & Childbirth	77	19.3%
<b>Total</b>	<b>399</b>	<b>100.0%</b>
<b>Operation</b>		
Intra-operative problems	90	31.5%
Operator error	63	22.0%
Others under Operation	133	46.5%
<b>Total</b>	<b>286</b>	<b>100.0%</b>
<b>Level of Care/Supervision / Follow-up</b>		
Fail to supervise	74	31.2%
Lack of assistance/care	40	16.9%
Others under Level of Care/Supervision/Follow-Up	123	51.9%
<b>Total</b>	<b>237</b>	<b>100.0%</b>
<b>Other</b>		
Sexual Abuse	36	7.1%
Assault, etc by hospital staff	18	89.4%
Others under Other	456	3.5%
<b>Total</b>	<b>510</b>	<b>100.0%</b>

<sup>21</sup> This table details the largest nature of incident groups and the largest categories within those groups, therefore data will not sum to 3,995.

**Table 14: Cases open at any stage, by specialty (2014/15 – 2018/19)**

Specialty	2014/15	2015/16	2016/17	2017/18	2018/19	Change since 2014/15
Accident & Emergency	623	631	626	629	670	↑
Anaesthetics & Pain Mgt.	52	50	52	56	50	↓
Burns, Plastic & Max. Surgery	29	29	29	30	28	↓
Cardiac Surgery	26	30	28	28	23	↓
Cardiology	31	31	42	45	47	↑
Children & Young People	98	103	106	105	114	↑
Dentistry	22	24	25	19	21	↓
Ear, Nose & Throat	42	41	39	38	43	↓
General Medicine	218	223	211	204	209	↓
General Surgery	384	390	379	397	413	↑
Gynaecology	215	200	194	236	259	↑
Mental Health Acute	60	56	58	64	71	↑
Neurology	27	29	29	23	107	↑
Neurosurgery	36	32	28	28	27	↓
Obstetrics	626	614	636	674	712	↑
Oncology	24	26	26	33	43	↑
Ophthalmology	40	38	37	43	51	↑
Paediatrics	91	94	95	90	91	↔
Radiology	49	53	56	55	60	↑
Trauma & Orthopaedics	383	377	374	366	369	↓
Urology	56	64	59	62	66	↑
Other	404	414	441	440	459	↑
Unknown	65	64	77	69	62	↓
<b>Total</b>	<b>3,601</b>	<b>3,613</b>	<b>3,647</b>	<b>3,734</b>	<b>3,995</b>	<b>↑</b>

**Table 15: Amount paid to date on cases open at any stage during 2018/19**

HSC Trust/ Legacy HSS Board	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid	No. of Cases Open
Belfast	£36,634,382	£4,226,701	£8,864,212	<b>£49,725,295</b>	1,604
Northern	£15,480,638	£1,579,374	£3,980,183	<b>£21,040,195</b>	595
South Eastern	£23,134,677	£1,983,982	£3,293,018	<b>£28,411,676</b>	599
Southern	£14,033,774	£1,252,208	£2,707,745	<b>£17,993,727</b>	558
Western	£5,169,944	£819,061	£878,088	<b>£6,867,093</b>	526
Legacy HSSB	£11,679,334	£709,796	£1,620,664	<b>£14,009,794</b>	92
NIAS/NIBTS	£181,896	£25,811	£35,489	<b>£243,196</b>	21
<b>Northern Ireland</b>	<b>£106,314,645</b>	<b>£10,596,934</b>	<b>£21,379,399</b>	<b>£138,290,978</b>	<b>3,995</b>

**Table 16: Amount paid to date on cases open at any stage during 2018/19, by speciality**

Speciality	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid
Accident & Emergency	£14,599,154	£1,404,608	£2,621,970	£18,625,732
Cardiology	£485,156	£152,820	£222,370	£860,346
General Medicine	£3,163,947	£868,187	£880,300	£4,912,433
General Surgery	£2,239,615	£425,849	£1,067,451	£3,732,914
Gynaecology	£1,564,062	£243,235	£742,152	£2,549,449
Neurology	£2,235,349	£250,627	£295,573	£2,781,548
Obstetrics	£62,733,299	£4,672,881	£10,291,914	£77,698,094
Paediatrics	£5,433,404	£561,707	£1,618,952	£7,614,063
Radiology	£2,111,500	£175,434	£408,647	£2,695,581
Trauma & Orthopaedics	£3,497,445	£684,332	£913,394	£5,095,171
Other	£8,251,713	£1,157,255	£2,316,678	£11,725,647
<b>Total</b>	<b>£106,314,645</b>	<b>£10,596,934</b>	<b>£21,379,399</b>	<b>£138,290,978</b>

**Table 17: Amount paid to date on cases open at any stage during 2018/19, by nature of alleged incident**

Nature of Incident Group	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid
Admissions/Referral	£2,444,501	£150,278	£266,816	<b>£2,861,595</b>
Assault (to patient & by patient)	£0	£1,310	£0	<b>£1,310</b>
Consent/Failure to warn	£55,000	£39,208	£111,876	<b>£206,084</b>
Diagnosis & Tests	£23,490,685	£2,942,977	£5,504,320	<b>£31,937,983</b>
Discharge	£0	£30	£0	<b>£30</b>
Facilities & Equipment	£45,000	£19,170	£36,867	<b>£101,038</b>
Infections	£496,483	£138,616	£259,982	<b>£895,081</b>
Level of Care/Supervision	£8,860,564	£695,267	£1,374,910	<b>£10,930,741</b>
Medication/Bloods/Fluids	£282,187	£133,280	£195,693	<b>£611,159</b>
Operation	£5,693,336	£548,967	£1,115,569	<b>£7,357,872</b>
Pregnancy & Childbirth	£35,592,694	£2,844,684	£6,222,556	<b>£44,659,934</b>
Treatment	£27,277,384	£2,596,041	£5,175,968	<b>£35,049,393</b>
Unexpected death	£128,950	£16,505	£64,528	<b>£209,983</b>
Other	£1,922,860	£446,406	£1,030,181	<b>£3,399,446</b>
Unknown	£25,000	£24,195	£20,134	<b>£69,329</b>
<b>Total</b>	<b>£106,314,645</b>	<b>£10,596,934</b>	<b>£21,379,399</b>	<b>£138,290,978</b>

**Table 18: Amount paid to date by periodical payment orders on cases open at any stage during 2018/19**

HSC Trust / Legacy HSS Board	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid	No. of PPOs
Belfast	£19,836,629	£1,589,514	£4,983,295	<b>£26,409,438</b>	12
South Eastern	£18,436,754	£1,377,474	£2,847,841	<b>£22,662,069</b>	10
Southern	£10,743,420	£639,101	£1,550,041	<b>£12,932,562</b>	6
Legacy, NIAS & NIBTS	£8,549,590	£443,929	£1,034,862	<b>£10,028,380</b>	5
<b>Northern Ireland</b>	<b>£57,566,393</b>	<b>£4,050,017</b>	<b>£10,416,039</b>	<b>£72,032,449</b>	<b>33</b>



**Table 19: Cases closed by HSC Trust / Legacy HSS Board, by payments awarded (2018/19)**

HSC Trust/Legacy HSS Board	Closed Without Payment		Closed With Payment		Total Cases Closed
	No.	%	No.	%	
Belfast	216	67.7%	103	32.3%	<b>319</b>
Northern	96	53.3%	84	46.7%	<b>180</b>
South Eastern	78	67.8%	37	32.2%	<b>115</b>
Southern	74	69.8%	32	30.2%	<b>106</b>
Western	33	55.0%	27	45.0%	<b>60</b>
Legacy, NIAS & NIBTS	5	55.6%	4	44.4%	<b>9</b>
<b>Northern Ireland Total</b>	<b>502</b>	<b>63.6%</b>	<b>287</b>	<b>36.4%</b>	<b>789</b>

**Table 20: Amount paid on cases closed during 2018/19, by HSC Trust / Legacy HSS Board and type of payment**

HSC Trust / Legacy HSS Board	No. of Cases Closed	Damages Paid	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid
Belfast	103	£5,847,652	£1,075,872	£2,340,471	<b>£9,263,995</b>
Northern	84	£4,040,131	£645,227	£1,992,414	<b>£6,677,772</b>
South Eastern	37	£664,800	£176,059	£344,651	<b>£1,185,510</b>
Southern	32	£725,083	£139,910	£401,503	<b>£1,266,496</b>
Western	27	£1,382,171	£196,843	£472,496	<b>£2,051,510</b>
Legacy, NIAS & NIBTS	4	£56,167	£19,059	£33,594	<b>£108,820</b>
<b>Northern Ireland</b>	<b>287</b>	<b>£12,716,005</b>	<b>£2,252,970</b>	<b>£5,585,129</b>	<b>£20,554,103</b>

**Table 21: Cases with legal costs exceeding damages awarded closed during 2018/19, by HSC Trust / Legacy HSS Board<sup>22</sup>**

HSC Trust / Legacy HSS Board	No. Of Cases Closed	Damages	Legal Costs	Cost Difference
Belfast	58	£687,026	£1,403,320	<b>-£716,294</b>
Northern	41	£356,751	£716,816	<b>-£360,065</b>
South Eastern	18	£90,750	£154,307	<b>-£63,557</b>
Southern	17	£97,833	£194,657	<b>-£96,824</b>
Western	*	£105,500	£171,435	<b>-£65,935</b>
Legacy, NIAS & NIBTS	*	£2,000	£4,263	<b>-£2,263</b>
<b>Northern Ireland</b>	<b>152</b>	<b>£1,339,860</b>	<b>£2,644,798</b>	<b>-£1,304,937</b>

**Table 22: Amount paid on cases closed with no damages awarded during 2018/19, by HSC Trust / Legacy HSS Board and type of payment**

HSC Trust / Legacy HSS Board	No. of Cases Closed	Defence Costs Paid	Plaintiff Costs Paid	Total Amount Paid
Belfast	21	£101,405	£288	<b>£101,693</b>
Northern	15	£27,905	£8,356	<b>£36,261</b>
South Eastern	9	£26,804	£67	<b>£26,871</b>
Southern	8	£31,993	£260	<b>£32,253</b>
Western	*	*	*	<b>£33,681</b>
Legacy, NIAS & NIBTS	*	*	*	<b>£625</b>
<b>Northern Ireland</b>	<b>63</b>	<b>£222,363</b>	<b>£9,021</b>	<b>£231,384</b>

<sup>22</sup> In order to avoid personal disclosure an '\*' represents a cell count of less than 4. When the anonymised figure can be deduced from the totals, the next smallest figure was also anonymised.

**Table 23: Cases open at any stage during the year by nature of incident group (2018/19)<sup>23</sup>**

Nature of Incident Group	Belfast	Northern	South Eastern	Southern	Western	Legacy, NIAS & NIBTS	Total
Consent/Failure to warn	28	*	*	20	*	*	58
Diagnosis & Tests	301	146	85	154	90	15	791
Infections	42	7	6	14	10	0	79
Level of Care/Supervision/Follow-up	116	22	46	36	17	0	237
Medication/Bloods/Fluids	58	23	20	11	6	0	118
Operation	133	23	*	55	52	*	286
Pregnancy & Childbirth	78	82	38	93	86	22	399
Treatment	523	149	299	106	139	17	1233
Other	238	134	81	42	100	50	645
Unknown	87	6	*	27	21	*	149
<b>Total</b>	<b>1,604</b>	<b>595</b>	<b>599</b>	<b>558</b>	<b>526</b>	<b>113</b>	<b>3,995</b>

<sup>23</sup> In order to avoid personal disclosure an '\*' represents a cell count of less than 4. When the anonymised figure can be deduced from the totals, the next smallest figure was also anonymised.

## APPENDIX 1: TECHNICAL NOTES

This statistical release presents information on clinical/social care negligence cases open in Northern Ireland during the year ending 31<sup>st</sup> March 2019. Information was provided by all Health & Social Care (HSC) Trusts including the Northern Ireland Ambulance Service (NIAS), the Northern Ireland Blood Transfusion Service (NIBTS), Legacy HSS Boards and Agencies.

### **Data Collection**

The information presented within this release is based on the quarterly CN1a and annual CN1 statistical returns. The CN1 statistical return was the first of two statistical returns introduced in June 2010 to monitor clinical/social care negligence cases in Northern Ireland. The CN1 return collects information on each case of clinical/social care negligence open during the year (1<sup>st</sup> April – 31<sup>st</sup> March). It details information on: the type of case, gender of patient, patient postcode, date of incident, date of case, date settled, date closed, specialty to which case is associated, nature of the incident, legal stage, outcome of the case, amount paid in damages, defence and plaintiff costs, date of birth and date of death if appropriate.

If no clinical/social care negligence cases were open at any time during the year, including those which were subsequently withdrawn or closed without payment of compensation against the HSC Trust, Legacy HSS Board or Agency, a nil return was submitted. For the 2018/19 CN1 return, a nil return was submitted by the Northern Ireland Guardian Ad Litem Agency (NIGALA).

The second of these statistical returns on clinical/social care negligence (CN1a) is collected on a quarterly basis and presents a summary of activity during each quarter. It details the number of cases open on the last day of the quarter, new cases opened, cases closed and financial payments made during the quarter.

Data providers are supplied with technical guidance documents outlining the methodologies that should be used in the collection, reporting and validation of each of these data returns. These documents can be accessed at the following link:

<https://www.health-ni.gov.uk/articles/clinical-negligence-statistics>

## **Rounding**

Percentages and financial information have been rounded to one decimal place and as a consequence these may not sum to the totals.

## **Data Quality**

The data featured in this release have been provided by HSC Trusts, Legacy HSS Boards and Agency information staff and have been validated by Hospital Information Branch (HIB) prior to release. HIB carried out a detailed series of validations to verify that information was consistent both within and across returns. Queries arising from validation checks were returned for clarification and if required returns were amended and/or re-submitted.

It is important to note that some cases will have been settled and/or closed since 31<sup>st</sup> March 2019 and these will be accounted for in the next publication, for 2019/20.

## **Main Uses of Data**

The main uses of these data are to monitor and report the details of alleged clinical/social care negligence cases open at any stage during the year, for corporate monitoring, to inform and monitor related policy, and to respond to assembly questions and ad-hoc queries from the public.

## **Contextual Information**

Readers should be aware that contextual information about Northern Ireland and the health services provided is available to read while using statistics from this publication.

This includes information on the current and future population, structures within the Health and Social Care system, the vision for future health services as well as targets and indicators. This information is available under the 'Guidance' tab at the following link:

<https://www.health-ni.gov.uk/articles/clinical-negligence-statistics>

## APPENDIX 2: DEFINITIONS

### 1. Clinical/social care negligence:

For the purposes of this information collection, Clinical/Social Care Negligence is defined as:

*“A breach of duty of care by members of the health care and social professions employed by HSC organisations or by others consequent on decisions or judgments made by members of those professions acting in the course of their employment, and which are admitted as negligent by the employer or determined as such through the legal process”.*

### 2. Cases open

This refers to the total number of cases open on the last day of the financial year. An open case refers to all cases to which an official letter of notification of the intention to proceed with a case has been received and which had not been settled or closed by the last day of the year.

### 3. Cases settled

A settled case refers to any case settled that was not subsequently closed by the end of 2018/19. These cases may not be closed until the following year.

### 4. Cases closed during year

Cases closed during the year refers to the number of cases where the decision has been made to withdraw or not proceed with no money being awarded. It should also include cases where all monies awarded have been paid, and there is no longer any activity. A case is officially closed when DLS (Directorate of Legal Services) issue a letter that the case file has been closed.

## **5. New cases opened**

This refers to any cases that were opened between 1<sup>st</sup> April 2018 and 31<sup>st</sup> March 2019.

## **6. Outcome unknown**

Outcome unknown refers to cases where the outcome of the case was not recorded or there was no settled or closed date recorded.

## **7. Financial payments**

Details the total amount paid during the quarter on: damages, plaintiff and defence costs.

## **8. Damages**

Damages will include only costs associated with the case for damages and will exclude all costs associated with the Plaintiff and/or the Defence.

## **9. Defence costs**

Defence costs should include the total of any Expert Reports, Costs of Junior Counsel, Senior Counsel, Loss Adjusters, Case Investigators, and any other defence costs.

## **10. Plaintiff costs**

Plaintiff costs should include the Costs of Compensation Recovery Unit (CRU), Receipts, and any Third Party costs.



## APPENDIX 3: NATURE OF INCIDENT

1. Application of excess force
2. Assault, Etc by Hospital staff
3. Bacterial Infection
4. Birth Defects
5. Clinical Trial
6. Cross Infection
7. Delay in Performing Operation
8. Diathermy Burns/reaction to prep agent
9. ECT Treatment
10. Equipment malfunction
11. Error with agent/dose/route/selection
12. Fail/delay treatment
13. Fail antenatal screening to detect congenital
14. Fail monitor dose/rate of syntocinon
15. Fail to act on abnormal blood test results
16. Fail to carry out Post Operative Observations
17. Fail to correctly apply forceps
18. Fail to diagnose pre-eclampsia
19. Fail to follow-up arrangements
20. Fail to inform test results
21. Fail to correctly interpret USS
22. Fail to make timely response to abnormal FHR
23. Fail to monitor 1st Stage labour
24. Fail to monitor 2nd Stage labour
25. Fail to recognise complication of treatment
26. Fail to supervise
27. Fail to warn (informed consent)
28. Fail/Delay admitting to hospital
29. Fail/Delay availability of SCBU beds
30. Fail/Delay availability of operating theatres
31. Fail/Delay obtain cord PH
32. Fail/Delay of availability of emergency anaesthetic
33. Fail/Delay referring to hospital
34. Fail/Delay resuscitation by paediatricians
35. Failed infection control policy/hospital hygiene
36. Failed sterilisation
37. Failure to interpret x-ray correctly
38. Failure to perform operation
39. Failure to perform tests
40. Failure to x-ray
41. Failure/Delay diagnosis
42. Forceps delivery
43. Foreign body left in situ
44. Hospital acquired infection
45. MRSA

46. Improper Delegation to unsupervised junior
47. Inadequate monitoring intra-operatively
48. Inadequate nursing care
49. Inadequate monitor in recovery room
50. Inappropriate use of forceps/ventouse
51. Inappropriate case selection
52. Inappropriate discharge
53. Inappropriate treatment
54. Incidents in community by absconded/discharge patient
55. Incorrect injection site
56. Infusion problems
57. Injured by another patient
58. Injury/harm to others by patient
59. Intra-operative problems
60. Intubation problems
61. Labial Tear
62. Lack of assistance/care
63. Lack of adequate Facilities/Equipment
64. Lack of pre-operative evaluation
65. Medication errors
66. Mendelsohn's syndrome
67. Not specified
68. Operate on wrong patient/body part
69. Operator error
70. Other
71. Performance Of operation that is not indicated
72. Perineal Tear-1st, 2nd, 3rd Deg
73. Poor application of plaster cast
74. Premature ceasure of treatment
75. Problem Blood/fluids
76. Problems with medical records
77. Re-canalisation
78. Removal & retention of organs
79. Repeated attempt forceps delivery and or ventouse
80. Self harm
81. Sexual Abuse
82. Surgical Foreign body left in situ
83. Tooth Injury cases & patient positioning problem
84. Unexpected death
85. Unknown
86. Unlawful detention – mental health
87. Wrong application of electrode
88. Wrong diagnosis made
89. Pregnancy & childbirth

## APPENDIX 4: GENERAL GROUP BY NATURE OF INCIDENT

### Diagnosis & Tests

- 37. Failure to interpret x-ray correctly
- 39. Failure to perform tests
- 40. Failure to x-ray
- 41. Failure/Delay diagnosis
- 64. Lack of pre-operative evaluation
- 88. Wrong diagnosis made

### Treatment

- 9. ECT Treatment
- 12. Fail/delay treatment
- 25. Fail to recognise complication of treatment
- 32. Fail/Delay of availability of emergency anaes
- 34. Fail/Delay resuscitation by paediatricians
- 53. Inappropriate treatment
- 55. Incorrect injection site
- 56. Infusion problems
- 73. Poor application of plaster cast
- 74. Premature ceasure of treatment
- 87. Wrong application of electrode

### Operation

- 7. Delay in Performing Operation
- 8. Diathermy Burns/reaction to prep agent
- 36. Failed sterilisation
- 38. Failure to perform operation
- 43. Foreign body left in situ
- 59. Intra-operative problems
- 68. Operate on wrong patient/body part
- 69. Operator error
- 71. Performance Of operation that is not indicated
- 77. Re-canalisation
- 82. Surgical Foreign body left in situ

### Pregnancy & Childbirth

- 4. Birth Defects
- 13. Fail antenatal screening to detect congenital
- 14. Fail monitor dose/rate of syntocinon
- 17. Fail to correctly apply forceps
- 18. Fail to diagnose pre-eclampsia
- 21. Fail to correctly interpret USS
- 22. Fail to make timely response to abnormal FHR
- 23. Fail to monitor 1st Stage labour

- 24. Fail to monitor 2nd Stage labour
- 31. Fail/Delay obtain cord PH
- 42. Forceps delivery
- 50. Inappropriate use of forceps/ventouse
- 61. Labial Tear
- 72. Perineal Tear-1st, 2nd, 3rd Deg
- 79. Repeated attempt forceps delivery and or ventouse
- 89. Pregnancy & childbirth

### **Level of Care/Supervision/Follow-up**

- 15. Fail to act on abnormal blood test results
- 16. Fail to carry out Post Operative Observations
- 19. Fail to follow-up arrangements
- 20. Fail to inform test results
- 26. Fail to supervise
- 46. Improper Delegation to unsupervised junior
- 47. Inadequate monitoring intra-operatively
- 48. Inadequate nursing care
- 49. Inadequate monitor in recovery room
- 62. Lack of assistance/care

### **Medication/Bloods/Fluids**

- 11. Error with agent/dose/route/selection
- 65. Medication errors
- 75. Problem Blood/fluids

### **Infections**

- 3. Bacterial Infection
- 6. Cross Infection
- 35. Failed infection control policy/hospital hygiene
- 44. Hospital acquired infection
- 45. MRSA

### **Consent/Failure to warn**

- 27. Fail to warn (informed consent)

### **Facilities & Equipment**

- 10. Equipment malfunction
- 63. Lack of adequate Facilities/Equipment

### **Assault (to patient & by patient)**

- 57. Injured by another patient
- 58. Injury/harm to others by patient

### **Discharge**

- 52. Inappropriate discharge

### **Admissions/Referral**

- 28. Fail/Delay admitting to hospital
- 29. Fail/Delay availability of SCBU beds
- 30. Fail/Delay availability of operating theatres
- 33. Fail/Delay referring to hospital

### **Unexpected death**

- 84. Unexpected death

### **Other**

- 1. Application of excess force
- 2. Assault, etc by Hospital staff
- 5. Clinical Trial
- 51. Inappropriate case selection
- 54. Incidents in community by absconded/discharge patient
- 60. Intubation problems
- 66. Mendelsohn's syndrome
- 67. Not specified
- 70. Other
- 76. Problems with medical records
- 78. Removal & retention of organs
- 80. Self harm
- 81. Sexual Abuse
- 83. Tooth Injury cases & patient positioning problem
- 86. Unlawful detention – mental health

### **Unknown**

- 85. Unknown

## APPENDIX 5: CASE SPECIALTY

1. Accident & Emergency
2. Allied Health Professions
3. Anaesthetics & Pain Management
4. Blood Transfusion
5. Burns, Plastic and Maxillofacial Surgery
6. Cardiac Surgery
7. Cardiology
8. Child & Adolescent Psychiatry
9. Children and Young People Services
10. Clinical Genetics
11. Community Nursing/Midwives
12. Community Paediatrics
13. Day Care Services
14. Dentistry
15. Dermatology
16. Domiciliary Services
17. ENT
18. General Medicine
19. General Surgery
20. Genito-Urinary Medicine
21. Geriatric Medicine
22. Gynaecology
23. Haematology (Clinical)
24. Infectious Diseases
25. Joint Consultant Clinics
26. Learning Disability
27. Mental Health Acute
28. Mental Health Community
29. Neonatology
30. Nephrology
31. Neurology
32. Neurosurgery
33. Nuclear Medicine
34. Obstetrics
35. Occupational Health Medicine
36. Old Age Psychiatry
37. Oncology
38. Ophthalmology
39. Other
40. Paediatric Neurology
41. Paediatric Surgery
42. Paediatrics
43. Palliative Care
44. Pathology (Laboratory Services)
45. Pharmacology

46. Physical Disability/Sensory Support
47. Radiology
48. Rehabilitation
49. Residential Care
50. Supported Living
51. Thoracic Surgery
52. Trauma & Orthopaedics
53. Urology
54. Vascular
55. Unknown

## APPENDIX 6: HOSPITAL INFORMATION BRANCH (HIB)

Hospital Information Branch is responsible for the collection, quality assurance, analysis and publication of timely and accurate information derived from a wide range of statistical information returns supplied by the Health & Social Care (HSC) Trusts and the HSC Board. Statistical information is collected routinely from a variety of electronic patient level administrative systems and pre-defined EXCEL survey return templates.

The Branch aims to present information in a meaningful way and provide advice on its uses to customers in the HSC Committee, Professional Advisory Groups, policy branches within the DoH, other Health organisations, academia, private sector organisations, charity/voluntary organisations as well as the general public. The statistical information collected is used to contribute to major exercises such as reporting on the performance of the HSC system, other comparative performance exercises, target setting and monitoring, development of service frameworks as well as policy formulation and evaluation. In addition, the information is used in response to a significantly high volume of Parliamentary / Assembly questions and ad-hoc queries each year.

Information is disseminated through a number of key statistical publications, including: Inpatient Activity, Outpatient Activity, Emergency Care, Mental Health & Learning Disability and Waiting Time Statistics (Inpatient, Outpatient, Diagnostics and Cancer). A detailed list of these publications is available from:

**Website:** <https://www.health-ni.gov.uk/topics/doh-statistics-and-research>



Further information on Clinical / Social Care Negligence Cases in Northern Ireland, is available from:

Michael O'Donnell  
Hospital Information Branch  
Information & Analysis Directorate  
Department of Health  
Stormont Estate  
Belfast, BT4 3SQ

Email: [statistics@health-ni.gov.uk](mailto:statistics@health-ni.gov.uk)

This Statistical bulletin and others published by Hospital Information Branch are available to download from the DoH Internet site at:

Internet address: <https://www.health-ni.gov.uk/topics/doh-statistics-and-research>