



Ref: FOIA Reference 2024/25-322

Royal Stoke University Hospital
Data, Security and Protection
Newcastle Road
Stoke-on-Trent
Staffordshire
ST4 6QG

Date: 6th November 2024

Email foi@uhnm.nhs.uk

Dear Sir/ Madam

I am writing to acknowledge receipt of your email dated 16th August 2024 requesting information under the Freedom of Information Act (2000) regarding cataract surgery

Q1 Under the Freedom of Information Act 2000, we are writing to request information related to postoperative infections associated with cataract surgeries within your Trust.

Given the clinical importance of postoperative infections, we seek information to conduct a National Ophthalmology Database audit (<https://nodaudit.org.uk/>) on the incidence rates of infection following cataract surgery (referred to as endophthalmitis or presumed-infectious endophthalmitis (PIE)). As these infections are rare – occurring in fewer than 1 per 1000 cataract surgeries – it is necessary to analyse data spanning several years to obtain accurate rate estimates.

We request the following information for the four-year period from 1st April 2019 to 31st March 2023:

- 1. Post-procedural Endophthalmitis Monitoring or audit:**
 - **Is there a policy/pathway in place for monitoring or regularly auditing the rates of post-cataract endophthalmitis in your organisation?**
 - Yes – (Please provide reports from this process as electronic copies or appropriate weblinks if the information is already available to the public)**
 - No**

A1 Yes, cases of endophthalmitis are discussed in the Mortality and Morbidity section of our Clinical Governance Meeting (CGM) held roughly every couple of months (5 or 6 meetings a year). The case should be added to the Mortality and Morbidity Folder for each specific dated meeting (ideally prior to the meeting). Cases from outside the organisation but managed by the organisation rarely may arise from discussion in the Complaints and Praise section of the

CGM. Any concerns are raised regarding management or frequency and escalated as necessary.

There is also an annual Trust Mortality and Morbidity meeting where the whole year is collated and discussed and that would highlight any worrying trends. The numbers of cases have not been formally audited

Q2 Endophthalmitis Treatment Policies and Pathways

Do you have a treatment policy for post-cataract presumed infectious endophthalmitis in your hospital detailing timing of treatment, investigations or antibiotic regimes?

Yes – (Please provide details as electronic copies)

No

A2 Please see attached

Q3 Cases of Endophthalmitis:

Please could you list the cases of suspected post-cataract surgery endophthalmitis which were recorded across the four NHS Audit years from 1st April 2019 to 31st March 2023. The purpose of this request is to cross-reference these cases with those reported to the National Ophthalmology Database. To do this we require the list of cases with:

- **the date of the cataract surgery that resulted in suspected endophthalmitis**
- **the location where the cataract surgery was performed**
- **the date of diagnosis of suspected endophthalmitis**
- **the laterality of affected eye (right or left)**

Additionally, if your hospital has treated any patients for suspected endophthalmitis originating from cataract surgeries performed at another facility, please include these cases as well. It is essential to clearly indicate the location where the cataract surgery was undertaken.

A3 See attached spreadsheet

Q4 Microbiology and Antimicrobial Resistance:

There may be changing patterns of infective agents or emerging strains of resistant bacteria. We therefore request information on each case from the microbiology report:

- **What sample was sent to microbiology (vitreous biopsy or anterior chamber tap)?**
- **What are the microbiology culture or PCR results for the recorded cases of endophthalmitis? (please include negative results of “no growth”)**
- **What antimicrobial resistance was reported from these cultures?**

The information will be used to evaluate current clinical practices and potentially influence future guidelines to enhance patient care quality within NHS services.

If at all possible, we would be grateful if the information could be provided on the Excel spreadsheet sent with this FOI request.

A4 See attached spreadsheet.

*Please note that any individuals identified do not give consent for their personal data to be processed for the purposes of direct marketing.

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An anonymised copy of this request can be found on the Trust's disclosure log, please note that all requests can be found at the following link: <http://www.uhnm.nhs.uk/aboutus/Statutory-Policies-and-Procedures/Pages/Freedom-of-Information-Disclosure-Log.aspx>

This letter confirms the completion of this request. A log of this request and a copy of this letter will be held by the Trust.

If you have any queries related to the response provided please in the first instance contact my office.

Should you have a complaint about the response or the handling of your request, please also contact my office to request a review of this. If having exhausted the Trust's FOIA complaints process you are still not satisfied, you are entitled to approach the Information Commissioner's Office (ICO) and request an assessment of the manner in which the Trust has managed your request.

The Information Commissioner may be contacted at:

Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow, Cheshire SK9 5AF or via www.ico.org.uk.

Yours,



Rachel Montinaro
Data Security and Protection Manager - Records



University Hospitals
of North Midlands
NHS Trust

