

Lady Dorit Young of Dartington
67 Gibson Square
London
N1 0RA

20 June 2022

Dear Lady Young,

Further to our recent correspondence, I am writing in response to the complaint you raised with Moorfields Eye Hospital. I would like to begin by saying how sorry I am to learn of your concerns, and I apologise for any distress this may have caused you.

I have been assisted in my investigation by Mr Mark Maynard, Quality Partner, Moorfields South. This response has also been reviewed by Dr Louisa Wickham, Medical Director.

Please let me start by expressing how saddened we all were to hear of Gaia's untimely passing, please accept our condolences at this difficult time.

Following receipt of your letter, Gaia's care was discussed at the trust serious incident (SI) panel meeting. This meeting, which is chaired by the trust's clinical lead for quality and safety, who is also a consultant ophthalmologist, is multi-disciplinary and is also attended by senior doctors, nurses and managers.

At this meeting it was agreed that a root cause analysis (RCA) investigation should be carried out to identify whether there had been an incident leading to any harm due to Gaia's care and treatment. It was agreed that a manager from another division (rather than the City Road team who provided Gaia's care) would lead the investigation, with the expert assistance of ophthalmic consultants who had also not been involved in Gaia's care. Mr Maynard was given this responsibility and involved Mr Nadeem Ali, ophthalmic consultant specialising in Neuro-Ophthalmology, and Miss Bejal Shah, ophthalmic

consultant, and service director for the Urgent Care service at our site in St George's Hospital, Tooting.

Mr Ali reviewed the care provided at Gaia's appointment on 4 December 2019 in the Neuro-Ophthalmology service. Miss Shah reviewed the care provided at her A&E attendance on 18 December 2019.

Both consultants have confirmed that the care provided to Gaia at these appointments was appropriate and that a review of the OCT images (OCT scans are used to look at the retina in more detail) taken on 4 December 2019 showed no evidence of optic disc swelling which you explained is a key concern.

I have included all the findings and conclusions from the RCA investigation below. Our investigation has not found anything untoward or surprising during Gaia's care and treatment and therefore there is no indication of an incident occurring. We have found there was potentially a small administrative issue relating to Gaia's A&E visit and this is explained at point 4 below:

- 1) On the OCT images I received from Moorfields the optic disc margins seem blurred and the optic discs elevated in both eyes. If "OCT imaging confirmed no oedema of the optic discs or signs of optic disc drusen", what do they think was the reason for the raised / swollen nerve? The results letter is unclear and does not go into enough detail regarding the images in order to understand the diagnosis of "no abnormality".

Mr Nadeem Ali, Ophthalmic consultant specialising in Neuro-Ophthalmology who works within a different part of the organisation, reviewed the OCT images that were taken on 4 December 2019. He confirmed that there "was no evidence of optic disc swelling at the time they were seen and the management was appropriate".

- 2) My daughter had for 2yrs+ headaches when she was seen at Moorfields by Ms Braithwaite. Hence, she was not "asymptomatic" as referred to by Ms Braithwaite. These headaches continued. There is no mentioning of headaches in the results letter. Why not? Did she enquire about those headaches?

There is no evidence in the handwritten clinical record from 4 December 2019 that the history of headaches was discussed between Gaia and the doctor who saw her. As the images of the optic discs showed that there was no swelling there would not have been a link between the optic discs and the headaches.

3) I understand that Moorfields together with Birmingham was part of the first phase of the IIH:Life Registry databank founded by Professor Dr Sinclair to be used by Neurologists / Neuro Ophthalmologists in order to raise awareness and understanding of IIH (Idiopathic Intracranial Hypertension). If a young woman of childbearing age gets referred because of long-term headaches and blurred optic disc margins, should this not have rung alarm bells and certainly given reason for a call back instead of an immediate discharge?

The investigation found that as there was no evidence of swollen optic discs at the appointment of 4 December 2019 and Gaia's discharge was appropriate.

4) Why was my daughter called a "frequent attender of Emergency Department" by Dr Taha Spomro after seemingly only 1 time? Gaia had attended Moorfields A&E Department 18 Dec 2019 with an eye injury in her right eye.

A review of the trust's appointment booking software has shown that Gaia only attended the A&E department once. The doctor who saw the patient on the day is no longer employed by the trust, so it has not been possible to speak with them regarding this entry. A review of the drop down menu to populate the letter has shown that "frequent attender of emergency department" is below the option for "no safeguarding concerns identified" and it is thought that the incorrect option was selected in error. An incident has been reported retrospectively by the head of risk & safety to acknowledge this error.

Please accept my sincere apology for the distress that this has caused to the family.

I am sorry that we have been unable to provide you with any further clarity for you to understand the cause of Gaia's death.

I am very sorry that you have had cause to complain, and I hope this letter addresses the issues you have raised. However, should you feel there are aspects of your complaint that have not been adequately addressed, please do not hesitate to contact Ms Marion Keys, Complaints Manager, by telephone on 020 7566 2054 or by email at moorfields.complaints@nhs.net Resolving concerns at local level is the aim of the NHS complaints procedure; therefore we will be happy to reconsider any outstanding issues you may have so that a resolution can be reached.

If you remain unhappy with the outcome of the local resolution process the Parliamentary and Health Service Ombudsman (PHSO) may be able to help

you by independently reviewing your case. I am enclosing a leaflet in which you will find information about their role and their contact details.

Yours sincerely

A handwritten signature in black ink, appearing to read 'Ch'.

Dr Martin Kuper
Chief Executive