



Resolution

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FOI_7778

The following information was requested on 12 March 2026 and clarified on 13 March 2026:

[On 12 March 2026 you requested] –

*I would be most grateful for your help. I am I am writing an paper of treatment of allergic eye disease. This is often treated with steroid eye drops. I understand there have been legal cases in the past regarding **steroid induced glaucoma** - as a result of treatment with steroid eye drops.*

Is there an easy way of getting a list of the medico-legal cases in ophthalmology, e.g. over the past 10 years? Or perhaps the ones which passed through NHS resolutions? Unfortunately I'm not aware of a directory of court cases to refer to.

[On 12 March 2026 we replied with] –

I am responding to your query below which was passed to our team.

*We can provide you with information regarding claims for **ophthalmology**.*

We could provide you with the number of claims received for the specialty and also the number closed with nil damages paid, number closed with a damages payment and associated costs, breakdown by primary cause, breakdown by primary injury.

Please refer to our publication: [Guidance-note-Understanding-NHS-Resolution-data-updated](#) and a set of codes against which claims are logged: [CNST-Codes.xlsx](#) (see the three tabs in the spreadsheet).

You can also check our publications:

[Annual statistics - NHS Resolution](#) (Number 1, 2 and 3 have a breakdown by specialty including ophthalmology)

[Fol Requests Archive - ophthalmology](#) – previous FOI responses.

Please, can you review the guidance above and confirm which data you are interested in.

[On 12 March 2026 you replied with] –

Thank you I have checked these documents

Are you able to provide more information regarding each claim? I.e. the specific circumstances? As the categorisation in the FOI responses (breakdown by primary cause/injury) does not provide much information. I was really just looking at the details of the paediatric ophthalmology cases.

I would be interested in the data if it's not a large administrative burden. But if it will take a long time/resources for your department to pull this information I wouldn't proceed with the request.

[On 13 March 2026 we replied with] –

Thank you for your email.

We would be unable to disclose any details that would allow the identification of the individual claim, where it could lead to the breach of the Data Protection requirements. We can only provide aggregated data i.e. numbers of claims per trust or per cause.

We could offer a breakdown of claims for ophthalmology where patient was under 18 years old, but only number, without details of individual claim.

Would you be interested in this data?

[On 13 March 2026 you replied with] –

Yes that data would be useful. Could you kindly send it for me? Thank you.

Our Response

Please find attached the requested information we are able to provide. This information only covers England and not the rest of the UK.

Please note: We have recently changed the way we report on our FOIs to align better with our published documents. Streamlining our reporting on FOIs with our annual published reports may mean a variation in snapshot dates. This means this data may not align with previous similar requests and it may not be possible for you to compare this information with a previous request. For further information, please refer to [Understanding NHS Resolution data - NHS Resolution](#)

Claims notified/received in any given year will often relate to incidents that have occurred many years prior. Due to the nature of clinical negligence claims and the level of investigation needed to bring them to a resolution, claims received and notified in a specific year may take years to settle and close. They are not guaranteed to be settled and closed in the same year. As such, there will be a time gap between incident and claim closure. Not all claims received will result in an award of compensation.

Due to the way in which data is extracted, it is also possible that the same claim may appear more than once in a dataset, across different year groups e.g. where the case has been closed (as nil damages payment), challenged, reopened, and closed again at conclusion.

The data shows variation in numbers of cases received, closed, settled as a PPO per year and costs attributed to those claims. This is a reflection of the nature of individual claims received and resolved by NHS Resolution which can vary significantly. As such these fluctuations cannot be interpreted as trends.

The data provided covers our [Clinical Negligence Scheme for Trusts - NHS Resolution](#).

Please find attached the following tables:

Table 1: Number of CNST Claims and Incidents received between financial years '2015/16' and '2024/25' where the Specialty is '**Ophthalmology**' and the Patient Age at Incident is under 18.

Table 2: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Specialty is '**Ophthalmology**' and the Patient Age at Incident is under 18. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

Table 3: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Specialty is '**Ophthalmology**' and the Patient Age at Incident is under 18. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Primary Injury.

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Table 5: Number and Cost of CNST Claims Closed between financial years '2015/16' and '2024/25' with **NIL** damages paid where the Specialty is '**Ophthalmology**' and the Patient Age at Incident is under 18.

PPOs

The information disclosed includes damages and costs paid up to the end of the settlement year (in Periodical payment order (PPO) cases) and up to the end of the closure year in non-PPO cases.

PPOs are an agreement between the parties, to pay an initial lump sum and regular future payments (PPO damages) related to the injured party's ongoing needs, usually care for life i.e., a percentage of the full value of the claim is paid at the point of settlement (lump sum damages) with the balance paid at regular intervals over subsequent years. The information disclosed includes lump sum damages, costs and any PPO damages paid up to the end of the year of settlement. It does not include PPO damages, which have been committed to but due to be paid after the settlement year.

Low figures

We have not provided the information for low figures involved as we believe that disclosure of information with this level of granularity is exempt under Section 40(2) by virtue of section 40(3A) (a) of the FOI 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.

Further to our obligations to provide advice and assistance, you may find it helpful to review the work of the [Getting It Right First Time team](#) with whom NHS Resolution has been working with to undertake in-depth analysis of our claims data. They have produced a number of [reports](#) from analysing our claims data which has been shared following approval of the confidentiality advisory group to the use of confidential patient information for this purpose.

Please refer to [Understanding NHS Resolution data](#) guidance for further details on how our Claims database is categorised.

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 [Joanne Appleby](#), Deputy

Data Protection Officer 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.

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Table 1: Number of CNST Claims and Incidents received between financial years '2015/16' and '2024/25' where the Specialty is 'Ophthalmology' and the Patient Age at Incident is under 18.

Notified Y

Year of Notification	No. of Claims
2015/16	15
2016/17	10
2017/18	23
2018/19	9
2019/20	11
2020/21	14
2021/22	8
2022/23	12
2023/24	15
2024/25	13
Grand Total	130

Table 2: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Specialty is 'Ophthalmology' and the Patient Age at Incident is under 18. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement.

ClaimOutcome	Damages Paid
ClosedSettled	Y

Year of Closure (Settlement Year for PPOs)	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid
2015/16	6	319,512	10,427	90,500
2016/17	6	1,202,985	112,498	587,500
2017/18	7	2,437,565	288,397	754,800
2018/19	#	#	#	#
2019/20	6	5,146,125	204,400	525,049
2020/21	5	2,838,132	141,260	378,879
2021/22	#	#	#	#
2022/23	10	9,540,272	514,581	1,444,112
2023/24	9	3,662,144	423,869	1,293,643
2024/25	8	6,295,744	439,503	1,219,000
Grand Total	65	37,658,086	2,559,169	7,686,836

Table 3: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Specialty is 'Ophthalmology' and the Patient Age at Incident is under 18. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Primary Injury.

ClaimOutcome	Damages Paid			
ClosedSettled	Y			

Primary Injury	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid
Other Visual Problems	28	14,532,555	881,553	2,703,218
Blindness	18	21,352,937	1,483,888	4,035,635
Adtnl/unnecessary Operation(s)	7	1,277,446	107,217	436,500
Unnecessary Pain	#	#	#	#
Brain Damage	#	#	#	#
Fracture	#	#	#	#
Other Infection	#	#	#	#
Scarring	#	#	#	#
Burn(s)	#	#	#	#
Psychiatric/Psychological Dmge	#	#	#	#
Grand Total	65	37,658,086	2,559,169	7,686,836

Table 4: Number and Cost of CNST Claims Closed (or settled with a periodical payment order) between financial years '2015/16' and '2024/25' with a damages payment, where the Specialty is 'Ophthalmology' and the Patient Age at Incident is under 18. The data includes the damages and legal costs paid up until the end of each relevant financial year of closure, or for PPO matters, year of settlement. Broken down by Primary Cause.

ClaimOutcome	Damages Paid			
ClosedSettled	Y			

Primary Cause	No. of Claims	Damages Paid	NHS Legal Costs Paid	Claimant Legal Costs Paid
Fail / Delay Treatment	24	18,426,891	1,277,885	3,436,637
Failure/Delay Diagnosis	12	10,748,411	620,113	1,562,382
Failure To Perform Tests	5	3,859,075	296,480	1,074,123
Fail To Follow-Up Arrangements	#	#	#	#
Operator Error	#	#	#	#
Err With Agnt/Dose/Route/Selec	#	#	#	#
Inappropriate Treatment	#	#	#	#
Delay In Performing Operation	#	#	#	#
Fail To Warn-Informed Consent	#	#	#	#
Failure To Interpret X-Ray	#	#	#	#
Fail/Delay Referring To Hosp.	#	#	#	#
Probs With Medical Records	#	#	#	#
Equipment Malfunction	#	#	#	#
Inadequate Nursing Care	#	#	#	#
Wrong Diagnosis	#	#	#	#
Fail To Supervise	#	#	#	#
Intra-Op Problems	#	#	#	#
Grand Total	65	37,658,086	2,559,169	7,686,836

Table 5: Number and Cost of CNST Claims Closed between financial years '2015/16' and '2024/25' with NIL damages paid where the Specialty is 'Ophthalmology' and the Patient Age at Incident is under 18.

ClaimOutcome	Nil Damages
ClosedSettled	Y

Year of Closure	No. of Claims	NHS Legal Costs Paid	Claimant Legal Costs Paid
2015/16	10	29,924	11,500
2016/17	14	28,803	0
2017/18	13	25,297	0
2018/19	6	44,174	0
2019/20	#	#	#
2020/21	6	37,921	0
2021/22	#	#	#
2022/23	5	17,492	0
2023/24	#	#	#
2024/25	5	43,275	0
Grand Total	71	277,603	11,500