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# NED NEWSLETTER

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In the eye health programme planning and implementation cycle, the two important steps often neglected by programmers are Monitoring and Evaluation. These are the essential outcome parameters of any eye health interventional programme without which the programme will lose its sustainability and eventually fail. Since its inception, NED has played a significant role within the national agenda to do as such. But NED in itself is a programme which needs monitoring and evaluation in particular with regards to data quality and utility. Please ask this question to ourselves. Have we done sufficient monitoring to improve data quality in NED? Have we used the data that we feed to NED to improve service or for publication?

## DATA UTILITY

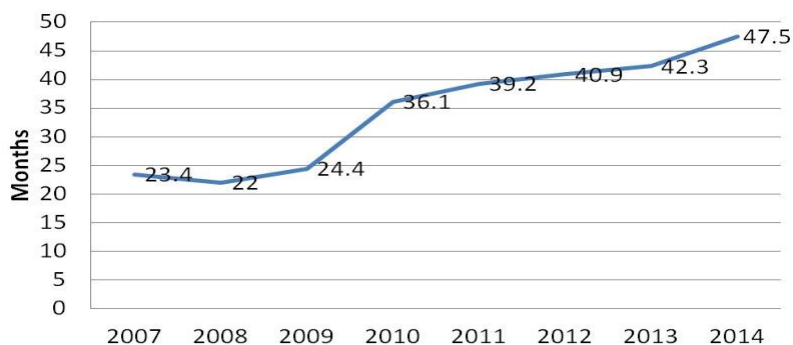
The NED has the capability for data captured to be downloaded in realtime in the form of either reports/graphs (PDF format) or raw data (excel spreadsheet). Data can then be presented to all levels of staff (Paramedics, Medical Officers, Optometrists,

Trainees, Specialists and Consultants) for example, at departmental CME sessions for dissemination of information. Such opportunity for information sharing would in turn generate interests and foster discussion to formulate local action plans for improvement

both at departmental and service/ministerial level. Regular 2-4 monthly presentation will in addition allow early cleaning of data thereby ensuring data completeness, reliability and accuracy.

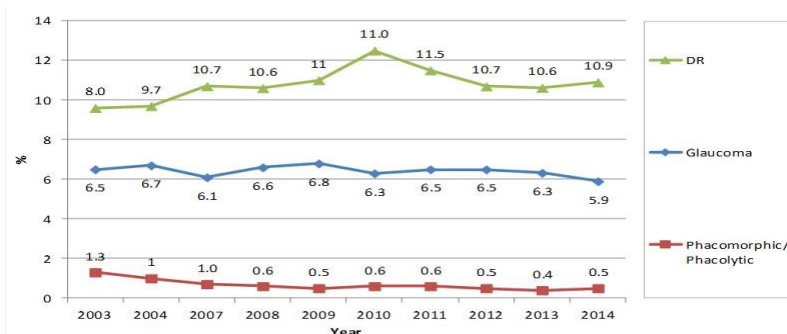
# CATARACT SURGERY REGISTRY 2014 HIGHLIGHTS

## Mean Duration Between First and Second Eye Surgery



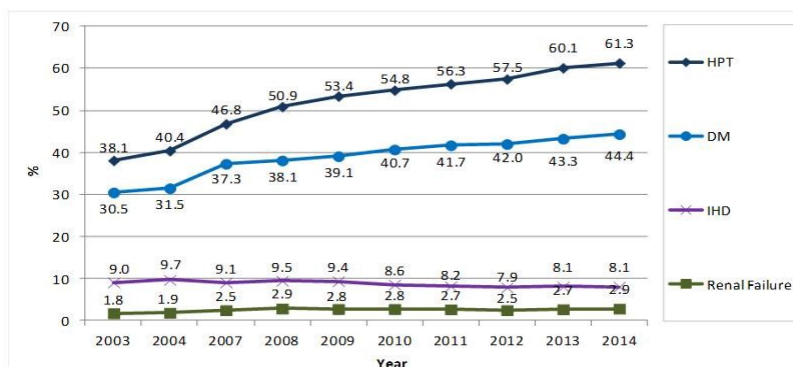
The mean duration between the first and fellow eye surgery showed an increasing trend, from 23.4 months in 2007 to 47.5 months in 2014.

## Ocular Co-morbidity



Percentages of eyes with Diabetic Retinopathy (DR), glaucoma and hypermature cataract appear to be the same over the years

## Systemic Co-morbidity



Percentages of patients with Hypertension (HPT) and Diabetes Mellitus (DM) are increasing over the years:

- from 38.1% in 2003 to 61.3 % in 2014 for HPT (double folds in a period of 10 years)
- from 30.5% in 2003 to 44.4 % in 2014 for DM

## CATARACT FINDER TRAINING

This is one of the eye health initiatives carried out by the Malaysian Ministry of Health.

The activity is part of the Cataract Free Zone (CFZ) initiatives (besides Klinik Katarak 1Malaysia and the National IOL bank). The objectives of cataract finder training are:

- To equip the community and health staff with the basic and necessary knowledge and skill to diagnose cataract
- To empower the community and health staff to do active case findings and act as feeders of cataract cases for hospitals and KK1M locations
- To reach out to the community through cataract finders, particularly in remote areas
- To create a network of eye care referral system be-

tween primary and secondary eye care centers

- To create a platform for the training and involvement of NGOs
- To disseminate information on Cataract Free Zone Project and to market eye health services

Cataract finders include healthcare staff both in the public (Non-ophthalmology Medical Officers, Optometrists, Medical Assistant, Nurses) and private (GP, Optometrist, Optician) healthcare sectors and community members (Community Leaders, Health Advisory Panel, NGO volunteers).

Training consists of one day or less interactive lecture on CFZ, anatomy, cataract care pathway and hands on training

on how to diagnose cataract using torch light and direct ophthalmoscope.

Personalised discussion on how to incorporate the cataract finder activities into the participants' work-process and how to refer patients to the nearest ophthalmology facilities will be done at the end of the training.

WhatsApp group chat will be created to form a referral network between the participants and an ophthalmologist coordinator.

## IAPB

The International Agency for the Prevention of Blindness (IAPB) is an alliance of civil society organisations, corporate and professional bodies promoting eye health through advocacy, knowledge and partnership

IAPB's mission is to eliminate the

main causes of avoidable blindness and visual impairment by bringing together governments and non-governmental agencies to facilitate the planning, development and implementation of sustainable national eye care programmes.

IAPB promotes VISION 2020, its joint initiative with the World Health Organization (WHO).

IAPB will be sponsoring a series of Cataract Finder training which will be conducted in Queen Elizabeth Hospital, Kota Kinabalu from August—December. The training will be conducted monthly and will include an extra day of phaco training for junior ophthalmologist.





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The National Eye Database (NED) is a service supported by the Ministry of Health (MOH) as an approach to collect health information. It collects data on incidences and distributions, and evaluates risk factors as well as treatment outcome of visually threatening eye diseases such as cataract, diabetic retinopathy, glaucoma and contact lens related corneal ulcer. In the initial phase, NED will collect data on cataract surgery, status of diabetic retinopathy in new diabetic patients, contact lens related corneal ulcer and glaucoma patients. Besides disease registry, NED also collects monthly service census of MOH Ophthalmology departments. The census serves as an effort to monitor key performance indicators of each ophthalmology department in the MOH. Information collected in the NED is very useful in assisting the MOH, Non-Governmental Organizations, private healthcare providers and industry in program planning and evaluation, leading to eye disease prevention and control.

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**We're on the web**

<http://www.acrm.org.my/ned>

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## MANILA-NED



A delegation from the Philippines visited Selayang Hospital from 11-12th April 2016.

The group comprised of the Regional Advisor for Inclusive Eye Health, representative from the Christian Blind Mission (CBM), Southeast Asia and

Pacific Office, Chairperson of the Community Ophthalmology Committee of the Philippines Academy of Ophthalmology and IT consultants from the Philippines Ministry of Health.

The purpose of their visit was not only to develop a working network with their Malaysian colleagues but more importantly to learn about

the NED as they plan to develop a performance monitoring system in their country.

Discussion on the country eye health and presentation on the NED methodology and findings were conducted on the first day.

This was followed by IT demonstration and a visit to Selayang Hospital and MAIWP-HS cataract center on the second day.

There was no doubt that The Philippines delegates had achieved the objective of their visit. But more importantly both countries had been able to share essential information about each country's eye health system. This information is indeed useful for both country's eye health system planning and further development.