

NED NEWSLETTER

National Eye Database

WHO/IAPB MEETING ON CATARACT SURGICAL OUTCOME PERFORMANCE MONITORING

Malaysian MOH concerted effort in Cataract Surgical Outcome Monitoring achieved another milestone when it received offer and nomination from both WHO and IAPB to host a premier event related to the same topic. In implementing part of the Action Plans of the WHA66.4 Resolution, both bodies recognized and endorsed our work and wanted Malaysia to be placed at the forefront to lead this global initiative.

A series of vetting meetings initiated at the global level by the IAPB early in the year has finally culminated in a successful prestigious event conducted at Hospital Shah Alam in September 2018.

Besides representatives from the member countries within the Western Pacific Region, the two days meeting was attended by key representatives from the ICO and other prominent International Bodies/NGO such as Fred Hollow Foundation, Brian Holden Vision Institute, CBM and ORBIS.

Malaysia has indeed benefited from the discussion on eye health during the meeting, but more importantly the meeting has achieved part of its objectives in creating regional (later global) interests to give due focus not only in eliminating cataract blindness globally but also to provide services with quality. Countries like Viet



WHO/IAPB meeting on cataract surgical outcome performance 19-20th September 2018 Hospital Shah Alam

Nam and Papua New Guinea have already expressed their intention to simulate us in their quests for systematic country performance monitoring in cataract surgery.

This meeting would not have been possible without the joint efforts of the organizing committee and hospital staff (from the driver to the MOs, Optometrists and Ophthalmologists). A big clap and thank you to all of you...

DELAYED DATA ENTRY

Consensus has been reached that data from the **Pre-clerking** and **Operative** forms shall only be entered online once the surgery is done. Data from both forms shall be entered by the MO who is present in OT during surgery and shall be done in real-time. This is particularly important to be observed and implemented otherwise real-time monitoring system such as

CUSUM-PCR will not work. Real-time data entry also ensures accuracy and completeness of all data fields in the forms as late data entry may involve data recall which may lead to inaccurate data entry.

Meanwhile, data for the **Outcome** form shall be entered online by the attending Optometrists 12 weeks later.

Analysis of data entry

pattern by hospitals in 2017 showed that the average duration taken by the MOs to enter data ranged from 0 day to 51 days.

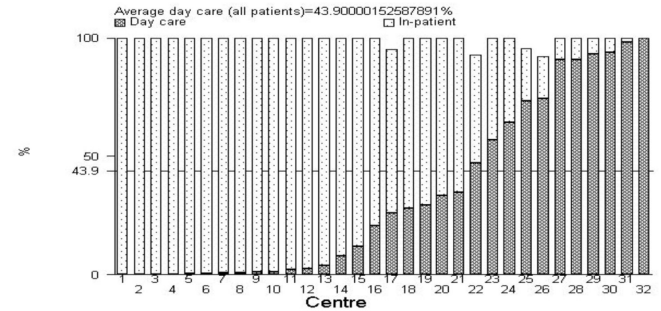
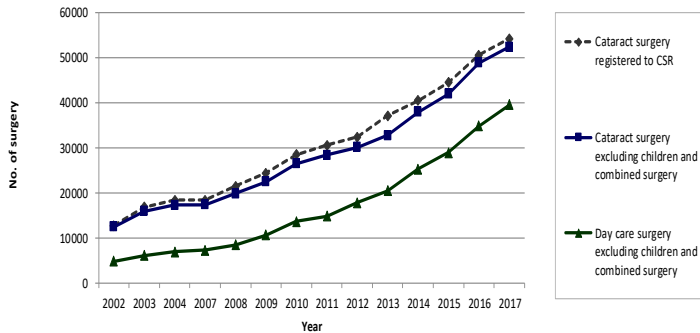
Root cause analysis revealed that the hospital with an average of 51 days data entry for example, delegated tasks to enter data for all forms to the Optometrists (who would only enter data once outcome was obtained 3 months later).

GLOSSARY

CUSUM=Cumulative Sum
 ICO=International Council of Ophthalmology
 IAPB=International Agency for the Prevention of Blindness
 MO=Medical Officer
 MOH=Ministry of Health
 OT=Operating Theatre
 PCR=Posterior Capsular Rupture
 WHA=World Health Assembly
 WHO=World Health Organization



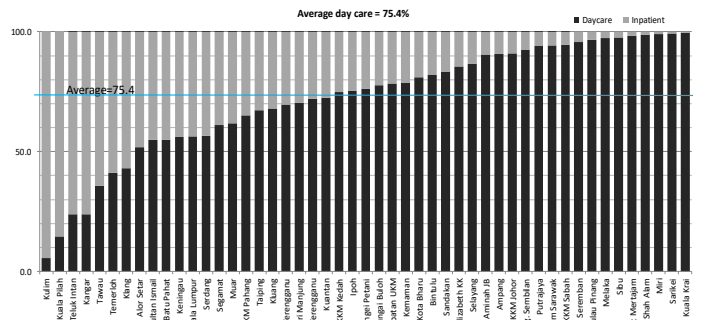
DAYCARE PRACTICE— IMPROVEMENT TROUGH THE YEARS



Distribution of Cataract Surgery Performed as Day Care by SDP (Excluding Surgery Done in Children and Combined Surgery), CSR 2002-2017

- SDP = Source Data Producer
Stacked Bar:
- light grey = admission
 - Dark grey = daycare

Daycare year 2007 (Hospitals were coded)



Daycare year 2017

IT'S A WRAP FOR AVIS 2018

Optometrists have been conducting preschool vision screening using a standardized AVIS protocol starting 2018. A total of 5848 children were screened, with equal distribution of the male and female gender. The majority of the children screened were Malays (86%). The percentage of children aged 6, 5 and 4 years old are 43%, 42% and 14% respectively. 25% (1470) of the children screened failed. These children were referred for further examination at the hospital. The results of screening are shown in Figure 1 below.

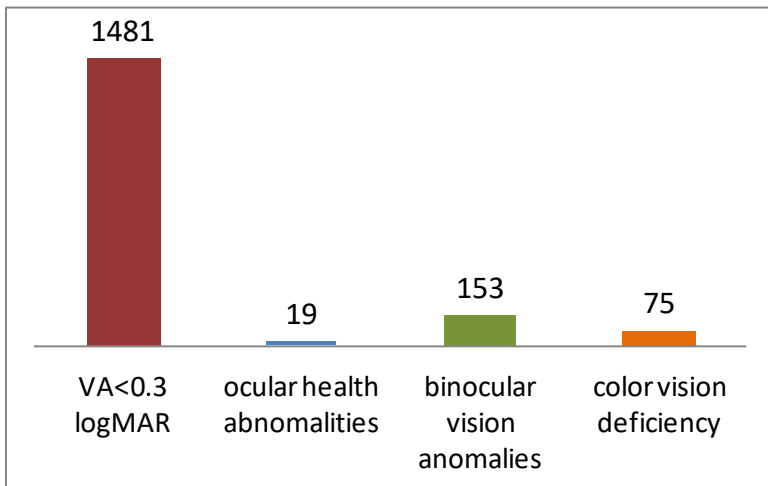


Figure 1: Results for Children Screened with AVIS test 2018