

ORGANIZING THE OUTREACH ACTIVITIES

CASE PRESENTATION: FHF VIETNAM PROGRAM

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Presentation Overview

Background
Needs
Solutions
Lessons learned

Background

- Blindness is a public health issue in Vietnam. 0.63 % of the population are blind.
- The population is approx. 84 millions; The FHF project areas is in Central region of Vietnam; covers of 16 million, of which 1.23% are blind.
- Provincial hospital has mobile team. District hospital can not conduct cataract surgery yet
- Community eye care services and referral systems were not adequately developed to address the rate of avoidable blindness.
- Province: pop. # 1-1.5 M
- District: pop. # 200,000-300,000



Eye care system

- Eye care system based on public health system:MOH
- •Provincial department of Health (DOH)
- District Health Center (DHC)
- Commune Health Station (CHS)
- •Network of Village Health Volunteer (VHV)

Health Care System



Establish community network of eye care providers



Community health workers training in Quang Tri



Community health workers screening cataract patients in the villages

Needs

Need to reduce avoidable blindness in Vietnam by:

- Upgrading a tertiary level hospital with appropriate infrastructure and equipment.
- Increasing the number of fully qualified eye care personnel
- Enhancing the quality and quantity of sightrestoring surgeries and other treatments
- Improving access, affordability and awareness of eye care services.

Solutions



To increase number of cataract surgery at commune level

- 1. Fully equip mobile team
- 2. Provide training for local eye care personnel
- 3. Organizing outreach programs

More people can access cataract surgery service at a good quality

CATARACT SURGERY

- Cataract surgery each year 100,000 cases
- In big city there are modern techniques/ equipment
- Most of cataract surgery in the remote areas is free by charity/ NGOs support
- The organizing way of OMEC is very much relied on the existing public health system.

Organizing at hospital/ Eye center

- Assign one coordinator who familiar with the OMEC
- Team has been trained and discussed on the OMEC
- Equipment/ consumables have been prepared and arranged: Box/ metal box for microscope; mini-autoclave; instruments boxes;
- Transport means prepared: vehicles/ motobike

Community eye surgeries





Patients after surgery

Cataract patients and families waiting for surgery

Before one outreach campaign

Inform to CHS and VHV:

- Door to door announcement
- On radio and commune broadcasting
- CHS staff and VHV inform villagers

District doctor have screening

- Go to each commune
- Eye check for villagers
- Have patient list and invite patient to DHC

In the outreach campaign

 Mobile team prepared
 Depend on estimation of number of patients, the team prepared : surgeons, consumable, equipments

Mobile team travel to district

- Set up operation theatre
- Re-Eye check for patients
- Give health education session to all patients

In the outreach campaign

Operation

- Provincial surgeons operate
- District doctor assist and learn
- Other assistant to help with the operation and medical consultation to patients

Health education

- Consider important
- Patient and relatives receive pamphlet, booklet, watching video

Community eye health education



Villagers attending evening eye care education sessions



Refractive error messages in schools

Community eye health education





Delivering health messages to community

In the outreach campaign

Each surgery campaign occur in 2 days, each days operate # 40-50 patients

 Patients stays 2-3 days at the clinic

After the outreach campaign

District doctor take care of post operation care

CHS and VHV will have the list of patients and remind them for the next eye check up

Provincial doctor may come back in the next follow-up : 1 week, 1month, 3 month

SCHOOL SCREENING

- This model work for school screening as well
- Train CHS staff, VHV on basic VA test, on PEC
- Train teacher on VA test, RE
- Mobile team to the school for screening and give prescription
- Followed by health education for children, parents, teachers

Lesson learned and applied

- Fix one date (or 2 dates) of the month for each district; for ex. District A OMEC on 25th
- Mobilize network of VHV to work on these surgery days: to provide health message to patients and relatives
- One week before the surgery day, launch the news and health message on local television, radio
 - Try to re-visit, phone to patients, keep stay in touch, give the list of patient to VHV

Lessons learned and applied (cont)

 Organizing a session of giving post op instruction for all patients before discharge





