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Reference: MD:

Date: 10/7/2023

VISITING TEAM EXIT REPORT

1. Program details

Service provider:	Taveuni Eye Project of The Rotary Foundation
Clinical specialty:	Ophthalmology
Visit Dates:	9th June 2023 to 23rd June 2023
Visit Location :	Waiyevo - Taveuni Island Hospital
Name of Person Completing this report Local Coordinator)	Peter Malden (Project Manager – Team Leader) (Local coordinator)

Program Details continued

Team members			
Name	Role in Team	Duration of service at health facility	Location of current practice
Dr Grace Richter	Surgical Team Leader (Dedicated)	12 days	USA
Dr David Pendergrast	Eye Surgeon (Rotation Roster)	12 days	New Zealand
Dr Federico Rupil	Eye Surgeon (Rotation Roster)	12 days	Argentina
Dr Jeff Rutgard	Eye Surgeon (Rotation Roster)	Did not attend	USA
Nurse Lois Pendergrast	Theatre Operation Specialist	12 Days	New Zealand
Dr Greg Booth	GP – Patient assessments (Dedicated)	12 Days	Tasmania
Dr Bryce Loder	GP – Patient assessments (Assistant)	12 Days	USA
Dr Damien Rodger	Consultant Retina Specialist (Assistant)	12 Days	USA
Ineke van Laar	Medical Supplies Coordinator	15 Days	New Zealand
Jan Beamish	Surgical assistant	12 Days	New Zealand
Barbara	Surgical assistant	12 Days	New Zealand
Shirley Donelley	Sterilising assistant	12 Days	New Zealand

Participating local staff and KEY CONTACTS			
Name	Sex	Role	Health Facility
Nurse Priscila Pillay	F	Patient Nursing and Post Op Care	Taveuni
Nurse Etilia Loalase	F	Patient Nursing and Post Op Care	Taveuni
Dr Ashna Murti	F	Head of Labasa Eye Department	Labasa
Dr Uyanga Enebish	F	Eye Surgeon (Rotation Roster)	Labasa
Nurse Florence Ting	F	Patient Nursing and Post Op Care	Labasa
Nurse Narieta Disele	F	Patient Nursing/Scrub Nursing	Labasa
Nurse Krishneel Chand	M	Patient Nursing/Scrub Nursing	Labasa

Participating Team Members and their roles			
Peter Malden	Project Manager	15 Days	Australia
Michael Prasad	Operations Manager	15 days	Taveuni
Jan Malden	Patient Support	15 Days	Australia
Helene Brown	Data and Statistics	10 days	Taveuni
Byron Fisher	Visual Acuity Testing	10 days	Taveuni
Peter Brown	Supplies and transport	10 days	Taveuni
Maricia Talemaisuva	Patient Recording	10 days	Taveuni
Denise Booth	Visual Acuity Testing	10 days	Tasmania
Naaz Khatija	Visual Acuity Testing	10 days	Taveuni
Kini Aditamana	Visual Acuity Testing	10 days	Taveuni
Sahil Prasad	Backup for managers, Transport	15 Days	Taveuni
Sindu Prasad	Buying Officer, Supplies, Transport	15 Days	Taveuni
Paul Purvis	Web Site design and reporting	15 Days	Taveuni
Pamela Purvis	Patient interviews and reporting	15 Days	Taveuni

Patient Food, Accommodation and Support Team members

Joey	12 Days	Taveuni
Bui	15 Days	Taveuni
Ani	15 Days	Taveuni
Keith	15 Days	Taveuni
Rosie	15 Days	Taveuni
Jasmine	15 Days	Taveuni
Margaret	15 Days	Taveuni
Joanna	15 Days	Taveuni
Tukana	15 Days	Taveuni
Tom	15 Days	Taveuni
Jone	15 Days	Taveuni
Ismail	15 Days	Taveuni

2. Visit Objectives

	Objective as listed in TOR	Comments(s)
i)	Assess patients needing eye surgery for cataract or pterygium – approx. 250 Fiji Society for the Blind assist with initial Patient assessments on site in their villages.	FSB conducted screening on islands as listed below – total number screened – over 350 Achieved Objective - YES
ii)	Conduct cataract surgery – approx. 175 eyes	Cataract Interventions – 177 in total Achieved Objective – YES
iii)	Conduct pterygium surgery – approx. 50 eyes	Pterygium Interventions – 66 in total Achieved Objective – YES
iv)	Patients from Taveuni, Koro and Local Islands	Patients were escorted in from Taveuni, Koro, Kioa, Rabi, Qamea, Vanua Levi and returned to their homes. Achieved Objective – YES
v)	One young child was treated for Conjunctivitis (by a Nurse and Surgeon) after the close of normal project hours. This was a walk-in.	2 patients had other procedures not listed above.
vi)		

3. Summary of Clinical Services

Note: Records of Patient data

Patient records including gender and age MUST be provided for both consultations and operations performed. Data should be completed electronically or by clear handwritten notes and returned with the visit report. Consultation Record and Operations Record templates are provided prior to departure.

Age (Yrs)	0 - 5		6 - 18		19 - 59		60 +		Totals		Grand
Sex	M	F	M	F	M	F	M	F	M	F	Total
No of Pt											
Screened	1	0	4	3	64 +	70 +	105 +	113 +	174 +	186 +	360 +
Consultations	1	0	4	3	64	70	105	113	174	186	360
Intervention Patients	1	0	0	0	30	23	74	86	105	109	214
Intervention Procedures	1	0	0	0	34	31	78	102	113	133	246

Procedure Details	Left Cataract	Right Cataract	Left Pterygium	Right Pterygium	Other	Total
	82	95	34	32	3	246

**Data on the actual number of potential patients screened per village is still being collated.
The number of Patients Screened will be more than the Screened figures above.**

An update on this will follow as soon as we have the data.

4. Summary of Interventions

Type of Intervention	Total Number of Cases	Immediate Outcome
Cataract extraction by Manual Small Incision Cataract Surgery	177	All showed very good results
Pterygium excision and cong. graft	66	All showed very good results
Other	3	Good result
Full medical Tests done with no surgery being required	145	No surgery needed were many walk-ins who had full eye checks and most just needed reading glasses. All informed of the best reading glass strength for them.

Please provide a detailed summary of clinical services provided during this visit including;

1. Screening

a. Level of pre-screening conducted by local staff

Fiji Society for the Blind travelled to villages and islands to do the screening. They have been supplied with all the necessary equipment to carry out eye and health screening. A further training session for FSB has been funded by Rotary to occur shortly. The exact number of screenings will be supplied shortly.

2. Perioperative care

All patients, including all walk in patients, had a full ophthalmic assessment including slit-lamp and / or b-scan analysis.

All surgical patients had full :-

- . pre-operative care
- . post-operative care
- . eye assessment before and after surgery
- . eye medications to take home
- . eye care instructions given by the local nurses
- . a pair of sunglasses to use in the sun

FSB travelled to the villages to escort the patient to and from the Taveuni hospital.

All patients received good food, washing facilities and a bed for the entire time they are with the project.

All pre and post-operative care is supplied by GP's and Trained Nurses.

All this is at NO cost to the Fijian Patients.

5. Capacity Building and Training Activities

Please provide detailed summary of capacity building and training activities delivered during the visit including;

1. Informal Training

- a. Details of scenarios i.e. mentoring, on-the-job skills training, supervision etc
- b. Details of local staff involved

	Capacity Building needs (as listed in TOR)	Comments(s)
i)	Local Nurses from Tavenui and Labasa will assist and be trained in latest techniques	2 Taveuni and 3 Labasa nurses were further trained. After a Covid delay between projects. Achieved Objective – YES
ii)	Dr. Uyanga Enebish – (Labasa) will be trained in the latest techniques	Dr Uyanga participated, was trained and carried out procedures under supervision – 5 days in surgery. Achieved Objective – YES
iii)	Dr Ashna Murti will also attend and be briefed on the latest techniques.	Dr Ashna attended and was fully briefed on the methods and how the team was to work – she supplied much assistance from her position at Labasa. Note – B scan machine was sent to Labasa as a temporary replacement for their broken machine. Achieved Objective – YES

2. Formal Training

- a. Type of training – see above
- b. Topics covered – all aspects of surgery, eye diagnosis and patient care
- c. Details of local staff/students involved ie undergrad/postgrad – see above
- d. Resources provided. All were allocated within the team and trained in situ
- e. Feedback from Participants – all were very happy with the project and expressed a desire to do it all again.

3. Training for the future

- a. Suggested training opportunities for future visits – repeat with additional team members ?
- b. Identify local staff who should be targeted for future training – include any new or trainee staff

6. Equipment and Supplies

Please provide information on the following;

1. Availability and condition of medical equipment in-country
 - . The Rotary Supplied equipment as controlled by the Minister of Health performed very well.
 - . Microscopes will be repaired with new wheels – all on order.
 - . One steriliser will be repaired with parts on order from New Zealand.

Note – one b-scan unit was taken to Labasa to temporary replace their faulty equipment.

2. Availability of supplies in-country –
 - . SEE and Alcon as well as New Zealand and Australia supplied the bulk of The medicines and materials required.
 - . Simba Global supplied all the protective equipment.
 - . Labasa Hospital supplied some medicines and supplies to carry out the last 40 or so procedures – initial project shad supplies for 200 patients and we did 244.
3. Supplies left with hospital-
 - . all unused supplies and medical protective equipment plus sterilising wraps have gone to Labasa Eye Department.
 - . No supplies that could go out of date are left in Taveuni.
4. Recommended procurement for future trips –
 - . continue and build on the cooperation between Labasa and Taveuni due to the closeness and ease of transport between them.

7. Issues

Please report on any issues relating to the visit – no issues raised.

8. Recommendations

Team members are invited to make recommendations. Consider including recommendations on:

- ☐ Frequency of visits - Should ideally be yearly.
- ☐ Clinical needs & priorities - Need to build Labasa capability and investigate the possibility of Labasa staff travelling to Taveuni for local outreach projects.
- ☐ Training needs & priorities – Labasa needs a dedicated Eye Surgery Facility not a shared operating theatre.
Rotary Boronia is happy to help with the provision of such facilities.

9. Debrief

Note: It is imperative that visiting teams be involved in a debriefing session, preferably towards the end of each visit. The debrief should involve the visiting team, local counterparts, a representative from the Ministry of Health, hospital clinical services, AusAID post and other relevant parties. The purpose of the debriefing is to promote linkages and sharing of information. This is an opportunity to discuss visit outcomes, recommendations regarding staffing, training, equipment and hospital operation.

Please provide the following details;

- a. Participants including name, gender, role and organisation
- b. Meeting place and time
- c. Major issues reported/discussed
- d. Outcomes and recommendations
- e. Any attempt made to contact AusAID to arrange a meeting

By having the Labasa team members attend the project and work with the visiting medical team continual learning and feedback was occurring.

The team had their meals together and this allowed for even more informal sharing of information, ideas and skill identification and sharing.

Dr's Ashna and Uyunga were critical parts of the team.

All visiting team members were more than willing to share their knowledge and coached the local staff at all times.

A formal sit down debrief was not considered necessary as everyone shared information and knowledge as the project progressed.

**Labasa is in need of a dedicated Eye Surgery Theatre.
This would allow for more patients per week rather than
only the shared surgery time available now.**

No attempt was made to contact AusAID – project fully funded by Rotary Foundation.

10. General / Other Comments on any aspects of this visit

In general the visit was a huge success.

Items that should be reviewed :-

- Easier entry into Fiji of the necessary medications and supplies is needed.
- Quicker registration process for the visiting medical personnel will help.
- Electronic copies of the forms required for permissions and reports should be created to allow for easy data and information entry. The Project Manager used software to create these WORD documents – plus inserted tables as required.

Apology if the results of the documents are not
exactly as per the instruction booklet.

All care was taken to ensure the basic
information is clear and precise.

Signature	Signed – Peter T Malden Rotary Club of Boronia District 9810 Victoria Australia. and sent via his email.
Name	Peter Malden
Position	Project Manager Team Leader Local Coordinator
Date	10/7/2023