

WAEH
WORLD
ASSOCIATION
OF EYE HOSPITALS

oog[®]

het oogziekenhuis rotterdam
the rotterdam eye hospital



het oogzorgnetwerk
the eye care network

Beyond Borders

10th WAEH annual meeting

in conjunction with

Eye Care Network 12th Anniversary meeting

Wednesday May 25 - Sunday May 29

Alcon[®]

BAUSCH+LOMB
See better. Live better.


oculenti[®]
contactlenspraktijken


ergra low vision

ROCKMED
innovation education cooperation

ZEISS

Locations



The Hulstkamp Building



The Wereldmuseum Rotterdam



The Rotterdam Eye Hospital

Contents

Introduction	3
Program at a glance	5
Detailed program	7
The Rotterdam Eye Hospital	18
The Hulstkamp Building	20
Wereldmuseum	22
City Rotterdam	24
Keynote speakers and speakers	25
Members	40
Colophon	42

Visit the Dutch EYEBus on Thursday the 26th! The EYEBus is parked in front of the congress venue and can be visited the entire day.



Introduction

Beyond Borders



Ms. Charity Wai is the Chief Operating Officer, Singapore National Eye Centre and is the Chair of the WAEH Board since January 2015.

Ms. Wai has over 25 years of eye hospital management experience. She also concurrently holds the appointment of Deputy Group Chief Operating Officer (Operations Integration), Singapore Health Services, an academic medical cluster of 9 healthcare institutions with a staff strength of 16,000 and managing over 3.5 million attendances annually.

As the Chair of the WAEH Board, it gives me great pleasure to introduce to you the 10th WAEH annual conference in Rotterdam, organized by founding member, The Rotterdam Eye Hospital in close co-operation with the team of the WAEH.

Since its inception in 2006 in Rotterdam, the World Association of Eye Hospitals has indeed spread its wings beyond borders, with members coming from the different continents of the United States of America, South America, Europe, Asia and Australia. This year we celebrate an important milestone, the WAEH jubilee year commemorating our 10th anniversary. The WAEH has continued to grow from strength to strength attracting new members from different parts of the world. We have also seen a growth in the number and diversity of participants in our annual meetings and the collaborations and projects undertaken over the years.

I like to extend a very warm welcome to all our delegates who have come to this special jubilee WAEH meeting to exchange knowledge and experience as well as to benchmark and network. I would also like to extend our sincere greetings to the national guests of The Rotterdam Eye Hospital, who will celebrate their 12th meeting of the Dutch Eye Care Network and will join us in Day 1 of our conference.

This year's programme reflects the innovative spirit our host and covers a wide range of interesting topics featuring 3D technology, robotics in the OR, resource planning and sustainable eye care, home eye care, the latest in eye hospital management and also many learning opportunities of best practices from industries outside healthcare.

We hope the meeting will generate a lot of discussion and new ideas that will inspire us to continue to seek new and better ways to transform eye care delivery to our patients, not only during the annual meeting, but throughout the whole year!

On behalf of the WAEH and The Rotterdam Eye Hospital, I would like to wish all of you a thought provoking and fruitful conference and a wonderful stay in Rotterdam!

Warmest regards,

Charity Wai
Chair, WAEH Board

www.waeh.org

BAUSCH + LOMB

See better. Live better.



EyeCee® ONE
PRELOADED



Eyefill®

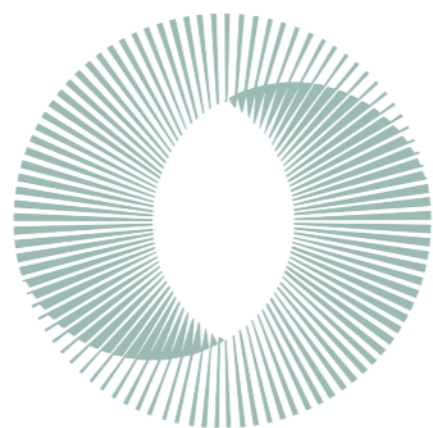


Stellaris Activate™

Program at a glance

Time	Wednesday (25 May 16)	Thursday (26 May 16)	Friday (27 May 16)	Saturday (28 May 16)	Time
		The Hulstkamp Building	The Wereldmuseum	The Wereldmuseum	
8.00					8.00
8.15		Pick up from Bilderberg hotel	WAEH board meeting 2016 at Wereldmuseum		8.15
8.30		Registration	Registration		8.30
8.45	Travel time to Schiphol Rijk				8.45
9.00				Registration	9.00
9.15		Official opening session	Session: Quality & Safety		9.15
9.30	WAEH Board Meeting 2016 at Schiphol Rijk			Session: how to improve your eye hospital? Structure process trends benchmark and medical outcome benchmark	9.30
9.45					9.45
10.00		Coffee break			10.00
10.15			Coffee break	Coffee break	10.15
10.30					10.30
10.45		Session: Technological Innovations	Session: Quality & Safe		10.45
11.00					11.00
11.15	Visit Bausch & Lomb (for board members)			Poster session: Get to know eye hospitals from all over de world	11.15
11.30					11.30
11.45					11.45
12.00				Award ceremonies (best poster presentation + Sol Innovation Award)	12.00
12.15					12.15
12.30	Lunch	Photo ceremony	Introduction new members		12.30
12.45					12.45
13.00		Lunch	Lunch	Lunch	13.00
13.15	Travel time to Rotterdam				13.15
13.30		Session: care within and across hospital borders: Task differentiation - New professional roles	Session: Patient focused health care	Session: Technological Innovations - Part II	13.30
13.45		Eye Care network board meeting (for members ECN)			13.45
14.00					14.00
14.15	Visit to innovative locations at Erasmus MC Rotterdam: 3d space & Robotic Bed Cleaning Centre				14.15
14.30				Coffee break	14.30
14.45					14.45
15.00		Coffee break	Introduction new members	Session: care within and across hospital borders - Part II	15.00
15.15					15.15
15.30			WAEH new member plaque ceremony		15.30
15.45			Coffee break		15.45
16.00					16.00
16.15		Eye care network day combined with WAEH meeting (mixed program)	Travel time to Rotterdam Eye Hospital		16.15
16.30			Member meeting at Rotterdam Eye Hospital	Tour in Rotterdam Eye Hospital	16.30
16.45					16.45
17.00	EAEH board meeting 2016 at Rotterdam Eye Hospital	Tour in Rotterdam Eye Hospital			17.00
17.15					17.15
17.30			Travel time to City Hall		17.30
17.45					17.45
18.00			Farewell cocktail party for leaving board members of the WAEH at the Rotterdam city hall - on invitation by the City of Rotterdam		18.00
18.15	Ice breaking activity ('old Dutch games') for WAEH delegates at Rotterdam Eye Hospital	Eye Care network partner award ceremony			18.15
18.30				Pick-up from Bilderberg hotel	18.30
18.45					18.45
19.00					19.00
19.15					19.15
19.20					19.20
19.45					19.45
20.00	WAEH welcome dinner at Rotterdam Eye Hospital	Dinner at Hulstkamp		REH closing dinner at Radar steamer "de Majesteit"	20.00
20.15					20.15
20.30					20.30
20.45					20.45
21.00					21.00
21.15					21.15
21.30					21.30
21.45					21.45

Contactlenzen op medische indicatie?



oculenti®
contactlenspraktijken
kwaliteitszorg in zien

Vestigingen in ziekenhuizen
 in Nederland. Ook bij u!

Bel (079) 330 24 40 of kijk op
www.oculenti.nl

Program

Wednesday May 25

08.30	Travel time to Schiphol Rijk – (for board members) Please bring your passport	Transport provided, pick up from Hotel Bilderberg
09.30 – 11.30	WAEH Board Meeting 2016 (for board members)	Schiphol Rijk
11.30 – 12.30	Visit Bausch & Lomb (for board members)	Schiphol Rijk
12.30 – 13.00	Lunch	Schiphol Rijk
13.00 – 14.00	Travel to Rotterdam for board members	Transport provided
14.00 – 16.00	Visits to innovative locations – open to all <ul style="list-style-type: none"> • 3D space • Robotic Bed Cleaning Centre 	Erasmus MC Rotterdam
16.00 – 17.00	Walk to The Rotterdam Eye Hospital / Coffee & Tea	The Rotterdam Eye Hospital
17.00 – 18.00	Tour in The Rotterdam Eye Hospital (for all)	The Rotterdam Eye Hospital
17.00 – 18.00	EAEH Board Meeting 2016	The Rotterdam Eye Hospital
18.00 – 19.00	Ice Breaking Activity ('Old Dutch Games') for WAEH delegates	The Rotterdam Eye Hospital
19.00 – 22.00	WAEH Welcome Dinner	The Rotterdam Eye Hospital

Sight seeing tips in Rotterdam



Markthal



Erasmusbridge



Euromast

Program

Thursday May 26

08.15	Pick up from Bilderberg Hotel	
08.30 – 09.00	Registration	
Official Opening Session		› Room: Stokerij
09.00 – 09.15	Opening ceremony WAEH Meeting	
09.15 – 09.25	Welcome Speech	Mrs. Charity Wai , Chair executive WAEH Board, COO SNEC, Singapore
09.25 – 09.35	The Impact of Crossing Borders on Eye Care in The Rotterdam Eye Hospital	Mr. Kees Sol , Member of the board, WAEH Member of the board, The Rotterdam Eye Hospital, The Netherlands
09.35 – 09.45	Welcome (video)	Mrs. Edith Schippers Dutch Minister of Public Health and Sports, The Netherlands
09.45 – 10.15	Learning from other Industries - Cross over Food & Healthcare - <i>Key note</i>	Koppert Cress, TBC
10.15 – 10.45	Coffee break	

Technological Innovations

› Room: Stokerij

Moderators: Prof.dr. Marc de Smet, Ophthalmologist and Dr. Koen Vermeer, Head Ophthalmic Imaging & Data Analyses Group, Rotterdam Ophthalmic Institute

10.45 – 11.15	Robotics and the future of retinal surgery - <i>Key note</i>	Prof. Dr. M. de Smet , Ophthalmologist, MIOS SA Lausanne, Preceyes Medical Robotics BV, Eindhoven, The Netherlands
11.15 – 11.30	One year prediction of low vision in uveitis patients	Mrs. Mia Klinten Grand , Phd Candidate Biostatistics, The Rotterdam Eye Hospital Rotterdam, The Netherlands
11.30 – 11.45	Self-tonometry as a complement in the investigation of glaucoma patients	Mrs. Laurence Quérat , Clinical Research Coordinator St. Erik Eye Hospital Stockholm, Sweden
11.45– 12.00	Innovations in the SOC setting	NC Audrey Kon , Nurse Clinician SNEC, Singapore
12.00 – 12.15	Remote Ophthalmology Diagnostics System: EyeConnect & EyePressure devices	Mr. Mark Petty , CEO, Royal Victorian Eye and Ear Hospital, Melbourne, Australia
12.15 – 12.30	iOCT in corneal surgery	Dr. Wisse , Ophthalmologist UMC Utrecht, The Netherlands, <i>sponsored speaker, ZEISS</i>
12.30 – 12.35	Summary and wrap up technology session	
12.35 – 12.40	Photo ceremony	
12.40 – 13.40	Lunch: Meet & Greet WAEH-members	

Program

Thursday May 26

13.30 – 14.00	Oogzorgnetwerk partnerraad	› Room: Rotterdam zaal Open to: board members & Ophthalmologists Eye care network
Care within and across hospital borders:		› Room: Stokerij
Task Differentiation - New Professional roles		
Moderators: Iris Wallenburg, PhD Assistant professor health care policy & management, Erasmus University, The Netherlands and Mr. Mark Schellekens, manager OR & clinic, The Rotterdam Eye Hospital, The Netherlands		
13.30 – 14.00	Navigating through a healthcare landscape - lessons from an European study - <i>Key note</i>	Mrs. Iris Wallenburg PhD Assistant professor Department of Health Policy and Management Erasmus University Rotterdam, The Netherlands
14.00 – 14.15	Developing integrated models of care within glaucoma specialist outpatient service	Dr. Melanie Lai Department Head, Orthoptics Sydney Eye Hospital Discipline Advisor, Orthoptics South Eastern Sydney Local Health District Sydney, Australia
14.15 – 14.30	The role of the contact lens specialist in a KC-carousel	Mr. Chrétien Frambach , BSc/FEA00, Optometrist Oculenti Location: The Rotterdam Eye Hospital Rotterdam, The Netherlands
14.30 – 14.45	Optometrist led Keratoconus Monitoring Service for Corneal Cross Linking	Dr Vijay Anand PhD BSc (Hons) MCOptom DipTp(Ip) Principal Optometrist (Joint) Contact Lens Service, Moorfields Eye Hospital, London, UK
14.45 – 15.00	Augmentation of manpower initiatives	Mrs Lim MH, DHR , SNEC Singapore
15.00 – 15.05	Summary and wrap up session	
15.05 – 15.30	Coffee break	

Make a picture with your international colleagues in front of the Dutch painting of 'The girl with the pearl earring'.



Program

Thursday May 26

Eye Care Network Day combined with WAEH meeting

› Room: Stokerij

Moderators: Dr. Jeanne Garth, Medical Director, St. John Eye Hospital, Jerusalem, and Mrs. Hetty Romp, Manager Outpatient Clinic, Flevoziekenhuis, The Netherlands

15.30 – 15.40	Welcome 12th Eye Care Network Day and 10th WAEH annual meeting	Mr. René Baljon Director, Eye Care Network, The Netherlands
15.40 – 15.45	Welcome Eye Care Network Day and WAEH guests to the 10th WAEH annual meeting	Mrs. Charity Wai Chair Executive WAEH Board COO SNEC Singapore
15.45 – 16.30	Port of Rotterdam - The challenge! - Key note	Drs. V. Schoenmakers Director Corporate Strategy, Port of Rotterdam, The Netherlands

› Room: Stokerij Language: English

› Room: Rotterdamzaal Language: Dutch

16.30 – 17.00	Does networked care offer future sustainability for the smaller specialty? Mrs. Karen Reeves , Vanguard Programme Director, Moorfields Eye Hospital, London, UK Mrs. Johanna Moss , Director of Strategy and Business Development, Moorfields Eye Hospital London, UK	16.30 – 17.00	Van Brons naar Goud Mevr. Kim Lammers Entrepreneur en oud hockey international <i>Sponsored speaker</i> by Baush & Lomb, The Netherlands
17.00 – 17.30	Sustainable Eye Care - How to adjust increasing need to limited resources Prof. Anja Tuulonen , CEO Tays Eye Centre Tampere, Finland	17.00 – 17.30	Taakherschikking: Synergie of Compromis? Mevr. Sandra Bossmann , verpleegkundig specialist neuro-oncologie, Radboud umc Dr. Arnoud Kappelle , Neuro-oncoloog, Radboud umc, The Netherlands
17.30 – 18.00	Quality & Safety: The Moorfields Way Mrs. Sally Storey , Director of Human Resources Moorfields Eye Hospital, London, UK	17.30 – 18.00	De ontwikkeling van een internationaal oogdruppelprotocol Mevr. Nora Ooms & Mevr. Marie Scheltens Verpleegkundigen, The Rotterdam Eye Hospital Rotterdam, The Netherlands <i>Check out the English protocol on administering eye drops on the WAEH website www.waeh.org/en/how-to-apply-eye-drops</i>

› Room: Stokerij

18.00 – 18.15	WAEH exchanges and the impact on the Eye Care: Development of the Out Patient Clinic for Macula Degeneration Patients at the Rotterdam Eye Hospital after visiting The Jakarta Eye Center, Indonesia	Dr. Mirjam van Velthoven , Ophthalmologist The Rotterdam Eye Hospital Ms. Jorinda Brouwer , Educator Macula Degeneration Outpatient Clinic Ms. Angeline van Rees , Educator Macula Degeneration Outpatient Clinic, Ergra Low Vision The Hague The Netherlands
18.15 – 18.45	Eye Care Network Partner Award ceremony	

18.45 – 21.30 Dinner at The Hulstkamp Building

WE HEBBEN MOOIE DINGEN VOOR OGEN

ERGRA LOW VISION -
INSTITUUT VOOR BETER ZIEN



Program

Friday May 27

08.00 – 09.00 WAEH Board meeting 2016 – open to board members of the WAEH **Room: Dr. Elie van Rijkevorselzaal, Wereldmuseum**

Quality and Safety

Room: Balzaal

Moderators: **Ir. J. Brügggen**, Safety manager at Dutch air traffic control and **Mr. Jan Geert Bollemeijer**, ophthalmologist, The Rotterdam Eye Hospital, The Netherlands

09.00 – 09.30 APPEAR good or BE good? - Key note **Ir. J. Brügggen**, Safety manager at Dutch Air Traffic Control, Amsterdam, The Netherlands

Room: Balzaal

Room: Dr. Elie van Rijkevorselzaal

09.30 – 09.45	Resource planning Mrs. Linda Åström , Quality coordinator St. Erik Eye Hospital Stockholm, Sweden	09.30 - 10.30 Workshop quality of cataract care: comparing between stakeholders and cultures, Interactive session Prof. dr. Joris van de Klundert Health care management science Erasmus MC, The Netherlands Mrs. Aline Stolk PhD student The Rotterdam Eye Hospital, The Netherlands
09.45 – 10.00	Improving performance in a busy Eye & Ear Emergency Department Mr. Mark Petty , CEO Royal Victorian Eye and Ear Hospital Melbourne, Australia	
10.00 – 10.15	The Six Domains of Health Care Quality Dr. Monica Michelotti Casey Eye Institute Portland, USA	
10.15 – 10.30	“Rolling up your sleeves” Jacomijn Gussenhoven , Policy advisor Quality & Safety. Corinne Riekwel , Policy advisor infection prevention, The Rotterdam Eye Hospital Rotterdam, The Netherlands	

10.30 – 11.00 Coffee break

11.00 – 11.15	Firework safety, when one hospital can make the difference Dr. Tjeerd de Faber , Ophthalmologist, The Rotterdam Eye Hospital Rotterdam, The Netherlands	11.00 - 12.00 Interactive session Implement the use of The Eye Card Game to improve patient safety and teamwork Mr. Roel van der Heijde Senior Consultant/Trainer/Confidential Counsellor The Rotterdam Eye Hospital, The Netherlands
11.15 – 11.30	A review of 145.234 ophthalmic patient episodes lost to follow up Dr. Alison Davis , Clinical Director Moorfields Eye Hospital, London, UK	
11.30 – 11.45	Quality improvement in health care Mrs. Carien Eijkman , Senior business consultant The Eye Care Network, Rotterdam, The Netherlands	
11.45 – 12.00	Study results on tool used to quantify and measure situational awareness for OT scrub nurses Phase I, ADON Loh Huey Peng , SNEC Singapore	
12.00 – 12.15	OR fire and patient safety Prof. Christine Nelson Professor of Ophthalmology and Visual Sc. Michigan Kellogg Eye Center, Michigan, USA	
12.15 – 12.20	Summary and wrap up Q&S sessions	

Program

Friday May 27

Introduction New Members

Room: Balzaal

12.20 – 12.30	West of England Eye Unit, Exeter, UK	Dr. Hirut van Lany , Ophthalmologist
12.30 – 12.40	Ispahani Islamia Eye Institute & Hospital Dhaka, Bangladesh	Mr. Mridul Kumar Sarkar , Chief Executive Officer
12.40 – 13.30	Lunch	

Patient Focused Health Care

Room: Balzaal

Moderators: **Mrs. Hester Rippen**, CEO, Child and hospital association, The Netherlands and **Dr. Marijke Wefers Bettink**, ophthalmologist, The Rotterdam Eye Hospital, The Netherlands

13.30 – 14.00	The child in the middle of the health care process. What does this mean for healthcare organisations? - Key note	Mrs. Hester Rippen , CEO, Child and Hospital Association Utrecht, The Netherlands
14.00 – 14.15	Patient Focus Model in Business development	Mr. Mariano Gonzalez , Managing director Moorfields Eye Hospital Dubai, Dubai
14.15 – 14.30	Care Pathway for the patient with Multi Eye Disease	Mrs. Ulla Syvänen , Head nurse Tays Eye Centre, Tampere, Finland
14.30 – 14.45	Implementation of Corneal Transplant Nurses in The Rotterdam Eye Hospital	Dr. Lies Remeijer , Ophthalmologist The Rotterdam Eye Hospital, The Netherlands Mrs. Jacolien Dijk- Feenstra , Cornea Transplant Nurse, The Rotterdam Eye Hospital, The Netherlands
14.45 – 15.00	Visual field project showing how reliability improves patient outcome	NC Belinda Toh , SNEC, Singapore
15.00 – 15.15	How Moorfields Eye Hospital set up a successful integrated patient support service	Ms. Louise de Board , Ophthalmic nurse counsellor, Moorfields Eye Hospital London, UK Mr. David Samuels , Senior ECLC, Eye Clinic Liaison Officer, Moorfields Eye Hospital London, UK
15.15 – 15.20	Summary and wrap up patient focus session	

Introduction New Members

Room: Balzaal

15.20 – 15.30	Emory Eye Center Atlanta, USA	Ms. Lovitt , Head Clinical Operations Center, USA
15.30 – 15.40	Suraj Eye Institute, New Colony, Nagpur, India	Dr. Vinay , CEO
15.40 – 15.50	Wilmer Eye Institute John Hopkins Medicine Baltimore, USA	Mr. Rahul M. Shah , Assistant Administrator Business Development, Strategy, & Surgical Enterprise Operations
15.50 – 16.00	WAEH New Member Plaque Ceremony	Mrs. Charity Wai , Chair Executive WAEH Board, COO SNEC, Singapore
16.00 – 16.15	Coffee break	

Program

Friday May 27

› Room: Geheerzaal, 3th floor,
The Rotterdam Eye Hospital

› Room: Hospital Meeting Point at Reception
The Rotterdam Eye Hospital

16.30 – 17.30	Member meeting: open to all	16.30 – 17.30	Rotterdam Eye Hospital tour: open to all
17.30	Pick-up from The Rotterdam Eye Hospital to the City Hall		
17.45 – 18.45	<p>Farewell Cocktail Party for leaving board members of the WAEH</p> <ul style="list-style-type: none"> • Mr. John Pelly • Prof. dr. Werner Spileers • Mrs. Ann Clark • Mr. Kees Sol <p>Speech by Maarten Struijvenberg, Vice Mayor of the City of Rotterdam</p>	Location: Rotterdam City Hall, on invitation by the City of Rotterdam	
18.45	<p>Free evening</p> <p><i>Suggestion:</i> visit/walk to the Market Hall and have dinner over there</p> <p>Board members - old & new: Fare well dinner for the leaving board members <i>Just for board members</i></p>		



Innovatie, educatie en samenwerking zijn al meer dan 30 jaar de kernwaarden binnen onze samenwerking met oogspecialisten. Centraal staat het bieden van innovatieve oplossingen, producten en opleidingen voor specialistische behandelingen aan cataract, refractie, medische retina, lacrimaal, orbita en glaucoom. Rockmed doet geen concessies aan kwaliteit en faciliteert oogspecialisten bij het leveren van de best mogelijke oogzorg.

SEE THE FUTURE | WWW.ROCKMED.NL

ROCKMED
innovation education cooperation

Program

Saturday May 28

How to improve your eye hospital?

› Room: Balzaal

Structure Process Trends Benchmark and Medical Outcome Benchmark

Moderators: **Mr. Mark Petty**, CEO, Royal Victorian Eye and Ear Hospital, Melbourne, Australia and **René Zimmerman**, Managing Director Finance & Resources, The Rotterdam Eye Hospital, Rotterdam, The Netherlands

09.30 – 09.45	Review of analyses of data of the WAEH Member Eye Hospitals	Mr. Kees Sol , Member of the board, WAEH Member of the board The Rotterdam Eye Hospital, The Netherlands
09.45 – 10.00	Trend total number of intraocular injections 2010 – 2014	Mrs. Tracy Lockett Moorfields Eye Hospital London, United Kingdom
10.00 – 10.25	Medical outcome Benchmark/ICHOM - WAEH Project	Ms. Glenda Leong , Senior Manager, Clinical Audit SNEC, Singapore
10.25 – 10.30	Wrap up	
10.30 – 11.00	Coffee break	

Rapid Fire – Get to know Eye Hospitals from all over the World

Moderators: **Dr. Mirjam van Velthoven**, Ophthalmologist The Rotterdam Eye Hospital **Mrs. Martine Brouwer**, business consultant and **Mrs. Marianne Kathmann**, business consultant, Rotterdam Eye Hospital / Eye Care Network

11.00 – 11.30	Rapid fire - Selected posters will be presented on stage, in just a few minutes.
11.30 – 12.15	Interactive poster session - the possibility to ask all your questions about the displayed posters
12.15 – 12.30	Award ceremonies (best poster presentation & Sol Innovation Award)
12.30 – 13.30	Lunch

Technological innovations – Part II

Moderators: **Dr. Narendran**, Chief Medical Officer, Aravind Eye Hospital, India & **Mr. Eric Loh**, Clinic Manager, SNEC, Singapore

13.30 – 13.45	The influence of bed rest with positioning on the progression of macula-on retinal detachment	Mr. Jan Hendrik de Jong PhD candidate The Rotterdam Eye Hospital, The Netherlands
13.45 – 14.00	Development of an IT based Quality Assurance System for Glaucoma and Diabetic Retinopathy Services WAEH Project	Dr. Narendran , Chief Medical Officer, Aravind Eye Hospital, Madura, India
14.00 – 14.15	IT Innovations - A CFO Perspective	Mr. Moses Wong , CFO, SNEC Singapore
14.15 – 14.30	Summary and wrap up	
14.30 – 15.00	Coffee & Tea	

Program

Saturday May 28

Care within and across hospital borders

› Room: Balzaal

Moderator: **Mrs. Tracy Lockett**, Director of Nursing, Moorfields, London, UK and **Ms. Glenda Leong**, Senior Manager, Clinical Audit, SNEC, Singapore

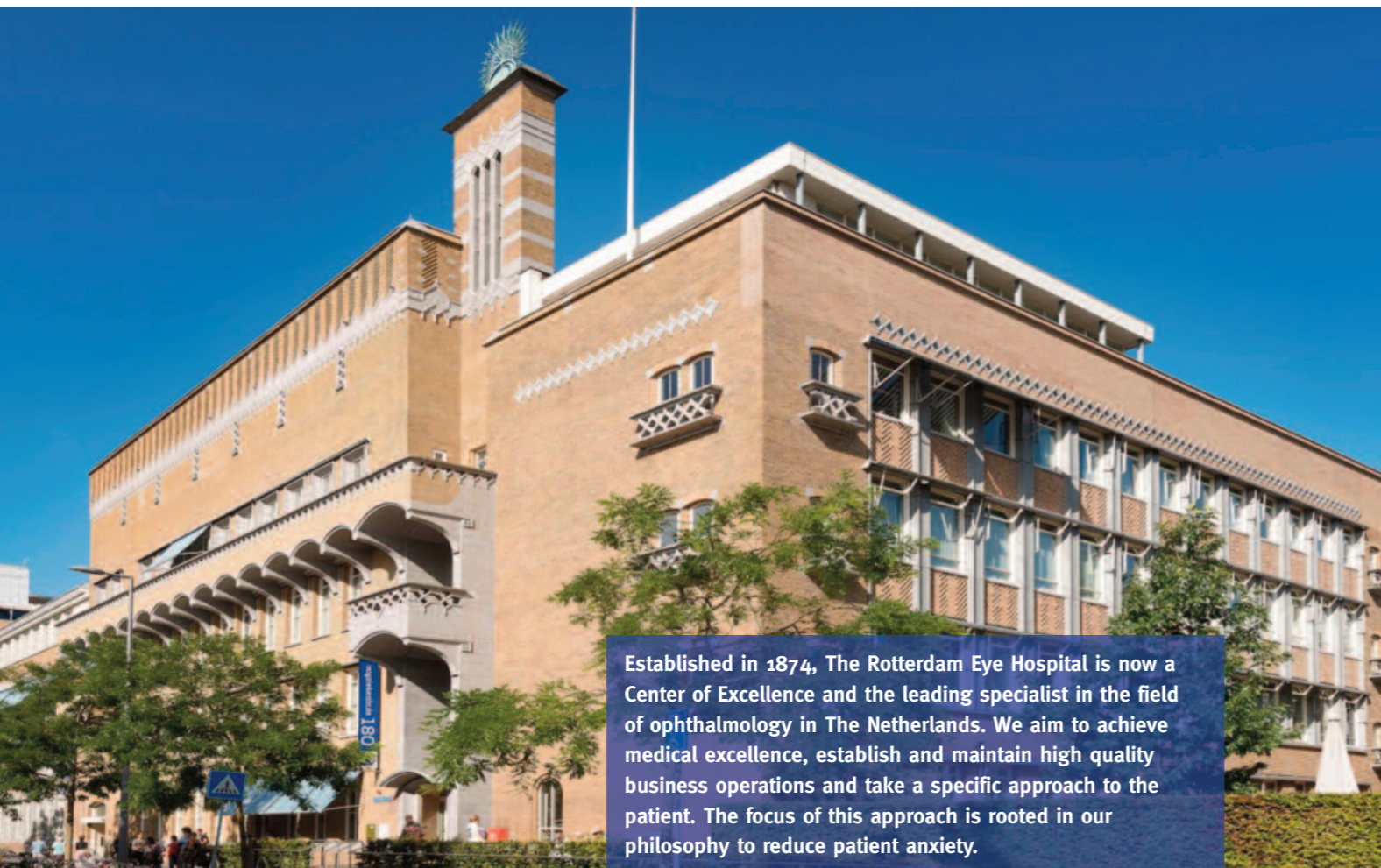
15.00 – 15.15	Ophthalmic skills training workshop for nurses and nursing aides from community-based care settings	ADON Chitra Govindasamy , Assistant Director of Nursing SNEC, Singapore
15.15 – 15.30	Asian Eye Hospital's journey to business excellence	Dr. Juan Maria Pablo Nanagas Medical and research director, Asian Eye Institute, Manila, Phillipines
15.30 – 15.45	Home eye care	Dr. Veera Ramani , Medical Director THONEH, Kuala Lumpur, Malaysia Board member of the executive board of the WAEH, Secretary of the WAEH
15.45 – 16.00	Development of regional healthcare alliance for the aim of the Year of Bright Vision	Dr. Ruibo Yang Director of clinical data statistics, Tianjin Medical University Eye Hospital Tianjin, China
16.00 – 16.15	ROP screening in neo-natal units	Dr. Narendran Chief Medical Officer, Aravind Eye Hospital, India
16.15 – 16.30	Summary and wrap up care across borders sessions	

Wrap up

› Room: Balzaal

16.30 – 16.45	<ul style="list-style-type: none"> • Wrap up WAEH meeting - 2016 • 2016: Chicago - fall meeting • 2017: China - location & dates 	Mrs. Charity Wai Chair executive WAEH Board COO SNEC, Singapore
16.45 – 17.00	THANK YOU - wrap up	Mr. Kees Sol Member of the board WAEH Member of the board The Rotterdam Eye Hospital, The Netherlands
18.45	Pick-up from Bilderberg hotel	
19.00 – 22.00	WAEH 2016 – meeting - Closing dinner at Radar steamer “de Majesteit” Including sight seeing tour of Rotterdam on the river. Can't miss it!!!	

The Rotterdam Eye Hospital; Facts & Figures



Established in 1874, The Rotterdam Eye Hospital is now a Center of Excellence and the leading specialist in the field of ophthalmology in The Netherlands. We aim to achieve medical excellence, establish and maintain high quality business operations and take a specific approach to the patient. The focus of this approach is rooted in our philosophy to reduce patient anxiety.



We assess the quality of our care according to applicable standards as part of both internal and external audits. The qualitative aspects of our organisation and the work we do are assessed by the Dutch Institute for Accreditation in Healthcare (NIAZ). We also carry out patient satisfaction surveys on a regular basis, logging and analysing all emerging complaints and suggestions.

The Rotterdam Eye Hospital has the highest rate of referrals in the Netherlands. We receive excellent scores in the field of patient satisfaction. Moreover, we have won various awards from leading institutes for our innovation, patient safety, conduct of business and design.

The Rotterdam Eye Hospital is the founder of The Eye Care Network, in which as part of which ophthalmologists from various hospitals, optometrists and eye rehabilitation institutes work closely together. Another initiative is the Rotterdam Ophthalmic Institute (R.O.I.) which brings together scientific research carried out under the auspices of The Rotterdam Eye Hospital. The Eye Hospital Focus Clinic is a private hospital belonging to The Rotterdam Eye Hospital. The Focus Clinic specialises in refractive eye surgery and cosmetic eyelid surgery, emphasising quality over treatment numbers or profit.

Finally the European Association of Eye Hospitals (EAEH) and the World Association of Eye Hospitals (WAEH) were founded at the initiative of The Rotterdam Eye Hospital.

www.oogziekenhuis.nl

The Rotterdam Eye Hospital

- › 130.000 outpatient visits (475 p/dag)
- › 12.500 operations (45 p/dag)
- › 4 OR's + 2 OR's day care center
- › 8 beds
- › 97% day care
- › 30% outside the region Rotterdam
- › 26.000 ER visits (70 p/dag) (24/7)
- › 560 contributors, 430 FTE
- › 35 ophthalmologists + 26 physician assistant

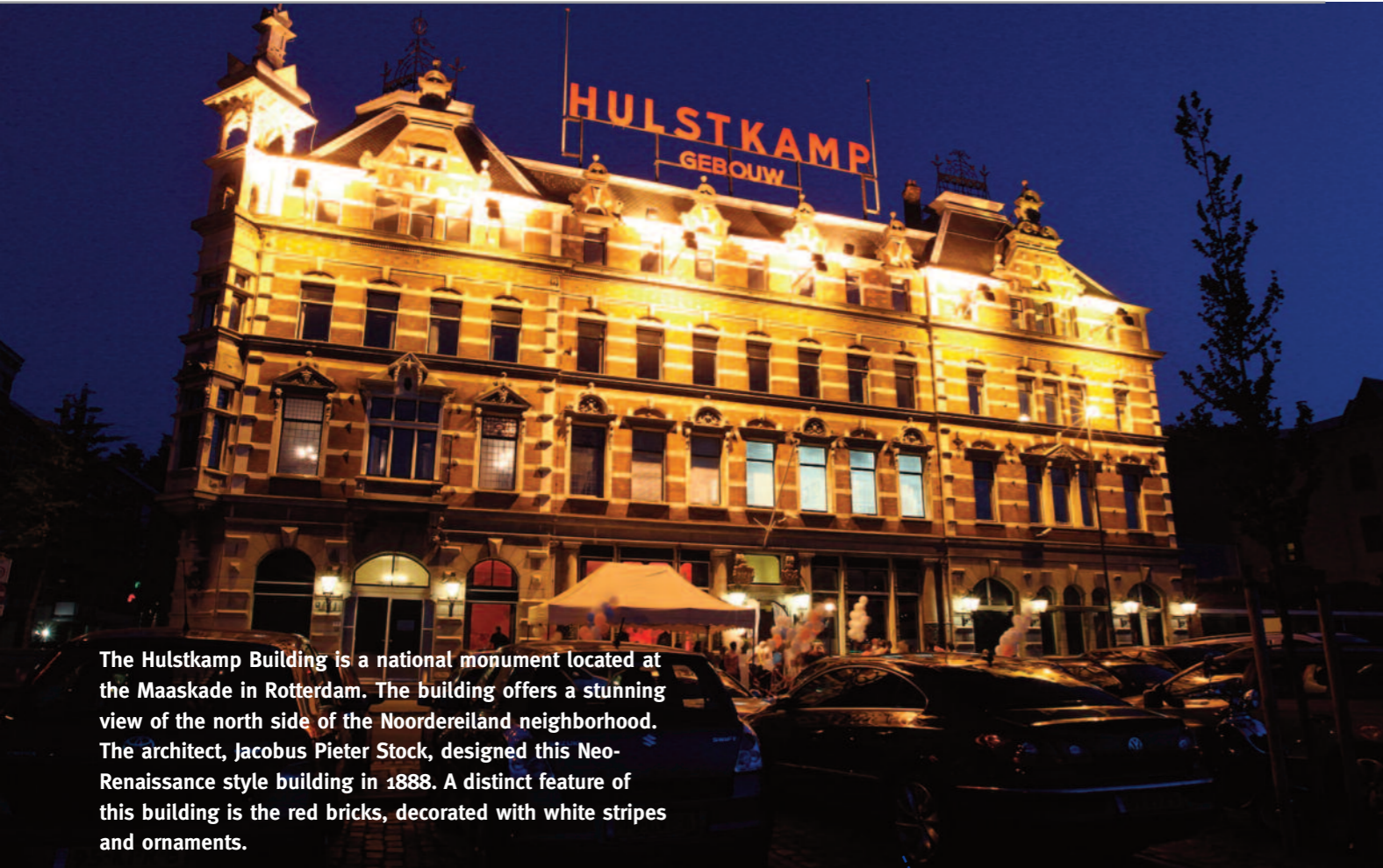
Rotterdam Ophthalmic Institute

- › 38 active studies
- › 12 new studies
- › 2 new contract research studies
- › 25 new study proposals
- › 59 publications
- › 6 PhD graduations

The Eye Care Network

- › Established in 2011
- › 2007: introduction of the franchise model
- › 13 Departments of Ophthalmology of Dutch hospitals participating ('our partners')
- › Participation of over 70 Dutch ophthalmologists
- › Over 200 opticians and optometrists participating in the network
- › service organisation with 10 all-round business consultants

The Hulstkamp Building



The Hulstkamp Building is a national monument located at the Maaskade in Rotterdam. The building offers a stunning view of the north side of the Noordereiland neighborhood. The architect, Jacobus Pieter Stock, designed this Neo-Renaissance style building in 1888. A distinct feature of this building is the red bricks, decorated with white stripes and ornaments.

History

The contracting firm for this construction was Laming & Sons, whom moved into this building in 1892. It was originally served as a margarine and cheese factory, including additional offices, apartments and storage facilities. After declaring bankruptcy, ownership of this building went to the firm Hulstkamp & Zoon & Molijn between 1919 and 1972, where it served as a Dutch gin distillery. During the attacks in Rotterdam in May 1940, this building was one of the first to be occupied by the German military. In 1979 this building was abandoned after which from 1980 till 1995 it served as the Marines Museum.

Renovation

After extensive renovations of the office building and the demolition of the distillery, this historic building turned into a convention center for business, banqueting and conference purposes. Galleries were introduced in the main exhibition hall and the former storage facilities were transformed into office spaces. Five exhibition halls can be found on the ground floor along with a conservatory with glass panels in the center. The original steel frame is visible in the exhibition halls 'De Branderij' and 'De Stokerij'.



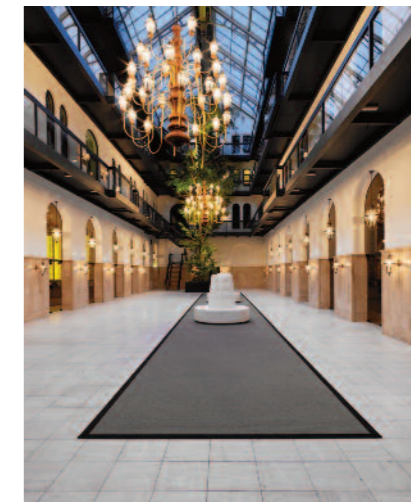
www.hulstkampgebouw.nl

The Hulstkamp Building



1. Alcon
2. Novartis
3. Rockmed
4. Merge
5. Laservision
6. Medical Workshop
7. Medifort
8. Koninklijke Visio
9. Ophtec
10. Bayer
11. AMO (Abbott Medical Optics)
12. Laméris Ootech
13. Zeiss
14. N.t.b.
15. Bausch + Lomb

> Oculenti



Winteruin

The Wereldmuseum Rotterdam



The Wereldmuseum in Rotterdam is a museum of current and historic cultures. It displays more than 1800 ethnographic objects from various cultures in Asia, Oceania, Africa, the Americas and the Islamic heritage.

History

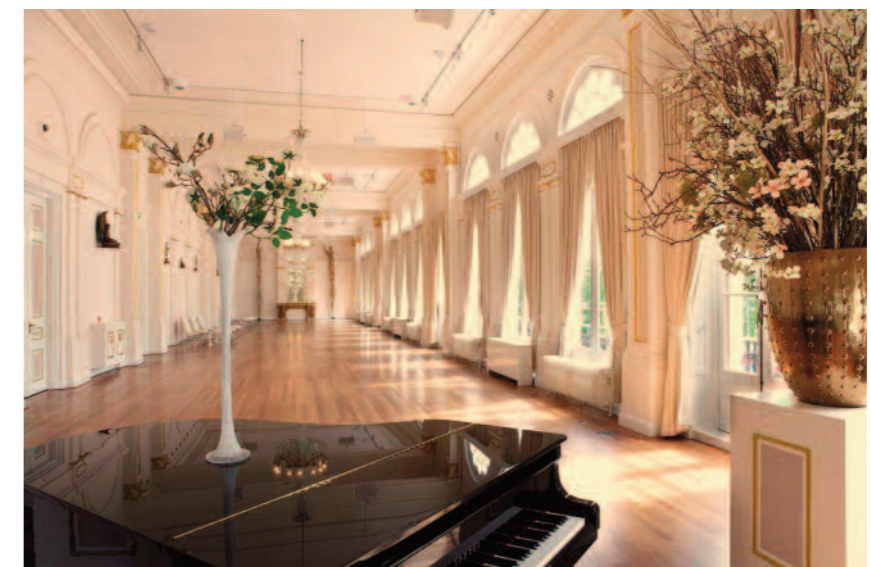
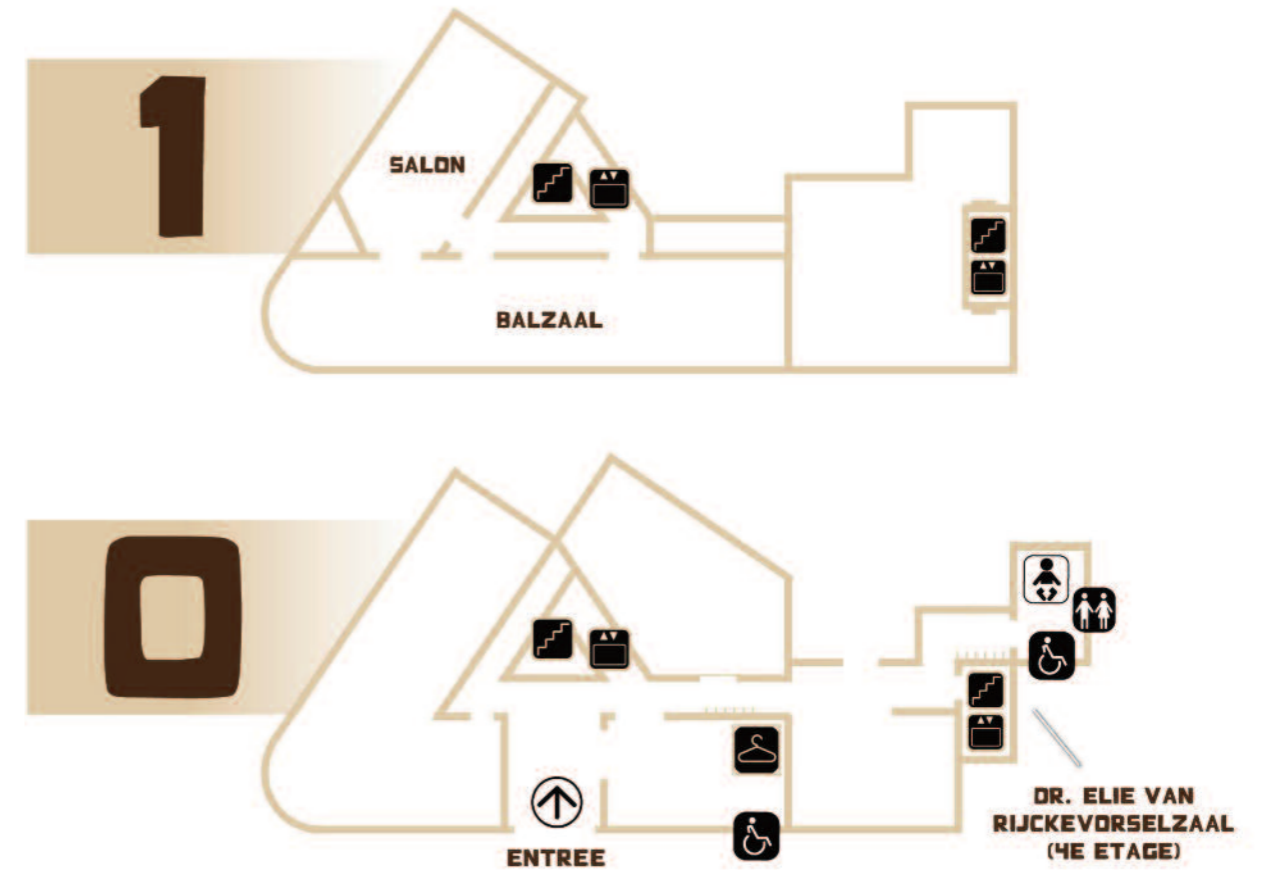
The museum is located in the former Royal Yacht Association clubhouse. The building dates from 1851 and was established in 1852 by King Willem III. The Yachtclub received items as gifts from knights, scientists and collectors and displayed these in their building. After the death of Prince Hendrik, president of the Yachtclub, in 1879, this building was sold to the municipality of Rotterdam. In 1885 this building turned into a local museum: the Museum of Ethnology.

The collection of objects and artifacts from different cultures all over the world grew even more as newer items were obtained from Dutch missionaries, sailors, soldiers and merchants. These items were considered as trophies for these groups of people. The growth led to the expansion of the building, as an additional floor was built. J.W. van Nouhuys, a researcher and former member of the New Guinea expedition, was the director of this museum between 1915 and 1934. He was in charge for organizing the collection in a scientific manner. At the time, the collection grew to approximately 110.000 objects and 100.000 pictures.



www.wereldmuseum.nl

The Wereldmuseum Rotterdam



Balzaal



The jubilee year of the World Association of Eye Hospitals (WAEH) will be celebrated in Rotterdam.

Rotterdam is one of the most vibrant cities in the Netherlands. Once a settlement on the bank of the river Rotte, nowadays the main port of Europe. With the construction of a dam in the Rotte around 1270, the flooding came to an end. The dam created a polder, in which the city of Rotterdam could develop. Rotterdam developed into a relatively small city of just 600,000 inhabitants, yet blessed with an enormous world port and on its territory.

The city also developed into a multicultural and dynamic city, where everything is possible. The young and multi-ethnic population is a valuable cornerstone of the city Rotterdam. It contains all the ingredients for people to develop: universities, cultural organisations, creative industry, research institutes, et cetera. This is why people seek their fortune in Rotterdam.

Many large multinationals are situated in Rotterdam, but also small entrepreneurs have great possibilities to develop their company in this city. Part of the thriving economy is also a well-equipped local healthcare system. The city stimulates healthcare organisations to innovate and develop.



Koppert Cress

09.45-10.15

Learning from other industries: Cross over Food & Healthcare

New technologies give us the opportunity to collect more data about ourselves. This way we get more and better insight into our own health and what is good for us. Is it better for me today to eat broccoli or rather a tomato or cress with some specific nutrient? This is called 'personalization' and this is the future for both the healthcare as the food industry.



Prof Dr. M. de Smet
Ophthalmologist
MIOS Lausanne, Preceyes
Medical Robotics BV,
Eindhoven

10.45-11.15

Robotics and the future of retinal surgery

Robotics offers high positional accuracy as well as ultimate control with. With programming, imaging feedback and logical control loops, it is possible to automate routine tasks. As robotics are introduced to eye surgery, the role of the surgeon will evolve from instrument manipulator to pilot who oversees and directs procedural tasks orchestrated to complete eye surgery. Specific applications will be discussed during the presentation.



Mrs. Iris Wallenburg PhD
Assistant professor,
Department of Health
Policy and Management,
Erasmus University
Rotterdam,
The Netherlands

13.30-14.00

Trained as a nurse and health scientist (Erasmus University Rotterdam), Iris Wallenburg obtained her PhD-degree at the Free University Amsterdam in 2012. Her research interest relies on two main themes: the work and role of healthcare professionals in evolving healthcare systems, and the quantification and valuation of healthcare.

Navigating through a healthcare landscape - lessons from an European study

In this presentation I share the lessons we learned from an (ongoing) European study on new professional roles. The study shows that many new professional roles have been developed, sketching a rather diverse picture of (new) healthcare occupations. Moreover, we reveal that new professional roles are a highly situated endeavour as tasks and responsibilities are mainly defined within healthcare organizations and local healthcare practices.



Dr. Victor Schoenmakers
Director Corporate Strategy
Port of Rotterdam Authority,
The Netherlands

15.45-16.30

Since 1 October 2014 Victor Schoenmakers is Director Corporate Strategy. We focus on the long term strategy for the port of Rotterdam. In the past, Victor Schoenmakers has held manifold positions at the Port of Rotterdam, such as Director European and International Affairs and Director of Marketing.

Port of Rotterdam - The challenge!

The world is changing and companies and institutions need to adapt rapidly. At the moment fossil fuels make up 60% of the market of the Port of Rotterdam. New developments in the energy sector and the gradually disappearance of fossil fuels create the necessity to focus on new markets. Creating new possibilities and making your company ready for big changes requires the possibility for open innovation, creative thinking and leadership, but also not to fear of letting go what once was your core business.

1. Technological innovations



11.15-11.30

One year prediction of low vision in uveitis patients

Development of a statistical model to predict chances of low vision in uveitis patients under treatment. Accurate assessment of the risk is highly relevant for these patients as uveitis is the leading cause of legal blindness in the working population in the western world.

Mrs Mia Klinten

Grand Phd Candidate
Biostatistics
The Rotterdam Eye Hospital
The Netherlands



11.30-11.45

Self-tonometry as a complement in the investigation of glaucoma patients

The purpose of our study was to evaluate the reliability of IOP measured by glaucoma patients themselves and to observe if IOP variations have the same pattern on different days. The results of our study show accuracy of the measurements made by glaucoma patients using rebound self-tonometry and the high incidence of IOP peaks outside office hours.

Mrs. Laurence Querat

Clinical Research
Coordinator
St. Erik Eye Hospital
Stockholm, Sweden



11.45-12.00

Innovations in the SOC setting

We are answering too many 'whys' in healthcare. For innovations to happen, the questions asked should start with the word 'how'. In this session, we want to provide a few insights and options on how ophthalmology can utilize the data in our systems to possibly improve one of the most chronic questions in healthcare.

NC Audrey Kon

Nurse Clinician
Singapore National
Eye Centre, Singapore



12.00-12.15

Remote Ophthalmology Diagnostic System**EyeConnect & EyePressure devices**

The Eye and Ear has worked with Ingeneus (a private company) to develop the Remote Ophthalmology Diagnostic System (RODS). The RODS project consists of two clinical devices designed to assist with effective remote risk management of acute ophthalmic conditions:

Mr. Mark Petty

CEO Royal Victorian
Eye and Ear Hospital,
Melbourne, Australia



12.15 - 12.30

iOCT in corneal surgery

Sponsored speaker, Zeiss.

Dr. Wisse

Ophthalmologist
UMC Utrecht,
The Netherlands

2. Care within and across hospitals



14.00-14.15

Developing integrated models of care within glaucoma specialist outpatient service

At The Sydney Eye Hospital, demand for access to Glaucoma Specialist Outpatient Clinics exceeds service capacity. Therefore the multi-disciplinary team (MDT) of the Glaucoma Specialist Unit are testing impacts of integrated models of care in managing increasing service demand. They hope to shift the current system by enhancing traditional scope of practice of healthcare professionals, improving interprofessional collaboration, communication and care planning within hospital borders.

Dr. Melanie Lai

Department Head,
Orthoptics, Sydney (eye)
Hospital,
Discipline Advisor, Orthoptics,
South Eastern Sydney Local
Health District, Australia



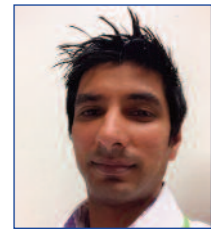
14.15-14.30

The role of the contact lens specialist in a KC-carousel

In a KC-carousel the contact lens specialist has an integrated role. KC-patients are very dependent of the success of contact lens fitting. Contact lens tolerance can also be very challenging. Despite correction with RGP contact lenses KC-patients may experience problems with visual performance. Managing these problems needs excellent teamwork.

Mr. Chrétien Frambach

Bsc, FEA00 Optometrist
Oculenti, Location
The Rotterdam
Eye Hospital,
The Netherlands



14.30-14.45

Optometrist led Keratoconus Monitoring Service for Corneal Cross Linking

An evidence-based update on optometrist-led management of keratoconus and suspect keratoconus patients in a dedicated hospital-based clinic. Discussion will be focused on diagnostic criteria for keratoconic progression, nuances in the use of corneal topography in the management of keratoconus, creation of a dedicated keratoconus monitoring service and the use of visual function measures to detect keratoconic progression.

Dr Vijay Anand

PhD BSc (Hons) MCOptom DipTp(Ip), Principal Optometrist (Joint), Contact Lens Service Moorfields Eye Hospital, London, UK



14.45-15.00

Manpower Augmentation Initiatives in SNEC

The ageing population with shifts in disease patterns will be a strong driver for healthcare demand. On the supply side, we are facing a shrinking workforce. In this presentation, we share 2 new manpower augmentation initiatives in SNEC: 1) Upgrading Clinic Assistants to Ophthalmic Assistants and Ophthalmic Technicians, and 2) Equipping GPs with Primary Eye Care skills. Resulting in a optimisation of skilled manpower resources and improved patient accessibility to healthcare.

Ms Lim Mui Huang

Singapore National Eye Centre(SNEC) and Singapore Eye Research Institute (SERI), Singapore

3. Eye Care Network Day



16.30-17.00

Does networked care offer future sustainability for the smaller specialty?

Moorfields is one of 13 national acute care collaborative vanguards selected by NHS England. The programme in Moorfields will deliver two key outputs – a toolkit to enable other organisations to implement a network model of care; and a publication which will explore national, international healthcare, commercial network models and the critical success factors needed to expand a network.

Ms. Karen Reeves

Vanguard Programme Director, Moorfields Eye Hospital NHS Foundation Trust, UK



Mrs. Johanna Moss

Director of Strategy and Business Development Moorfields Eye Hospital NHS Foundation Trust, UK



17.00-17.30

Sustainable Eye Care – How to adjust increasing need to limited resources

The main objective of eye health care is to allocate the finite health care resources in the most cost-effective way to promote well-being of the citizens. There is a need to face and learn to live with the reality of growing discrepancy between demand and resources for health care services. Prof. Anja Tuulonen will present the initiative of all Finnish Chief Ophthalmic Physicians, which they presented to the Ministry of Health, as an example on how to approach the challenge between increasing needs to limited resources in the public sector.

Prof. Anja Tuulonen

CEO, Tays Eye Centre, Tampere, Finland



17.30-18.00

Quality & Safety: The Moorfields Way

The Moorfields Way is an ambitious programme of cultural change, to transform experience at Moorfields and develop a culture of courage and ownership in which staff feel safe speaking up, a culture which is vital to quality and safety. This presentation will present our progress, and the lessons we have learned as we have worked in partnership with staff and patients to build The Moorfields Way.

Mrs. Sally Storey

Director of Human Resources Moorfields Eye Hospital, London UK



18.00 -18.15

Development of the Out Patient Clinic for Macula Degeneration Patients at the Rotterdam Eye Hospital after visiting The Jakarta Eye Center, Indonesia

In 2010 the annual meeting of the WAEH took place in Jakarta (Indonesia) and Melbourne (Australia), hosting partners The Jakarta Eye Center and the Royal Victorian Eye & Ear Hospital.

In the waiting room of the Jakarta Eye Center there was a nurse giving information about all kinds of eye diseases. This inspired the Rotterdam Eye Hospital to develop together with cooperation partner Ergra Low Vision such education in the out patient clinic for Macula Degeneration patients. With growing numbers of patients coming in this is one of the most busiest out patient clinics in Rotterdam. How can you prepare the patients in the waiting room in such a way that they feel relaxed and don't feel fear?

Ms. Jorinda Brouwer

Educator Macula Outpatient Clinic, Ergra Low Vision, The Hague The Netherlands



dr. Mirjam van Velthoven

Ophthalmologist, The Rotterdam Eye Hospital, The Netherlands



Ms. Angeline van Rees

Educator Macula Degeneration Outpatient Clinic Ergra Low Vision, The Hague The Netherlands



Ir. Job Brügger
Safety Manager
Dutch Air Traffic Control
Schiphol
The Netherlands

09.00-09.30

Job Brügger holds a masters degree from Delft University of Technology in Aerospace Engineering. In 1986 he started working for the National Aerospace Laboratory where he later became the head of the Air Transport Division. His particular interest in safety led him to Air Traffic Control the Netherlands, to become their first safety manager in 2002. He is particularly known for his activities in Just Culture developments and was one of the first to demonstrate the detrimental effect of prosecution of air traffic controllers on incident reporting. In 2003 he re-created the CANSO Safety Standing Committee and chaired it for six years. He is currently leading the effort for the FAB Europe Central safety management activities. He also advises in health care on safety matters with a particular focus on safety leadership from the top.

APPEAR good or BE good?

Safety can be managed, using a variety of techniques and tools. Safety culture as an enabler for good safety management is recognized, however JUST CULTURE, as one of the most important parts is hard to manage. Fortunately, you will not be alone in your quest...



Mrs. Hester Rippen
CEO Child & Hospital
Association
The Netherlands

13.30-14.00

The child in the middle of the health care process. What does this mean for healthcare organizations?

From the perspective of the child and the parents this presentation brings across what it really means for health professionals and health care organizations to put the patient in the middle. How to really embed Shared Decision making and Patient Participation in your work and to understand it better.

1. Quality and Safety

Mrs. Linda Åström
Quality coordinator
St Erik Eye Hospital
Stockholm, Sweden

09.30-09.45

Resource planning

Resource planning has been introduced at two clinics at St. Erik Eye hospital. The aim has been to identify the necessary resources for the clinics care pathways by looking at best medical practice and estimating number of patient visits by historic and predicted data. The result is continuously followed by monitoring the number of out-patients visits and operations, outcome between planned and performed care according to staff schedule and number of rooms used.



Mr. Mark Petty
CEO Royal Victorian
Eye and Ear Hospital,
Melbourne, Australia

09.30-09.45

Improving performance in a busy Eye & Ear Emergency Department

The Eye and Ear Emergency Department (ED) provides a statewide service for eye and ENT emergencies. The Eye and Ear is undergoing an extensive redevelopment which has significantly impacted on the ED surrounds. At WAEH 2015 ED process improvements were described and this work has continued, with the ED continuing to meet key performance indicators within a difficult environment.



Dr. Monica Michelotti
Vitreoretinal fellow
Casey Eye Institute
USA

10.00-10.15

The Six Domains of Health Care Quality

The Institute of Medicine provides an analytic framework for quality assessment by providing six aims for the health care system. These six aims are: safe, effective, patient-centered, timely, efficient, and equitable. This presentation will discuss the six measures and how they apply to ophthalmology, using age related macular degeneration as an example.

Speakers

Friday May 27



10.15-10.30

Rolling up your sleeves

The Rotterdam Eye Hospital participates with 10 other hospitals in the Rotterdam area in a programme called 'Rolling up your sleeves', aiming to substantially improve uniform policy and hand hygiene compliance. During this programme we have experienced successes and difficulties which we will share with the WAEH.

Mrs. Corinne Riekwel

Business consultant
infection prevention
The Rotterdam Eye Hospital
The Netherlands



Mrs Jacomijn Gussenhoven

Business consultant Quality
& Safety
The Rotterdam Eye Hospital
The Netherlands



11.00-11.15

Firework safety, when one hospital can make the difference

In countries where consumer fireworks are not banned, eye injuries related to the use of consumer fireworks, especially during holidays and festival seasons continue to occur in unacceptable numbers. Even strict regulations on the purchase and use of fireworks do not prevent the high incidence of related eye injuries and the resulting visual impairment and blindness. The Rotterdam Eye Hospital endorses a national ban on consumer fireworks and has been actively campaigning about legislation to ban consumer fireworks in The Netherlands. The presentation of dr. de Faber will illustrate the need and results of this campaign.

Dr. Tjeerd de Faber

Ophthalmologist
The Rotterdam Eye Hospital
The Netherlands



11.15-11.30

A review of 145,234 ophthalmic patient episodes lost to follow up

Moorfields Eye Hospital reviewed the records of all patients in all subspecialties without review appointments booked between July 2007 and November 2012. Purpose: To determine whether ophthalmic patients lost to follow up had come to harm and develop investigation techniques to optimise safety and minimise clinical staffing resource.

Dr. Alison Davis

Clinical Director
Moorfields Eye Hospital
UK

Speakers

Friday May 27



11.30-11.45

Quality improvement in healthcare

Healthcare systems around the world are facing common challenges that are impacting access, quality and delivery of care. Yet a number of developments are ushering in a new era in health that bring the promise of better value, greater access and improved outcomes.

Mrs. Carien Eijkman - Stuart

MSC
Business Consultant,
The Eye Care Network
NNK / EOQ Quality Manager,
The Netherlands



11.45-12.00

Study results on tool used to quantify and measure situational awareness for scrub nurses in an Ophthalmic Operating Theatre

Situational awareness (SA) is one of the crucial cognitive elements not widely explored in healthcare, especially for cataract surgeries in fast paced ambulatory setting operating theatre (Koh, Park & Wickens, 2014). SPLINT (Scrub Nurse List of Intra Operative Non-Technical Skills) could provide us a method to understand how work system impacts human factor skills in the OT and the findings could provide insights in understanding constraints that prevent attainment of SA in a fast paced operating room.

ADON Loh Huey Peng

Nurse
Singapore National Eye
Centre, Singapore



12.00-12.15

OR Fire and Patient Safety

Fires are an avoidable and a potentially deadly event in the operating room. OR fires should never happen. We can assess the risk of a surgical fire during the pre-incision time out.

Prof Christine Nelson

Professor of Ophthalmology
and Visual Sciences
University of Michigan
Kellogg Eye Centre, USA

Interactive sessions



Mrs. Aline Stolk
PhD Student,
The Rotterdam Eye hospital

09.30-10.30

Quality of cataract care: comparing between stakeholders and cultures

Our study on quality measurement is motivated by the many different and extensive indicator sets around and in use. We propose a method which involves multiple stakeholders and perspectives to compose a shared and compact indicator list, as needed to effectively manage quality improvement.

We demonstrate the methods through an active workshop involving participants in one of the method's steps: the 'concept mapping'. We discuss our findings obtained in the Dutch context and engage the audience in the validity of the methods and results in other contexts (e.g., countries). To this purpose we rely on Hofstede's framework of organizational culture, and will explore replication and extension of our research in the WAEH network with the workshop participants.



Prof. dr. Joris van de Klundert
Health care management
science, Erasmus MC
The Netherlands



Mr. Roel van der Heijde
Senior Consultant / Trainer /
Confidential Counsellor
The Rotterdam Eye Hospital
The Netherlands

11.00-12.00

Implement the use of The Eye Card Game to improve patient safety and teamwork

The Rotterdam Eye Hospital has started with daily briefings for all teams with the objective to improve patient safety and teamwork. The Eye Care Card Game is developed to improve these discussions during the daily briefing moment.

The game topics are based on the weekly themes in the Rotterdam Eye Hospital. The questions include knowledge questions and observation and action queries. The card game helps to improve discussion and knowledge in an accessible way.

Attend this highly interactive session and learn how to gamify the start of the day in your hospital!

2. Patient focused health care



Mr. Mariano Gonzalez
Managing Director
Moorfields Eye Hospital
Dubai, United Arab Emirates

14.00-14.15

Patient Focus Model in Business Development

I will present the clinical model of Moorfields in the UAE to establish, consolidate and develop the Moorfields Brand within a new market, preserving the quality of care and the patient focus in the center of everything we do. The presentation intends to provide with insights about the management of market opportunities, challenges and innovations in the healthcare eye sector, preserving the quality of service with the associated and expected financial outcomes.



Mrs. Ulla Syvänen
Head nurse
Tays Eye Centre, Finland

14.15-14.30

Care Pathway for the Patients with Multi Eye Disease

Based on data search of the patients visiting Tays Eye Centre, we identified a pilot group of patients with a diagnosis of AMD, glaucoma and/or diabetic maculopathy and estimated the number visits which could have been combined. We developed a care pathway for improving the coordination of care of patients with multiple chronic eye diseases and to reduce the number of unnecessary visits to Tays Eye Centre.



Dr. Lies Remeijer
MD PhD, ophthalmologist
The Rotterdam Eye Hospital
The Netherlands

14.30-14.45

Implementation of Corneal Transplant Nurses In The Rotterdam Eye Hospital

Increasing numbers of patients needing corneal transplantation and the wish of transplant patients to have one single point of contact require the use of auxiliary staff. The deployment of a specialized transplant nurse covers both points and increases the quality and efficiency of information and administration for corneal transplant care



Mrs. Jacolien Dijk-Feenstra
cornea transplant nurse
The Rotterdam Eye Hospital
The Netherlands



Mrs. Belinda Toh
Nurse Clinician (Outpatient
Subspecialty Clinics)
Singapore National Eye
Centre, Singapore

14.45-15.00

Visual field project showing how reliability improves patient outcome

The Humphrey Visual Field (HVF) test is the gold standard for assessing the extent of visual field loss in the diagnosis of glaucoma and monitoring of the disease progression. However, many patients are not able to perform the HVF test accurately. The project findings suggest that pre-test education with hands on demonstration practice on-site is important to improve patients' reliability in visual field test performance.



15.00-15.15

How Moorfields Eye Hospital set up a successful Integrated Patient Support Service

The need for timely appropriate support and information for visually impaired patients is well recognised. The Integrated patient support service was formed as a response to recognition of this unmet need at Moorfields Eye Hospital. Presented will be the background to the service including the initial stages and practicalities of setting up a new team and the discussion of referral pathways. Also we will discuss future plans for patient support services and argue that this model could be used by other eye hospitals.

Ms. Louise de Board
Ophthalmic nurse counsellor
Moorfields Eye Hospital,
London, UK



Mr. David Samuals
Senior Eye Clinic,
Liaison Officer,
Moorfields Eye
Hospital, London, UK

1. How to improve your eye hospital?

Structure Process Trends Benchmark and Medical Outcome Benchmark



09.30-09.45

Review of analyses of data of the WAEH member Eye Hospitals

In this session, the newest WAEH benchmarking data will be discussed and related to innovations in member eye hospitals.

Mr. Kees Sol
Member of the board,
WAEH Member of the board
The Rotterdam Eye Hospital
The Netherlands



09.45-10.00

Trend total number of intraocular injections 2010 – 2014

The total benchmark of all member eye hospitals shows a substantial increase in intraocular injections. The average volume growth between 2012 and 2014 in the population of WAEH hospitals is 61%. Suspected is that this has influenced the way in which the macula degeneration care pathway has been organized.

At Moorfields they have also encountered quite a large growth. Moorfields will tell on how they dealt with such a substantial growth in intraocular injections, how the care process has been organized, both logistically and financially, to be able to realize such a growth and which hindrances they needed to deal with because of this growth.

Mrs. Tracy Luckett
Director of Nursing and
Allied Health Professions-
Moorfields Eye Hospital,
London, United Kingdom



10.00-10.25

Benchmarking and the WAEH Medical Outcomes Project with ICHOM Standard Set

Our WAEH Medical Outcome Project using ICHOM's cataract standards set aims to collect comparable data from a small group of members for benchmarking. We looked at the availability of data from electronic data capture, to manual data capture and 100% data to data sampling. We will share our experiences, results and recommendations. And also the intent for incorporating the other WAEH members into the project.

Ms. Glenda Leong
Senior Manager, Clinical
Audit, Singapore National
Eye Centre, Singapore

2. Technological Innovations - part II



13.30-13.45

The influence of bed rest with positioning on the progression of macula-on retinal detachment

Traditionally, preoperative bed rest and positioning are prescribed to patients with macula-on retinal detachment (RD) to prevent RD progression and detachment of the fovea. Execution of such advice can be cumbersome and expensive. This comparative, non-randomized trial aims to investigate if preoperative bed rest and positioning affect the progression of RD.

Mr. Jan Hendrik de Jong
PhD candidate
The Rotterdam Eye Hospital
The Netherlands



13.45-14.00

IT enabled quality assurance system for Glaucoma & Diabetic Retinopathy - WAEH Project

The purpose of this project is to develop an IT based quality assurance system for Glaucoma and Diabetic Retinopathy (DR) that is relevant for the WAEH member hospitals and beyond. The expected outcome of the project is to have an IT based quality assurance system developed, that can be used to monitor universally acceptable quality indicators for Glaucoma and DR.

Dr. Narendran
Chief Medical Officer
Aravind Eye Hospital
India



14.00-14.15

IT Innovations – A CFO Perspective SNEC

Technology is moving us in a new, third direction. “Listening technologies” are following our every move and giving us feedback constantly. If you buy a book by one author, a similar one pops up on your shopping page. If you listen to a song, other artists in a similar genre appear alongside. This kind of feedback is being constantly expanded.

Mr. Moses Wong
CFO
Singapore National Eye
Centre, Singapore

3. Care within and across hospital borders



15.00-15.15

Ophthalmic skills training workshop for nurses and nursing aides from community-based care settings

As the elderly are prone to visual impairment resulting from common age related eye conditions, Singapore National Eye Centre (SNEC) identified a growing need for the nurses/nursing assistants from the nursing homes to be trained to deliver basic ophthalmic care. To address this need, SNEC Description: developed the “The Ophthalmic Skills training program” in collaboration with the Agency for Integrated Care (AIC)

ADON Chitra Govindasamy
Assitant Director of Nursing,
Eye Clinic Subsidized
(ECS/OPD), Assistant Director
of Nursing for Education &
Clinical Liaison Officer,
Educational Development
Unit Singapore National
Eye Centre, Singapore



15.00-15.15

Asian Eye Hospital's journey to business excellence

Our institute is a part of a very large business conglomerate in various industries. Our business model differentiates us from most eye facilities in the country. The institute is run by business professionals; the medical team concentrates on what they do best. Given the complex business environment and shareholder requirements, we adopt the Corporate's planning process processes to align ourselves, in risk management for example. The process has guided us to initiate actions based on our assessment.

**Dr. Juan Ma. Pablo
R. Nañagas** M.D.
Medical and research
director, Asian Eye Institute
Phillipines

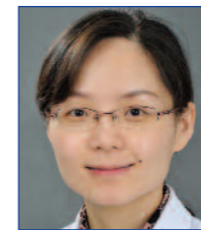


15.30-15.45

Home eye care

A presentation to discuss what strategies an Eye Care facility can employ to the growing demand of patients with eye problems at home level.

Dr. Veera Ramani
Medical Director THONEH &
Board member of the
executive board of the WAEH,
Secretary of the WAEH
Malaysia



15.45-16.00

Development of regional healthcare alliance for the aim of “Year of Bright Vision”

Healthcare alliance is an important policy of healthcare reform in China to balance the contradiction between health demand and supply and to decrease the rapid growth of health expenditures. In 2015 Tianjin Medical University Eye Hospital (TMUEH) cooperated with regional secondary hospitals as well as community health centres to establish the “Regional Healthcare alliance” for the aim of “Year of Bright Vision” project. Presented will be different projects and strategies which contributed to the alliance.

Dr. Ruibo Yang, M.D.
Director of clinical data
statistics and associate
consultant Tianjin Medical
University Eye Hospital
China



16.00-16.15

Tackling Retinopathy of Prematurity via Telescreening in Rural India

India has the highest number of premature deliveries in the world and a large percentage of the babies are at risk of retinopathy of prematurity (ROP) and blindness. Aravind Eye Hospital started a ROP-telescreening program where a trained team visits NICUs covering a radius of 200 kms around the city. This project is proving to transcend the barriers of awareness and access to provide crucial and timely intervention, thereby saving vision.

Dr. Narendran
Chief Medical Officer
Aravind Eye Hospital
India

The moment you help your patients
see the whole picture.
This is the moment we work for.



// TRUE LIVING VISION
MADE BY ZEISS



True Living Vision becomes reality with ZEISS AT LISA® tri and the new
ZEISS AT LISA tri toric. Excellent near, far and intermediate vision.
Under all light conditions. For maximized independency from spectacles.

www.meditec.zeiss.com/lisa-tri-family



Members

Founding members

- › Singapore National Eye Centre (Singapore)
- › Moorfields Eye Hospital (London, UK)
- › The Rotterdam Eye Hospital (Rotterdam, The Netherlands)
- › Tun Hussein On National Eye Hospital (Kuala Lumpur, Malaysia)
- › Royal Victorian Eye and Ear Hospital (Melbourne, Australia)
- › The Department of Ophthalmology of the University Hospital Leuven (Leuven, Belgium)
- › Rutnin Eye Hospital (Bangkok, Thailand)
- › St. Erik Eye Hospital (Stockholm, Sweden)

Full members

- › The Royal Victoria Eye and Ear Hospital (Dublin, Ireland)
- › Jakarta Eye Center (Jakarta, Indonesia)
- › Tianjin Medical University Eye Hospital (Tianjin, China)
- › Sydney Eye Hospital (Sydney, Australia)
- › Kim's Eye Hospital (Seoul, South Korea)
- › Aditya Jyot Eye Hospital (Mumbai, India)
- › St. John of Jerusalem Eye Hospital
- › Kellogg Eye Center (Ann Arbor, USA)
- › Fondation Asile des Aveugles (Lausanne, Switzerland)
- › The Metta Eye Hospital (Mettapracharak (Wat Rai Khing) Hospital) (Bangkok – Thailand)
- › Ispahani Islamia Eye Institute & Hospital (Bangladesh)
- › Bascom Palmer Eye Institute (USA)
- › Massachusetts Eye and Ear Infirmary (USA)
- › Phillips Eye Institute (USA)
- › Wilmer Eye Institute at Johns Hopkins (USA)
- › Emory Eye Center (USA)
- › New York Eye and Ear Infirmary (USA)
- › Wills Eye Hospital (USA)

Associate members

- › Himalayan Eye Center (Pokhara, Nepal)
- › Mechi Eye Center (Mechi, Nepal)
- › Cao Thang International Eye Hospital (HỒ Chí Minh, Vietnam)
- › Institute of Ophthalmic Science - Angeles Lomas Hospital (Mexico-city, Mexico)
- › Aravind Eye Care System (Madurai, India)
- › Suriname Eye Center (Paramaribo, Suriname)
- › Chittagong Eye Infirmary and training Complex (Chittagong, Bangladesh)
- › Asian Eye Institute (Makati City, Philippines)
- › Clinica Oftalmologica Pasteur (Chili)
- › Tays Eye Centre (Tampere, Finland)
- › West of England Eye Unit (Exeter, UK)
- › Dr. K. Zaman BNSB Eye Hospital (Mymensingh, Bangladesh)
- › Suraj Eye Institute (India)

