

Teamwork for eye care



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Human resource development (HRD) – the development of the people who deliver health care – has been identified as one of the key pillars of eye health delivery. HRD is one of the essential building blocks of the World Health Organization (WHO) Global Action Plan: 'Towards universal eye health'. The importance of HRD is also recognised beyond eye care, as can be seen in the WHO Health Systems approach.

Historically, eye care delivery was mainly the responsibility of ophthalmologists. It soon became clear, however, that in order to effectively reduce avoidable blindness, other types of health care workers would need to be developed, trained and deployed to work with and support ophthalmologists. A team approach would therefore be essential.

In recent years, eye care team development has become an important part of the advocacy and action plans of most global eye health agencies and regional bodies. The International Agency for the Prevention of Blindness (IAPB) and the International Council of Ophthalmology (ICO) both have interna-



Hilary Romo

A ophthalmic clinical officer observes a community health worker examining a patient's eyes so that he can offer helpful feedback and support, if needed

tional committees on HRD, and IAPB has also formed regional HRD committees. One of their key tasks has been to identify gaps and plan HRD for individual groups of eye health providers – including ophthalmic nurses, ophthalmic clinical officers, and optometrists/refractionists –

in a way that supports the development of the eye care team as a whole.

The composition of an eye care team varies from region to region and country to country, and it will also differ depending on whether the team is working in a

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ABOUT THIS ISSUE



Elmien Wolvaardt Ellison

Editor: *Community Eye Health Journal*.

This issue is about teamwork for eye care, and about how eye teams can function more effectively to address blindness and improve eye health in the communities where the need is greatest.

Our authors look at the various people involved: ophthalmic nurses, ophthalmic clinical officers, ophthalmologists, optometrists, the surgical team, and managers. But there are many more people whose enthusiastic and skilled participation is essential for both good clinical outcomes and a good patient

experience: low vision and rehabilitation workers, teachers, community health workers, equipment technicians, receptionists, cleaners, drivers, and outreach workers – to name but a few.

A good indicator of a team that is functioning well is that people are enjoying working together. What can be better than doing worthwhile work with people you respect and appreciate, and who each bring unique skills, perspectives and energy to the team?

But great teamwork does not always come naturally. This issue therefore looks at the importance of establishing a culture of teamwork right at the start,

when people are undergoing training. We focus on good leadership, which is needed to keep team members focused on what is important, on the goals the team wants to achieve, and on good planning and management, all of which helps to support and facilitate teamwork. There is advice on how to function within a team and improve the effectiveness of the team. Other articles look at various groups of eye health workers, the challenges they face, and how these are being addressed to improve teamwork.

We hope you will enjoy this issue and that you will be inspired to make positive changes where you work.