



Our background in treating ear problems in Nepal



Every kind of ear problem





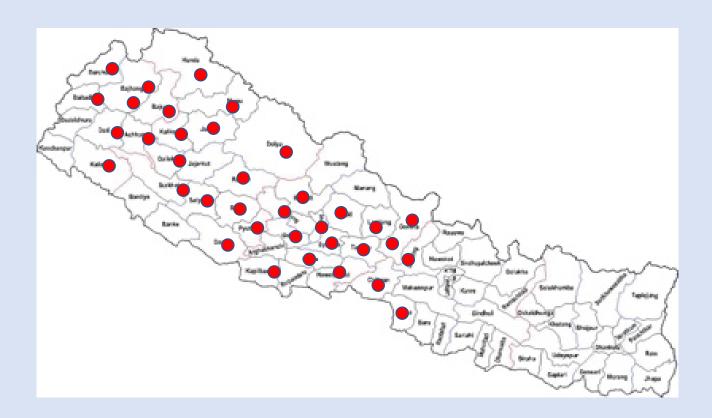








52 Ear camps to 32 districts in less developed Western Nepal, 1993-2018



40,000 out patients seen 5,000 operations done



Typical ear camp: 1000 Outpatients, 100-150 Operations, 300 H. aids

BUT - things are changing:

- Must be sensitive to local professionals and regulations
- Parachute camps by foreigners, will they remain appropriate?
- Visa and medical registration issues are making expatriate camps difficult in Nepal
- Lancet commission and WHO recommend camps only as part of a structured programme





Increasing awareness of ear disease and deafness internationally.

Minister of health attends meeting

Taking a new direction

Ear Centre Planning

Vision

Sustainable

High quality care and teaching

Reach poor and marginalized

Develop satellite community ear care

Network with national and international professionals







CONTACT: 061431015, 061430548



NEW FIRST CLASS FACILITY
OPEN NOW

CLINIC DAILY 9.00 am – 4 pm SUNDAY - FRIDAY

TREATMENT AND TESTING FOR ALL TYPES OF EAR PROBLEMS

कान सम्विन्ध सबै समस्याहरूको परिक्षण र उपचार

MEDICINE, MICRO-SURGERY, HEARING TESTS, HEARING AIDS, COUNSELLING, SPEECH THERAPY





Community outreach - Aims

Visit primary health centres and schools regularly.

Train primary health staff

Encourage appropriate referrals

Maintain hearing aids in the field

Facilitate poor and remote people to reach the Ear Centre and obtain specialist treatment



Finances

Establishing the service

Building: Switzerland

Land: INF Nepal

• Equipment: UK

Initial running costs: Germany

• Currently after 4 years, 'core services' sustainable by fair patient charging

Donors or local government will still be required for:

- Funds for clients unable to cover costs (currently supported by earaidnepal charity)
- Community work, training, and health education



Personnel - around 40 staff

- Postgraduate ENT doctors
- Medical officers
- Anaesthetists, anaesthetic assistant (LA and GA ear surgery)
- Audiologists, Ear mould technician, trained assistants
- 'Ear Care practitioners' for out-patient support, and community work
- Nurses
- Speech therapist
- Manager, reception, business officer, training coordinator, community coordinator
- Ancillary workers
- Expatriates, long term on staff variable 1-3
- Many short term visitors and volunteers

Out Patients

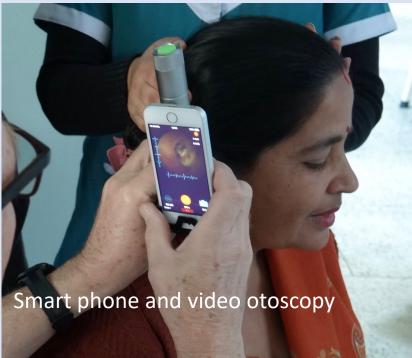




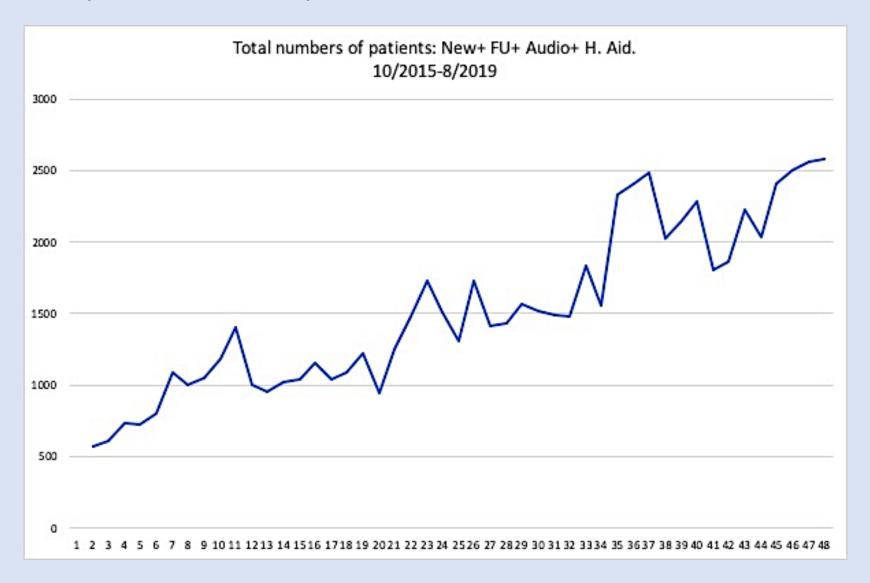




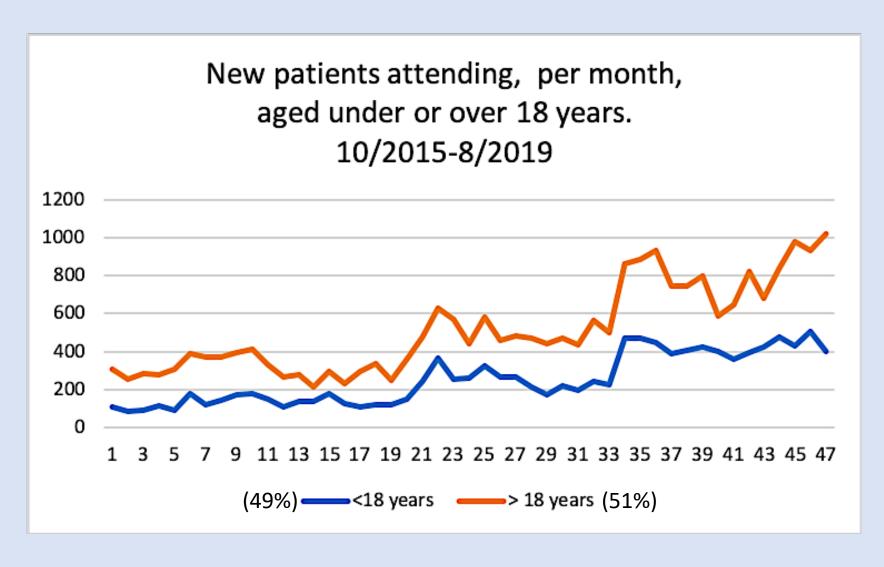




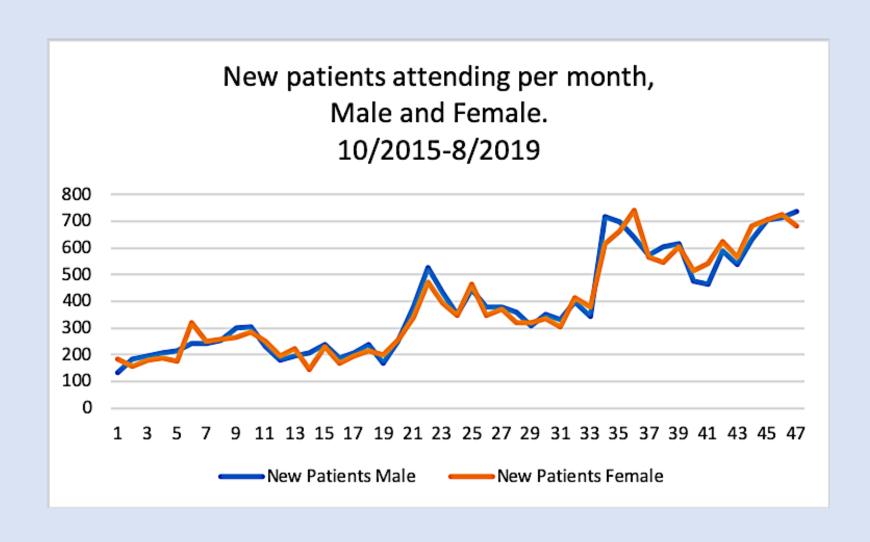
Total out patients, per month



New patients, under or over 18 years of age



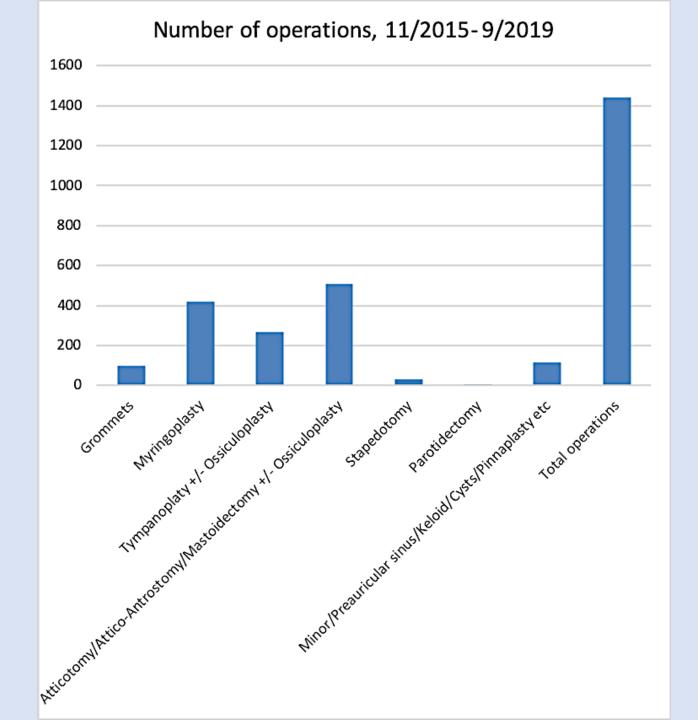
New patients, by sex



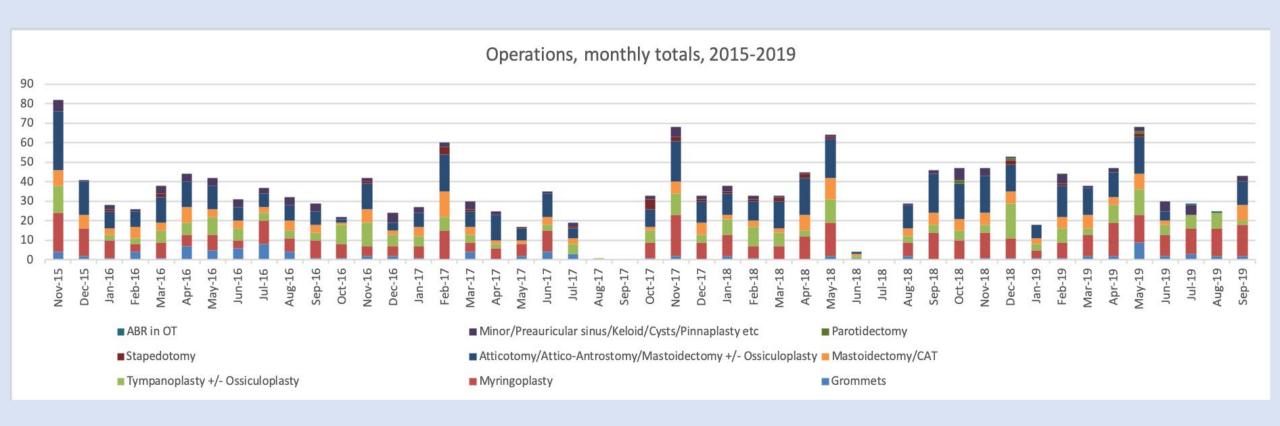
Surgery

Types of Operations



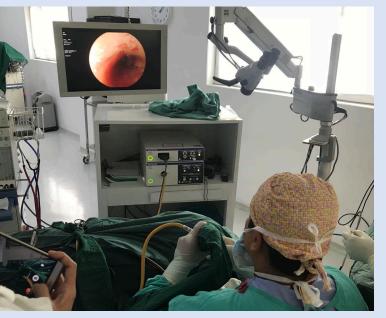


Operations, types per month



New technology

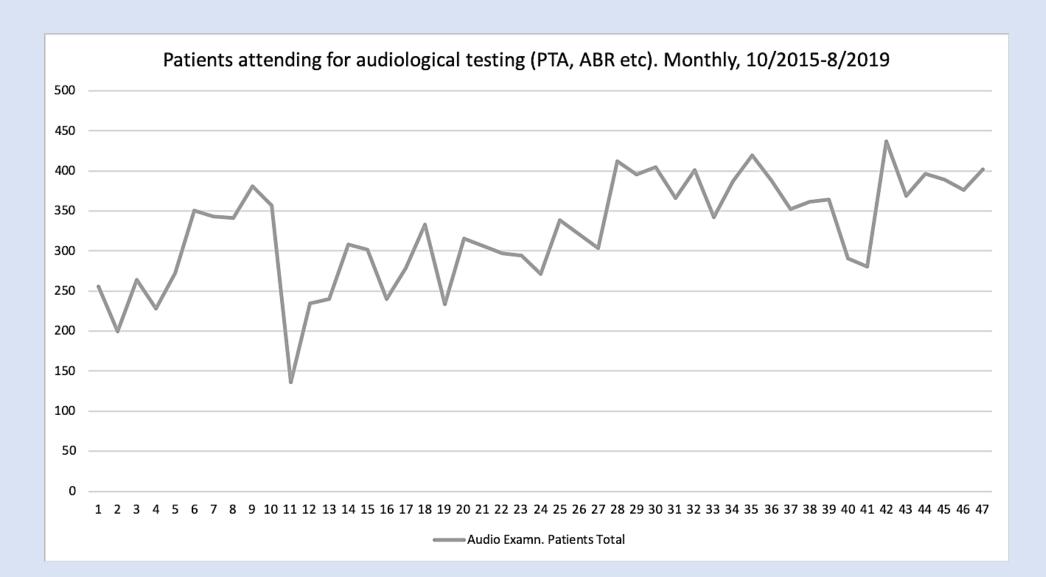




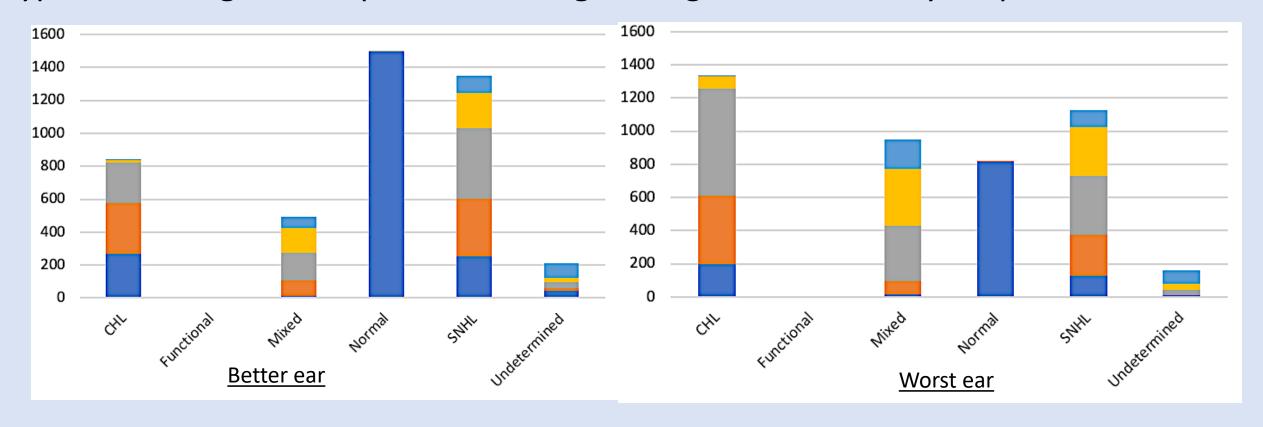
Facial nerve monitor
Video links
3D microscope camera
Endoscopic ear surgery
KTP laser

Audiology statistics

Audio patients

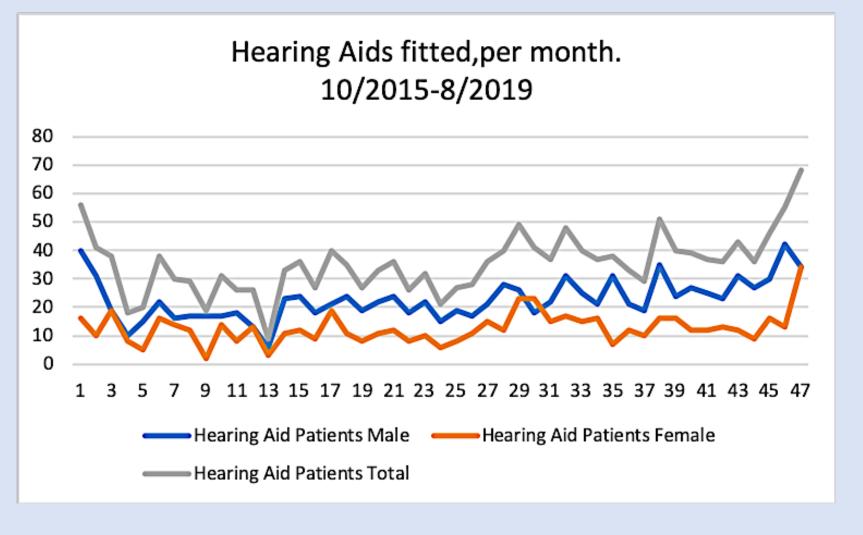


Type of hearing loss, of patients having audiograms, over a 1 year period, 2018-19



- 4 >81dB, Profound
- 3 81-80dB, Severe
- 2 41-60dB, Moderate (31-60dB for children)
- ■1 26-40dB, Slight/mild
- 0 < 25dB, Normal/no impairment

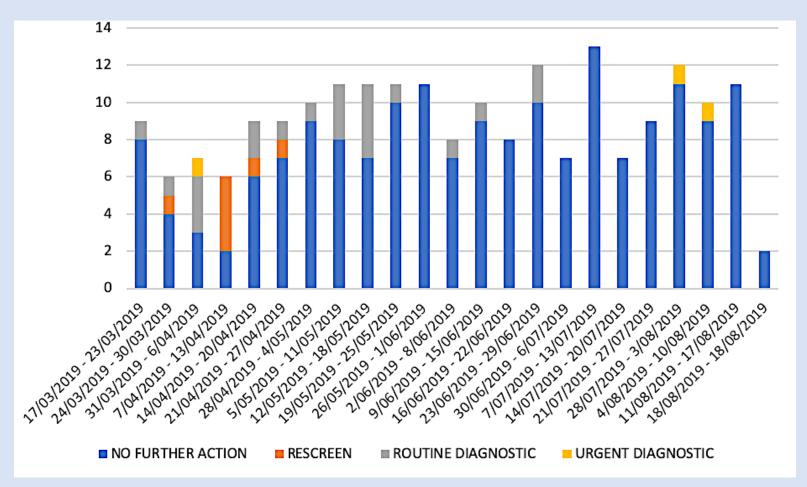
Hearing aids fitted





Mainly donated aids

Neonatal screening (at risk babies) in regional hospital, per week, by outcome





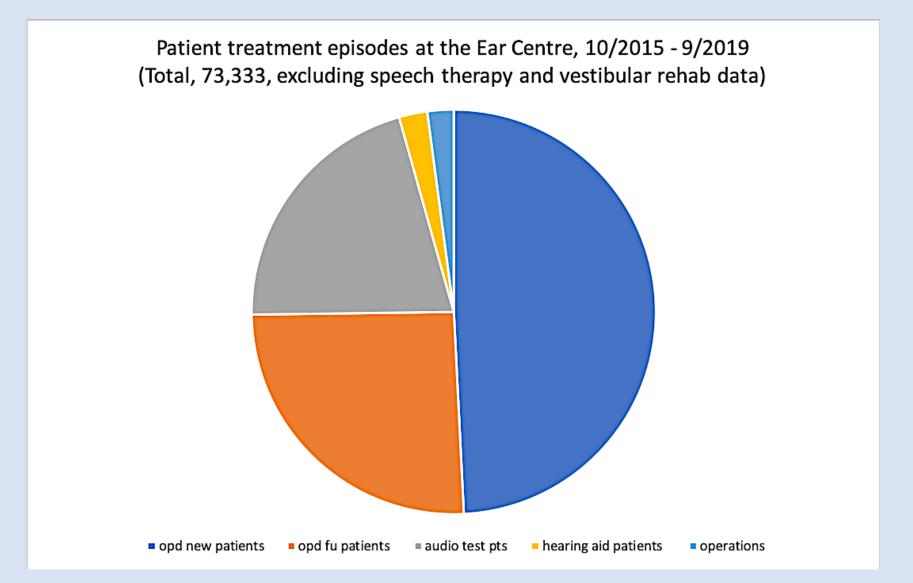
Blue: bilateral pass

Orange: rescreen required (child did not cooperate or technical issue) Grey: referral to Ear Centre for diagnostic testing (one or both ears)

Yellow: urgent referral to Ear Centre, due to a risk factor that needs urgent attention

Summary and lessons learned

Patients treated since opening in 2015



Excludes community outreach camps (1500+ patients)

Staff recruitment and retention

- Staff will move, plan ahead
- Finding and retaining leaders or visionaries is tough
- Maintain good working atmosphere, social events, feedback meetings, fair employment
- Plan for handover to nationals from the start
- Remember core, appropriate targets and values

Service and outcome standards

- Do research and audit, develop accurate (electronic) records
- Follow up is difficult, need contact systems
- Maintain national and international professional networks
- Communication well with supporters
- Provide a good caring service, grapevine is better than advertising
- High standards of safety

Volunteers welcome!

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Check us out on:

https://www.earaidnepal.org

https://www.inf.org/our-work/ear-centre/



earaidnepal



