



Report on
**National Workshop on
“VISION CENTRES”**

Venue

PBMA'S H. V. Desai Eye Hospital , Hadapsar, Pune, Maharashtra

Date

21st & 22nd December 2004.

PREFACE

Dear Friends,

Vision 2020: The Right to Sight is an achievable objective because of the inherent strength it has from planning to implementation at all levels. Primarily, we have foundation that is strong and could be still made stronger at the periphery level by building awareness and effective service delivery bottom up. The development pyramid envisaged for the achievement of Vision 2020 goals highlights the concept of Vision Centers for a population of 50,000 at the primary level. Fortunately, there are umpteen numbers of experiments going on across the country to provide comprehensive eye care at the primary level. There is a variety of nomenclature to signify the contribution at the gross root level. The Government of India in its National plan has given high priority for establishing Vision Centres to provide effective services as part of this envisioned strategy.

We, Vision 2020:INDIA have felt that bringing together various players that are embarked upon primary level experiments and provide them a platform to confer , consolidate and validate the experiences to have wider application in the diverse situations. Thus a national workshop on vision centers was thought of and organized. I must say it was simply grand because of the overwhelming response it has got from the activists to planners in the pyramid of Vision 2020. We have come out with replicable, applicable and agreeable strategies for the comprehensive eye care at the primary level and we hope that Government, INGOs and NGOs would embrace the outcome and evince great interest to take it forward. We express our profound thanks to all and place on record our great appreciation for the concern and commitment of all the partners of the workshop to elimination of avoidable blindness. We hope to march forward with a 'partnership' torch.

With best wishes

PKM. SWAMY

Introduction

Blindness and vision impairment is a major public health problem in India. Nearly 90% of the blindness in India is treatable or avoidable and is attributed to either age related cataract or refractive errors. Other major causes for blindness are also on the increase as population demographics shift towards aging and people live longer.

Conditions like diabetic retinopathy, age related macular degeneration and glaucoma assume importance from an adult blindness perspective. Childhood blindness and ocular morbidity are also being recognized as major priority areas for eye care programmes. There are an estimated over 200,000 children blind in India, about 42% of this blindness is avoidable. 11 million blind person years are estimated to be lost in India due to blindness in children compared to 22 million blind person years lost due to age related cataract.

Although several models for adult eye care exist including tertiary care models and outreach or eye camp models, utilization of services remains low in rural areas. Several studies in India have elucidated the barriers that exist to uptake of services from current models of care.

The Present approach in the National Action Plan, gives more emphasis to setting up Vision Centers under “Comprehensive Eye Care Model” in rural areas. The Vision Centres are the first contact place where people can come and interact with the eye care professional and seek treatment / advice for their problem.

Many Institutions/Funding agencies are running Vision Centres in their existing Comprehensive Eye Care Model across the Country. They have their own models and varied experiences. But there is urgent need for a validated /standard model that can be replicated in all parts of the country.

Need

Setting up of Vision Centre at primary level has been given emphasis in Vision 2020-National Plan of Action (India). The country requires more than 20,000 Vision centres by the year 2020. The out reach of the National Programme for Control of Blindness (NPCB) largely depends on the successful running of Vision Centres in rural

areas. It is the key point where people with visual problem seek advice. Mid Level Ophthalmic Personnel (MLOP) working in Vision Centre is an important person to provide information and necessary preliminary services for better eye care. she/he acts as a friend, philosopher, and counselor for the patients. MLOPs can be utilized to mobilize the rural people for any eye care activity laid under Vision 2020 Action Plan.

The Vision 2020: The Right to Sight-India organized a national workshop on “Vision Centre” from December 21 to 22 at Pune to discuss various issues related to Vision Centres and develop a strategic guideline on setting up model Vision Centre in rural India. Representatives from all stakeholders including Government of India, INGOs, NGOs, Vision Centers/Satellite Hospitals and Research Institutions participated in the workshop. After two day long deliberations and debates, following recommendations were put further by the participants:-

Objectives

The objectives of the national workshop on “Vision centre” are :

- To review the current practices on Vision Centre followed by various agencies in the country to evolve a guideline.
- To understand the relevance and importance of Vision Centre under the pyramid envisaged in the National Plan of Action.
- Evolving a strategy to increase the establishment of Vision centres in rural areas.
- Build consensus among the national and regional eye care agencies on the concept of designing and establishing Vision Centres in India and on designing / modifying (current) course curricula for the Vision technician.
- To utilize the out come of the collective experience for developing a national MANUAL on setting up of Vision centres.

Methodology

The methodologies adopted to achieve the said objectives were as follows:

- Presentation on current practices on Vision Centres.
- Group Discussion, group work and presentation
- Action plan

Participants

A total of 53 delegates from different parts of the country were present in the Workshop. The participants of the workshop were Central and State government officials, National practitioners, Non-Governmental organizations from all over the Country.



Venue and Dates

The Venue for the National workshop on Vision Centres was the Auditorium, H.V. Desai Eye Hospital , Hadapsar, Pune, and Maharashtra. The dates were 21st & 22nd December 2004.

Proceedings

Day-One(21st December 2004)

In the inaugural Session

Sri N.P. Pandya, Executive Director, Poona Blind Men's Association, in his welcome address appreciated the participation from all corners of the Country and extended warm welcome to all participants.

Mr. PKM Swamy, Executive Director Vision 2020-India gave overview of the workshop. He also mentioned that Vision2020-India would like to conduct other such workshops in collaboration with Government of India and other stakeholders to expedite the Vision 2020 initiatives.

Dr. Supriyo Ghose, Vice president, Vision2020-India gave the global perspective of blindness scenario and also the relevance and rationale of the Vision Centre workshop.

Dr. D. Bachani, ADG (O), Department of H& FW, Govt. of India briefed the Govt. initiatives in this regard. Also he reviewed the recommendations of Primary Eye Care workshop held at Coimbatore-April 2002. In his speech he highlighted the importance of Vision Centres in the National Plan of Action for reducing avoidable Blindness in India. He pointed out that there are 20,000 Vision Centres to be established by the year 2020.

At the end of the inaugural session **Dr. GV Rao** from ORBIS Internationals, **Dr. CS Shetty** from Lions Club International Foundation, **Dr. Nelson** Yasudasan from Christoffel Blindenmission and **Mr. Vinay Patel** from Sight Savers International mentioned their present initiatives and future plan to enhance the Vision Centre activities in India.

In the Second Session, Resource persons from different regions of India present their papers on Current practices in Vision Centre in their regions. From EAST ZONE *Mrs. Satyabati* (PREM,Orissa) and *Mr. Bhakta Parkayastha* (West Bengal), From WEST *Dr. M. Deshpande* (H.V.Desai,Pune), From North *Dr Anand Sudan* (Sadguru Netra Chikistalaya,Madhya Pradesh) and *Mr. Somesh* (Venu Eye Institute, New Delhi) presented their papers on current practices. From SOUTH *Mr Villas Kovai* (LVPEI, Hyderabad) highlighted the sustainability aspect and HR training related to the Vision

Centres. **Dr. Namperumalsamy** (AECS, Madurai) stressed on how technology can be used in Vision Centre Setup focusing the future need and demands. He gave their own experience of Vision Centre set up where IT technology is used to minimize the distance between VC and Secondary Centre.

Dr. Sunitha Lulla, Dr. Vandana Nath, & Mrs Sumana Samuel gave a presentation on inclusion of Low Vision services in Vision Centres which added a different dimension to think on Vision Centre activities.

At the end of the session a short film on Community Vision Screening was shown to audience. The film was developed by Netra Niramay Niketan, Chaitanyapur, West Bengal.

In the post lunch session Delegates were divided into Four groups. Each group had their own theme to discuss and had their leader to monitor the discussion. Working briefs for the themes were provided before hand to concentrate on. Group I & Group III worked on the theme “Development of guidelines and managing Vision Centres at Primary level”. Similarly Group-II and Group- IV worked on the theme “The financial and Non-financial (policy) support and action plan for development and spread of Vision Centers at Govt ,INGO &NNGO levels”. Each group discussed at length till evening and noted their recommendations.

Day-Two (22nd December 2004)

At the outset of the day two, speakers from different group presented their recommendations. The points were noted and debated. Some suggestions were added. Dr. D.Bachai and Dr. C.S. Shetty were on the dais and moderate the entire proceedings with their valuable inputs. All points were noted and discussed in the open forum before giving it a final shape. Immediate after tea break the final recommendations were presented once again and unanimously accepted by all. In the concluding part Dr.D.Bachani briefed some recent initiatives related to the Vision Centres. Also he promised to put forward the recommendations at the Govt. level for consideration.

Recommendations

I. Guidelines for establishing and managing Vision Centers at Primary Level

A. Rationale for establishing a Vision Centre (VC)

- Vision centers needed to be established in those areas where primary eye care services are not available for at least 50,000 populations.
- It should provide primary eye care especially refractive error services, which should be easily accessible.
- Existing VCs and Primary Health Centers (PHCs) should be strengthened besides setting up of new Vision Centers.
- Government should collaborate with local NGOs & INGOs to set up new VCs

B. Human resource required

- There should be at least one Mid Level Ophthalmic Personnel (MLOP) to manage each VC. There could be one assistant for each VC.
- MLOP will work closely with other health care personnel, link workers, teachers, Anganwadis of Integrated Child Development System (ICDS).
- MLOPs should identify minor external eye diseases like conjunctivitis, eye injury along with other diseases like cataract & glaucoma and refer patients to the nearest eye care centre.
- Vision testing & prescription / dispensing of glasses. Optical shop can be set up or outsourced.
- Conduct school eye screening programme, training of volunteers and imparting eye health education.
- In case of inadequate number of MLOPs, the state may train one of the existing health worker as MLOP
- Ophthalmologists should visit VCs periodically, preferably once a week from referral centre

C. Training of Human Resource

- MLOP training in Govt. sector may be continued.
- Candidates should preferably be selected from the community with minimum qualification 10 + 2.
- Rename MLOP instead of PMOA.
- Start training of MLOP (2 yrs) in Govt./Private/NGO training centers to meet the human resource requirement of VCs. More training centres required.
- Curriculum of Low Vision should be added in the MLOP training.
- Conduct periodic reorientation training for existing MLOPs – formal / non-formal (distance).
- Training should be supported by the Central Government.

D. Infrastructure / Equipment

- Trial set, Trial Frame (Adult and Child), Vision Testing Drum, Plane Mirror Retinoscope, Streak Retinoscope, Snell en's Charts, Binomag / Magnifying Loupe, Schiotz Tonometer, Torch (with batteries) Lid Speculum, Epilation Forceps, Foreign body spude and needle, Direct Ophthalmoscope (used by Medical Officers), Rechargeable batteries, Slit lamp (optional), Vision Charts for pre-verbal children and Vehicle or logistic support (optional).
- For each VC, one large room or two small rooms will be required.

E. Financial / Non-financial resources

- Any agency may set up a Vision center with the support of Government, NGOs, Community (panchayats, local leaders etc.)
- Appropriate costing of a VC needs to be done
- It could be set up in a rented premise or within a PHC facility.

F. Monitoring, Evaluation, Documentation and MIS

- Financial / Progress report of Govt. VCs should go to MO-PHC and from there to DBCS to State Program Manager to GOI-NPCB.

- Private / NGO set up VCs may have own Management Information System (MIS). Reporting requirement would be based on the requirement of supporting agency.
- Following reports can be maintained at the VC:
 - Out-patient records (BCVA, treatment etc.)
 - Prescription slips
 - School screening records
 - Inc. & Exp. Records
 - Stock list
 - Inventory etc.

G. Sustainability

- Income source: spectacles, OPD (user charges) etc.
- User fees based on paying capacity
- Support to vision center should be gradually withdrawn

II. The Financial and Non-financial (policy) support and action plan for development and spread of Vision Centers at Govt., INGO and NGO levels

A. Policy measures for healthy life of vision centers

- Mapping of area served by each vision center to avoid duplication of effort and to ensure co-operation between Govt., NGOs and local community.
- It is important to have a link with a “Secondary” level eye care facility in Govt., NGO or private sector. A Vision Centre should be set up after establishment of this link formally.
- The secondary level facility should be present within a radius of 50 km (desirable).
- Transport of referred patients to secondary facility should be the responsibility of the latter
- Totally free service is not to be encouraged (except for the very poor).
- Nominal registration fee may be charged.
- Referred patients may pay according to policy of secondary facility.

- School screening/teacher's training should be free, but referred patients may be charged except poor children. Spectacles will be provided free of cost by DBCS.
- MLOPs should work for 8 hours/day and should be given a fixed salary as per minimum wage of Govt of India plus incentive.

B. Resources for VC and role of INGO and local Community

- Non-recurrent cost would include infrastructure, equipment and cost of training man-power. This cost should be mobilized from Govt., NGOs & local community.
- Recurring cost would include salaries, consumables, overheads and social marketing. This expenditure will be met through Govt./NGO support, registration fees, spectacles and medicine.
- Wherever possible INGOs should establish strong linkages with Government to set up or strengthen Vision Centers. INGOs should provide one time cost.
- Community should increase eye health education through teachers, religious groups and self help groups. They should also play a vital role in providing place, identify suitable person and forming a Local Advisory Committee to act as a local guardian.

C. Validation / Monitoring

Following data, activities and revenue sources should be periodically monitored:

- No. of patients examined
- Spectacles dispensed
- Referrals
- Follow-ups
- School screening
- Volunteer training
- Revenue from registration and spectacles
- Revenue from referral patients (at secondary eye hospitals)
- No referral compliance
- Qualitative: satisfaction and Impact of services of VC
- Techniques: uniform data base for all VCs

D. Time frame & Target

- 2002-2007 - 500 VCs
- Identification of Training Centers & Curriculum
- Job description

E. Content of Manual on Development and Management of Vision Centers

- Quality standards
- Specific protocol for individual attached to VC with detailed job description
- Community participation
- Strategies to become self supporting
- Link with secondary hospital
- Monitoring
- Documentation/Data formats
- Do's & don'ts and ethical practices
- Available in regional languages
- More pictorial content
- Specific guidelines on Information Systems

Action plan

A National Core Committee was formed including the representatives from Govt, INGOs and NGOs for developing the **Manual**. The committee was entrusted to look in to the matter and expedite the process. Following persons were in the committee: Dr. GVS Murthy, Dr. Parikshit Gogate, Mr. Vilash Kovai, Mr. Anand Sudhan, Dr. GV Rao, Mr. Vinay Patel, Dr. C.S.Shetty, Mr. PKM Swamy, Dr. D. Bachani, Dr. Srinivas Reddy.

Annexure

- I. Invitation**
- II. Programme Schedule**
- III. List of participants**
- IV. Photographs (CD attached separately)**
- V. Set of paper presented (CD attached separately)**

Annexure-I (Invitation)

Dear All,

We are happy to inform you that, Vision2020-India is going to organize a workshop on “VISION CENTRE”, the need of the hour, on 21-22 of December-2004 in the culture-rich city of Pune.

We are aware that you have been associated with development and facilitating Vision Centers for quite long.

The outcome of the workshop will be rich only when resource person like you would offer inputs.

We therefore have two requests to make.

1. Please accept our invitation to be a resource person on behalf of your organization.
2. Please do arrange to sponsor 5-6 agencies of your network that have been either keenly involved or likely to get involved in Vision Centre.

The workshop is being organized jointly by the Vision2020: The Right to Sight –India forum and Poona Blind Men’s Association.

The Venue for the workshop is H.V.Desai Eye Hospital, Hadapsar, Pune.

Eminent national and regional resource persons have been drafted for keynotes and deliberations.

The main objectives of the workshop will be

- To bring out best practices in organizing Vision Centre by various agencies in the country.
- To emphasize the relevance and importance of Vision Centre under the pyramid envisaged in the National Plan of Action.
- Evolving a strategy to enhance the establishment of Vision centre in rural areas.
- Build consensus among the national and regional eye care agencies on the concept of designing and establishing Vision Centre uniformly through out India
- Designing/ modifying (current) course curricula for the Vision technician.
- To utilize the out come of the collective experience for developing a national MANUAL on SETTING UP of Vision centers.

We request you to confirm your participation and your partner organizations early for better arrangement.

Thank you and with warm regards

Yours sincerely
Bikash Chandra Mohanta
Program Manager
Vision2020-India

Annexure-II (Programme Schedule)



NATIONAL WORKSHOP ON VISION CENTRE

21-22 December 2004

Venue:- H.V.Desai Eye Hospital, Pune.

Programme

Date 21st December 2004.

Session –I (9.30AM-11.00AM)

1. Welcome - Dr. M. Deshpande (5)
2. Overview of the Vision Centre workshop (10)
PKM Swamy, Executive Director Vision2020; The Right to Sight-India.
3. Global perspective on Blindness, Vision 2020 initiatives and the relevance and rationale of Vision Centre (10)
Dr.Supriyo Ghose Vice - President Vision2020: The Right to Sight-India.
4. Overview of the recommendations on Primary Eye Care workshop held at Coimbatore-April-2002./ Vision Centre under National Plan –PYRAMID (15)
Dr. D Bachani, ADG (O), Dte GHS, New Delhi
5. Role of INGOs in planning and implementation of Vision Centres- (10X4)
OEU/ORBIS /SIGHT SAVERS AND LCIF
(Current initiatives and Future plans)

Session-II (11.30 AM -1.30PM)

Presentation on current practices in Vision Centre from different regions

Chair person: Dr.Supriyo Ghose, Co- Chair:- Lalitha Raghuram

A.

EAST

1. Vision Centre practices in Orissa (10)
Mrs. Satyabati , PREM, Orissa
2. Vision Centre practices in West Bengal (10)
Mr. Bhakta Parkayastha, West .Bengal

WEST

1. Vision Centre practices by H.V.Desai Eye Hospital Pune. (10)
Representatives from H.V.Desai Eye Hospital

NORTH

1. Vision Centre practices by Sadguru Netra Chikishalaya, Chitrakut (10)
Dr. B.K.Jain
3. Vision centre practices by Venu Eye Institute , New Delhi (10)
Mr. Somesh Dwivedi

SOUTH

1. Vision Centre Practices By LVPEI, Hyderabad (15)
Mr. Vilas Kovai, ICARE, Hyderabad
(Sustainability aspect and HR training focus)
2. Vision Centre practices by AECS, Madurai (15)
Dr. Nam, Madurai
(Technology use in Vision centre, Future aspect)
- B. Inclusion of Low Vision Services at Vision Centre (15)
Dr. Sunita Lulla, Dr. Vandana Nath & Mrs Sumana Samuel
- C. Urban Vision Centre practices by Dr. R.P.Centre, New Delhi (15)
Dr. GVS Murthy, Dr. RP Centre, New Delhi
(Challenges and achievements)

Session -III (2.30 PM -4.00PM)

- (Short Film on Community Vision Screening)** (15)
Developed by Vivekananda Mission Eye Hospital, Chaitainyapur, WB

Group Session

Group-A

Team leader:-Dr. Chandra Shekhar Shetty
Documentation:- Mr. Bikash Chandra Mohanta

Development of guidelines for establishing and managing Vision Centres at Primary level.
(Working Brief)

Group-B

Team leader:- Dr Nam
Documentation: - HV Desai Eye Hospital Representative

The Financial and non –financial(policy) support and action plan for development and spread of Vision Centres -at Govt., INGO and NNGO levels(with the help of working brief)

Session-IV (4.30 PM-5.30 PM)

Group Work (two groups) Contd.....

(Reversal of themes of III rd session for the groups)

Day-Two, 22nd December 2004

Moderator Mr.PKM Swamy and Dr. Bachani

Session-I (9.00AM- 11.00 AM)

Presentation by the groups and discussion

A. Validation and replicable model of VC

B. Process of development **National Guidelines & Manual** on VC

Session-II (11.30AM-1.30PM)

I. Final recommendations and action points to various partners




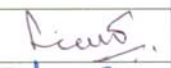




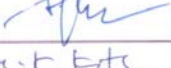


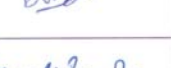
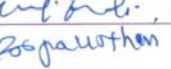


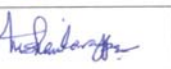

II. Formation of National Core committee on Development Manual on VC


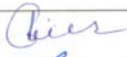
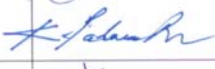


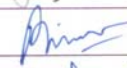











Annexure -III (Participants List)


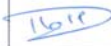

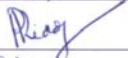





15
19
13
47

List of the Delegates Participated in National Workshop on Vision Centres

Venue :-H.V.Desai Eye Hospital ,Pune

SI No	Name and Address	21 st Dec 2004	22 nd Dec 2004
01	Dr. G.V.Rao, Country Director ORBIS-India, New Delhi		
X 02	Mrs. Lalitha Raghuram, Country Director-India O. E. U. Hyderabad		
03	✓ Dr. D. Bachani, ADGO,DH&FW, Govt. of India, New Delhi		
04	Dr. C.S. Shetty, Bangalore (LCIF)		
05	Dr. NAM , Director, AECS Madurai		
06	Mr. Vilas Kovai LVPEI, Hyd		
07	Dr.G.V.S. Murthy, Dr. R.P Centre for Ophtholmic sciences, AIIMS, New Delhi		
08	Mr Vinay Patel, SSI, Kolkatta		
09	✓ Dr. Supriyo Ghose, Dr. R.P Centre for Ophtholmic sciences, AIIMS, N.Delhi		
10	Mrs.Minaxi Kothari		
11	Dr.Bijal Mehta, Bombay City Eye Hospital, Mumbai		
12	Madam Gunawathy Fernandez, CBM, Bangalore		
13	Dr. Gopa Kothari (OEU)		
14	Ln.Dr. K.V.krisnaji ,RR Lions Eye Hospital,Palakol, AP		
15	Dr.Sunita Lulla Gur, Venu Eye Institute and Research Centre N.Delhi		
16	Mr. Sankarappa & his wife West Lions Eye Hospital, Bangalore		

17	Dr. Srinivas Reddy , AP Right to sight society, Hyderabad		
✓18	Dr. B.K.Jain ,	*	
✓19	Mr. Anand Sudhan Sadguru Netra Chikitsalaya, Chitrakut, MP	✓	
✓20	Mr PKM Swamy , Vision2020-India, Madurai	✓	
21	Rtn A.R.Jayanty		
22	Dr. K Padmaraju , RNEH, Vishakhapatanam		
23	Mr.A.K.Arora		
24	Dr. Umang Mathur , Shroff Eye Hospital, New Delhi		
✓25	PN Prasannakumar SSI, Jodhpur		
26	Shriniwas Sawant SSI, Mumbai		
27	Mrs. Satyabati People Rural Education Movement, Orissa		
28	Dr.. Jatin Shah , LCIF		
29	Mr. Bhakta Parkayastha , Sundarbans Social Development Society, West.Bengal		
30	Mr.Dhanaram , Urmul,Rajasthan		
31	Mrs Sumana Samuel , Sharp Memorial, Dehradun,		
32	Dr. Vandana Nath , BPA, Ahmedbad		
33	Sister Aney John Agartala , Assam		
34	Ms V Smite Agartala, Assam		
35	Mr. Bikash Chandra Mohanta V2020-India		
36	Somesh Dwivedi Venu Eye Institute&Research Centre, New Delhi		

37	Mr. Franklin Deniel VEI & RC, Delhi		
38	Dr. Deshpande	✓	
39	Dr. Parikshit	✓	
40	Dr. Kuldeep Dole HV Desai Eye Hospital		
X41	Representative from Bangladesh		
X42	Dr. Divesh Shah (LCIF)		
43	Dr. Nelson Yasudasan (CBM)		
44	Lion Roopkaran Reddy, Mehboob Nagar, A.P		
45	Dr. Ajit Joshi Lions Hospital, Miraj		
46	Mr. Kamlesh Guba ORBIS		
47	B.N. Srinivasulu Reddy BULEN P-2		
48	YAMADA S.P. RAJESH KUMAR SID KAKINADA, AP		
49	Dr. Anand Chavhan	✓ →	
50	A. Khandrup		
51	Dr. Mustafa Palla	