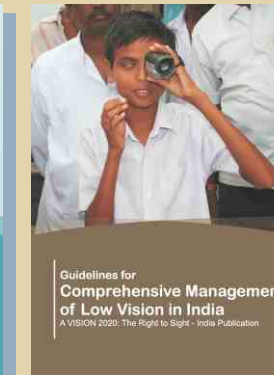
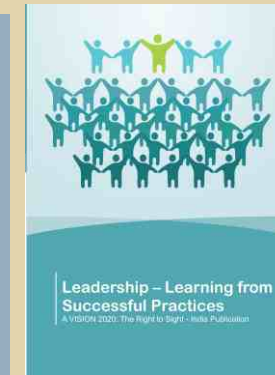
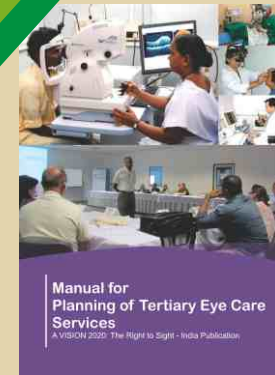


Annual Report 2013-14

VISION 2020

The Right to Sight – India



www.vision2020india.org



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About VISION 2020: The Right to Sight – India

VISION 2020: The Right to Sight – India is part of the global initiative of the World Health Organisation (WHO) and International Agency for the Prevention of Blindness (IAPB) for reducing avoidable visual impairment by year 2020.

VISION 2020: The Right to Sight – India is a collaborative effort of INGOs, NGOs, eye care organisations in India and the Government to coordinate and advocate for improved eye care programs; to gain and share knowledge and together develop solutions to achieve quality, comprehensive and equitable eye care.

VISION 2020: The Right to Sight – India's programs and action plans are aligned with government's programme of National Programme for Control of Blindness. VISION 2020 India builds the capacity of eye care institutions and strongly promotes quality, equity and comprehensive eye care service provision towards contributing to the national goal.

Our VISION: An India free of avoidable blindness, where every citizen enjoys the gift of sight and the visually challenged has enhanced quality of life as a right.

Our Mission: To work with eye care organisations in India for the elimination of avoidable Blindness by provision of equitable and affordable services as well as rehabilitation of visually challenged persons through:

- Development of appropriate policies
- Quality standards
- Advocacy
- Training, and
- Promotion of emerging practices with a special emphasis on the poor and marginalized sections of society and underserved areas.

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Acronyms

NPCB: National Programme for Control of Blindness

WHO: World Health Organisation

IAPB: International Agency for Prevention of Blindness

Message from the President and the CEO

The year 2014 marks ten years for VISION 2020: The Right to Sight – India. It is a significant landmark for any organisation. As VISION 2020: The Right to Sight –India nears this landmark, it gives us great satisfaction that the initiative launched in 2004 has contributed to reducing the burden of blindness with its rich resource of members, advisors, INGOs, and support & guidance from the Government of India. Vision 2020 India has mainly focused on improving 'quality' and 'equity' in service delivery and on promoting comprehensive services. At a national level, collective inputs have helped to increase allocation to the national programme of control of blindness to Rs. 1250 crores under 11th five year plan and Rs. 2506 crores under the 12th plan. However, there is much to be done to achieve the goals of Vision 2020, the elimination of avoidable blindness, by 2020.

VISION 2020: The Right to Sight -India has advocated both at national and state level. It has published thematic manuals that are guidelines to eye care service providers; conducted thematic workshops on issues such as costing of cataract surgery and diabetic retinopathy, glaucoma and paediatric eye care. VISION 2020 - India is able to bring together eye care personnel, experts, INGOs, medical college representatives and hospital managers. We also held workshops to build capacity in different areas such as Leadership, Primary Eye Care, Role of Media and Operations Management. In addition, the visits to member organisations with team building exercise and strategic planning has helped to bring all together to put in our best efforts to reduce the burden of avoidable blindness.

At the global level, The World Health Organisation has prepared the Global Action Plan (GAP) 2014 – 19 which was endorsed by delegates at the 66th World Health Assembly (WHA) that concluded on 27 May, 2013. This is an action plan that aims to further improve eye health, reduce avoidable visual impairment and secure access to rehabilitation services. Under the plan, the global target is to reduce the prevalence of avoidable visual impairment by 25% by 2019. We are proud that India also contributed towards preparing the zero draft that was the basis for the final document.

In this report, we provide a glimpse of our activities in the year 2013 – 14.



Dr. Sara Varughese
President



Phanindra Babu Nukella, Ph.D.
Chief Executive Officer

Introduction

VISION 2020: The Right to Sight – India remains committed towards achieving the goal of reducing visual impairment by year 2020.

Quality, Equitable and Comprehensive eye care are the three cross cutting principles that guide our strategic objectives and form the core of all our programmes.

Three strategic objectives have been identified:

1. Equitable access to eye health ensured by the year 2020
2. Quality eye health services made available by the year 2020
3. Delivery and uptake of comprehensive eye health services increased by the year 2020

In addition, organisational development of VISION 2020: The Right to Sight-India has been a priority.

Under the above mentioned overarching objectives, VISION 2020: The Right to Sight – India's programmes are designed to realise

- Development of appropriate policies
- Quality standards
- Advocacy
- Training and
- Promotion of emerging practices



In the year 2013 – 14, VISION 2020: The Right to Sight – India conducted several national workshops and meetings aligned with its strategic plan directed towards impacting various elements of avoidable blindness.

In our efforts towards advocacy, we involve the ministry of health in all important discussions that can impact key decisions. We also seek their guidance on a regular basis on crucial issues through meetings with the Joint Secretary, Ministry of Health and the DDG (O), NPCB and inform them the problems at the ground level.

We conformed to the statutory requirements by holding Board meetings, meeting with the Advisors and annual general body meeting.

This year, we saw an increase in membership including corporate. This further strengthens our initiative and our resolve towards delivering quality, equitable and comprehensive eye care to the unreached and underserved.

Quality Eye Care

For achieving quality eye care, VISION 2020 – India has identified areas that require reinforcement:

- Map human resource gaps and chart out a plan to address the gaps.
- Build human resource capacity: through hospital Based clinical and non- clinical training Programs.
- Develop training modules to train hospitals lacking good human resources.
- Support hospitals in team development for full utilization of the potential and capacity and so improve patients care and services.
- Advocate for improvement in quality of postgraduate courses and for developing new courses with an aim of increasing the supply of eye health personnel at all levels.
- Develop best practices manuals to guide partners in improving the quality of their services in partnership with leading eye care institutes.
- Enable organizations to conduct quality assessments on their own at their institutes so that they can do a thorough review of their systems.
- Facilitate the implementation of Hospital Management Information System (HMIS) designed and developed by the National Programme for Control of Blindness, government of India to improve the quality of services being rendered to patients by streamlining processes, reducing costs and improved monitoring.

1. Hospital Based Skill Transfer Programme:

This programme aims at upgrading the skills of the clinical and non clinical departments of our member organisations. Currently, we have rolled out training for the clinical aspects. The clinical skill transfer programme is for a period of two to four days and conducted at the premises of the hospital. This is especially keeping in mind the short staffing at majority of the hospitals. This makes it difficult for staff to travel to a location outside their hospital affecting work and treating patients.

The training is imparted by a pool of volunteer faculty. The faculty is from a pool of ophthalmologists, belonging to all specialty and sub specialty in eye care who offer to devote their time for training.

In 2013 – 14, three Hospital Based Skill Transfer Programmes were held:

- Sankar Eye Foundation by Dr Ravi Shankar, private practitioner, Chennai, July 28 – 30, 2013. Area of speciality: squint.
- Gomabai Eye Hospital, Neemuch by volunteer faculty: Dr Sudhir Singh from Global Hospital Institute of Ophthalmology, Mt Abu, Rajasthan. September 13-15, 2013. Area of speciality: squint.
- Sankar Eye Foundation from November 8-10, 2013 by volunteer faculty Dr. Rahul Deshpande, Medical Director, HV Desai Eye Hospital, Pune. Area of specialty: Oculoplasty.

For the three day Hospital Based Skill Transfer Programme held at Gomabai Nethralya, Dr Sudhir Singh combined technical skill transfer along with lectures and also demonstrated Squint Master software. Dr Singh included trainee and other ophthalmologist and optometrists in the hospital for his lecture.

Three cases were operated on during the HBP for demonstrating skills.

“Hospital Base Training Programme is very useful initiative of Vision 2020 where trainees get in house opportunity to learn from visiting faculty,” Dr Sudhir Singh.

Case Study

Skill Transfer Programme leads to gift of sight

One of the Hospital Based Skill Transfer Programmes in 2013 – 14 was conducted at Sankar Eye Foundation, Visakhapatnam, Andhra Pradesh. During the programme, under the guidance of the volunteer faculty, the ophthalmologist from Sankar Eye Foundation was successful in correcting the vision of a young boy, giving him the joy of corrected vision.

Eight year old Yerra Manikanta, the younger son of Kumara Swamy living in Rajayayapeta Village of Rajam Mandal in Srikakulam district suffered from squint from age one. The parents were aware of the problem, however, due to lack of knowledge that squint can be corrected, they left the condition untreated.

The eye problem was a source of embarrassment for the young boy but he had learnt to live with it. Fortune smiled on Yerra Manikanta and there seemed a ray of hope for him when under the “Chinnari Choopu” an eye screening programme of the government of Andhra Pradesh for identifying visual problems in school going and non-school going children. Manikanta was diagnosed with squint in his left eye and referred to Government Hospital at Palakonda. The doctors at the government hospital advised for a squint correction surgery and referred the young boy to Sankar Foundation Eye Hospital at Visakhapatnam in January 2013.

In April 2013, the child was examined in detail by ophthalmologists at the Sankar Eye Foundation, advised use of glasses and fusional exercises. On his review check up after two months, Manikanta was advised squint correction surgery.

On July 28, 2013, VISION 2020: The Right to Sight – India facilitated an Hospital Based Skill Transfer Programme at Sankar Foundation. Dr. Ravishankar, volunteer faculty with VISION 2020: The Right to Sight – India conducted the programme in the area of squint. During the Hospital Based Skill Transfer Programme, Manikanta successfully underwent the surgery. Dr Nasrin, Ophthalmologists at Sankar Foundation, performed the surgery under the able guidance of Dr Ravishankar.



2. Strategic Planning Workshops

To ensure quality in treatment and patient satisfaction, the holistic development of all the departments of a hospital with a focus on quality is a definite.

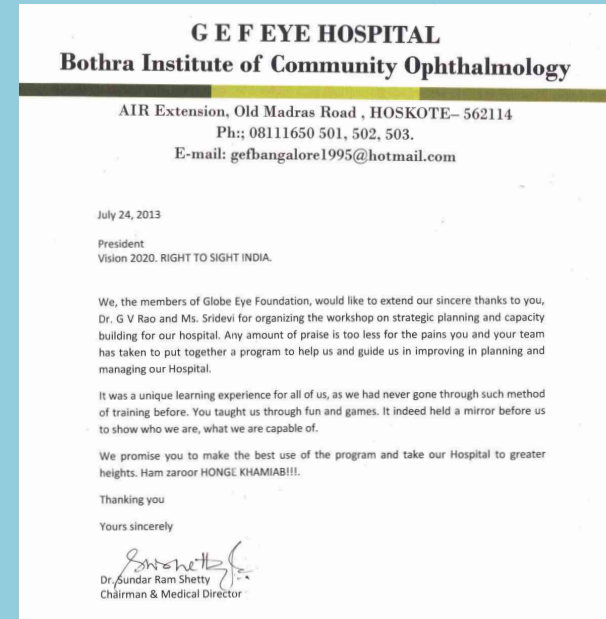
VISION 2020 – India offers its members the opportunity of Strategic Planning for their organisation. The exercise that spans over a maximum of two days aims to identify the gaps in an organisation and concludes with a business plan for the next two – five years.

For effective ownership of the plan, all the departments of a hospital are involved - right from the car driver to the CEO – in the exercise. The idea being that each staff contributes his or her valuable inputs towards the future development of the hospital and their own growth in it. Through role play and analyses of the data concerning outreach, the problem areas of the organisation are highlighted and the solution emerges out of interactions that happen. A business plan for growth and development of the organisation is the end result of the two day exercise.

Strategic Planning workshops were held in 11 organisations during the year 2013 – 14. Among the organisations was a medical college - Medical College Mimer, Talegaon.

- Kota Eye Research Centre Society, Kota.
- Arunodhya Deseret Eye Hospital, Gurgaon.
- Tejas Eye Hospital, Divya Jyoti Trust, Mandvi, Gujarat.
- Rotary Eye Institute, Navsari, Surat, Gujarat.
- Globe Eye Foundation, Hoskote, Bangalore.
- Little Flower Eye Hospital & Research Centre, Anganmally, Cochin, Kerala.
- Velemegna Good News Society, Bidar, Karnataka
- Medical College Mimer, Talegaon
- Blind People Association, Ahmedabad
- Kantalaxmi Eye Hospital, Nandurbar, Maharashtra

Sharing his team's experience of the two day workshop, Dr Sundar Ram Shetty, CEO, Globe Eye Foundation said, "It was a unique experience as we have never gone through such a training before. You held a mirror in front of us to show what we are capable of."



PMBA's Kantalexmi Shah Eye Hospital, Nadurbar expresses our sincere appreciation for conducting such an inspiring Strategic Planning workshop. We are in the sixth year of operation. Business review and Strategic Planning was very necessary for us. The Strategic Planning helped us to understand our vision, mission, objectives, strengths, weaknesses, opportunity, threats, gaps, values. Further, the strategic planning inspired us to change our mindset to build strengths, resolve weaknesses, explore opportunities and overcome threats. The workshop brought management and employees together and helped both understand each other in a better way and everyone felt that they are part of the process. This will go a long way in bringing our strengths and values together to make us greater than the sum of our part. The action plan formed not only directs us for the next five years but shall also shapes our future for many more years. Our team is motivated to start the journey towards excellence with renewed zeal. The demonstrative skills of Col Deshpande and you are excellent.

NA Gaikwad Director - Administration
Dr Siddharth Kamble Chief Medical Officer

3. Peer Reviewed Quality Exercise

Quality protocols are a vital aspect for any eye hospital to deliver quality eye care for patient satisfaction. Right from the high tech Operation Theatre to the inconsequentially considered community kitchen are under the ambit of quality.

VISION 2020: The Right to Sight – India offered to its members 'Peer Reviewed Quality Exercise' an opportunity for members to check if the hospital's protocols are in order. The review is led by Dr Usha Gopinathan, Executive Director, LVPEI, Col Deshpande, Medical Director, HV Desai Eye Hospital and President, VISION 2020: The Right to Sight – India and the CEO of VISION 2020: The Right to Sight – India.

Depending upon the size of the hospital, the workshop is for a day or spread over two days. The team visits all the departments of the hospital and deeply interacts with its heads, reviews the patient flow, waiting time for the patients and looks at the details minutely.

This year two such exercises were held:

- Niramaya Charitable Trust, Gurgaon, Haryana.
- Lotus Eye Hospital, Mumbai.

"We want to thank Vision 2020 – India and Dr. Usha Gopinathan for guidance in incorporating NABH certification process in our Institute. The initiative for quality is now taking its shape and in continuous process."
- Niramaya Charitable Trust, Gurgaon

4. Developing Best Practice Manuals

One more tool used by VISION 2020 – India for promoting quality eye care delivery is manuals. These publications promote best practices and are developed meticulously. They are written by subject experts are reviewed by a specialist team. The topics are various aspects of eye care delivery right from eye diseases to setting up of an eye hospital. The manuals are supported by INGOs.

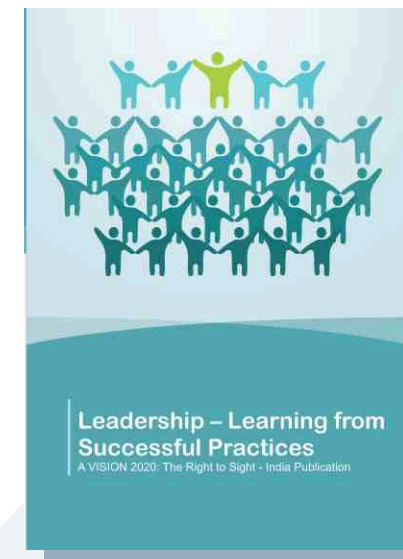
Till date VISION 2020 – India has published the following manuals:

- Guidelines for the Management of Cataract in India
- Handbook on equipping a Secondary Eye Hospital
- Guidelines for the comprehensive Management of Diabetic Retinopathy in India
- Vision Centre Manual

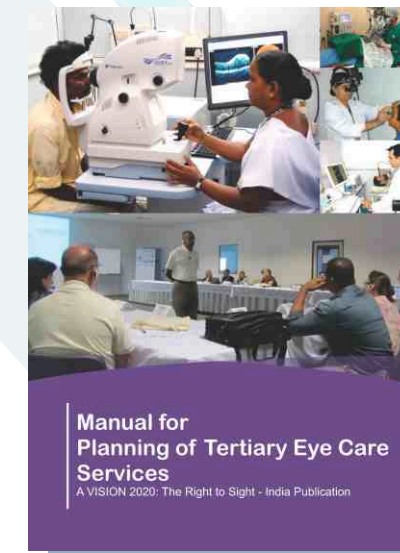
In 2013 – 14 three manuals were published to the list:

- Leadership – Learning from Successful Practices
- Planning of Tertiary Eye Care Services
- Guidelines on Comprehensive Management of Low Vision

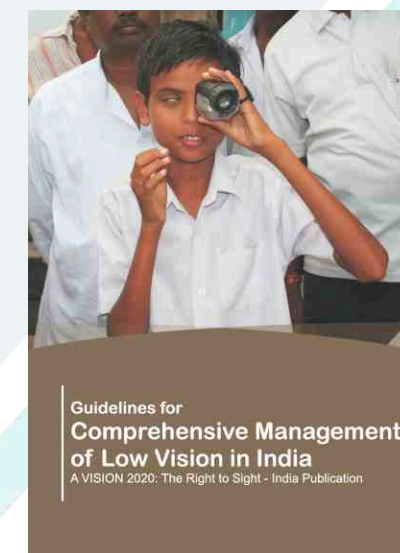
A manual on 'Leadership – Learning from Successful Practices' is based on the inspiring lectures delivered in the leadership track at the successful VISION 2020 – India's 8th annual conference held at Madurai. This idea took root based on the feedback from the conference and the tremendous popularity of the track on 'Inspiring Leadership for Effective Growth of an eye hospital'.



INGO, Sightsavers, supported the manual on 'Planning of Tertiary Eye Care Services'. The manual was developed by LAICO, Madurai. The elaborate manual aims at a stimulus for developing new eyecare institution at the tertiary levels.



The third manual published and disseminated by VISION 2020 – India was on 'Guidelines on Comprehensive Management of Low Vision in India'. This manual was supported by Sightsavers and CBM is aimed at those who want to set up low vision services.



Equity

VISION 2020 works towards advocating for policies and developing projects that aims at bringing equity in provision of eye care services.

To bring about equity in eye care services, three important steps that VISION 2020 – India has identified:

- Identification of equity related gaps in the services being provided by conducting an analysis in selected districts
- Build capacities of partner organizations developing and implementing pilot projects which can then be replicated at other places
- Advocating for changes in policies and programs to ensure that the underserved areas, such as North East states, are given due consideration



Meeting for developing a plan for the north east region: For an equitable eye care delivery in the eight states under the northeast region is one of the priority areas for VISION 2020: The Right to Sight – India. The beginning is to develop a regional plan for the northeast region which is grossly underserved as far as eye care is concerned. Some of the major barriers are the inhospitable terrain of the region and the other is the local insurgency.

It has been VISION 2020: The Right to Sight – India's aim to bring all stakeholders in the region together for a workshop for developing a regional plan for the north east region. The efforts began in 2012 and bore fruit when a one day meeting was held at Guwahati on September 1, 2013.

One of the main achievements of the workshop lay in bringing together all the significant stakeholders together for this meeting and channelizing their inputs towards attaining the common aim of reaching out to the underserved in this geographically difficult terrain and politically strife region.



Fifty two participants representing INGOs and NGOs working in eye care in the region participated in the workshop 'Eye Care Services Development of North East Region'. The government was represented by RIO, Guwahati and the SPOs from Assam and Arunachal Pradesh.

Dr Praveen Vashist from Dr RP Centre, AIIMS was the main resource faculty for the workshop.

The one day determined deliberations refined the understanding of the existing gap in eye care in the region. The meeting culminated with an earnest commitment to analyse the data collected and chart out a plan for the region. As an initial step, a state plan for Arunachal Pradesh is being developed as each states in the region have vastly different requirement and no one regional plan would fit all.

Comprehensive eye care:

The third focus area for VISION 2020: The Right to Sight – India is Comprehensive Eye Care.

In order to eliminate the causes of avoidable blindness, it becomes imperative to look at eye care and health in a comprehensive manner and address all pertinent issues rather than focus on only one leading cause of avoidable blindness.

Towards ensuring comprehensive eye care, VISION 2020 India collaborates with various organisations in order to help spread awareness on common eye problems, at all levels of the society, to encourage diagnosis and treatment at an early stage. Collaborations with other organizations are important not just to broaden perspective but also to leverage resources in order to bring about a change.

Comprehensive eye examination, Comprehensive eye care services and Comprehensive eye care system are three essential dimensions for a comprehensive approach. It works with technical and professional personnel to develop protocols for conducting a comprehensive eye examination while focusing on quality and equity of such services as well.

In the year 2013 – 14, VISION 2020: The Right to Sight – India took several steps to look beyond cataract and initiate national plans for comprehensive eye care. VISION 2020 India organised national workshops to look at the status of Low Vision and Glaucoma and how to improve accessibility to treatment and how to create awareness on Diabetic Retinopathy.

But most importantly, VISION 2020 India looked at the core issue of integrating eye care at primary health care level.

1. Developing a Comprehensive Primary Eye Care – Best Practices and Models:

In a vast country like India with its limited resources making eye care accessible to the last man in the village is a challenge. One way is to join the efforts of all health programmes in the country to support each other. For eye care, integration of eye care at primary health care may be the way forward and essential for the success of eye care delivery to all levels in the society.

To discuss the development of such a model, a one day workshop '**Comprehensive Primary Eye Care– Best Practices and Models**' on August 19, 2014 was held at LV Prasad Eye Institute, Hyderabad. The meeting was inaugurated by Dr NK Agarwal, DDG (O), and National Programme for Prevention of Blindness (NPCB), Ministry of Health and Family Welfare, Government of India. Dr G Chandrasekhar, LVPEI; Dr Deshpande, Dr GN Rao and others gave their valuable inputs. Nearly 52 participants from 30 organisations took part in the workshop spanning two sessions and group works.

Providing direction towards such a model, Dr G Chandrashekar, Vice Chair, LVPEI, Director, Hyderabad Campus suggested that "Primary Eye care should not be centred around the institution but should be around the person who needs the care."

Talking at the concluding session of the workshop, Dr GN Rao, Chairman, LVPEI cautioned that "Primary eye healthcare is never self sustainable. It has to be supported. It has to be supplemented. While sustainability is important but that should not be the major criteria at the primary level, in my view".



He further added that anywhere in the world primary health care is never self – sufficient. “Even in the most developed countries, it has to be supported, supplemented. In our desire to satisfy the sustainability criteria, let us not neglect the most neglected” was his word of advice.

Dr TP Das, Vice Chairman, LVPEI concluded by saying that future endeavors should be to remove barriers in accessing eye care services and should look for co-existence of living and providing services to needy.

Dr CS Shetty, Technical Advisor, LCIF said that whatever is relevant at a point of time to be considered and acted upon and the “Needs of the people to be considered in making any decision”.

It was decided that a manual be brought out to capture the presentations at the workshop to present the best practices and linkages in primary eye care with primary healthcare.

For promoting comprehensive eye care, two important national level meets were held in year 2013 – 14. These meetings focussed on two eye care problems that require to be addressed in the country to create awareness and uptake of services.

One was on a national meet on Low Vision and another was on Glaucoma.



2. National workshop on Low Vision:

India has made considerable progress in the prevention of avoidable blindness. However, low vision has remained a low priority and only 5 – 10% of persons with low vision access low vision services. The lack of access to low vision services results in children with low vision studying in blind schools and being taught Braille instead of using their residual vision. Ageing and increasing longevity will also increase the numbers of those with conditions that result in low vision. The number of people living with vision loss will increase over the coming decades.

For VISION 2020: The Right to Sight – India, low vision is one of the priority areas for making eyecare comprehensive.

As a first step, a two day workshop was held on November 15-16, 2013 at HV Desai Eye Hospital, Pune aimed at enhancing the service delivery system for underserved population of Low Vision (LV) people.

The workshop focused on the various aspects of low vision and the group work aimed at finding out the challenges and strategies to strengthen low vision services in India. Low Vision experts from across the country participated in the workshop. As an outcome of the group work, some of the main challenges were identified and strategies to overcome the challenges were suggested on various issues to improve the low vision services in the country.

The workshop also acted as an advocacy effort with MoHFW which was represented by Ms. Sujaya Krishnan, the then Joint Secretary as the Chief Guest. Prof. Rajvardhan Azad, the then Chief, RP Center, AIIMS, New Delhi was the guest of Honour.

Dr. Praveen Vashist, Additional Professor & Head of Community Ophthalmology Department, Dr RP Centre, AIIMS carried a situational analysis on Low Vision current situation and services.

To take forward this initiative, a national working committee and a national steering committee on low vision has been formed to discuss the current status of low vision services in the country and strategies for improvement.

Another eye condition that is calling out for attention is Glaucoma. This is a disease of the optic nerve that affects approximately 60 million people globally. According to statistics available with Glaucoma Society of India, 12 million people are affected by glaucoma in the country accounting for 12.8% of the countries blindness and is the third leading cause of avoidable blindness in the country.

To bring the spotlight on this eye problem, VISION 2020: The Right to Sight – India organised a national meet on Glaucoma on November 23-24, 2013 at Advanced Eye Centre, PGIMER, Chandigarh, who hosted the workshop.

The aim of the workshop was to bring together all the agencies, organizations, professional bodies, institutions and individuals involved in glaucoma screening and treatment for:

- Increasing awareness of glaucoma,
- Identify priorities for control, and
- Develop short and medium terms strategic plans.

The importance of such a meet was highlighted by Prof Amod Gupta, Head, Advanced Eye Centre, PGIMER Chandigarh. He said that the major challenge in glaucoma was how to diagnose the condition at the patients' doorstep and how to tackle the large percentage of undiagnosed cases in the community. The need of the hour, he said, “was to develop effective screening tools that could be incorporated within the comprehensive eye examination to be able to diagnose the condition effectively.”

Outlining the challenges for tackling glaucoma, Col Deshpande, the then President, VISION 2020: The Right to Sight – India emphasised that for tackling the problem of glaucoma effectively, there was a need to have glaucoma national awareness drive to increase awareness about this potentially irreversibly blind condition and while there appeared to be a dilemma regarding the effectiveness of population screening for glaucoma, till date there was not even an agreement about what is the basic equipment required for glaucoma screening.

The meet had valuable inputs from some of the leading practitioners in the country – from the government, private and community ophthalmology. Participants for the workshop included Dr JC Das, President, Glaucoma Society of India; Dr Ramanjit Sihota, Head of Glaucoma department at Dr RP Centre, AIIMS; Dr. Praveen Vashist, Additional Professor & Head of Community Ophthalmology Department, Dr RP Centre, AIIMS; Dr Suneeta Dubey, Dr Shroff Charity Eye Hospital; Dr Harpreet Kapoor from Max Hospital and representatives from PGI, Chandigarh.

Two main recommendations emerged from the deliberation at the workshop:

- To impress upon NPCB that in addition to avoidable blindness, the focus should also now be on irreversible blindness due to glaucoma.
- Set up a small expert group to carry forward these recommendations to the Govt for inclusion as part of the NPCB.



Diabetic retinopathy is a common complication of diabetes. It occurs when high blood sugar levels damage the cells at the back of the eye (known as the retina). If it is not treated, it can cause blindness.

The alarming fact is that India is fast spiralling towards becoming the capital for diabetes. According to ICMR-INDIAB Study 2011, 62.4 million people live with diabetes in India, and 77.2 million people are on the threshold, with pre-diabetes.

3. Meeting towards creating a national plan for awareness on Diabetic Retinopathy

A day long round table meeting towards formulating an action plan for awareness of Diabetes and Diabetic Retinopathy in India was held on March 6, 2014 at Dr RP Centre, AIIMS. The workshop was jointly organised by VISION 2020 – India, Dr. R.P.Centre for Ophthalmic Sciences and All India Ophthalmic Society.

India has more than 50 million people with Type 2 DM and Diabetic Retinopathy (DR) is becoming an important cause of visual impairment in India. One of the foremost challenges for uptake of services for DR is low awareness in the community about the diabetes, co-morbidities including risk of visual impairment and also about the prevention and available services.

It is in this backdrop that the round table with experts in eye care from across India was held. The aim of the workshop was to formulate an action plan on generating awareness of diabetes and diabetic retinopathy at the level of community as well as among the health care providers.

The action plan thus developed will dwell on areas for awareness generation, strategies, target groups, health care levels and estimated costs for different strategies suggested. It is proposed that the action plan will be a working document for National Programme for Prevention and Control of Diabetes, cardiovascular diseases and stroke, Government of India and other Non-governmental organisations for implementing such programmes with a broader goal to combat

burden of diabetes and diabetes eye disease. The participants included the leading retina specialists from across the country.

At the end of group work strategies and activities for Diabetes and DR awareness were recommended.

4. Hospital Management Information System (HMIS)

HMIS is an information gathering system developed by NPCB for collecting information on service delivery by NGOs. This was in order to bring out transparency in the system especially for tracking the Grant in Aid that is disbursed by the government.

VISION 2020 – India has been facilitating the government's HMIS among its members. The system faced numerous teething problems and VISION 2020 – India assisted NPCB by collecting feedback from its members on the type of problems they faced in using it and followed-up with the NPCB.

For a more practical demonstration of the system, a two hour session was held especially for the DPMs and SPOs at the VISION 2020 – India annual conference at Bhopal in April 2013. The session received encouraging participation. It was conducted Dr V Rajshekar, who is the In-charge for the implementation of the system at NPCB. The session was chaired by Ms Sujaya Krishnan, the then Joint Secretary, Ministry of Health and Family Welfare, Government of India.

Organisational Development



VISION 2020: The Right to Sight – India adheres to the governance statutory norms and held four Board meetings and the Annual General Body Meeting.

Board Meetings:

- The 38th Board meeting was held in conjunction with the annual conference at Bhopal on April 5, 2013. Twenty Board members including special invitees attended the meeting.
- The 39th Board meeting of VISION 2020: The Right to Sight – India was held on July 12, 2013 at Globe Eye Foundation, Hoskote, Bangalore.

- The 40th Board Meeting was held in conjunction with the WSD at Bansara Eye Care centre, Shillong, Meghalaya on October 9, 2013.
- The 41st Board meeting of VISION 2020: The Right to Sight – India was held at Agra in conjunction with the AIOS conference on February 6, 2014.
- The 9th AGBM was held in conjunction with the 9th annual conference at Bhopal. Fifty three organisations attended the AGBM.
- The committee that was set up by the Board to suggest amendments to MoA made presentation on its recommendations. The amendments were approved in 9th AGBM.



Participation in AIOS Conference



All India Ophthalmic Society (AIOS) which has almost all the ophthalmologists in India as its member, holds an annual conference in the winter months of January/ February. VISION 2020: The Right to Sight – India is given an opportunity to conduct a technical session at this august gathering which also serves as a platform to promote our organisation and its cause.

This year the 72nd AIOS conference was held at city of Taj Mahal, Agra. VISION 2020: The Right to Sight – India designed its technical session innovatively and introduced the theme of a debate: **'Equity or High Tech Ophthalmology: which is more important for elimination of avoidable blindness?'**. The 85 minutes session was held on February 7, 2014 at the Jaypee Palace Hotel and Convention Centre, Agra, the venue for the 72nd AIOS conference.

Some of the eminent ophthalmologists either supported or spoke against six topics ranging from 1. Refractive error: spectacles are more important than refractive surgery; 2. Tertiary care institute raise the bar for all eye care; 3. Maintenance of surgical quality is more important than high volumes cataract surgery;

4. Vision centres are better than camps for providing access; 5. Accessible primary eye care services will reduce burden of blindness to 6. High end equipment is the solution for quality eye care. The debate was well received by the audience who thought it was stimulating.

We were also allotted a complimentary stall by AIOS in the trade area. This was an opportunity for us to disseminate information on the activities and also on the forthcoming annual conference. We received an encouraging number of delegates to the stall, seeking information about VISION 2020 India.

Website as knowledge centre

The new look website of VISION 2020 – India was launched by Mr RN Mohanty at the 41st Board meeting held at Agra.

Advocacy

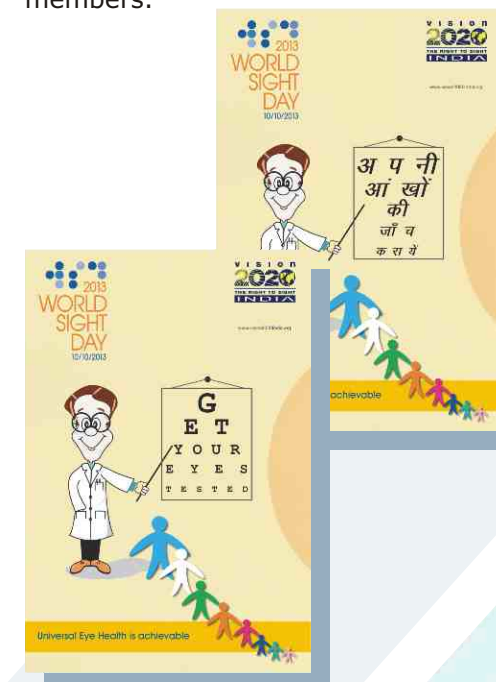
According to Mr Peter Ackland, CEO, IAPB: "Effective advocacy is critical to the success of international efforts to realise the objectives of VISION 2020: The Right to Sight. Only by securing the support of key actors, whether they are local health providers, national governments, or their development partners, can we hope to bring about the changes we seek: the universal strengthening of eye health services in a sustainable, and equitable, manner".

In the year 2013 – 14, we participated in several advocacy initiatives to influence policymakers to bring about changes for strengthening eye care in the country. These efforts were through observing the global days of World Sight Day and Glaucoma Week and also realising a state plan on DR.

World Sight Day is an annual day observed on the 2nd Thursday of October primarily to advocate and raise awareness for better eye care.

The global theme for WSD 2013 was **Universal Eye Health with call for action: Get your Eyes Tested**. These simple words with a powerful action message were adapted in several innovative ways by VISION 2020: The Right to Sight – India members and a large number of organisations across the country.

In a kind of first for VISION 2020 – India, an attempt was made for uniform message dissemination. A common poster both in Hindi and English was designed and shared with all members.



World Sight Day 2013: a focus on eye care in the northeast region

VISION 2020: The Right to Sight – India along with Bansara Eye Care, Shillong, Meghalaya observed the World Sight Day (WSD) 2013 on October 10. The day long programme which commenced with a screening camp and concluded with a technical session was attended by some of the top government officials: right from the Governor of Meghalaya to the State Home Minister and Health Minister: it was an immensely successful platform for advocating and sensitising the government on eye care. Inaugurating the WSD programme, the Chief Guest for the occasion, Governor of Meghalaya, Dr KK Paul suggested that the young population under the age group of 6 years who roughly constitute 20 per cent of the population in the State should be screened under the blindness control programme regularly.

The best medicine is preventive medicine. The Governor emphasised the necessity to reach out to the people and cover the last mile and screen the last man and child in the region.

Towards the goal of a healthy community the Governor said, "I think educating the mother is important." "Female literacy is of utmost importance. If you are educating a girl you are educating the entire family."

Speaking on the occasion, the Guest of Honour for the WSD programme, Ms Sujaya Krishnan, Joint Secretary, Minister of Health and Family Welfare, Government of India campaigned for more focus on preventing childhood blindness, where 50 per cent blindness is avoidable.





Speaking passionately on the subject she said, "We are a 30 year old programme (NPCB) and it will be totally criminal if any child has to go blind. Every child needs to be tested; any pre term baby needs to be tested for ROP. Today there is no excuse for any child to be blind."

Convergence is the key word to attain our goal said Ms Krishnan urging all health programmes to converge to offer the best possible health care to the society.

Ms Krishnan's concern stemmed from a growing younger generation in the coming years in India for whom "there can be no compromise on having a disabled generation." Else we will loose an entire generation to disability, she added.

On this global day of creating awareness on eye care, Ms Krishnan called out to the audience to "rededicate ourselves to universal eye health" and to ensure to "reach the unreached and take eye care to the doorstep."

Dr Bamin Tada, Advisor, Health, North Eastern Council, Government of India in his address emphasised on the need for health research where the gap is very wide. He said "Our neighbouring countries have overtaken us in this area." He called out to the Professionals to get out of their comfort zones and reach out to the community.

Dr Tada reminded the audience that the task of eliminating blindness was not insurmountable as "we have eliminated a number of diseases like small pox and polio, blindness should not be far."

The then President of VISION 2020: The Right to Sight - India, Col (retd) Dr Deshpande in his welcome speech said that health should be treated as a fundamental right. He said that cataract was an area where we have done well and also on refractive error, which is a simple problem. But now we have to focus on other problems also like Diabetic Retinopathy (DR) where the numbers were going high.

The daylong celebrations began with the flagging off of the screening camp by Ms Sujaya Krishnan, Joint Secretary, Ministry of Health and Family Welfare, Government of India and Smt Roshan Warjri, Honourable Home Minister, Government of Meghalaya.

The WSD programme concluded with a technical session to bring focus on the gaps in eye care in the region. Ms Sujaya Krishnan who inaugurated the session briefly spoke about the initiatives of NPCB in the region.

Observing Global Glaucoma week

On the occasion of 6th World Glaucoma Week that was observed worldwide from March 9 - 15, the team from VISION 2020: The Right to Sight - India participated in a walk.

The walk in Delhi organised by Glaucoma Society of India (GSI) and Delhi Ophthalmological Society was inaugurated by then Union Minister of Communications and Information Technology and Law and Justice, Government of India, Mr Kapil Sibal. On the occasion, he released colourful balloons and interacted with the eye doctors present to understand the magnitude of glaucoma. The minister also urged the public to get their eyes tested regularly. The walk witnessed participation from some of the leading glaucoma specialists from the Capital including Dr JC Das, President, GSI and Dr Suneeta Dubey, Treasurer, GSI.

State DR Plan for Gujarat implemented

In March 2012, a one day workshop was held in Ahmedabad to develop a Diabetic Retinopathy plan for Gujarat. The workshop was led by National Programme for Prevention of Blindness (NPCB) and Dr. Pran Nagpal, Retina Foundation and facilitated by VISION 2020: The Right to Sight - INDIA. Dr. R.P. Centre was the technical advisor for the workshop. Now a year later, a workshop was held at Anand on April 28, 2013 to disseminate the plan that was developed. The workshop was hosted jointly by Anand & Nadiad Ophthalmic Society, All Gujarat Ophthalmic Society, National Programme for the Control of Blindness and Vision 2020: The Right to Sight Gujarat Chapter.

Dr Uday Gajiwala, President, Vision 2020 Gujarat Chapter revealed that the Government of Gujarat has already started implementing the action plan initially in four districts and later plan to expand to the whole State. Col (retd) Dr Deshpande and Dr GV Rao attended the workshop.



As a national initiative, VISION 2020 India participates in several important meetings and workshops, lending valuable inputs impacting the work to reduce avoidable visual impairment.

National RoP Summit

The Queen Elizabeth Diamond Jubilee Trust's investment will focus on combating three blinding diseases that affect people across the Commonwealth: Trachoma, Diabetic Retinopathy and Retinopathy of Prematurity.

Under the Queen Elizabeth Diamond Jubilee Trust, a national RoP Summit was proposed in India. The purpose of the summit is to bring together all the agencies, organizations, professional bodies, institutions and individuals involved in neonatal care and ROP screening and treatment, to increase awareness of ROP, to identify priorities for control, and delineate short and medium terms plans. In the meeting held at Hyderabad, VISION 2020 – India was invited and was represented by Col Deshpande, the then President, VISION 2020 - India and Dr GV Rao, the then CEO of VISION 2020 – India.

Eye Bank Meeting

The meeting was conducted by IAPB regional Chair: Col (Retd) Dr Deshpande and Dr GV Rao were invited to attend the IAPB Eye bank meeting held on September 12, 2013 at India International Centre, Delhi. The overall objective of the meeting was to identify key focus points of revision in the NPCB standards, based on reviewing international eye banking standards, and recommend those revisions to the NPCB.

Thematic Workshops

VISION 2020: The Right to Sight – India has its member organisations spread across six zones in the country. From this year on, VISION 2020 India introduced zone focus workshops striking a balance between the topic and accessibility for member organisations to be able to attend the workshop. The topics of the workshops stemmed from requests made participants at the zonal meetings.

Proposal Development Workshop

A two – day proposal development workshop was held on July 4-5, 2013 at Sitapur, Uttar

Pradesh. This was a maiden attempt on the part of VISION 2020: The Right to Sight – India to organise such a workshop specifically for a particular zone. The resource faculty for the workshop were Mr Kashinath B and Dr Santosh Moses from Operation Eyesight Universal (OEU). The participants were encouraged to follow up the learning of the workshop with the resource persons.

VISION 2020: The Right to Sight – India would be announcing similar zone wise workshops in the very near future.

Patient Compliance Workshop

A two day workshop on 'Patient Compliance' was organised by VISION 2020: The Right to Sight – India on March 8-9, 2014 in collaboration with Dr Shroff's Charity Eye Hospital, Delhi. Ms Dhivya Ramasamy, faculty from LAICO designed the module of the workshop.

Over two days, the workshop focussed on:

- ▶ Patient Compliance - Understanding the problem
- ▶ Improve compliance by empowering patients
- ▶ Enhancing Compliance through Better Service Design
- ▶ Strategies to Monitor Compliance.

Three group works were held during the workshop to identify the barriers for patient non - compliance for cataract, pediatric blindness, refractive error and glaucoma.

Feedback on the workshop: Dr. Partap Kumar Midha, Director & Trustee, Global Eye Hospital, Mt Abu said that the discussion at the workshop has now enthused him "to take time out to sit with the patients to understand their problems and definitely interact with them while they are being discharged."

Mr. Subeesh Kuyyadyil, SNC, Chitrakoot: "SNC being a volume intensive hospital, patient compliance poses a big challenge. Learning from this workshop prompts me now to see how to have one to one focus."

Mr. D N Sharma, Rotary Eye Hospital, J & K: "This workshop has been an eye opener. It has given us an insight into a very crucial topic for effective treatment cycle. We will surely do our best to see how to implement the learning from this workshop."



Annual Conference at Bhopal

Annual Conference is the flagship event for us. Since 2012, the conference underwent a make – over with an aim to provide a platform for knowledge sharing and networking for community ophthalmology at a national level.

Exchange of knowledge and sharing best practices across 8 tracks, 7 sessions in each track, and a total of nearly 520 participants - that is the 9th annual conference in a nutshell that was held in Bhopal on April 6 - 7, 2013.

The two – day conference '**Achieving Excellence in Comprehensive Eye Care Management**' held on April 6 – 7, 2013 and hosted by Sewa Sadan Eye Hospital, Bhopal included a range of topics and received a tremendous response in terms of participation from our members.

"The sessions covered many areas of interest and I feel confident that it did stimulate a lot of enthusiasm especially among the young audience" said Dr Pararajsegram of the conference. Commenting on the exclusiveness of the conference, Dr Santosh Moses, Assistant Director - Eye Health, Operation Eyesight Universal (India) said, "This is perhaps the only

conference in ophthalmology that provides an opportunity to the supporting staff in an eye hospital to attend a conference and more importantly, an opportunity to share their thoughts."

Ms Sujaya Krishna, Joint Secretary, Ministry of Health and Family Welfare graced the occasion and Chaired the special two hour training session for HMIS. She also inaugurated the trade.

Dr NK Agarwal, DDG (O), NPCB, Ministry of Health and Family Welfare, Government of India who attended on the second day of the conference was gracious to Chair session in the Outreach and also participated in the panel discussion on 'Medical Curriculum' and the need to upgrade it.

Dr N Ravichandran, Director, IIM, Indore and Dr. Ranjeet Nambudiri, Faculty, IIM Indore also addressed sessions.

Some of the luminaries from eye care who contributed to the conference by sharing their knowledge were: Dr R Pararajsegram, Consultant, Ophthalmologist; Dr Rajvardhan Azad, Chief, Dr RP Centre, AIIMS; Dr GN Rao, Chairman, LVPEI and several others.

New Members

New Member Organisations:

In the financial year 2013 – 14, 22 members joined VISION 2020 – India. This includes five companies in the corporate category.

S. N.	Name of Organization	State/UT
1	M.S. Reddy Lions Eye Hospital	Andhra Pradesh
2	Eye Research Society	Andhra Pradesh
3	Assam Eye care Foundation	Assam
4	St. Luke Hospital (Assam Diocesan Trust Association)	Assam
5	Jorhat Lions Service Trust	Assam
6	Christian Fellowship Hospital	Chattisgarh
7	Blind People's Association	Gujarat
8	KLSM Rotary Eye Hospital	J & K
9	Allergan India Private Limited	Karnataka
10	Bio Medix Optotechnik & Devices Pvt. Ltd	Karnataka
11	Vittala International Institute of Ophthalmology	Karnataka
12	Alcon Laboratories (India) Pvt. Ltd	Karnataka
13	Project Drishti	Karnataka
14	Essilor India Private Limited	Karnataka
15	Carl Zeiss India Bangalore Pvt.Ltd	Karnataka
16	Forus Health Private Ltd.	Karnataka
17	Mission Trust	Meghalaya
18	Sound Hearing 2030	New Delhi
19	Sankar Eye Hospital	Tamil Nadu
20	Glaucoma Society of India	Tamil Nadu
21	Raj Eye Hospital	Uttar Pradesh
22	Drishti Eye Institute	Uttrakhand



AUDITOR'S REPORT TO THE MEMBERS OF VISION 2020 THE RIGHT TO SIGHT- INDIA

We have audited the attached Balance Sheet of Vision 2020 The Right to Sight - India as at 31st March, 2014 and also the Income & Expenditure Account for the year ended on that date annexed thereto. These financial statements are the responsibility of the society's Management. Our responsibility is to express an opinion on these Financial Statements based on our audit.

We conducted our audit in accordance with auditing standards generally accepted in India. Those standards require that we plan and perform the audit to obtain reasonable assurance about whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting the amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by society's management, as well as evaluating the overall financial statement presentation. We believe that our audit provides a reasonable basis for our opinion.

In our opinion and to the best of our information and according to the explanations given to us, the said Financial Statements read together with the notes to Notes to Accounts, give the information required, in the manner so required and give a true and fair view in conformity with the accounting principles generally accepted in India :

- (i) in the case of the Balance Sheet, of the state of affairs of the above-named Society as at March 31, 2014 ; and
- (ii) in the case of the Income & Expenditure Account, of the excess of expenditure over income for the accounting year ended on the date.

For Koshi & George
Chartered Accountants
(Reg.No.003926N)



G. Koshi
George Koshi
Partner
(M.No.82961)

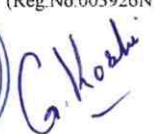



Place: New Delhi
Date : 30.05.2014

D8 / 8061, Vasant Kunj, New Delhi-110070
Phone : 011-26132362, 26133847, 42147885, Fax: 26133847
E-mail: koshigeorge@hotmail.com, koshigeorge@yahoo.com
koshiandgeorgedelhi@gmail.com

VISION 2020 THE RIGHT TO SIGHT - INDIA
Admin Office: Room No.205A Second Floor, Enkay Tower B & B1
Vanijya Nikunj, Udyog Vihar, Phase V
Gurgaon, Haryana - 122016
BALANCE SHEET AS ON MARCH 31, 2014

	SCHEDULE	As on 31.3.2014		As on 31.3.2013	
SOURCES OF FUNDS					
Corpus Fund			203,868		203,868
GENERAL FUND					
Opening Balance		2,114,252		3,180,908	
Add: Cost of Assets Purchased					
Less: Transfer to Programme Grant					
Add: Excess of Expenditure over Income		(228,178)		(1,066,656)	
			1,886,074		2,114,252
CURRENT LIABILITIES & PROVISIONS					
Provision for Annual Leave			450,000		450,000
Provision for Staff Gratuity			300,000		300,000
Unutilised Programme Grant					
Opening Balance		232,950		21,985	
Add: Transfer from General Fund					
Add: Received During the Year	"D"	4,014,527		3,406,546	
Less: Expended During the Year		4,403,055		3,195,581	
			(155,578)		232,950
TOTAL			2,684,364		3,301,070
APPLICATION OF FUNDS					
FIXED ASSETS					
Gross Block	"A"	963,570		927,370	
Less: Depreciation		655,784		601,722	
Net Block			307,786		325,648
CURRENT ASSETS, LOANS & ADVANCES					
Cash and Bank Balances	"B"	2,140,539		2,806,534	
Other Current Assets	"C"	236,038	2,376,577	168,886	2,975,420
TOTAL			2,684,364		3,301,070
NOTES TO ACCOUNTS					
In terms of our report of even date attached					

In terms of our report of even date attached

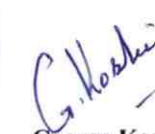



<p>For Koshi & George Chartered Accountants (Reg.No.003926N)</p>  George Koshi Partner M.No.82961	<p>For Vision 2020 The Right To Sight - India</p>  President	<p> Treasurer</p>  Chief Executive Officer
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New Delhi
May 30, 2014



VISION 2020 THE RIGHT TO SIGHT - INDIA
Admin Office: Room No.205A Second Floor, Enkay Tower B & B1
Vanijya Nikunj, Udyog Vihar, Phase V
Gurgaon, Haryana - 122016
INCOME AND EXPENDITURE ACCOUNT FOR THE YEAR ENDED MARCH 31, 2014

	SCHEDULE	Current year (Rs.)	Previous year (Rs.)
INCOME			
TRANSFER FROM PROGRAMME GRANT ADVANCE	"D"	4,403,055	3,195,581
PROGRAMME GRANT - LOCAL	"H"	914,977	683,906
Membership Annual Subscription		2,571,229	2,114,967
Membership Registration		350,000	430,000
Other Income		1,020,821	391,073
Bank Interest(Net)		239,299	135,343
TOTAL		9,499,381	6,950,870
EXPENDITURE			
PROGRAMME GRANT EXPENSES			
PROGRAMME GRANT EXPENSES	"D"	4,403,055	3,195,581
PROGRAMME DIRECT EXPENDITURE	"E"	4,168,664	3,565,600
PROGRAMME INDIRECT EXPENDITURE	"F"	1,101,730	1,149,150
OTHER EXPENDITURE			
Depreciation for the year	"G"	50	752
		54,060	106,443
TOTAL		9,727,559	8,017,526
Excess of expenditure over income transferred to General Fund		(228,178)	(1,066,656)
NOTES TO ACCOUNTS			
In terms of our report of even date attached			

<p>For Koshi & George Chartered Accountants (Reg.No.003926N)</p>  George Koshi Partner M.No.82961	<p>For Vision 2020 The Right To Sight - India</p>  President	<p> Treasurer</p>  Chief Executive Officer
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New Delhi
May 30, 2014



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Gurgaon, Haryana - 122016


CONSOLIDATED RECEIPTS AND PAYMENTS ACCOUNT FOR THE YEAR ENDED MARCH 31, 2014

Receipts	Schedule	Amount Local	Amount FC	Total	Payments	Schedule	Amount Local	Amount FC	Total
Opening balance:					PROGRAMME GRANT EXPENSES	"D"		4,398,855	4,398,855
Cash in hand		4,296	90	4,386					
Cash at bank		20,465	502,270	522,735	PROGRAMME DIRECT PAYMENTS	"E"	4,168,664		4,168,664
Fixed deposit	2,075,545				PROGRAMME INDIRECT PAYMENTS	"F"	1,101,730		1,101,730
FDS - Corpus	203,868				OTHER EXPENDITURE	"G"	50		50
		2,279,413		2,279,413	Program Advance		31,916	32,703	64,619
PROGRAMME GRANT - FCRA	"D"		4,014,527	4,014,527	TDS on Bank interest		7,533		7,533
PROGRAMME GRANT - LOCAL	"H"	914,977		914,977	CAPITAL EXPENDITURE:				
Membership Annual Subscription		2,197,500	373,729	2,571,229	Office Equipments		32,000	4,200	36,200
Membership Registration		350,000		350,000					
Other Income		920,821	100,000	1,020,821	Closing balance :				
Bank Interest		213,912	26,190	240,102	Cash in hand		3,850	2,538	6,388
					Cash at bank :				
					Axis Bank		202,039		202,039
					Indian Overseas Bank		16,135	578,510	594,645
					Fixed deposit		1,133,599		1,133,599
					FDS - Corpus		203,868		203,868
		6,901,384	5,016,806	11,918,190			6,901,384	5,016,806	11,918,190


In terms of our report of even date attached

For Koshi & George
Chartered Accountants
(Reg.No.003926N)

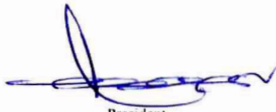
For Vision 2020 The Right To Sight - India



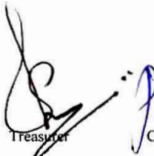
George Koshi
Partner
M No. 82961




George Koshi
Partner
M No. 82961



President



Treasurer



Chief Executive Officer

New Delhi
May 30, 2014



VISION 2020 THE RIGHT TO SIGHT - INDIA
Admin Office: Room No.205A Second Floor, Enkay Tower B & B1
Vanija Nikunj, Udyog Vihar, Phase V
Gurgaon, Haryana - 122016

FOREIGN CONTRIBUTION SCHEDULE : D
Statement showing the Receipt and Utilisation of Donor Funds
During the year ended March 31,2014

INCOME	Amount Rs	Total
PROGRAMME GRANT ADVANCE		
Light of the World	186,837	
CBM	444,000	
Operation Eyesight Universal	544,000	
ORBIS International	1,695,690	
Sightsavers International	1,144,000	
		4,014,527
TOTAL PROGRAMME GRANT RECEIVED		4,014,527
EXPENDITURE	Amount Rs	Total
PROGRAMME DIRECT EXPENDITURE		
Community Eye Health Journal-India Supplement	49,400	
Manual and guidelines	657,747	
World sight Day	75,881	
Staff Training	26,720	
Meeting/Seminar/Workshop/Conferences	1,615,063	
Programme Salary & Organizational Development	1,047,843	
		3,472,654
PROGRAMME INDIRECT EXPENDITURE		
Bank Charge	390	
Office Rent	414,142	
Office Supplies	6,881	
Repairs & Maintenance	13,966	
Printing & Stationery	45,908	
Telephone, Postage & Communication	95,002	
Website	89,000	
Salaries	260,912	
		926,201
		4,398,855
CAPITAL EXPENDITURE		
Computer,Printer & Peripherals		
Office Equipment	4,200	4,200
TOTAL PROGRAMME GRANT EXPENSES		4,403,055



VISION 2020 THE RIGHT TO SIGHT - INDIA Admin Office: Room No.205A Second Floor, Enkay Tower B & B1 Vanijya Nikunj, Udyog Vihar, Phase V Gurgaon, Haryana - 122016 SCHEDULES TO THE INCOME & EXPENDITURE ACCOUNT ACCOUNTING YEAR : 2013-14		
EXPENDITURE	Amount Rs	Total
SCHEDULE : E		
<u>PROGRAMME DIRECT PAYMENTS/EXPENDITURE</u>		
Program Salary & Organizational Development	2,794,409	
Meeting Workshop Seminars	851,783	
World Sight Day	48,397	
Resource Centre - Publication of CEHJ	474,075	
Total programme Direct Payments		4,168,664
Total Programme Direct Expenditure		4,168,664
SCHEDULE : F		
<u>PROGRAMME INDIRECT PAYMENTS/EXPENDITURE</u>		
Audit Fees	33,707	
Electricity and Water	13,815	
House Keeping Expenses	1,900	
Website	34,151	
Office supplies	34,038	
Printing & Stationery	24,572	
Professional fee	23,596	
Other fee	9,520	
Postage and Courier Charges	6,738	
Office Rent	78,652	
Office Maintenance	135,622	
Salaries & Allowances	653,474	
Pre-Period Expenses	22,213	
Telephone & Communication	29,732	
Total Programme Indirect Payments		1,101,730
Total Programme Indirect Expenditure		1,101,730
SCHEDULE : G		
<u>OTHER EXPENDITURE</u>		
Bank Charge	50	
		50
		1,101,780
<u>CAPITAL EXPENDITURE</u>		
Furniture & Fixtures		
Office Equipment	32,000	
		32,000
TOTAL		1,133,780
SCHEDULE : H		
<u>PROGRAMME GRANT - LOCAL</u>		
HV Desai Eye Hospital		914,977
		914,977

