



### FACTS

- According to WHO estimate 45 million people are blind in the World as of 2000;
- 60% blindness due to cataract and refractive errors [treatable];
- 15% was due to trachoma, vitamin A deficiency & onchocerciasis (Africa) [preventable]; another
- 15% of blindness was due to DR and glaucoma [partly preventable, although more difficult];
- 10% was attributable to age-related macular degeneration and other diseases [more research required for best treatment].
   Source: WHO

















| st Five Year Plan               | Amt in Rupees   | Percent of total |
|---------------------------------|-----------------|------------------|
| 1951-1956                       | 653 Million     | outlay           |
|                                 |                 | 3.4%             |
| 5 <sup>th</sup> Five Year Plan  |                 |                  |
| •1974-1979                      | 12526 Million   | 3%               |
| 10 <sup>th</sup> Five Year Plan |                 |                  |
| 2002-2007                       | 589203 Million  | 4.0%             |
|                                 |                 |                  |
| 11th Five Year Plan             |                 |                  |
| 2007-2012                       | 1401350 Million | 6.5%             |

# NPCB Budget •9th Five Year Plan 2500 million INR •10th Five Year Plan 4500 million •11th Five Year Plan 12500 million 1.2 % of GDP on Health 0.9 % of Health expdr on NPCB

## Infrastructure

- NGO = 1300
- Eye banks = 389,EDC= 211
- Eye Surgeons = 14000 (2322 Govt)
- PG seats =914(MS=416,DO=285,DNB=213)
- Med College = 269( 131Govt)(RIO & SSU)
- Centre for Trainig of eye surgeons
- Distt Hosp.= 620,
- SSU, RIO, Trg.Centres





## POLICY SHIFT Studies indicated that visual out come in makeshift surgical camps were much below the desired level. And surgical camps have been banned w.e.f 1997 by Govt. of India This led to a strategic shift from camps to fixed facilities where a regularly functional sterile OT is available. Village wise blind registry introduced through link worker. More emphasis to Community based services Involvement of mass media and PRI. Emphasis on PPP

## Creating Enabling Environment For NGOS. >Institutional strengthening @ Rs. 3.0 million >Eye banking @ Rs. 1.5 Million > Reimbursement per cat-ops@ Rs. 750 > Reimbursement for eye ball collection @ Rs. 1500/-> Reimbursement for D.R., Glaucoma, ARMD etc,@ Rs 1000/-> Free Spectacle( SES) @ Rs. 200/-

## INDIRECT INCENTIVE

>Duty free import of sight saving equipment, goods & medicines

>Low cost supply made available in the Country for

- √IOL
- ✓Micro surgical sutures
- ✓Drugs & disposable

Supported quality institutions to grow to provide best eye care services at an affordable price (FCRA) etc.

## **QUALITY MONITORING**

- > 5% cross verification for quality improvement
- Regular Evaluations by independent agencies.
- > Local studies through SSU's





# CONTRIBUTION OF INGO<br/>(Financial,2009)• Sight Savers Internl US \$ 5.68 million• Orbis Internl US \$ 2.50 million• Operation Eyesight US \$ 1.50 million• Lions Internl US \$ 1.50 million• Total US \$ 11.18 million



## India ranks second in world medical tourism

### PLUS POINTS

 In 2007, Indian hospitals had treated 4.5 lakh foreign patients compared to Finaliand's 12 lakh
 A study shows there has been a significant rise in patients from the US, UK and Europe in the recent past
 Med cost is the lowest in India-20% of average expenses

Incurred in US • Long patient waiting list in the United Kingdom & Europe is another key factor

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explore medical tourism potential • Singapore formed a collaboration of industry and govt representatives to create a medical hub • Taiwan works on a \$318m project to develop medical

services South Korea plans institutions for international patients



## ISSUES

- 52 Distt. without EYE SURGEONS
- 1004 CHC without PMOAs
- 413 DH without separate eye OT
- Deficient Training of all eye care providers
- 155 Blind schools all needs improvement





| Desired CSR for<br>The CSR in a giv<br>16.0% in India as | en state is dr | iven by the > 5  | 0 yrs population | which is 12.6% in | Bihar and                          |
|--|----------------|------------------|------------------|-------------------|------------------------------------|
| State Bihar  |                |                  |                  |                   |                                    |
| Population of service Area:                              |                | 82,998,509       |                  | CSR               | 1,684 for Bihar<br>5,000 for India |
| Eye Care Potential                                       | Rate           | Per              | Potential Need   | Currently Treated | Unmet Need                         |
| Cataract Surgery   | 7,089          | 1,000,000        | 588,380          | 139,769           | 448,610                            |
| Spectacles   | 5              | 100              | 4,149,925        | 65,000            | 4,084,925                          |
| Diabetes Prevalence                                      | 2.50%          |                  | 2,074,963        |                   |                                    |
| - Diabetic Retinopathy                                   | 20.00%         | of the diabetics | 414,993          | 3,000             | 411,993                            |
| Glaucoma Patients  | 1              | 100              | 829,985          | 1,000             | 828,985                            |
| Incurably Blind  | 1              | 1,000            | 82,999           | 100               | 82,899                             |
| Low Vision Persons                                       | 1              | 100              | 829,985          | 200               | 829,785                            |

## **PPP in Bihar**

- 7districts(K.ganj,Katihar,Munger,Begusa rai,Bhagalpur,Purnia,Samastipur
- MoU in 1 district Kishanganj
- Sightsavers will share the Kishanganj experience

### **Revised Financial Norms under** 11th Five year Plan Financial norm during 10<sup>th</sup> Plan **Revised financial norm** during 11<sup>th</sup> Plan New RIO (Non-recurring assistance) -Rs. 50 Rs. 60 lakh lakh Existing RIO Rs. 40 lakh (Non-recurring assistance -Rs.30 lakh Medical Colleges (Non-recurring assistance) Rs. 40 lakh -Rs. 30 lakh

| Financial norm during 10 <sup>th</sup> Plan                     | Revised financial<br>norm during 11 <sup>th</sup> Plar |
|---|--|
| •District Hospitals<br>(Non-recurring assistance)-Rs. 12 lakh   | Rs. 20 lakh  |
| •Sub-district Hospitals<br>(Non-recurring assistance)-Rs.3 lakh | Rs. 5 lakh   |
| • Vision Centres<br>(Non-recurring assistance) Rs. 25000/-      | Rs.50,000/-  |
|   |  |

| Financial norm during 10 <sup>th</sup> Plan  | Revised financial<br>norm during 11 <sup>th</sup><br>Plan |
|--|---|
| • Eye Banks  |   |
| (Non-recurring assistance) -Rs. 10 lakh  | Rs. 15 lakh   |
| <ul> <li>Recurring Assistance -Rs.1000 per pair of<br/>Eyes</li> </ul>                     | Rs.1500 per pair of Eyes                                  |
| •Eye Donation Centre – Rs.500 per pair of Eyes   | Rs.1000 per pair of Eyes                                  |
| •NGOs for strengthening/expansion of eye care units (Non-recurring assistance)-Rs. 25 lakh | Rs. 30 lakh   |
| • Spectacles under School Eye Screening<br>Programme Rs. 125/-                             | Rs. 200/-   |

| Financial norm during 10 <sup>th</sup> Plan  | Revised financial<br>norm during 11 <sup>th</sup><br>Plan |
|--|---|
| •Cataract Operation<br>(recurring assistance) -@ Rs.750/-<br>(upto) per cataract operation/per eye   | -@ Rs.750/- (upto) per<br>cataract operation/per<br>eye   |
| Other eye diseases (diabetic<br>retinopathy, glaucoma management,<br>laser techniques, corneal transplantation,<br>vitreoretinal surgery, treatment of<br>childhood blindness etc.) -<br>NIL | (diabetic retinopathy,                                    |

| Financial norm during 10 <sup>th</sup> Plan  | Revised financial<br>norm during 11 <sup>th</sup><br>Plan   |
|--|---|
| Training of eye surgeons<br>Upto Rs.45,000/- per trainee   | Training of eye<br>surgeons Upto<br>Rs.70,000/- per trainee |
| <ul> <li>Sentinel Surveillance Units (recurring<br/>assistance) Upto toRs.1.50 lakh per SSU</li> </ul> | Upto to Rs.3.00 lakh<br>SSU                                 |
|  |   |
|  |   |

| Financial norm during 10 <sup>th</sup> Plan  | Revised financial<br>norm during 11 <sup>th</sup><br>Plan  |
|--|--|
| Construction of Eye Wards and Eye OTs (Non-  | Non-recurring assistance   |
| recurring assistance) - NIL  | Upto Rs.75 lakh per unit   |
| <ul> <li>Mobile Ophthalmic Units with tele network<br/>(Non-recurring assistance) - NIL</li> </ul> | (Non-recurring assistance)<br>Upto Rs.60 lakh per unit. Th<br>assistance for Mobile Van with<br>essential Ophthalmi<br>equipments is upto Rs.20 lakh<br>and assistance for tele<br>ophthalmic network/tele-mode<br>is upto Rs.40 lakh. |
| <ul> <li>Maintenance of Ophthalmic Equipments (Non-</li></ul>                                      | (Non-recurring assistance) -   |
| recurring assistance) - NIL  | Upto Rs.5 lakh per unit.   |

| Post approved during 11 <sup>th</sup><br>Plan on contract  | Approx.<br>number | Salary per<br>month/per<br>posts |
|--|-------------------|----------------------------------|
| <ul> <li>Ophthalmic Surgeon in<br/>District Hospitals in new<br/>District.</li> </ul>  | 250               | Rs.25000/-                       |
| <ul> <li>Ophthalmic Assistant in<br/>District Hospitals in new<br/>Districts and in PHCs/Vision<br/>Centres where they are not<br/>available.</li> </ul> | 425               | Rs.8000/-                        |
| • Eye Donation Counsellors in<br>Eye Banks in Government<br>and NGO Sector.  | 150               | Rs.10000/-                       |