'GIVE SIGHT AND PREVENT BLINDNESS'

Primary and Secondary Eye Care and Treatment Hospital for Rural Poor



Project Vision

Bangalore, India

Organizational information:

Project Vision is one of the social programs of the Hope Society which was registered in 1990. The Project Vision focusing on a developing a movement for eye donations and services for eye care for the rural poor people, all over the country.

There are five projects under the HOPE Society.

- 1. Hope Recovery Centre for alcoholics in Belgaum with 60 beds since 1999
- 2. Support Centre for 30 HIV/AIDS patients at Bangalore since 2004

3. Support Centre for 20 HIV/AIDS patients in Belgaum, 2008

- 4. Project Vision for visually challenged persons based in Bangalore 2013
- 5. Bangalore Cares for Nepal for earthquake relief and rehabilitation in Nepal 2015

Name of Organization: HOPE Society

Legal Status: NGO- HOPE Registered Society with 12A, 80G, FCRA

Registered Date, Number and year: 423/90-91

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Position: Director

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Project Summary

India has one third of world's blind population - 15 million people. About 60% of the total population requires eye care facility as some time of life. This project's objective is to provide eye care facilities for the 10.5 million people living in the peripheries of Bangalore. Through a hospital and an outreach mobile unit, we plan to provide free eye care facilities to about 90,000 in three years.

We request your partnership in order to realize this goal. We request a grant of 50 lakhs rupees for one floor of the eye care hospital block which will be constructed exclusively in the name of your agency and Rs. 10.89 lakhs for a vehicle for the outreach camps, thus totally Rs. 6,089,000 rupees. Your financial contribution is welcome for the whole amount or for any one of these - building or vehicle. The society will locally raise funds for furniture, equipments and running expenses to the tune of Rs. 42,10,000, thus making the total project cost as Rs. 102,99,000.

1. Rationale

As per the VISION 2020 plan by WHO, Blindness continues to be one of the major public health problems in developing countries like India. Cataract and corneal diseases are major causes of blindness in less-developed Countries. According to the World Health Organization, corneal diseases are among the major causes of vision loss and blindness in the world today, after cataract and glaucoma. There are 39 million people across the globe that is blind. India is now home to the world's largest number of blind people with 15 million persons (WHO 2010). India has one third of world's blind population - 15 million people. About 60% of the total population requires eye care facility as some time of life.

In India, it is estimated that there are approximately 6.8 million people who have vision lessthan 6/60 in at least one eye due to corneal diseases; of these about a million have bilateral involvement. It is expected that the number of individuals with unilateral corneal blindness in India will increase to 10.6 million by 2020. According to the National Programme for Control of Blindness (NPCB) estimates, there are currently 120,000 corneal blind persons in the country. According to this estimate there is addition of 25,000-30,000 corneal blindness cases every year in the country. The burden of corneal disease in our country is reflected by



the fact that 90% of the global cases of ocular trauma and corneal ulceration leading to corneal blindness occur in developing countries.

With regard to the State of Karnataka, a national survey on blindness has shown that barely 50 per cent of the people in Karnataka have near normal vision and prevalence of blindness is more than the national average. Covering 40,000 people all over the country including 3,200 in Karnataka, a survey by the National Programme to Control Blindness has pointed out that 13.7 percent of the population in the State suffers from blindness as against the national average of 8.5 per cent.

The Project Vision is a global movement and response to the huge suffering that is seen around us for the persons who cannot see. The Project Vision movement with a vision 'let everyone see', started in 2013, focusing on promoting eye donations, eye care, enabling the permanently blind to live a better life, very specially for the children, women, youth, poor and very socio economically marginalized population. It is a multi sectoral movement and an approach supporting the cause of blindness which requires public involvement, government, Corporate, Business sector, INGOs, NGOs and with the participation of all sectors of the society to make it has a comprehensive project in Karnataka. The Project vision has a centre in Gowribidanur and developed its 2020 vision to implement its vision and mission in rural areas. Vision: "Let everyone see"

Mission: "Eye donation becomes a norm in the society and is an easy process, prevent avoidable blindness, eye care and appliances are affordable and accessible and inclusive rehabilitation of all types of visually impaired people by the year 2020"

All these are in principle in line with the objectives of VISION 2020.



(A visual presentation of the Strategic Interventions of Project Vision)

The objectives: To make eye donation a norm in the society and to create opportunities for the permanently blind to live a descent life. Nearly 60,000 persons have been motivated to pledge their eyes. We have created several fully eye pledged institutions. Over 5000 persons have signed up as Vision Ambassadors. We work to prevent blindness and to treat those with visual impairment.

Our Coverage Area - four Districts

We plan to reach out to the people of the four Districts:

1.Bangalore Rural 2.Tumkur 3.Chikkaballapur 4.Kolar

The total population of this area is 10.5 million.



Overall objective:

a.To start a primary and secondary care Hospital for refractive errors, eye care, treatment, cataract operation, cornea harvesting and all such necessary treatment with the basic medical infrastructures and facilities for the suburban people living in the peripheries of Bangalore.

- b.Create awareness among public, inadequate eye care facilities, advance treatment, register for eye donation
- c. Mobile Out Reach Program to conduct eye screening camps in and around the districts

ACTIVITY, OUTPUT AND OUTCOME

ΑCTIVITY	Ουτρυτ	Ουτςομε
Eye Screening Teams organized	2018 first half to have a team ready for conduct- ing eye screening camps, create networks with lo- cal agencies and areas with necessary infra- structure like vehicles and equipments screen- ing.	Eye Screening Team ready
Eye Donation campaign	All persons who are pro- vided eye care services both in hospital and camps will be provided information on eye do- nation, thus involving about 100,000 persons	100,000 made part of the Eye donation cam- paign

	in the eye donation	
	movement	
Start hospital construc-	By end of 2017 have the	Hospital construction
tion	plans done and approv-	started
	als received and funds	
	mobilized to start the	
	construction of the hos-	
	pital block	
Enable the hospital med-	From 2018 the hospital	Full fledged eye care
ical team to provide fully	to provide a full fledged	services provided to the community
fledged medical services	service to about 50 per-	
on eye care assess-	sons per day, including in	
ments, treatment and	patient care and inter-	
follow up	ventions like operations,	
	thus reaching out to	
	45,000 persons in three	
	years.	
Eye Donation and cor-	From 2018 to have eye	Eye Donation and cor-
nea transplantation	collection facilities set	nea transplantation
	up in the project area,	promoted in the com-
	collecting about 100	munity.
	persons eyes per year,	
	thus giving sight about	
	200 persons per year.	

Provide spectacles and	From 2018 to provide	Spectacles and other
other devices necessary	spectacles and other de-	devices-provided to all
for refractive errors	vises to about 10% of all	needed people
	cases that are registered	
	in the OPD and the out-	
	reach camps thus help-	
	ing about 10,000 per-	
	sons in three years.	
Establish collaboration	In 2018 create working	Professional collabora-
with major hospitals like	partnerships with other	tions and networks es-
Aravind, Narayana Neth-	major hospitals through	tablished
ralaya, Rotary, Lions and	networking meetings re-	
other Government hos-	sulting in partnerships	
pitals	being created.	
Provide preventive in-	Mid of 2018, onwards to	Preventive interventions
terventions necessary	provide out patient ser-	necessary for loss of
for loss of sight	vices to about 50 per-	sight done
	sons per day thus reach-	
	ing out to 15,000 per-	
	sons per year providing	
	treatment and other	
	preventive programs.	

Conduct eye screening	Yearly 150 camps at-	Eye Screening carried
Camp teams in and	tended on an average of	out for people in the
around the Project	100 persons to be con-	project area including
areas.	ducted from 2018 to	children and treatment
	provide eye screening	provided
	services to 15,000 per-	
	sons per year, thus	
	45,000 persons in three	
	years.50% of this will	
	cover school children.	



(Fr George with Govt. of India Minister for Health Shri. Nadda discussing about eye care

programs)

OUR BENEFICIARIES

THROUGH IN HOUSE HOSPITAL PROGRAM: The direct beneficiaries will be persons requiring cataract surgeries, people in need of cornea, refractive errors, eye donors and persons with complete loss of vision, low vision, partial vision, school going children and poor vision who need medical help. We will be able to provide direct services to over 15,000 people in one year, through our hospital services. This is calculated in terms of 50 persons daily for about 300 working days in a year. Thus in three years, we will provide services for about 45,000 people.

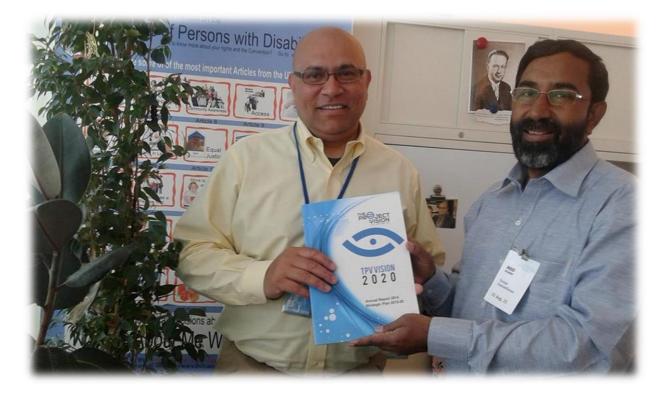
THROUGH MOBILE OUT REACH PROGRAM: The area of coverage of this project is quite wide and so we would be reaching out to them through a mobile eye care facility. Mostly it will be used for screening the patients. The actual treatment would be done at the base hospital. We plan to conduct three outreach camps every week - thus totally 150 camps every year. Every camp we will cater to about 100 persons. Half of this will be with the school students. Thus we will be able to provide services to 15,000 persons every year and in three years to 45,000 people.

Thus in three years, the project will provide eye care facilities to 90,000 people.

All these are people in the rural area and belong to economically weaker sections.

Our indirect beneficiaries:

The Indirect beneficiaries will be family members of persons and children suffering from vision difficulties, eye donors, students, vision ambassadors, hospital staff, project staff, Panchayat or Ward members, government officials, volunteers and the general community. Indirectly we will be able to reach out to about 500,000 people through our services, considering that every family has about five members. This will be done through our outreach services.



(Fr George with United Nations officer in charge of disabilities Mr Dolton in New York, presenting Project Vision plans and programs.)

Having understood the need and the situation, we invite you to support the setting up and running of a hospital with multi-specialty for eye care and treatment based near Gowribidanur town which is in the middle of the large area covering Bangalore rural, Chikkaballapur, Tumkur and Kolar Districts, totally with a population of 10.5 million people. The hospital will provide access to free eye screening, basic medical amenities, eye surgeries, cornea transplantation, cornea harvesting, cataract operation, medical treatment, referrals and follow up. An outreach unit will take the program to the people, where it is required.

Strategic interventions:

- Conduct training for staff on Hospital planning, implementation, monitoring, review, documentation, team building and overall hospital management.
- Awareness Activities for primary, secondary and tertiary level eye care, pledging eyes and corneal blindness in different hospitals will be conducted.
- Organize Mass cataract operation camps and launch campaigns on eye care and donation.

- Conduct training for health staff of public and private hospitals on eye care and pledging eye.
- Networking activities to Collaborate with eye banks to ensure cornea availability.



(Eye donation pledge at an eye donation campaign)

- Provide mobility aids and appliances for persons with vision difficulties.
- Provide long term medication for persons with serious medical treatment.
- Workshop for government health officials and politicians on health policies especially about eye care, treatment, medication and eye donation.
- Hospital building construction in 2016 with the following facilities:
 - Patient wards (50 patients)
 - Special rooms (1)
 - Operation theatre (1)
 - OPD ward (200 patients)
 - Consultation room (1)

- Toilet and bathroom facilities (10)
- Special testing room (1)
- Emergency ward (1)
- ✤ Waiting room (1)
- Laboratory (1)
- Canteen with all the catering facilities (1)

• Hospital equipment:

- OT equipment,
- ✤ OPD materials,
- Emergency aids and equipment, testing equipment,
- Assessment equipment,
- Surgical equipment,
- Patients moving/shifting trolleys,
- ✤ Wheelchairs, etc.

• Basic amenities to run the hospital:

- Electrification
- Generator
- Solar system
- ✤ Air cooler
- Water tanks and tube wells
- Equipment to preserve the medicine
- Laboratory equipment etc

• Medical team consists with the following members:

- Hospital director
- Manager

- Administrator
- Surgeon
- Eye specialists
- Ophthalmologist
- Nurses
- Lab technician
- Health assistants
- Refractions
- Visiting doctors
- Data analysts
- Clerks
- Secretary
- Receptionist
- Ward Persons
- Driver
- ✤ attendant
- Ambulance: one in number with all the emergency facilities to attend any medical emergency.
- Administrative facilities:
 - ✤ Telephone
 - ✤ Internet
 - ✤ Computers
 - ✤ Laptops
 - Printer
 - Post box

- ✤ Inter telecom
- ✤ Xerox machine.

• Furniture:

- ✤ Tables (25),
- Chairs (200),
- ✤ OT table (4),
- Cupboards (10),
- ✤ Shelves (10),
- Computers (10),
- Computer chairs (10),
- Benches (10),
- Desks (5),
- ✤ Cots (60),
- Canteen equipment etc.

• Medicines:

- This includes drugs of emergency,
- Regular
- ✤ Specific and general medicines related to eye care and treatment.



Request for Funds

The total project cost of this program is Rs. 102,99,000. An amount of Rs. 42,10,000 will be the contribution of the society towards the project ,which will cover the running expenses, furniture and equipments. The request for funding from you is Rs. 60,89,000, to cover the cost of civil works and a Van. The details are given below.

a.Construction of a block of Hospital building

Our request for help is for the construction of the first block which is estimated at Rs. 50 laths for civil works alone. It will be a five thousand square feet building. It will have the following facilities:

Waiting Area
Pre Screening room
Consultation Rooms - 2
Treatment room
Minor Operation Theatre
Spectacle Display and dispatch room



Fr George with Minister of State for Social Justice and Empowerment Shri. Krishan Pal Gurjar, Government of India, leading Blind Walk organized by Project Vision

The detailed drawing of the building is provided. Annex the detailed budget estimate for construction is also provided. The cost of the civil works for the ground floor which is an extent of 5000 sq. ft construction is Rs. 5,000 000 (five million rupees) Annex

Request is made for the civil works of the ground floor of the hospital block. Funding is requested for Civil Works (5000 sq. ft) which is Rs. 5,000,000 (71,430 Euros).

B. Funding request for mobile outreach pregame) The second component of capital investment for which we request funding is for a vehicle which can be used for two activities: One is for organizing the eye screening camps and provides them corrective devices. It can also be used for identifying cataract operations, to transport the patients from the field to the hospital and back. The second is for organizing awareness programs , organizations, educational institutions, and so on about eye care and eye donations. The cost of Tempo Traveler DVL 10,88,900/- the vehicle. Quote in Annex.

The third component is the running expense including for the staff consisting of a medical team as well as support staff and a coordinator. This will be taken care of by us. Thus our total request for grant is for Rs 6,089,000 - 86990 Euros.

You are welcome to contribute the whole or any one of the two aspects requested - the building or the vehicle.

Timeline

We plan to start the construction as soon as the finances are available. The building will be completed within 12 months from the time the work is started.

The project period is for three years. The hospital and outreach programs will conduct under this project plan for three years from the time of funding.

Permission

We have obtained the permission from the Panchayat (local body) for the construction of the building. Annex

Monitoring and Evaluation

The team from your organization is welcome to come for monitoring, evaluation and suggestions to the spot any time. Project vision will submit a progress report every three months once the grant is provided.

Acknowledgement

By way of acknowledgement for the contribution made by your organisation, the ground floor could be named after your agency.

Sustainability

The hospital is conceived as a Sustainable venture. 50% of all population requires eye care services at some point of life. Thus an eye hospital is a need for the community. While we will make the hospital financially accessible to the poor and needy, we will also charge the patients who are able to pay so that the system can be sustained. Thus in three years time, the hospital would become self sustainable.

Budget

Find a detailed budget below.

No.	Item	Per month ex- penditure (Rs.)	Annual /Total Expense (Rs.)
1	Hospital Block - Civil works for 5000 sq. ft		50,00,000
2	Mobile Van - Tempo Traveller Quote in Annex		10,89,000
3	Hospital Furniture		10,00,000
4	Salary for Ophthalmologist	100,000	12,00,000
5	Salary for Social Worker	20,000	2,40,000
6	Salary for technician	20,000	2,40,000
7	Salary for Driver/ Helper	10,000	1,20,000

8	Equipments and materials		1,00,000
9	Administrative Expenses	5000 per month	60,000
10	Publicity Materials like post- ers, pamphlets, etc		1,50,000
11	Running expenses for Van and other travel expenses	10 x 10,000	1,00,000
12	Expenses for organising cat- aract operations and other medical interventions		2,50,000
13	Expenses for spectacles and other aids and appliances	5000 x 150	7,50,000
		TOTAL	102,99,000



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