

## SightLife India Activity Report April 2018-March 2019

I - April & May 2018 Report



*Photos from the awareness campaign in Sitapur, Uttar Pradesh.*

*The campaign aims to educate about the corneal blindness prevention program and encourage community members to see their local ASHA worker.*

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| <b>Partner Development</b>                      |  | <p><b>Highlights:</b> RIEB, DDEB and SCEH continued their great form while LIEB, Bangalore broke their record for the third month in a row. SCEH, Delhi set all-time records in April. Mortuary redistribution in some locations continued to be a pain point and it has taken a while for clarity to emerge for the partners to establish relations with the new locations. Utilization rate has improved further as focus on HCRP is being strengthened. The strategy of strong HCRP focus and realigning mortuaries is paying off but remains a work in progress.</p> <p><b>Opportunities to improve:</b> Maharashtra partners (Sahiyara and HVDEB) missed targets for the first time this year owing to suitability issues and staff shortage. SNC, Chitrakoot are still underperforming as their HCRP projects have yet to take off.</p> <p><b>Strategy Moving Forward:</b> Continued focus on risk mitigation in partners where suitability is likely to be a concern in these months. We are also organizing a training for 3 new Eye Bank Managers in our office in Delhi.</p> |
| <b>Hospital Cornea Retrieval Program (HCRP)</b> |  | <p>Back to back, over 1100+ performances has seen a great turnaround from HCRP team. May saw a growth of 31% over same period last year, with 1143 transplants, by 106 EDC and a productivity of 10.1. April was also a great month with 1134 transplants, a growth of 37%, and EDC productivity is on all time high of 10.5</p> <p>LIEB, SCEH, RIEB and DDEB and KGMU have led in terms of excellent EDC performance. EBAK performance slipped because of the Nipah virus outbreak. Maharashtra partners, being dependent on HCRP also trended below expectations.</p> <p>Bingo promotion for EDCs is already underway has helped again as a risk mitigation strategy for summer months.</p>  |
| <b>Infrastructure Projects</b>                  |  | <p><b>Highlights:</b></p> <p>KGMU Eye Bank reached its record performance in May with 73 transplants against the target of 48; making it the highest volume eye bank in Uttar Pradesh. The support given by local officials to implement best practices such as eye bank reimbursement and counselor training is having impact throughout the underserved state.</p> <p>In addition to servicing KGMU, we are now servicing 8 new surgeons in cities of Sitapur, Varanasi, Allahabad, Agra, Gorakhpur and Kanpur.</p> <p>Initiated SL Quality audit process.</p> <p>KGMU hosted officials from the Department of Health, Bihar and Jharkhand, who are keen to initiate programs focusing on elimination of corneal blindness in the two states.</p> <p><b>Opportunities to improve:</b></p> <p>Continue to grow local placement opportunities for optical and therapeutic tissue through surgeon development. Review suitability criteria and improve collection of suitable tissues.</p>  |

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|   |  | <p><b>Strategy Moving Forward:</b><br/>Initiate HCRP at Kanpur Medical College and launch night HCRP counselling at KGMU. Train NPCB counsellors at the authorized learning center and reduce supply costs with a focus on eye bank self-sustainability.</p>  |
| <p><b>Quality Certification</b></p>       |  | <p><b>Highlights:</b><br/>As of end of May 2018, 10/10 eligible partners remain certified.<br/>Internal audit project development documents created.<br/>Panel meeting held in April, decided for a 2 year quality certification for EBAK.<br/>Quality consultancy is ongoing with C L Gupta eye bank.</p> <p><b>Opportunities to improve:</b><br/>SOP review project is still progressing slower than expected because resources have been allocated other projects.</p>   |
| <p><b>Cornea Distribution System</b></p>  |  | <p><b>Highlights:</b><br/>During the first five months of the year, CDS has distributed 1,394 tissues which is a growth of 9% over last year same period.<br/>Average monthly placement: 278/month, and hit the magic figure of over 300 tissue distribution in two of the five months under review.<br/>Surgeon base expanded to 264 (7% increase over last year), with 119 surgeons active every quarter.<br/>Cover a total of 49 towns across the country including 6 metros.<br/>Working with EBAI to marginally increase processing fees by Rs. 500.<br/>Door-to-door SpiceJet shipment service was partially successful. We are in conversation with India Post to penetrate the farther locations.<br/>EBAI has agreed to work with us in handling issues faced while dealing with Surgeons (obtaining timely payment and RIF)<br/>EBAI has acknowledged the role of CDS in making Punjab bilateral blind free state.</p> <p><b>Opportunities to improve:</b><br/>Improve RIF Tracking – Jan-Mar 2018 - 81% Compliance (Benchmark – 90% within 45 days of month closure), April - 70%, May - 32%</p> |
| <p><b>Eye Bank Skills Development</b></p> |  | <p><b>Highlights:</b><br/>SightReady programs was rebranded to SightLife Learning, to raise awareness of and reinforce the SightLife brand, especially as SightLife expands into new countries. SightLife Learning includes SightLife Online, Classroom, and Conference. Learn more at <a href="https://learning.sightlife.org">https://learning.sightlife.org</a>.</p> <p>In April, SightLife Online partnered with Stephanie Heilman, Tissue Evaluation Trainer for CorneaGen, to host the second '<b>Do You See What I See?</b>' <b>Advanced Tissue Evaluation Webinar</b>. The topic was a full live demo of tissue evaluation, plus an in-depth feature on epithelial findings. Fifty-two (52) people from six countries attended, and the feedback was positive with an NPS score of 86.</p> <p>In May, webinars were held to onboard partner Eye Bank Managers to the new online learning community platform. Suggested functionality from the participating managers is already being built, including the capability for eye bank staff to upload photos of tissue evaluation for review.</p>      |

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|  |  | <p><b>Opportunities to improve:</b><br/>Re-evaluate SightLife’s role in training at regional and annual Eye Bank Associate of India (EBAI) conferences to ensure effective use of resources and optimal impact for trainees.</p> <p>The launch of a training facility at King George Medical College (KGMU) Eye Bank has been delayed but should be completed by next month. Interest in local training programs through KGMU is growing and already four people are registered to participate.</p> <p><b>Strategy Moving Forward:</b><br/>In the coming months, focus will be on conducting webinars for Eye Bank Managers and tissue evaluators, as well as driving traffic to the new online learning platform.</p>   |
| <p><b>Policy and Advocacy</b></p>                |  | <p><b>Highlights:</b></p> <p>In April, a new amendment to the Drivers’ License notifying donor status was introduced by the Ministry of Transport which was communicated to our partners and follow-up meetings conducted with key officials at EBAI, NOTTO &amp; Ministry of Health to understand its implications. Meeting with Ministry of Transport are pending availability of concerned official.</p> <p>In response to CDS team’s concern regarding tissue availability in remote areas of India not serviceable by air carriers or couriers, P &amp; A reached out to India Post to explore the possibility of using their service to supply tissue to unreached areas. Following a positive reply by the GM, Speed Post, P &amp; A is following up with a request for an appointment to discuss this further.</p>   |
| <p><b>Clinical &amp; Prevention Programs</b></p> |  | <p><b>Highlights:</b></p> <p>In April, 34 surgeons trained at the Kerato-Graft Cornea Symposium hosted by Bangalore West Lions Super Specialty Eye Hospital in Karnataka.</p> <p>The SightLife – Shroff’s Charity Eye Hospital three-month fellowship graduated two surgeons.</p> <p>In May, a Descemet’s Stripping Endothelial Keratoplasty (DSEK) course was held at Disha Eye Hospital in Kolkata. Dr. David DeRose from Lehigh Eye Specialist in Pennsylvania and Dr. Rahul Pandit from Houston Methodist in Texas, served as visiting faculty to train 8 surgeons.</p> <p>Surgeon alumni grew their surgical volumes by 87%. The higher than normal percentage continues as there have been a handful of surgeons doing many more surgeries than they were doing before attending the course.</p> <p><b>Opportunities to improve:</b><br/>Marketing of skills transfer courses will begin sooner to encourage surgeons from the hospital to make time to attend the course as observers.</p> <p><b>Strategy Moving Forward:</b><br/>For the remainder of the year we will focus on 3 more skills transfer courses in India, in both PKP and DSEK.</p> |

Development of standardized curriculum for Simple Limbal Epithelial Transplant (SLET) will begin in the coming months as preparations for other planned skills transfer courses continue.

**Prevention Program:**

In March, 124 additional ASHAs completed a two-day training as part of the launch of the Corneal Blindness Prevention (CBP) program in Sitapur. A total of 278 ASHAs have been trained on how to diagnose and manage corneal abrasions.

During April, SightLife staff, along with Corneal Blindness Prevention (CBP) program staff, met with ASHA Sanginis to coach on any knowledge gaps that exist amongst the ASHAs they manage following the initial trainings in February and March.

In May, a campaign was run in 20 villages of the Biswan block of Sitapur to generate awareness about the CBP program. Meetings were held with pharmacists, rural medical practitioners, school children and leaders in the villages to encourage people to visit ASHAs immediately after eye trauma. Informational leaflets and posters were also distributed in the villages.

In March, 10 patients were seen by ASHAs. In April, ASHAs saw 31 patients and diagnosed and treated 18 corneal abrasion cases. A total of 66 patients were seen in May bringing the total number to 107 and total treatment of corneal abrasion cases to 44.

**Strategy Moving Forward:**

Prevention programs will pilot a mobile app to directly collect live data from ASHAs. A new database will also be launched in the coming month. Refresher training is planned mid H2, which will reinforce and result in higher detection of corneal abrasion cases.



*Clockwise from upper left: SightLife staff spoke at the Vision 2020 conference in Guwahati; Attendees at SightLife's first skills transfer course at Bangalore West Lions Super Specialty Eye Hospital; Julien Bezerra, Director of Global Donor Operations & Partnerships, visits KGMU.*

| Global Priorities                               | Status | Notes  |
|---|--------|--|
| <b>Partner Development</b>                      |        | <p>The period under review saw partners deliver 4,715 against a target of 4,616, which is 102% of plan. This comes during the period where we had twin challenges of quality issues with Cornisol (the medium-term storage medium) and severe floods in Kerala that impacted operations considerably.</p> <p>Lions International EB, DD EB Bhubaneswar, Shroff's Delhi and Sahiyara, Thane are leading the performance in this period. RIEB, EBSR seeing a slight dip in momentum due to challenges in HCRP Programs at select centers in their networks. In August, we added our 21<sup>st</sup> partner, IGIMS, Patna.</p> <p>YTD, we continue to grow at 11% over LY.</p> |
| <b>Hospital Cornea Retrieval Program (HCRP)</b> |        | <p>HCRP Programs continue to lead growth. During the 3 months under review we have seen EDC productivity 9.9, 10.7 and 11 respectively.</p> <p>Overall transplants from HCRP Programs are 3,333 (roughly 71% of all transplants during the period).</p>  |
| <b>Infrastructure Projects</b>                  |        | <p>KGMU continues to grow from strength. During the period under review, against a target of 152 has delivered 199, including hitting an all-time high of 73 in August.</p> <p>In addition, KGMU has established itself as a source of quality tissue supplying to over 16 surgeons in 10 cities across UP both in the public and private sector.</p> <p>The team has been augmented with the addition on another tissue evaluator and night counselling at KGMU is due to commence shortly.</p>   |
| <b>Quality Certification</b>                    |        | <p>As of end of August 13/15 eligible partners remain certified. During the three-month period, five partners in India have been audited.</p> <p>Panel meeting for eye banks audited till June was held in July and the panel granted 2-year certifications to RIEB (LVP) and Lions International EB, Bangalore and 1-year certification to H V Desai EB, Pune.</p> <p>In addition, Quality consultancy initiated with SNC, Chitrakoot and AIOB. KGMU is getting ready for final audit and we are finalizing a team of independent auditors for the same. SOP review process is currently on and we expect to complete by end of October.</p>                                |
| <b>Cornea Distribution System</b>               |        | <p>During the review period, CDS distributed 713 tissues on a target of 856. This is mainly due to lower supply of tissue from our partners for the national pool as local distribution has increased over time.</p> <p>Issues with Cornisol - contamination scare as well as solidification ingredients when eye banks received fresh stock. This created little bit furor as eye banks were skeptical about using these storage media which severely impacted</p>  |

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|  |  | <p>availability of tissues for national distribution between mid-June to first week of July. Floods in Kerala impacted availability of tissue in August.</p> <p>The number of Active Surgeons crossed 133 in August and with onboarding of 7 new surgeons during the period, the surgeon base has moved to 268 across 44 towns.</p>  |
| <p><b>Eye Bank Skills Development</b></p>        |  | <p><b>In June</b> 26 people attended the first part of a webinar series for international Eye Bank Managers. Subject matter experts from SightLife Seattle office and partner eye bank, Aravind Eye Care System, co-hosted the session on recruiting and interviewing eye bank staff. Attendance was higher than expected and feedback was very positive, with an NPS score of 100 from webinar participants.</p> <p><b>In July</b>, 38 courses were completed through SightLife Online portal. Courses included eye banking basics courses and prerecorded webinars. While the number of active users were lower than expected, those who were active completed several courses.</p>  |
| <p><b>Policy and Advocacy</b></p>                |  | <p>In the first week of June, the Global P &amp; A team finalized the Policy Guidebook for launch at the World Ophthalmology Congress (WOC) Barcelona. The Guidebook was launched by Josie Noah, on 14 June at the WOC. It is available here for download <a href="https://www.sightlife.org/policyguide">https://www.sightlife.org/policyguide</a></p> <p>Initial brainstorming with SLI India team to introduce mandatory Death notification in KGMU, Lucknow. Research and interviews with relevant stakeholders conducted at Shroff Eye Hospital Delhi, AIIMS Delhi and PGI Eye Bank Chandigarh to map their notification processes.</p>   |
| <p><b>Clinical &amp; Prevention Programs</b></p> |  | <p><b>Clinical Programs:</b></p> <p>In July, SL organized two Cornea Symposia, one at Lions International, Bangalore followed by another at Ahmedabad. Cornea specialists and fellow from across the state participated in the two-day training, which included a mix of didactic and observational learnings. In August, a DSEK training course was organized at AIIMS (9 surgeons trained), followed by a DSEK, DMEK wet lab at ISCRS at Le Meridian, N. Delhi (33 surgeons trained).</p> <p>Course alumni have increased their year over year growth by 72%. This number is particularly high as there have been a few surgeons that entered courses with low surgical volumes and are now doing very well.</p> <p><b>Prevention:</b></p> <p>In June, 113 patients were seen by trained community health workers in Sitapur. In July, ASHAs in Sitapur saw a total of 156, which is a 38% increase from June. In August, a total of 190 patients were seen, a 20% increase from the number of patients seen in July.</p> <p>47% of patients seen were treated for corneal abrasions and 1 patient was referred for more specialized care. ASHA Sanginis, or ASHA supervisors, successfully participated in their first remote check-in meeting with Sightlife</p> |

staff from Delhi by video call. The program coordinator from Sitapur had the opportunity to visit the prevention program in Nepal to meet with staff and learn best practices.

The significant increase in activity is attributed to targeted follow-up training and an awareness campaign completed in May and June.

Additionally, 30 select ASHAs were trained to pilot a mobile app which will collection patient data in real time and reduce data entry inefficiencies.

ASHAs are having issues filling out and maintaining complete logbook entries. This is a topic that will be covered in the refresher training in September along with reinforcing initial training principles, sharing best practices and address any issues or concerns.

| Metric  | February | March | April | May | June | July | August | Total |
|---|----------|-------|-------|-----|------|------|--------|-------|
| Number of eye health workers trained (Sitapur)        | 154      | 124   | 0     | 0   | 0    | 0    | 0      | 278   |
| Total number of patients seen by ASHAs (India)        | 0        | 10    | 31    | 66  | 113  | 156  | 190    | 566   |
| Total number of abrasion cases seen by ASHA's (India) | 0        | 1     | 18    | 26  | 56   | 81   | 101    | 283   |
| Percentage of abrasion cases (India)                  | 0%       | 1%    | 58%   | 39% | 50%  | 52%  | 53%    | 50%   |
| Total number of referral cases made by ASHAs (India)  | 0        | 2     | 6     | NA  | 3    | 2    | 1      | 14    |
| Percentage of referral visits completed (India)       | 0%       | 100%  | 100%  |     | -    | 100% | 100%   | 4     |

III - Sept. to Nov. 2018 Report



*Clockwise from left: Photo 1 - Celebrating 1,000 corneal transplants at KGMU UP; Photos 2 – 4 - Surgeons attending the skills transfer for DSEK.*



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| <p><b>Partner Development</b></p>                      | <p><b>Highlights:</b> The period of Sept – November saw us trending green in all the 3 months. At the end of Nov., we are about 1800 Tx more than same period LY, which is 12% higher. We are on track to achieve our annual target of 18,474.</p> <p>During this period, we have added one new partner – Gomabai Netra Chikitsalaya in Neemuch, MP. With this our partner strength goes up to 22.</p> <p>This was a period of two important festivals as well as conferences (Keracon) and it is heartening to see the momentum building at the right time to track higher than our plans.</p> <p>A special callout to a couple of partners – SCEH for being a very consistent performer; NEB – AIIMS for achieving their highest ever in Nov.; LIEB for their consistent performance over the year to be a new entrant to the 1000+ club; DDEB towards a good pickup in the latter half of the year, and EBAK for a swift turnaround after devastating floods mid-year.</p> <p><b>Opportunities for Improvement:</b> Some partners continue to be laggards, primarily because of manpower issues, slow pickup on projects and lack of monitoring from our side.</p> <p><b>Strategy Moving Forward:</b> While maintaining a focus on project execution, we are utilizing our learnings from this and previous years into 2019 planning with partners so that we can manage the risk better and develop consistency in partners.</p>  |
| <p><b>Hospital Cornea Retrieval Program (HCRP)</b></p> | <p><b>Highlights:</b> HCRP has been the fulcrum driving performance for our partners. Today HCRP accounts for around 70% of all Tx by our partners, up from 64% of LY and 37% in 2014. EDC productivity across the 3 months has ranged between 10.5 – 11.3 which is a great pickup.</p> <p>At most of our partners we saw project execution improve in both - existing and new projects. However, this cannot be said of all our partners and in 2019 we will look at improved planning and execution based on the lessons learnt this year PAMs will work closely with GDO team in HQ to evaluate best practices and create opportunities for growth in 2019.</p>  |
| <p><b>Infrastructure Projects</b></p>                  | <p><b>Highlights:</b> The EB surpassed its targets every month for the period under review. By the end of October, the EB completed its annual target of 600 and hence the revised target for the year is 750. Additionally, in the month of November the EB achieved the milestone of 1000 Tx in less than 2 years of its operation making it the fastest growing EB in Asia.</p> <p>Night counselling at KGMU commenced from October leading to a healthy growth in performance. Also, as per the request of the Military Hospital in Lucknow, the team is exploring its feasibility as a HCRP Centre.</p> <p>In October, the CoE was successfully launched at KGMU. Six eye donation counselors across UP and Bihar were trained and certified in the presence of DDG, NPCB. In second half of December, counsellors from Indonesia are expected to attend the EDC Training course.</p> <p>Another key milestone was the first ever quality audit. Two external evaluators conducted the quality certification audit. Few minor observations have been reported and the team is working to address them.</p> <p><b>Opportunities for Improvement:</b> Continuing effort on adding additional HCRP centers and implementation of mandatory death notification to improve collection. Closely watching consumable expenditures and exploring alternate strategies to rationalize cost.</p> <p><b>Strategy Moving Forward:</b> Focus on sustainability. Improve utilization rate. Follow-up with Kanpur Medical College for HCRP Partnership.</p> |

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| <p><b>Quality Certification</b></p>                 | <p><b>Highlights:</b> As of end of November 2018, 10/10 eligible partners remain certified. SL Certification panel meeting held in October, re-certified three eye banks: CUSEB, Chennai, MGRC, Thane and EBSR, Jaipur. Certification audit was conducted for the first time at KGMU, November 16 – 18.</p> <p>Seven out of 10 certified partners have been onboarded onto an internal audit project. Quality consultancy is ongoing with AIOB and SNC. Chitrakoot quality program budget has been prepared for 2019.</p>  |
| <p><b>Cornea Distribution System</b></p>            | <p><b>Highlights:</b> The period under review has been a difficult period for CDS Operations. In September and November, the placement was lower than target. Lower flow of tissue into the national distribution has led to low placements in some months of the year. Nov with Diwali holidays and Keracon towards the end of the month, led to lower placement due to poor demand. The team will miss out on the annual target of 3400 and are gunning for a revised plan of 3200.</p>  |
| <p><b>Eye Bank Skills Development / L&amp;D</b></p> | <p><b>Highlights:</b> The L&amp;D team successfully supported organizers of EBAI and SightLife staff in the preparation and facilitation of the annual eye banking conference. Talks were prepared and delivered by several staff and partner eye banks.</p> <p>In October, six people were trained at the inaugural Eye Donation Councilor (EDC) training program at King George’s Medical University (KGMU). Trainees were actively engaged in the seven-day instructor led sessions – role-playing approaches, observing senior EDCs, and writing personal purpose statements. EDCs left the training confident in their ability to approach and counsel families at their hospitals. Sightlife will be following up with the trainees to track their progress over the next several months.</p> <p><b>Strategy Moving Forward:</b> Continue to support KGMU training events, while planning for a full market analysis in 2019.</p>  |
| <p><b>Policy and Advocacy</b></p>                   | <p><b>Highlights:</b> The team held a workshop for the KGMU leadership on introducing mandatory death notification at KGMU. A circular was passed by the DGP Police Uttar Pradesh allowing recovery prior to post mortem across the State.</p> <p>On World Sight Day (October 11) the P &amp; A team released a policy brief on prevention of corneal blindness aimed at the Indian government and leadership in eye health, calling upon them to adopt, implement, and scale up corneal blindness prevention efforts in the country. Targeted email for concerned government officials was sent and some positive response and interest was expressed.</p> <p>In November, a two day visit to the KGMU CEB and Sitapur prevention program was conducted, attended by Dr. Sangeeta Abrol, DDG (O) of NPCB, and Melissa Thompson, Director, CSR, Alcon Foundation. The visit introduced Dr. Abrol to SLI’s work and established an important connect that we are hopeful will impact future policy initiatives positively. P &amp; A was also a key focus for the SCEH workshop conducted to introduce a high performing EB partner to the cornea health systems approach and brainstorm on future collaboration.</p> |
| <p><b>Clinical &amp; Prevention Programs</b></p>    | <p><b>Highlights:</b> On a target to train 156 surgeons, the team has trained 295.</p> <p>In Sept., Clinical Programs supported a course for cornea fellows of LVPEI, Bhubaneswar. A total of 18 surgeons were trained in a mixture of Descemet’s Stripping Endothelial Keratoplasty (DSEK) and Descemet Membrane Endothelial Keratoplasty (DMEK). The course</p>  |

was taught by local LVPEI faculty, Dr. Sujata Das, Dr. Srikanth Sahoo, Dr. Jagadeesh Reddy and Dr. Pravin Vadapalli.

One surgeon completed the 3-month cataract to cornea fellowship at Shroff's Charity Eye Hospital in New Delhi.

In Nov., Clinical Programs partnered with Dr. Shroff's Charity Eye Hospital to host a 3.5 days course in Descemet's Stripping Endothelial Keratoplasty (DSEK). There were 13 surgeons trained by international faculty Dr. James Lehman (Focal Point Vision, Texas) and Dr. Francis Mah (Scripps Torrey Clinic, California) and local faculty, Dr. Umang Mathur, Dr. Manisha Acharya and Dr. Abha Gaur.

During the first day of Keracon 2018 SightLife hosted a wet lab where 65 surgeons were trained in a mixture of DSEK, DMEK, and Deep Anterior Lamellar Keratoplasty (DALK).

Course alumni have continued to increase their year over year growth by 68%.

**Prevention Program Highlights:**

In September, SL and CBP (Corneal Blindness Prevention) program staff hosted a refresher training in Sitapur for all 278 ASHAs. The training was the first refresher training since the launch of the program in Feb/March and reinforced principles from the initial training. A high performing supervisor from the VIEW (Village Integrated Eye Worker) Program in Nepal came to India to support the training sessions. In Sitapur, ASHA Sanginis also participated in the first video conference meeting to discuss problems and best practices with SightLife's Prevention Coordinator in Delhi.

The program coordinator conducted two school teacher trainings, informing them of the Corneal Blindness Prevention (CBP) program and encouraging them to educate their students about early intervention with ASHAs.

YTD, a total of 1298 patient have been seen by Accredited Social Health Activist (ASHAs) in Sitapur. Of the 1298 patients seen, 56% were treated for corneal abrasions with a success rate of 96%. A total of 21 patients were referred to specialized care and all referred patients completed their follow up visits.

In October, there was an unexpected but positive attrition of the Program Coordinator from the Corneal Blindness Prevention (CBP) Program at Sitapur. A replacement coordinator has already been hired and is in the process of onboarding in the field, at the hospital, and with SightLife staff.



## Wait time for cornea transplant at KGMU now 1 wk, not 10 mths

### VISION OF HOPE AHEAD

Till now, patients had to wait for up to 10 months for corneal transplant at KGMU. It will now be a week

➤ Against 107 corneal transplants performed in 2015, ophthalmic surgeons at KGMU undertook 707 surgeries in 2018

➤ 4% or 1.85 million of the global visually impaired people (45 million) live in UP



Shailvee.Sharda  
@timesgroup.com

Crediting the improvement in medical facilities to awareness efforts and a formal set-up in the form of the community eye bank, Dr Kumar said though the rise has brought down the general waiting list for corneal transplants at the medical university to 7-10 days, a lot still needs to be done.

**Lucknow:** There is positive news for those waiting for the gift of sight — an impressive 85% jump has been reported in the number of corneal transplants undertaken at King George's Medical University every year since 2015. The six-and-a-half-fold rise has brought the waiting period for a corneal transplant down to just one week.

Earlier, a patient had to wait for eight to 10 months for a corneal transplant at KGMU.

Against 107 corneal transplants performed in 2015, ophthalmic surgeons at KGMU undertook 707 surgeries in 2018. Medical director of KGMU community eye bank Dr Arun Kumar said: "We hope to cross the number in 2019. It looks possible as 157 people have been given vision between January 1 and March 8 this year."

This is because 4% or 1.85 million of the global visually impaired people (45 million) live in Uttar Pradesh.

"The saddest part is that the loss of vision in majority of these people is preventable," said Dr Y K Pathak, director of the National Programme for Control of Blindness and Visual Impairment.

"Cataract and refractive errors are the most common causes of blindness in UP. Both problems are reversible in nature but lead to permanent blindness if ignored," he informed.



*Clockwise from left: Photo 1 – A successful pilot training 12 surgeons in hands-on SLET; Photo 2 – Article about the reduced wait time for a transplant at KGMU; Photo 3 – Community awareness event in Uttar Pradesh; Photo 4 – New DMEK microscope at KGMU*



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| <p><b>Partner Development</b></p>                      | <p><b>Highlights:</b> We ended the quarter with a 13% growth over Q1 2018 but not enough to beat the Q1 2019 target. We lost out by 21 transplants. This was a mixed quarter for India partners. Several of our mid-sized partners (doing 1000 – 1500 Tx pa) did exceedingly well, beating targets comfortably. Specific callouts are reserved for Shroff’s, Lions Bangalore and NEB-AIIMS while EBSR, Rajasthan had their best quarter in their history. This came through a combination of effective HCRP execution and maximizing the productivity from mortuaries.</p> <p><b>Strategy Moving Forward:</b> Moving into the second quarter, we are focusing on project delivery and ensuring operational rigor, especially in laggards. With the PAM team complete and Indrajit onboarded, we see higher rigor coming into the operations. We are in dialogues with the leadership at our bigger partners to better understand their challenges and offer support Finally, we remain committed to developing a pool of large eye banks that can grow to serve the needs of a state/s.</p>   |
| <p><b>Hospital Cornea Retrieval Program (HCRP)</b></p> | <p><b>Highlights:</b> Partners facilitated 3429 HCRP transplants in Q1, exceeding the Q1 target by 5%. We’ve seen strong EDC productivity at 9.4, and partners are progressing well on HCRP projects. Several partners have put together excellent quarters, well exceeding their targets every month, including EBSR, AIIMS, SCEH and LIEB.</p> <p><b>Opportunities for Improvement:</b> There are several partners who fell short of target at least two of the three months in Q1. Issues included staffing, recovery facility challenges, quality, and partner commitment to HCRP. The team is working to alleviate these issues moving forward for a stronger Q2.</p> <p><b>Strategy Moving Forward:</b> Regionally, continue providing excellent support to partners, with a focus on areas partners underperformed last quarter. Globally, begin development of Global Donor Operations programmatic content, including 1) an HCRP Guidebook to provide best practices and practical resources to support the development and optimization of HCRP, and 2) Enhanced EDC Curriculum to incorporate best practices learned over decades of donor operations experience globally.</p> |
| <p><b>Infrastructure Projects</b></p>                  | <p><b>Highlights:</b> February was a particularly good month with utilization crossing our target threshold of 65%. We also organized a training covering tissue evaluation on site for the technician and cornea fellows to ensure accurate tissue grading, thus improving utilization. We trained five eye bank professionals from for Eye donation counselling and recovery skills.</p> <p><b>Opportunities for Improvement:</b> Improving our utilization is one of our major goals for this year as it also helps us balance revenue from processing fee against cost, thus getting u closer to being financially sustainable.</p> <p><b>Strategy Moving Forward:</b> We will build on tissue evaluation capacity with another training in Q2-3 of 2019 in which the technician will be certified. We are also working hard to develop capacity to handle finance and operations independently within the team at KGMU, which is our major goal for 2019.</p>  |
| <p><b>Quality Certification</b></p>                    | <p><b>Highlights:</b> In Q1 2019, a re-certification audit was conducted at Drushti Daan Eye Bank, Bhubaneswar (DDEB) March 7 – 8. Quality certification panel discussion was held in February during which King George Medical University Community Eye Bank (KGMU), Lucknow was SL Quality certified for one year. Besides this, a preparatory audit visit was conducted at Aravind International Eye Bank, Coimbatore (AIOB) to</p>  |

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|   | <p>assess eye bank's audit readiness. Quality consulting is ongoing at Aravind International Eye Bank, Coimbatore (AIOB). SOP revision project and internal audit capacity building projects are on track.</p> <p><b>Opportunities for Improvement:</b> Quality consulting at Sadguru Netra Chikitsalaya (SNC) is on hold as the Eye Bank Manager is unavailable on health grounds and currently the eye bank is trying to allocate resources for the same.</p> <p><b>Strategy Moving Forward:</b> Continue to work with quality consulting and conduct certification audits planned for the year 2019. Also work to understand the effectiveness of the internal audit project executed at the partner eye banks.</p>  |
| <p><b>Cornea Distribution System</b></p>  | <p><b>Highlights:</b> CDS did fairly well this quarter with 821 placements against the set target of 863. March did not meet expectations with CDS falling 49 short of the set target. CDS onboarded 12 new surgeons during this quarter among which 3 were government surgeons. 82% the tissues distributed through CDS were on prior request basis against the target of 80% with 100% utilization rate. EBSR came out on top with exceeding expectations and submitting more than the budgeted number of tissues.</p> <p><b>Opportunities for Improvement:</b> Six out of seven CDS partners did not share the budgeted number of tissues during the quarter which resulted in CDS falling short of the target. CDS also experienced lots of inconsistency from the eye banks while they were sharing tissues. Also, with Chiranjeev's departure the RIF project has also taken a hit and is lagging.</p> <p><b>Strategy Moving Forward:</b> Conversation with PAMs has been initiated to understand the status of partners and realign CDS's strategy for the next quarter. Pinki's onboarding has also been fast tracked to ensure the RIF project can be brought back to initially set timelines.</p> |
| <p><b>Eye Bank Skills Development</b></p> | <p><b>Highlights:</b> Eight eye bank personnel were trained in Q1. Six were trained as EDC/ERTs at the KGMU Learning Center. The KGMU training team has now facilitated several training events and have received excellent feedback on the learning experience from attendees. Two people were also trained as Eye Bank Managers at the SightLife Delhi office.</p> <p><b>Opportunities for Improvement:</b> Three additional EDC/ERT trainings were planned, but the EBs have had challenges filling the positions, so the training needed to be postponed.</p> <p><b>Strategy Moving Forward:</b> Continue building capability of the KGMU ALC by refining curriculum and begin assessing the capability of other eye bank partners to become training partners.</p>   |
| <p><b>Policy and Advocacy</b></p>         | <p><b>Highlights:</b> Key policy focus in Q1 was to implement and monitor the progress of mandatory death notification in KGMU UP CEB, a model to be replicated and scaled up in the State of UP in 2019. At the end of February, KGMU Hospital completed the transition to E-Hospital software, an online software available at district hospitals across the country, which included a ward-wise update of deaths. In March, the KGMU UP CEB also got access to E-Hospital whereby deaths across the Hospital could be updated to the CEB.</p> <p>Follow up with KOLs at the national level has continued with regularity.</p>  |

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|  | <p><b>Opportunities for Improvement:</b> Explore opportunities to bring together key stakeholders and KOLs at the state level in UP and Karnataka to drive donor access friendly policies like MDN.</p> <p><b>Strategy Moving Forward:</b> Set up state level meetings in Karnataka and UP to generate interest and advocate for MDN and Prevention at the State level. Engage KOLs at national and state level for this purpose.</p>  |
| <p><b>Clinical &amp; Prevention Programs</b></p> | <p><b>Highlights:</b> This quarter 13 surgeons were trained in India on Simple Limbal Epithelial Transplantation (SLET) during the 2019 Ocular Surface Workshop in Karnal, India. This training piloted a new curriculum developed in partnership with L.V. Prasad Eye Institute to train Ophthalmic professionals on this innovative, cost-effective surgical technique. A NPS score of 99 was maintained throughout all program events.</p> <p>This quarter Accredited Social Health Activists (ASHAs) saw a total of 497 patients. 334 patients, or 67% of patients seen were diagnosed and treated for a corneal abrasion. Eight patients were referred for more specialized care. The Corneal Blindness Prevention Program (CBP) Coordinator attended all monthly meetings for ASHA Sanginis and completed strategic meetings with village leaders and teachers to increase awareness of the program.</p> <p><b>Opportunities for Improvement:</b> With piloting the new topic, there is room for improvement training the trainer to adapt the curriculum. These learnings will be implemented in the next few weeks as the train the trainer curriculum is built for the short-term cornea fellowship. In India, we have not yet seen the effects of the new metric on direct skills adoption. This will be built out on a more robust system moving forward.</p> <p>ASHAs are still having issues completing patient logbook information. Accurate and comprehensive logbook entries will be an objective during the upcoming refresher training in April. We are also continuing to explore the possibility of mobile data collection through a pilot group who are utilizing a smart phone application rather than a paper log book.</p> <p><b>Strategy Moving Forward:</b> The next quarter will be training courses and curriculum development heavy, with more institutions hosting symposiums and new topics emerging such as DMEK and Medical Management of Cornea. As clinical training moves through these, there will be a focus on standardizing the survey model pre- and post-course to continue the success from symposiums. Focus will be on planning for the upcoming refresher training for all 278 ASHAs, as well as hosting local government officials to witness the program and to advocate for government allocated resources to support state wide prevention programs. Engagement with a new technology company in Delhi will help to improve our current database used for entering and storing patient data.</p> |