

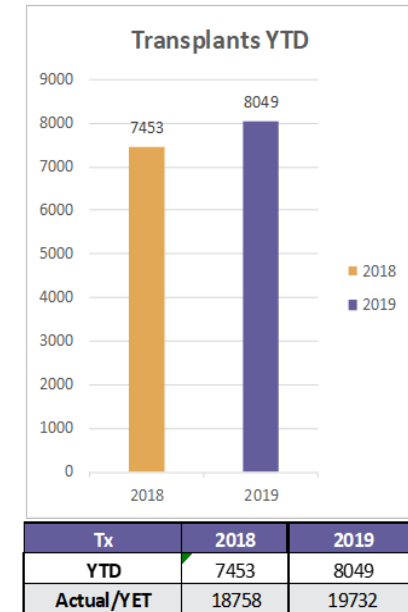
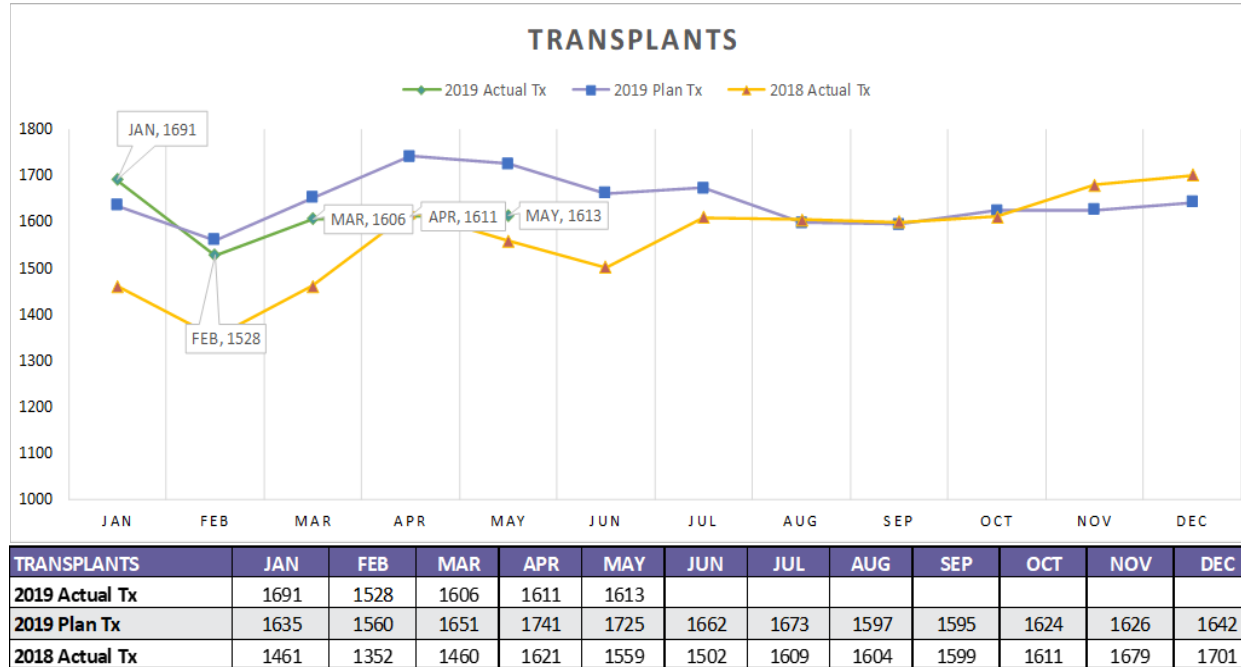
## SightLife India Activity Report April 2019-March 2020

### I - April - June 2019 Report



*Clockwise from left:  
Photo 1 – Slalom  
Project Team with  
Community Health  
Workers in Biswan;  
Photo 2 – SightLife  
India celebrating  
100,000 individuals  
who no longer from  
treatable corneal  
blindness in India;  
Photos 3 and 4 –  
Lorraine Misquith  
providing consultation  
on HCRP and how a  
state level policy on  
mandatory death can  
accelerate the mission  
to end corneal  
blindness – held in  
PGI Chandigarh*





OTHER DATA		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YET
Total Growth	Actual	16%	13%	10%	3.5%	8%								5.0%
Utilization Rate	Actual	54%	56%	59%	60%	60%								
	Plan	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%
CDS	Actual	300	279	242	305	321								
	Plan	300	274	291	279	304								3450
HCRP	Actual	1175	1055	1175	1204	1147								
	Plan	1123	1062	1123	1215	1267								
Surgeons Trained	Actual	0	13	80	40	0								
	Plan	0	20	1	0	12								
Community Health Workers Trained	Actual	0	0	0	273	0								
	Plan	0	0	0	273	117								

Global Priorities	Notes
<b>Partner Development</b>	<p><b>Highlights:</b> In May, SL and its partners achieved the unique milestone of 100,000 transplants since SL began its collaboration in India.</p> <p>In the first five months of 2019, partners are growing by 8% YTD (8049 vs 7453), but we are at 97% of this year's YTD target (8312 vs 8049). The momentum of the first quarter could not be sustained in April and May and we ended with 7% and 6% short of month's target for these two months, respectively.</p> <p>Several of our mid-sized partners (doing 1000 – 1500 Tx pa) are doing well, either beating targets or above targets. Specific callouts are reserved for EBSR, Shroff's, Lions Bangalore and NEB-AIIMS. This came through a combination of effective HCRP execution and maximizing the productivity from mortuaries.</p> <p><b>Strategy Moving Forward:</b> Moving closer to the second half, we are focusing on project delivery and ensuring operational rigor. PAM team (with support from Global Donor Operations) has stepped up their on-ground engagement with partners with closer monitoring of projects, spending quality time in the field for COEs (correction of errors), evaluating and actioning incentive program if required.</p>
<b>Quality Certification</b>	<p><b>Highlights:</b> As of end May, all 11 of the eligible partners remain certified. Re-certification audits in this period have been conducted at Drushti Daan Eye Bank, Bhubaneswar (DDEB) in March; Shroff's Charity Eye Hospital (SCEH) in April; and HV Desai Eye Bank, Pune in May.</p> <p>During April and May, team has reviewed CAPAs from DDEB, SCEH and provided consulting support for eye bank audit readiness. Additionally, they are support quality consulting to our team in LatAM and Greater Asia. The coming quarter is a big audit period with four audits planned – 2 international and 2 in-country.</p>
<b>Cornea Distribution System</b>	<p><b>Highlights:</b> CDS during the period has achieved 1447 which is as per plan. In May, the team distributed 321 tissues which is their best, surpassing 316 which was achieved mid last year. This performance is even more commendable as the team continued to deliver in spite of a transition in April – Chiranjeev moved on and we brought in Pinki as a new distribution coordinator.</p> <p>The surgeon base has grown to over 300 with 142 active surgeons across 53 cities receiving tissues through CDS.</p>

<b>Policy and Advocacy</b>	<p><b>Highlights:</b> In Q1 the focus was to implement and monitor the progress of mandatory death notification in KGMU UP CEB, a model to be replicated and scaled up in UP this year.</p> <p>In April, along, with the Refresher Training for the ASHA workers in Sitapur (5 April 2019); district and state level health officials were invited and results of the first year of the pilot program were disseminated.</p> <p>Follow up with KOLs at the national level has continued with regularity. One affinity shift was achieved with Dr. Gobind Mukherjee, President EBAI on request by SLI. SLI was able to advocate for an increase in tissue processing fees for EBs by INR 500. A final notification was issued by EBAI in the latter half of May and has been implemented beginning June.</p> <p>In May, SL was invited to a national level stakeholder meeting, “HCRP as a way forward for India to achieve the national plan of 100,000 Tx by 2025’ organized by Govt of Punjab and PGI, Chandigarh. This was attended by Sumedha Gupta (PAM) and Lorraine Misquith (Policy) where we presented a roadmap for HCRP with death notification systems to achieve the national goal.</p>
<b>Clinical &amp; Prevention Programs</b>	<p><b>Clinical Programs:</b></p> <p><b>Highlights:</b> In Q1, 13 surgeons were trained 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 LVPEI to train Ophthalmic professionals on this innovative, cost-effective surgical technique. An NPS score of 99 was maintained throughout all program events.</p> <p>In April, 40 ophthalmologists were trained at the Annual Cornea Interest Group in Kozhikode by international faculty Dr. Michael Banitt (Seattle, WA) and Dr. Matthew Giegengack (Winston-Salem, NC). National Faculty included Dr. Siddharthan, Dr Sujith Nayanar, Dr Anil Radhakrishnan, Dr Aneeta Jabar, and Dr Vinay S Pillai. This was a great opportunity to engage the local surgeon community in both Descemet’s Stripping Endothelial Keratoplasty (DSEK) and Descemet’s Membrane Endothelial Keratoplasty (DMEK).</p> <p>Clinical Programs is scoping the curriculum build for a medical management of cornea to train general ophthalmologists and optometrists in early identification of corneal disease and proper follow up care post-operatively. An additional curriculum for keratoconus management is also being scoped with key opinion leaders in India.</p> <p><b>Prevention Programs:</b></p>

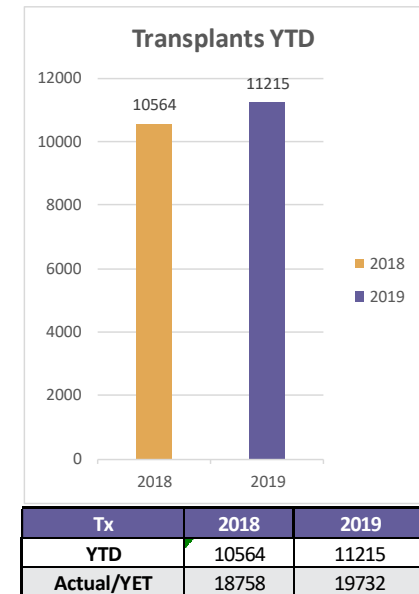
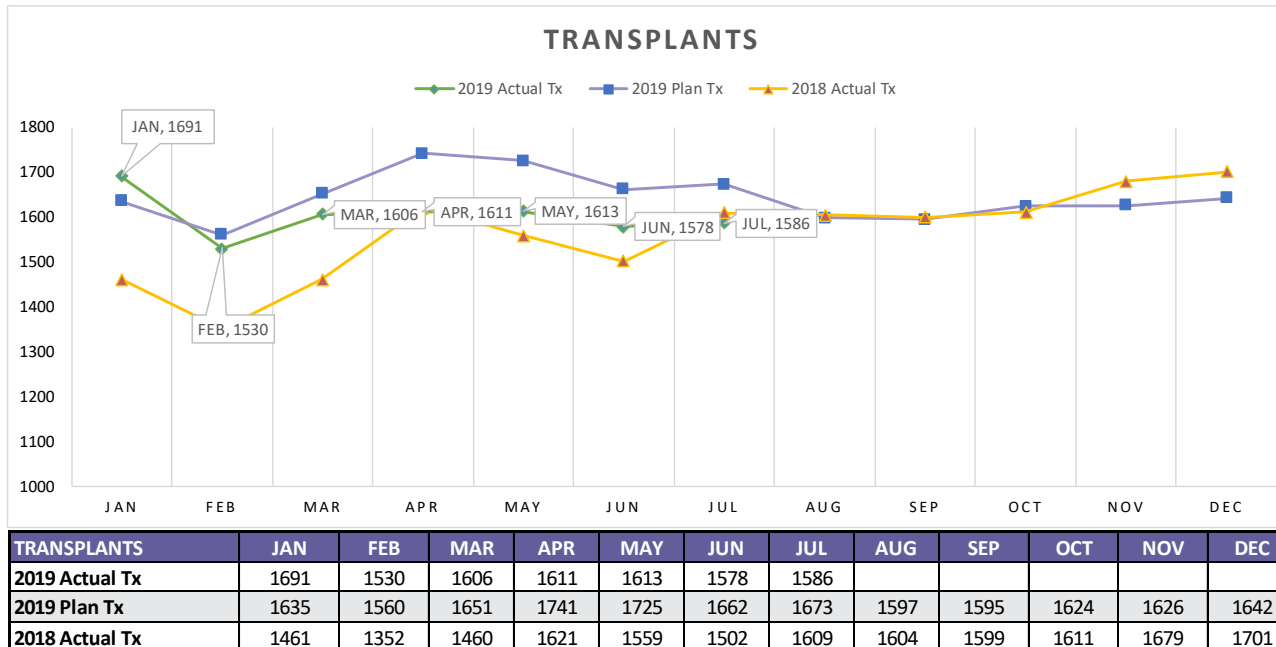
Between January - May 2019, ASHA workers reached out to over 1062 people in Biswan block of Sitapur, UP and successfully diagnosed over 684 people on corneal abrasions. 29 patients were referred by ASHAs to more specialized Ophthalmic professionals for advanced care. All patients who were referred completed their follow up visits.

In April, all 273 Accredited Health Activists (ASHAs) participating in the Corneal Blindness Prevention (CBP) Program in Sitapur, attended a refresher training put on by SightLife and clinical staff. The refresher training also marked the 1-year anniversary of the program. Government officials and policy makers attended a celebration of the program during the refresher training to learn more about the work and to commend the ASHAs.

Looking at program needs, select ASHA Sanginis (supervisors) have been promoted to a managing role of other ASHA Sanginis. Adding another management level between the ASHA Sanginis and the single field coordinator should improve data collection, adherence to clinical techniques, and outreach to patients. However, in May, we lost our Sr. Coordinator, Anuja and we are actively looking at a replacement from within the team.

Looking forward, expansion is planned in two more blocks in Sitapur district - Leharpur block in July & Tambaur in November. This is to ensure that our Prevention interventions reach out to more and more people in different geographies while closely working with our partners. We are actively exploring options for expansion of our program in South India.

## II - July - September 2019 Report



OTHER DATA		JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	YET
Total Growth	Actual	16%	13%	10%	3.5%	8%	5%	-1%						5.0%
Utilization Rate	Actual	54%	56%	59%	60%	60%	61%	65%						59%
	Plan	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%	61-70%
CDS	Actual	300	279	242	305	321	288	280						2015
	Plan	300	274	291	279	304	265	273						1986
HCRP	Actual	1175	1055	1175	1204	1147	1118	1126						
	Plan	1123	1062	1123	1215	1267	1211	1072	1122	1098	1133	1102	1120	13604
Surgeons Trained	Actual	0	13	0	40	0	23	6						82
	Plan	0	20	1	0	12	1	15	0	1	0	0	1	51
Community Health Workers Trained	Actual	0	0	0	273	0	0	173						
	Plan	0	0	0	273	0	0	173				441		

<b>Partner Development</b>	<p>June highlight was the successful transition of the DCHCRP Program to our partners in Delhi.</p> <p>Further, we are proud to announce that KMC (Kasturba Medical Center), Manipal has joined the SightLife family as our 24<sup>th</sup> partner in India. The institute is well known across India and abroad as a center of excellence of medical education, research and care. Though their cornea department is not well developed, we see opportunity in the long term.</p> <p>PAM team is closely monitoring and working on quality improvements to increase the supply of optical quality tissue as well as focus on delayed projects with some partners. Deliberations with the leadership of our largest partners (RIEB and Aravind AIEBS) are seeing their performance coming back on track, but a large deficit remains. We have launched a promotional activity for eye bank teams that is valid from August to mid-September.</p>
<b>Hospital Cornea Retrieval Program (HCRP)</b>	<p>HCRP Programs are showing steady growth. The contribution of HCRP led transplants to total transplants has increased from 69% to 73% during the year, with EDC productivity a healthy between 9.5 – 10.3 across months.</p> <p>Better monitoring with timely feedback is seeing a pickup across key efficiency metrics: notification, suitability, consent and utilization e.g Average death notification rate was a year-to-date high of 57% and has been trending up for 3 straight months, indicating improved partner relations activity. Transplant rate has remained in the ideal range, at 73.6%.</p> <p>Strategy Moving Forward: Continue development of HCRP best practices and begin piloting implementation with partners.</p>
<b>Quality Certification</b>	<p>As of the end of this reporting period, all 11 out of 11 eligible India partners remain quality certified.</p> <p>The Quarterly certification panel meeting scheduled for 11<sup>th</sup> July approved a 2 years re-certification for 3 partners: Drushti Daan Eye Bank (DDEB), SCEH (Shroff's Charity Eye Hospital) and H. V. Desai Eye Bank.</p> <p>Globally, quality consulting is ongoing at National Eye Bank, Sri Lanka (NEBSL) and National Eye Bank Taiwan (NEBT).</p> <p>Initial assessment visits at Eye Banks in China has been planned to understand the current scenario and plan Quality consulting strategy. Quality consulting plans have been rolled out for Eye Banks in Mexico.</p>



<b>Cornea Distribution System</b>	<p>During the first seven months of 2019, CDS has clocked 2015 distributions against a target of 1986, with on or over target delivery in 6 of the 7 months.</p> <p>Two of the seven partners have been consistent tissue providers (as per targets). The surgeon database has increased to 302 as against 287 in the beginning of the year.</p> <p>In the last 2 months, tissues are being distributed to 150 surgeons (in a month) as compared to 137 at the start of 2019. We are now covering 52 cities and towns across the nation.</p>						
<b>Policy and Advocacy</b>	<p>SightLife hosted a panel at the Vision 2020, Annual Conference in Chennai, June 8<sup>th</sup>/9<sup>th</sup> on Prevention as a key strategy in elimination of corneal blindness. At the national and state level two positive affinity shifts were created, with the return of Dr. Promila Gupta as DDG at NPCB&amp;VI, and with Dr. Amresh Bahadur Singh, Deputy Director, National Health Mission, Uttar Pradesh.</p>						
<b>Clinical &amp; Prevention Programs</b>	<p><b>Prevention:</b></p> <p>The period saw continued good program implementation in Biswan block. In April, a refresher training for the ASHA workers was organized. In June, the supervisor team was trained on the new desktop version of dashboard, wherein all the data of patients under Prevention Program can be stored and used for future reference.</p> <p>The local sugarcane factory - Seksaria Brothers have agreed to support the cost of 4000 eye protective glasses for sugarcane farmers in the region and provide spectacles to 273 ASHA workers after their eye screening.</p> <p>In July, the program was launched in Leharpur block of Sitapur district. A formal launch program was organized on July 9<sup>th</sup> in the presence of all local health officials. A four days initial training for local ASHA workers followed the launch with 173 ASHAs being trained.</p> <p>YTD performance:</p> <table border="1" data-bbox="394 1558 1248 1671"> <tr> <td>No. of patients seen in YTD July '19</td><td>2252</td></tr> <tr> <td>No. of patients diagnosed on corneal abrasion</td><td>1482</td></tr> <tr> <td>No. of referrals</td><td>44</td></tr> </table> <p><b>Clinical Programs:</b></p> <p>As against a YTD plan of training 51 surgeons, we have successfully trained 82.</p> <p>In June, 23 ophthalmologists were trained through 3 partners - Disha Eye Hospital (Kolkata), Little Flower Eye Hospital, Kochi (Kerala) and Narayana Nethralaya (Bangalore).</p>	No. of patients seen in YTD July '19	2252	No. of patients diagnosed on corneal abrasion	1482	No. of referrals	44
No. of patients seen in YTD July '19	2252						
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	<p>Faculty included Dr. Audrey Rostov (Seattle, WA) and Dr. Samar Basak (Kolkata), Dr Jatin Ashar (Kerala) and Rohit Shetty (Bangalore).</p> <p>In the month of June, surgeons could adopt skills obtained at a clinical training event at 78% against a target of 30%. Surgeon faculty and participants net promotor score was at 97 for the month of June.</p> <p>In July, an abbreviated skills transfer course in DMEK was conducted at Aravind Eye Hospital, Madurai. 6 surgeons were trained by Dr. Pravin Vaddavalli (Hyderabad, IN) and Dr. Marjan Farid (California, USA). The program has a net promotor score of 98 at this time. The alumni group of individuals has been able to directly adopt their skills at 80%.</p>
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### III - October - December 2019 Report

**Eye Bank Development:** As we head into the end of 2019, Eye Bank partners have recorded a 4.1% growth YTD over last year. Of our 24 partners, 9 partners are in trending in green ( $\geq 100\%$  of target) 2 in amber (between 95% - 99%) and 13 in red ( $< 95\%$ ) on a YTD basis. Against our annual target of 19,732 we stand at 17,756 at the end of November (90% of target).

After a great August, which was aided by a promotional scheme, we have seen a distinct uptick in activity over the last 3 months, we missed our monthly targets narrowly in September and October but have come back strongly in November. We would like to call out some great performances for the year; especially with Eye Bank society of Rajasthan (EBSR); Shroff Charitable Eye Hospital (SCEH) and Lions International Eye Bank, who have been consistent performers throughout the year. Similarly, kudos to RIEB (Ramayamma International Eye Bank) for a great turnaround in this quarter, wherein twice they have bested the 500-transplant milestone in a single month. Additionally, we are witnessing an improvement in Drishti Dhan Eye Bank (DDEB) and Eye Bank Association of Kerala (EBAK) performance as well. Aravind

group continues to deliver mixed performances - achieving targets in some months and underperforming in others.

November has been a very strong month for us where in we achieved 10% more than our monthly target, we are looking forward for a good December as a promotional scheme for eye bank staff is underway, which should get us closer to our annual target.

**KGMU UPCEB** has in the same period seen a pick-up in their performance. From a monthly achievement of around 60 in August, they have recorded 79 transplants in November, with a clear focus on improving tissue evaluation training by closer monitoring of the tissue evaluator and the fellows. We have also been able to secure permission for a dedicated space for counselors and recovery technicians operating at the mortuary.

**HCRP Performance:** HCRP contribution to monthly transplants continues to grow, from 70% in January to 74% in November. We have seen a healthy consistent achievement of monthly targets for HCRP (YTD 94% of annual target). This has been driven by good death notification rates (around 50%) and consistent consent rate at 52%. EDC productivity has improved to an average of 11.1 and utilization rate continues to be strong at around 75%. Suitability rate which has been at around 26% and is going to be a focus area for improvement in the coming year.

**Quality certification:** At the end of the current period, all 11 of the eligible partners in India are quality certified. In October, a certification panel meeting was conducted in which Rotary Arvind International Eye Bank, Madurai was re-certified for 2 years. During this period of reporting quality certification audits were conducted at KGMU and at Aravind, Coimbatore. Going forward the team is working towards launching a 3-year quality certification program from 2020 onwards.

**Cornea Distribution System:** The reporting period has been of impressive month on month performance of the CDS team. Not only have they consistently bettered their monthly targets; they have breached the milestone of 400 distributions in November after an all time high of 367 distributions in October itself. With this the team has successfully achieved their annual target (3400) in November. This performance has come during a period of major festivals and conferences, where both surgeon availability and patient flow gets impacted. Given the new normal in terms of availability of tissue, the team is actively working towards inducting new surgeons into the CDS system, where currently the surgeon database is already above 300.

**Eye Bank Skills Development:** In September, 18 EDCs were trained on donor screening to improve quality and consistency of medical chart review and donation eligibility decision making; and 8 EDCs trained in donation counseling skill development to improve quality of discussions with potential donor families across two eye banks. In October, two recovery technicians from Chitrakoot were trained as EDCs cum ERTs at our training center in KGMU. Moving forward in December, we have two training events scheduled at Sahiyara, our partner in Thane and at KGMU focused on training of different cadres in eye banking.

**Policy and Advocacy:** October saw active participation by SightLife team at the EBAI's annual conference and the global leadership summit. This was an opportunity to drive focus around creation of mandatory death notification systems; focus on building quality in eye banking and exploring interest around improving availability of tissue across the country through creation of holistic distribution systems.

**Prevention:** During this year our prevention work has expanded from one site in Sitapur district to two new sites taking the total coverage to 3 blocks in the district. A total of 634 ASHA workers have been trained to cover populations impacted across the three blocks. We are seeing a very healthy screening and treatment numbers as illustrated in the table below:

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- 1) No. of patients seen- 6008
- 2) No. of corneal abrasion cases diagnosed- 3718 (62% of all patients seen)
- 3) No. of referrals- 87
- 4) No. of patients who got healed at Community health workers level- 3631 (97.7% of call corneal cases diagnosed).

Going forward, we are looking at integrating Patient Discovery to our prevention work in partnership with Shroff's and rolling out at a site in Rajasthan.

**Clinical Programs:** During this period there were no training events organized in India. The focus has been on finalizing curriculum for DMEK training and initiating a comprehensive training program for general ophthalmologists and optometrists which is called Cornea Care Curriculum that focuses on building practitioner's ability to provide medical care before a patient needs surgical care. In Nov., we focused on supporting the work towards the pediatric workshop at LV Prasad in which 25 surgeons were trained.

## IV - January - March 2020 Report

**Eye Bank Development:** Plan for the year is 18,040 with 23 partners. NEB-AIIMS is now an alumni partner with us. The focus for the year is on run programs, leveraging enablers of policy (mandatory death notification); structured HCRP (including rollout of HCRP Guidebook); learning and development efforts for select partners' capacity building as trainers; building a mentor mentee model that leverages learning and capabilities of mature eye banks to help smaller upcoming ones.

Start of the year has been good – in the first two months we are 3,189 Tx on a YTD target of 3,017 (6% higher). Utilization rate is >55% but lower than targeted 60%. Several of our partners have had a good start to the year – SCEH, RIEB, DDEB, LIEB, KGMU. Our partners in Maharashtra had a better start to the year compared to the previous year. Select partners namely – EBAK and EBSR are plagued with internal challenges and key external factors are dragging them down compared to last year. Several small volume partners – GNEC, CLGEB, PGI, Gomabai are on track. The impact of COVID-19 is starting to show with supply reducing in some partner eye banks –RIEB, EBAK and two Maharashtra state partners, now but is likely to get worse.

**KGMU** had a good first two months at 185 on a plan of 158. With tissue evaluation issues getting resolved (training and certification of tissue evaluator and coordination of evaluation with residents), we are seeing

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a healthy pickup. As tissue availability improves, KGMU is collaborating with CDS to improve supply to UP state-based surgeons.

**HCRP:** Indicators are trending healthy with EDC productivity averaging at 10.1. Two new HCRP sites have been started on a plan for 8 for the year.

**CDS:** On a plan of 3,800 for the year, the first two months of 2020 have been better at 630 on a target of 612. Several of our partners have been supplying tissues higher than demand – RIEB, DDEB, LIEB, Aravind and SCEH making up for the deficit from EBAK and EBSR. We are keeping a close track of both supply and demand side issues, keeping in mind the coronavirus situation evolving in the country.

**Quality:** No audits were planned in January and February. The team focused on preparing for audits in March & April, which are now on hold. Quality team and Certification panel has decided to extend the certification duration of two Eye Banks to 6 months since re-certification visits could not be scheduled in March, travels are currently on hold due to COVID-19. The situation is currently monitored to schedule visits in the upcoming months. Online consulting to EBs continued with a focus on Mexico, Sri Lanka. The team has also spent considerable time in reviewing the SOPs and aligning it with updated guidance from EBAA in partnership with our team at HQ.

**Policy:** Focus has been to cultivate relationships to push Mandatory Death Notification in UP and Karnataka. At KGMU systems have been linked and the eyebank now receives email and SMS alerts of deaths occurring at the hospital. We are actively reviewing this and looking at improving the process to be able to increase consents and recoveries given that active follow-ups for deaths need not be done by the EDCs. In Karnataka, with the constant change of staff at different levels, we have to initiate efforts from scratch. We as a team are evaluating the option of moving our efforts to Rajasthan which was the third state of focus for the year. Meeting with the state health leadership and the district leadership at Alwar district has opened up options of a pilot prevention cum patient discovery program with SCEH. The state is also open to funding one third of the costs of the program for year 1 and one fifth for year 2 and 3.

**Prevention:** with the harvesting season in full flow, we have had a high number of corneal abrasion cases detected, treated and referred by ASHAs in the first two months across the 3 blocks of Sitapur. A total of 2,421 patients reached out to ASHA workers, of which 1,515 were corneal abrasion cases (63%). 1,492 cases were successfully treated and 23 were referred to the vision center or Sitapur Eye Hospital. The next round of refresher trainings is due in June and the team has spent considerable time in focusing on creation of a marketing and communication plan, remote monitoring tools and ensuring adequate supplies to ASHAs in India and FCHVs in Nepal.

**Clinical Training Programs:** No in-country trainings were planned during this period. The focus of the team has been on curriculum development and refinement of our Pediatric and Continuum of Care (CCC) programs.

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