

LIONS ARAVIND INSTITUTE OF COMMUNITY OPHTHALMOLOGY

Review and Development of Actionable National Plans for the South East Asian Region: A Vision 2020 Regional Workshop

September 24 - 26, 2009

Data Sheet

Country		Sri Lanka				
Population of service Area:		21,128,773			CSR:	3,750
Eye Care area	Rate	Per	Potential Need	Annual Target	Currently Treated	New Targets
Cataract Surgery	11,000	1,000,000	232,417	110,000	79,233	110,000
Spectacles	15.3%		3,230,114	100,000	10,000	100,000
Diabetes Prevalence	3.40%		718,378	0		
- Diabetic Retinopathy	20.00%		143,676	50,000	20,000	
Glaucoma Patients	1	100	211,288	35,000	25,000	
Incurably Blind	1	1,000	21,129	0	0	
Low Vision Persons	1	100	211,288	0	0	
Trachoma						

HR Need - based on Population & above annual workload

Human Resource Category	Rate	Per	Unit	Total Need	Current Availability	HR Gap	*Desired Annual Output	Annual training capacity	Targets
Ophthalmologists	1	1,600	Cataract Surgeries	145	51	94	12	5	80
Hospital Based Ophthalmic Assistants	4.5	1	Ophthalmologist	654	121	533	67	15	400
Community Based Vision Center Technicians	1	50,000	Population	423	0	423	53	0	0
Optometrists	2	100,000	Population	423	0	423	53	0	0
Eye Care Managers	1.5	1,000,000	Population	32	4	28	4	0	9
Instrument Maintenance Technicians	1.5	1,000,000	Population	32	0	32	4	0	0

LIONS ARAVIND INSTITUTE OF COMMUNITY OPHTHALMOLOGY				
Review and Development of Actionable National Plans for the South East Asian Region: A Vision 2020 Regional Workshop				
September 24 - 26, 2009				
Country Name:	Sri Lanka			
Strategy Area	Human Resources and Training			
Where do we want to be	110000 Cataract Surgeries	Category		
	Ophthalmologists	Internal	Policy decision	Financial Implication
Action Point : 1	Study the reasons for the suboptimal utilisation of the Ophthalmologists and discover areas to address			√
Action Point : 2	Having dedicated OT for ophthalmologists to operate			√
Action Point : 3	Monitoring mechanism for the outcome of cataract surgery		√	
	MLEP			
Action Point : 1	Do a situation analysis and find out the gap existing in the ratio of MLEPs to Ophthalmologists and take the necessary action to fill the			√
Action Point : 2	Ensure optimal utilisation of the available staff (looking at the workload shift the MLEP to other places if necessary)	√		
	Managers			
Action Point : 1	Appointing eye care managers for all the provinces (currently only 3 out of 9)		√	
	Training Capacity			
Action Point : 1	Double the training capacity for MLEPs (Currently 15/year)			√
Action Point : 2	Increase the intake capacity of post graduates in ophthalmology		√	
Action Point : 3	Train more of the primary health workers in primary eye care	√		
	HR Distribution Issues			
Action Point : 1	Produce more eye surgeons to address uneven distribution		√	
Action Point : 2	Continue the rural posting policy in order to ensure the availability of eye surgeons in unreserved areas		√	
	Research : Evidence to Enhance Human Resource Utilisation			
Action Point : 1	Study the reasons for the suboptimal utilisation of the Ophthalmologists			√
Action Point : 2	Situation analysis for the MLEP distribution			√

LIONS ARAVIND INSTITUTE OF COMMUNITY OPHTHALMOLOGY				
Review and Development of Actionable National Plans for the South East Asian Region: A Vision 2020 Regional Workshop				
September 24 - 26, 2009				
Country Name:	Sri Lanka			
Strategy Area	Enhancing Access			
Where do we want to be	110000 Cataract Surgeries	Category		
	Infrastructure	Internal	Policy decision	Financial Implication
Action Point : 1	Organising more outreach Screening in underserved areas			√
Action Point : 2	The Vision 2020 programme requires more specific fund rising to support the purchase of equipments, consumables, to improve transport facilities			√
Action Point : 3	Start more Eye OTs in the District General Hospitals (renovate the existing facilities/build new)			√
	HR requirement to enhance access			
Action Point : 1	Each hospital taking a care of a particular area to organise outreach screening (a campaign approach)			√
Action Point : 2	Work with the primary healthcare workers in identifying and referring the patients	√		
	Diseases Specific(Subsidie,Insurance,Financing Mechanism, Referral)			
Action Point : 1	Start screening among patients coming to the general clinics for Glaucoma and Diabetic Retinopathy (Government funding)			√
Action Point : 2	Start optical dispensing facilities in the district hospital premises		√	
	Awareness creation			
Action Point : 1	Start more health promotion activities with reference to problems other than Cataract (mainly through the primary health care workers)	√		
Action Point : 2	Use of mass media to create awareness in the community	√		
Action Point : 3	Observance of World Sight Day in collaboration with mass media	√		
	Research : Evidence to Enhance Access			
Action Point : 1	Plan to do a series of RAAB			√
	Policies related to enhance access (Current Policies & Lack of Policies)			
Action Point : 1	Get more INGOs or Corporates involved with the government in raising funds in order to create access	√		

LIONS ARAVIND INSTITUTE OF COMMUNITY OPHTHALMOLOGY				
Review and Development of Actionable National Plans for the South East Asian Region: A Vision 2020 Regional Workshop				
September 24 - 26, 2009				
Country Name:	Sri Lanka			
Strategy Area	National & Regional Structures			
Where do we want to be	110000 Cataract Surgeries	Category		
	Structure to Create Government Commitment	Internal	Policy decision	Financial Implication
Action Point : 1	Strengthen the Central HR team for Eye Care		√	
Action Point : 2	Strengthen the logistic support for Eye Care activities (office space, vehicle etc.)			√
Action Point : 3	Strengthening of the Vision 2020 team at the provincial and district level to carry out the programmes effectively with active participation (having participation from the RDHS)	√		
	Leveraging Private & Voluntary Sector			
Action Point : 1	Leverage the INGOs and corporate sector in delivering services in subspecialty areas			√
Action Point : 2	Develop a district eye care model in collaboration with the Kaluthara School of Public Health with support from INGOS	√		
	Coordination Mechanism			
Action Point : 1	Have more support staff to coordinate the programmes well (currently the Vision 2020 coordinator himself has to do everything by	√		
Action Point : 2	Strengthen the intra and inter disciplinary relationships in order to get the optimal outcome of the programmes (e.g. coordination with	√		
	MIS/Project Implementation System			
Action Point : 1	Strengthen the monitoring and evaluation mechanism (analyse the periodical reports and giving feedback)	√		
	Communication Process			
Action Point : 1	Discuss in the steering committee meeting the major ideas generated during the consultation at Aravind	√		
Action Point : 2	Hold meetings with the 6 focal points of Vision 2020 and the NGOS to roll out the plan	√		
Action Point : 3	Include these points in the agenda of the steering committee meeting in January	√		