

# **NATIONAL PROGRAMME FOR CONTROL OF BLINDNESS**

## **(1) INTRODUCTION**

National Programme for Control of Blindness [NPCB] was launched in the year 1976 as a 100% centrally sponsored programme with the goal of achieving a prevalence rate of 0.3% of population by 2020. The strategy of the programme is :

- ***To identify the curable blinds in the State;***
- ***By Strengthening service delivery;***
- ***Developing human resources for eye care;***
- ***Promoting outreach activities and public awareness and***
- ***Developing institutional capacity.***

*The implementation of the programme was decentralized in 1994-95 with formation of District Health Society in each district of the country. The Government of India has been issuing guidelines from time to time to utilize the funds released to the District Health Society in an effective and efficient manner. The District Health Society is expected to enhance the coverage and improve quality of eye care services in the district.*

### **Grant in Aid**

**The NPCB is funded by GOI.** The funds will be released by the GOI to State Blindness Control Society (or State Health Society) Punjab. The funds will be released by GOI based on the Annual Action Plan submitted. GOI will release funds in two equal installments in a financial year, first installment will be equivalent to 50% of the Plan budget. The second installment will however be released on basis of progress made and expenditure incurred during the financial year. The funds provided to State Health Society will be distributed to District Health Societies as per requirement and district plan of action. The following documents pertaining to the previous financial year are required by 30<sup>th</sup> June of the current financial year:

- a) Statement on performance and expenditure
- b) Audited Statement of Accounts
- c) Utilization Certificate
- d) State Annual Action Plan for the current financial year.

### **Procurement of Goods**

The DBCS is permitted to procure consumables including the Drugs, Medical and instruments required for ophthalmic surgery in Govt. facilities which have been notified as base hospitals for eye care services. This may include DHs, SDHs and CHCs, where

Eye Surgeons are posted.

The District Health Society will be required to constitute a purchase committee comprising of CMO, district ophthalmic Surgeon, DPM and officer of the another deptt. preferably having knowledge of procurement and financial procedures to procure the items required by the District Health Society. **The evaluation of the bids should not be based on the criteria of lowest cost alone but the quality should also be considered.**

**Provision of spectacles :** Students with refractive errors who cannot afford to pay for spectacles would be got made by District Health society to the maximum upper limit of Rs.200/-. The price of spectacles must be fixed based on an open tender basis ensuring quality of glasses as per specifications (English Glass) at a competitive price

### **Objectives of NPCB**

1. To reduce the backlog of blindness through identification and treatment of blind
2. To develop Comprehensive eye care facilities in every district.
3. To develop human resources for providing eye care services.
4. To improve quality of service delivery.
5. To secure participation of Voluntary organizations/Pvt.Eye surgeons in eye care
6. To enhance community awareness about eye care.

### **Activities**

1. 100 percent achievement of Cataract operations of which 95% will be IOLs and 5% for simple cataract surgeries.
2. Annual Eye check up of all incumbents of blind schools covering the visual acuity, fundus examinations and other appreciate advance tests required to assess chances of visual restoration. Eye check up of applicants who desire to seek admission in a blind school and issue of certificate of incurable blindness recommending admission to a blind school. No person would be admitted to blind school without this certificate. Eye check up of the incumbents of blind schools including special investigation. Low vision Aids are to be provided to selected blind school students.
3. Follow up of treated cases as per recommendation of ophthalmic board.
4. Rehabilitation of incurable blind would be as per scheme of department of social welfare.
5. Ophthalmic Assistants @ Rs. 8000pm and Eye counselors @Rs. 10,000pm have been appointed.

## **Financial Assistance**

District Blindness Control Society would be empowered to use GOI grant released under NPCB to meet expenses on the following:

1. Eye Check up of incumbents of blind school including special investigations;
2. Medical and/or surgical treatment of referred cases including medicine prescribed after treatment/surgery.
3. Low vision Aids and/or spectacles prescribed.
4. TA/DA to members of the Board for travel relating to the scheme.

## **Focus in 2011-12**

1. Eye collection centers to be established in all the districts of the State.
2. To achieve 100% target of cataract operations.
3. To provide following eye equipments at Sub Divisional Hospitals for effective eye care services:  
Slit Lamps, A-scan, operating Microscopes, Keratometers, vision drum (Distant and near) Trial Frame, Trial Set, Motorised surgical Chairs & Motorised Operation Tables.
6. Strengthening of Vision Centers in all districts of the State.

## **(2) STRATEGY OF 11<sup>TH</sup> PLAN**

### **Proposed pattern of assistants and strategy for 11th plan**

- a) Funds for implementation of the programme would be released by Govt. of India to State Health Societies (NPCB) in the form of Grant in Aid.
- b) Increase in assistance for commodity to various facilities to increase their capacity for treatment of all types of eye ailments.
- c) Facility for IOL implantation expanded up to Taluka level.
- d) Marginal increase of grant in aid to Eye Banks, Eye Donation Centres and NGOs due to escalation of costs and to improve quality of services.
- e) In addition to cataract, assistance would also be provided for other eye diseases liked Diabetic Retinopathy, Glaucoma Management, Laser Techniques, Corneal Transplantation, Vitreoretinal Surgery, Treatment of Childhood blindness etc.
- f) Assistance for construction of dedicated Eye wards and Eye Operation Theatres in North East States and few other states as per need.
- g) Assistance for appointment of ophthalmic manpower – ophthalmic surgeons, ophthalmic Assistants and Eye Donation Counselors on contractual basis.

- h) Assistance for involvement of Private Practitioners in sub-district, block and village levels.
- i) Assistance for maintenance of ophthalmic equipments supplied under the programme.
- j) Development of Mobile ophthalmic units with Tele-ophthalmology Network and some fixed tele-models to cover difficult hilly terrains and difficult areas.
- k) Critical posts of 228 Eye Surgeons and 510 ophthalmic Assistants sanctioned during the 9<sup>th</sup> plan and continued during 10<sup>th</sup> plan, would be integrated within the State Plan in a phased manner during the current plan period.
- l) Strengthening of Management Information system (MIS).
- m) Intensification of IEC activities.

### **Strengthening/setting up of Regional Institutes of Ophthalmology**

Non-recurring assistance upto Rs. 60 lakh for new RIOs and Rs. 40 lakh for existing RIOs for providing ophthalmic equipments for developments of pediatric eye units/ low vision units/ retina units, audio visual aids and training infrastructure, IOL Surgery & all other Sub specialties etc.

### **Strengthening of Medical Colleges**

Non-recurring commodity assistance upto Rs. 40 lacs for providing ophthalmic equipments as commodity assistance for development of paediatric eye units/ low vision units/retina units.

### **Strengthening of District Hospitals**

Non-recurring commodity assistance upto Rs. 20 lacs for Ophthalmic Equipments for IOL Surgery.

### **Vision Centres at PHCs/ in Vol. Sector**

Non-recurring assistance upto Rs. 50,000 for basic equipments, furniture and fixtures, GIA to DBCs would be used for Vision Centres at PHCs. For Voluntary Sector, assistance would be provided as GIA.

### **Support to Eye Banks in Government/Voluntary Sector**

Non-recurring assistance upto Rs. 15 lakh for equipments and furnishing towards strengthening/developing eye bank by GOI.

## Support to Eye Donation Centres in Government/Voluntary Sector

Non-recurring Assistance upto Rs. 1 lakh for strengthening/developing Eye Donation Centre.

Recurring assistance of Rs. 1000 per pair of eyes collected towards honorarium of eye bank staff, consumables including preservation material & Media transportation/travel cost/POL and Contingencies, Recurring GIA would be paid through Affiliated Eye Banks.

### (3) FINANCIAL & PHYSICAL STATUS

#### **". Achievement of National Programme for Control of Blindness for the year 2010-11**

#### **Physical Performance**

ACHIEVED 114.0% OF CATARACT OPERATION

<b>Cataract Operation</b>			<b>IOL Implantation</b>		
<b>Target of the year</b>	<b>Performance</b>	<b>% of achievement</b>	<b>Target for the year</b>	<b>Performance</b>	<b>% of achievement</b>
1,80,000	2,05,170	114.0	1,71,000	1,88,807	110.4

#### **School Eye Screening**

<b>Particulars</b>	<b>Performance</b>
School Children Screened by DBCS	<b>6,57,714</b>
School Children Detected with Refractive errors	<b>58,103</b>
No. of Free Spectacles given to Children	<b>39,287</b>
Teachers Trained	<b>32,749</b>
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### **Eye Banking**

No. of approved Eye Banks	=	08
No. of Approved Eye Donation Centres procured	=	01 ( 05 more likely to Eye Balls = 1,003
No. of Keratoplasties Done	=	725

### **Report of Phaco Utilization : 4400**

### **Report of YAG Laser utilization : 312**

### **Other Eye Diseases (cases treated)**

1. Glaucoma : 2192
2. Diabetic Retinopathy : 823
3. Laser Tech. : 1108
4. Corneal Transplantations : 725
5. Childhood Blindness : 348
6. Squint Surgery : 54

### **Expenditure Report**

District Health Society (NPCB) : 1,99,20,417

State Health Society (NPCB) : 76,58,012

### **Status of procurement of Eye Equipments worth about Rs. 7 crore is as under:-**

- 1) Equipment installed in GMCs Amritsar & Patiala and 11 YAG Lasers, 20 Auto-refractometers installed in District Hospitals.
- 2) Consumables & Refraction sets, 20 Flash Autoclaves, Surgical tables/ stools, Slit Lamps, Microsurgical instruments, LED Scrolls, 25 microscopes, 25A- Scans, 25 Keratometers is in process with Procurement Branch (NRHM)

## Planning for the year 2011-12

Activity	Target	Time Schedule			
Physical performance		I <sup>ST</sup> Quarter	II <sup>ND</sup> Quarter	III <sup>RD</sup> Quarter	IV <sup>TH</sup> Quarter
Cataract	1,60,000	40,000	40,000	40,000	40,000
IOL	1,52,000	38,000	38,000	38,000	38,000

Recurring GIA to District Health Societies for NGOs for performing free cataract operations and other Intra-ocular Surgeries @750/-per patient.

Grant-in-Aid for NGOs for management of other Eye Diseases (other than Cataract) like Diabetic Retinopathy, Glaucoma Management, Laser Techniques, Corneal Transplantation, Vitreoretinal Surgery, Treatment of Childhood Blindness etc. is Rs. 1000 per case.