A STUDY ON POST OPERATIVE REVIEW AND REFERRAL OF SPECIALTY AND COMMUNITY EYE CARE SURGERIES THROUGH SANKARA VISION CENTERS

Dissertation Submitted To

The IIHMR University, Jaipur

1, Prabhu Dayal Marg, Sanganer, Airport

Jaipur-302029, Rajasthan

Ph.: 0141 3924700, Fax: 3924738

Website: www.iihmr.edu.in

For the partial fulfillment for the award of the degree of

Master of Business Administration (MBA)

in

Hospital and Health Management (HHM)

Academic Year: 2020-2022

By

Aditya Saha

Under the Supervision and Guidance of

Dr. Anoop Khanna

2022

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DECLARATION BY STUDENT

I hereby declare that this dissertation titled **"A study on post operative review of specialty and community eye care surgeries through Sankara Vision Centers"** is the bonafide record of my original research work. I declare that it has not been submitted to any other university or institution for the award of any degree or diploma. Information derived from the published or unpublished work of others has been duly acknowledged in the text.

(Signature)

Aditya Saha (1053)

MBA HM-25

Date:

www.sankaraeye.com

SRI KANCHI KAMAKOTI MEDICAL TRUST
SANKARA EYE HOSPITAL

INTERNSHIP COMPLETION CERTIFICATE

The certificate is awarded to

Mr. Aditya Saha

In recognition of having successfully completed his Internship in the department of

OPERATIONS

and has successfully completed his Project on

A STUDY ON POST OPERATIVE REVIEW AND REFERRAL OF SPECIALITY AND COMMUNITY EYE CARE SURGERIES THROUGH SANKARA VISION CENTERS AT SANKARA EYE FOUNDATION,INDIA

1ST APRIL 2022 to 30TH JUNE 2021

Organization: SANKARA EYE HOSPITAL, COIMBATORE

He comes across as a committed, sincere & diligent person who has a strong drive and zeal for learning

We wish him all the best for future endeavours

Ms Srini Karthikeyan
(Chief People Officer)

Mr Bharath Balasubramanian
(President – Operations)

CERTIFICATE OF COMPLETION (Organization)

This is to certify that **Aditya Saha (Roll No.: 1053)** in partial fulfillment of the requirements for the award of the degree of Master of Business Administration (MBA) in Hospital and Health Management (HHM) from the IIHMR University, Jaipur has successfully completed his internship at **Sankara Eye Hospital, Coimbatore** during April 1st, 2022 to June 30th, 2022.

Place:

Date: (Preceptor/Head of the Organization)

Sankara Eye Hospital, Coimbatore

CERTIFICATE (From Faculty Guide and School Dean)

This is to certify that dissertation titled **"A study on post operative review of specialty and community eye care surgeries through Sankara Vision Centers"** is a record of the research work undertaken by **Aditya Saha (Roll No.: 1053)** in partial fulfillment of the requirements for the award of the degree of Master of Business Administration (MBA) in Hospital and Health Management (HHM) from the IIHMR University, Jaipur under my guidance and supervision and her approach to the research study has been sincere, scientific, and analytical.

(Faculty Guide)	(School Dean)
Dr. Anoop Khanna	Dr. Dhirendra Kumar
Dean Research & Associate Professor	Professor & Dean- Academic and Student Affairs
IIHMR University, Jaipur	IIHMR University, Jaipur
Date:	Date:

Abstract

There are around 21 million blind or visually impaired persons in India. 15 million of these 21 million people reside in rural areas. Blindness has significant negative effects on people and communities. In addition, India is one of the nations with a doctor deficit, with just 12,000 ophthalmologists, the majority of whom focus their practise exclusively in metropolitan regions. The only means of properly regulating visual impairment for those who cannot access tertiary eye care facilities is the presence of effective eye care services. It is also crucial to comprehend the effects of such eye care service providers (vision centers) working nationally for rural residents and regularly assessing their effectiveness to ensure that the greatest number of those in need benefit from it and avoidable blindness is prevented.

This study was under taken to analyze the performance of all vision centers of Sankara Eye Foundation across India for which an observational cross-sectional analytical study was conducted at Sankara Eye Hospital, Coimbatore with three objectives which were; to identify the underperforming and best performing Vision Centers of Sankara Eye Foundation, India, to compare and identify the reasons for underperformance of Vision Centers from those which are performing well and to identify and suggest strategies to improve functioning of underperforming vision centers of Sankara Eye Foundation.

With the help of observational analysis, I am going to assess the post of Follow ups through Vision Center and referral Report in the base hospital. I am also going to assess so that no patient misses their regular follow up. I am going to make a tool so that it will be easy to make regular post OP follow up and also the referral report.

B. Acknowledgement

This report is the end product of twelve weeks during which several employees from various departments mentored me. It's a nice chance to let them all know how grateful I am.

I would like to extend my sincere appreciation to **Mr. Bharath Balasubramaniam, President-Operations and Administration**, for giving me the chance to study and enabling me to successfully finish this report.

I would like to extend my sincere appreciation to my mentor, **Mr. Kowsik Krishnamoorthy, Manager of Operations and Partner Relations**, for his direction and frequent monitoring, as well as for giving the report's required information and aid in its effective completion.

I also want to express my gratitude to **Mr. Sudhir Sudhal, the head of the Vision Center**, for providing consistent support and direction throughout the period.

I would like to extend my sincere appreciation to the Vision Center Unit Heads, Sisters, and other working staff members who assisted me in finishing the project and gaining departmental knowledge. I am grateful to Dr. Anoop Khanna, Professor and Mentor at IIHMR, for instilling in me the appropriate attitude toward studying and for aiding and support when needed.

Without expressing special gratitude to my friends for their assistance and support in the creation of this report, the list would be lacking.

Aditya Saha

Table of Contents

List of Symbols and Abbreviations:

ABBREVIATIONS	***FULL FORM***
BH	Base Hospital
FY	Financial Year
OPD	Outpatient Department
Spec	Spectacle Collection
TP	Total Population
VC	Vision Center
VT	Vision Technician
VHV	Village Health Visitor

Chapter-01: Introduction

Sankara Eye Foundation India (SEFI) is a Not-for-Profit organization committed to provide quality eye care services to the poor and marginalized sections of the society since last 45 Years. Started as a small primary health care center in the year 1977 by Dr R.V. Ramani and Dr Radha Ramani, today Sankara is one among the largest and fastest growing social enterprise with a group of 12 hospitals equipped with world class facilities & robust Infrastructure and catering to the rural & the urban population.

Sankara's Community Outreach Model is a unique, replicable & sustainable model which has transformed over ten million lives since inception and continues to do so.

While Ssnkara's Pan India footprint is expanding, serving more States and Districts, it has been realized that Primary Eye Care is very important especially at the Village level, for which the concept of Vision Centers has been introduced across all Sankara Units. Today SEFI is having 16 vision centers spread across 7 states in the country. These vision Centers are located in the states of Tamil Nadu, Madhya Pradesh, Karnataka, Gujarat, Rajasthan, Punjab and Uttar Pradesh. In the upcoming years SEFI is planning to add more units and vision centers in other states of country to achieve the goal of "Eradicating Preventable Blindness" across the country.

Since the past 45 years, Sankara Eye Foundation India (SEFI), has worked to offer the underprivileged and underserved segments of society with high-quality eye care services. Beginning as a small basic healthcare facility in 1977 under the direction of Dr. R.V. Ramani and Dr. Radha Ramani, Sankara is now among the largest and fastest expanding social enterprises, with a network of 12 hospitals offering top-notch services to both the rural and urban populations. For setting up these Vision Centers, SEFI invests a huge amount of Capital (Approx. 13.5 Lakhs capital expense and 9.3 lakhs recurring expenses) for each vision center just to provide quality eye care treatment to all sections of the society but especially to the poor and needy. Therefore it is very necessary to keep a regular check on the performance of all the vision centers of SEFI across India.

The Purpose of Conducting this study was to analyze the post OP follow-ups and referral report of all vision centers of Sankara Eye Foundation across India with the aim

- To analyze post operative review – follow up process in Sankara's vision center and design a tool to track the patients (Paying and non – paying).
- To analyze the referral report and design a tool for proper follow up.
- To suggest strategies to improve post OP follow up in Sankara's Vision Center.

1.1- Overview of Sankara Eye Hospital's Vision Centers:

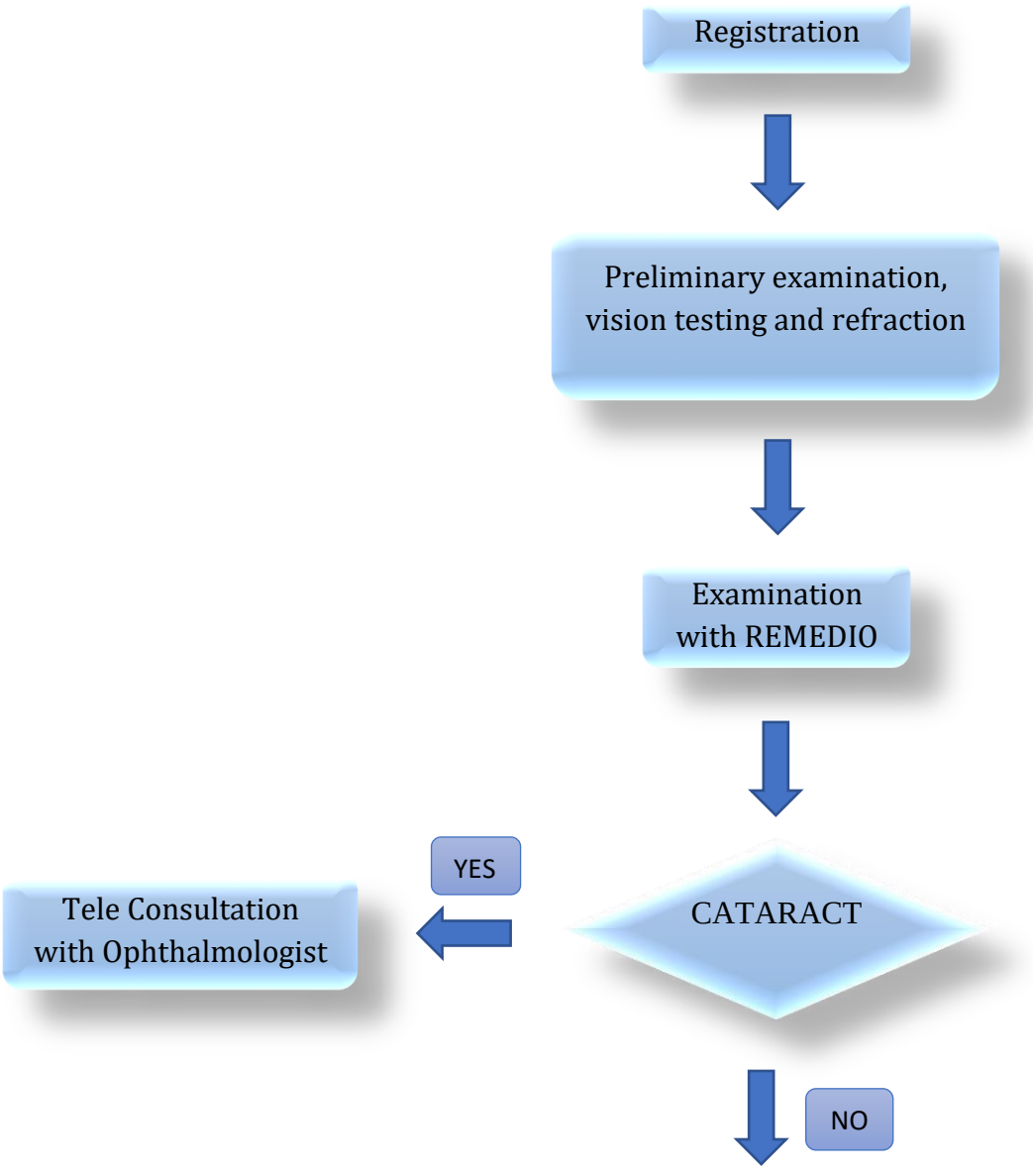
Sankara's Vision Centers serve as Satellite Primary Eye Care Centers, which are small, permanent facilities designed to offer affordable primary eye care services to semi-rural

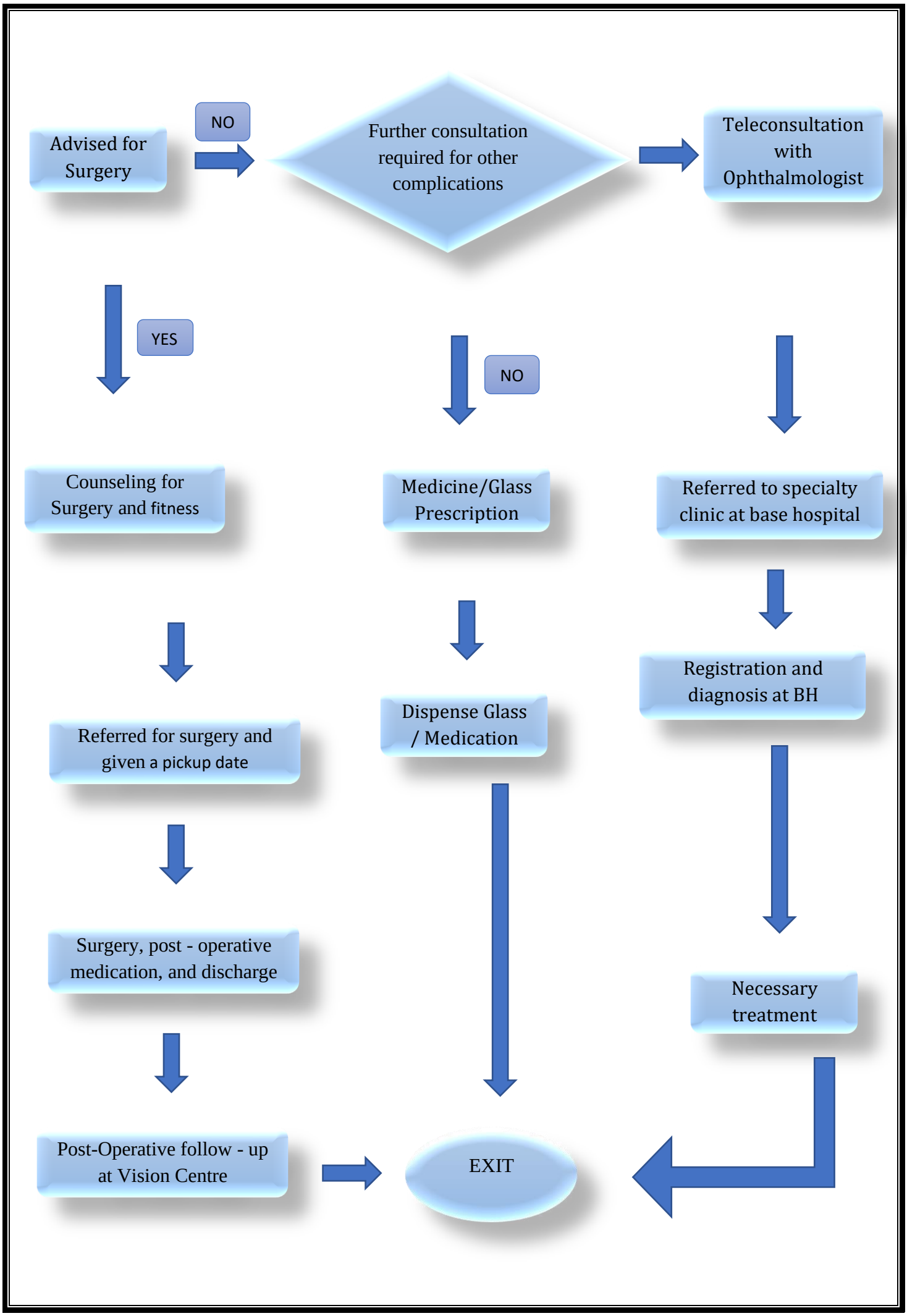
and rural communities. They serve as the general public's first point of contact for comprehensive eye care services delivered by a single skilled eye care professionals. The facility is often run by optometrists in ophthalmology. Every day, an optometrist screens the patients, and secondary and tertiary consultations are conducted with the base hospital through tele-ophthalmology. Patients who are found to have refractive errors are given glasses. Patients who need surgery are advised by the councilor and taken to the Base Hospital for further care. The Sankara Eye Foundation now operates 36 vision clinics throughout India.

1.2 - Vision Center timing:

Days	Time
All Weekdays	9 am to 6 pm
Sunday	Weekly Off

1.3 – Activities and process flow:




Advised for Surgery
NO
Further consultation required for other complications
Teleconsultation with Ophthalmologist
YES
NO
Counseling for Surgery and fitness
Medicine/Glass Prescription
Referred to specialty clinic at base hospital
Referred for surgery and given a pickup date
Dispense Glass / Medication
Registration and diagnosis at BH
Surgery, post - operative medication, and discharge
Necessary treatment
Post-Operative follow - up at Vision Centre
EXIT

Chapter-02- Review Literature:

Sr. No	Journal & Date	Title	Authors	Salient Features
1	Indian Journal of Ophthalmology (Sep-Oct 2012)	Key factors determining success of primary eye care through vision centers in rural India: Patient's Perspective	Kovai et al (2012)	The study concluded that a competent VC might raise patient satisfaction. However, patients' expectations go beyond the provider to include things like their capacity to pay and easy transportation that makes it simple for them to go to the VC.
2	Indian Journal of Ophthalmology (Sep-Oct 2010)	Comparison of patient satisfaction with services of Vision Centers in rural areas of Andhra Pradesh, India	Kovai et al (2010)	According to the study, the overall satisfaction levels with the Vision Center's experience were determined to be 74 percent and 62 percent, respectively. Service times, employee performance, costs, and the quality of vision treatment must all be continually improved, particularly in more outlying primary eye care facilities.
4	Community Eye Health Journal (Sep-2007)	Delivering refractive error services: primary eye care centers and outreach	Kovin Naidoo and Dhivya Ravilla (2007)	The analysis revealed that screening through vision centres in schools and communities is crucial to increase patient numbers and make sure that physicians' time is used effectively. Additionally, outreach programs have the ability to raise awareness and provide

				immediate needs in underserved distant places.
7	Indian Journal of Ophthalmology (Feb 2020)	Primary Eye Care in IndiaThe Vision Center Model	Rohit C Khanna, Shalinder Shabarwal, Asim Sil, Mohammad Growth, Kuldeep Dole, Subeesh Kuyyadyil, Hedi Chase	The delivery of PEC models in India, especially via the vision centre (VC) method, is the main topic of this article. Primary Eye Care Centers (PECs) are offered in far-flung rural parts of the nation by VCs, who are a part of a broader eye care network. When establishing a VC, factors including population size, accessibility, community involvement, and nearby competition should be taken into account.
8	Community Eye Health Journal (July 2016)	Eye Care in Rural Communities Reaching the Unreached in Sundarbans	Sameera Ahmed	The study points out that for any VC to be successful it should be locally operated, rate should be subsidized, young people should be volunteered to create awareness among the masses, registered Medical Practioners should be involved and continuous technology-based monitoring of the patients should be done

9	Community Eye Health Journal	Optical products for refractive error and low vision	Kovin S Naidoo Yashika I Maharaj, Vivasan Pillay, Sebastian Fellhauer	The study emphasises the need of concentrating on the optical products needed for the proper delivery of refractive error and poor vision services and providing insight into how they may be handled successfully to offer a quality service in order for any Vision Center to be successful. Knowing the proper source and understanding what your consumer wants and can afford are equally crucial.

2.1 – Research Question:

- What is the post OP surgery pattern and their follow up in the vision center of Sankara Eye Hospitals?
- What are the referral pattern and reason for low follow up among referral cases in Sankara Vision Center?

2.2 - Aim: To analyze post operative review of specialty and community eye care surgeries of vision centers of Sankara Eye Foundation India and suggest strategies to improve their functioning.

2.3 - Objective:

- To analyze post operative review – follow up process in Sankara's vision center and design a tool to track the patients (Paying and non – paying).
- To analyze the referral report and design a tool for proper follow up.
- To suggest strategies to improve post OP follow up in Sankara's Vision Center.

Chapter 3 – Methodology

3.1 – Source of data:

Secondary data was collected from the vision center and remaining data was taken from the Medics and MocDoc software.

3.2 – Study type – Observational Study

3.3 – Study duration - April 2022 – June 2022

The study was conducted in the duration of three months where an observational study was done at Sankara Eye Hospital, Coimbatore (Tamil Nadu) and a systematic search was done to collect secondary data from various sources like medics and mocdoc software of Sankara Eye Hospital.

3.4 – Study Area - Sankara Eye Hospital Coimbatore, Tamil Nadu and 2 vision centers (Ranebennur and Channagiri).

3.5 – Sample Size – 553 Patients who are coming through Vision Center to the base hospital for eye surgery.

3.6 – Inclusion Criteria – It includes all the paying and non – paying patients who come to the hospital through vision centre for their surgery.

3.7 – Exclusion Criteria - It excludes all the patients who came directly to the hospital or referred from the camp for the surgery.

3.8 – Analysis Plan – Statistical analysis with graphical representation.

3.9 – Data Collection Method – Secondary data was collected from the Medics and Mocdoc software whereas some data was collected from the Vision Center staff.

Chapter 4 – Result

As per Master sheet Data (Non – Paying Surgery)

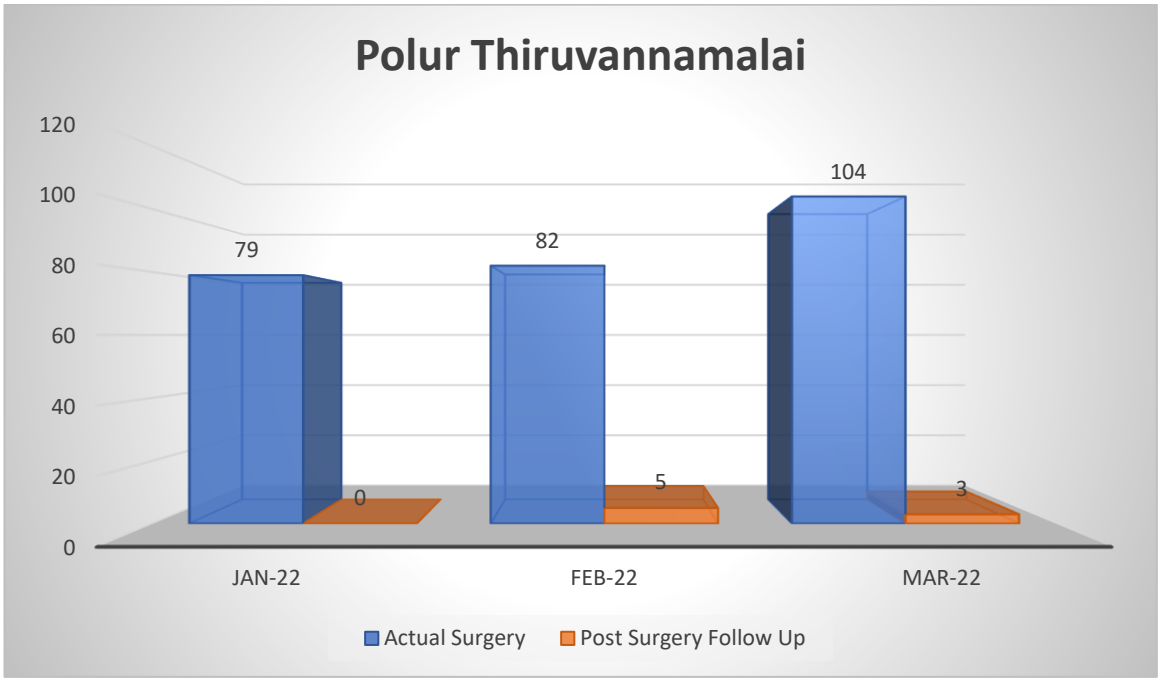


Fig: 4.1 - Number of actual surgeries and post-surgery follow-up since – 1st Jan 2022 – 31st March 2022

Fig: 4.1 According to this graph it depicts that on the month of January 79 surgery was done followed by on the month of February and March 82 and 104 surgery was done respectively. But the follow up was done in the month of January, February and March are 0, 5 and 3 respectively.

As per Master sheet Data (Non – Paying Surgery)

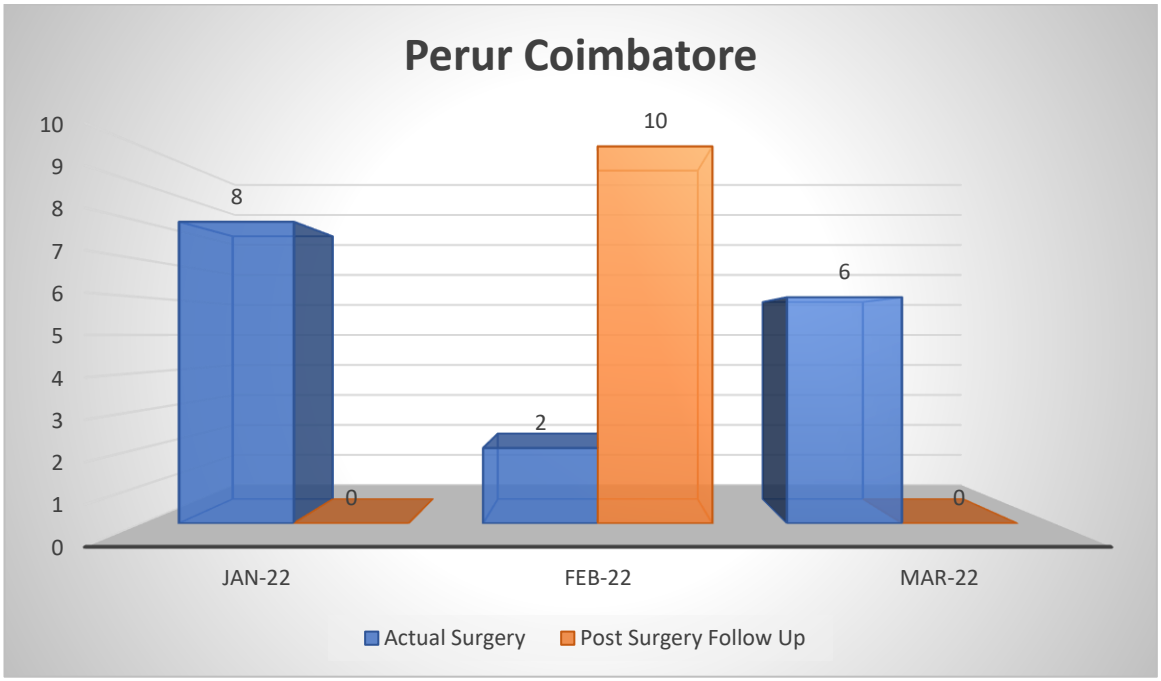


Fig: 4.2 - Number of actual surgeries and post-surgery since – 1st Jan 2022 – 31st March 2022

Fig: 4.2 According to this graph it depicts that on the month of January 8 surgery was done followed by on the month of February and March 2 and 6 surgery was done respectively. But the follow up was done in the month of January, February and March are 0, 10 and 0 respectively.

As per Master sheet Data (Non – Paying Surgery)

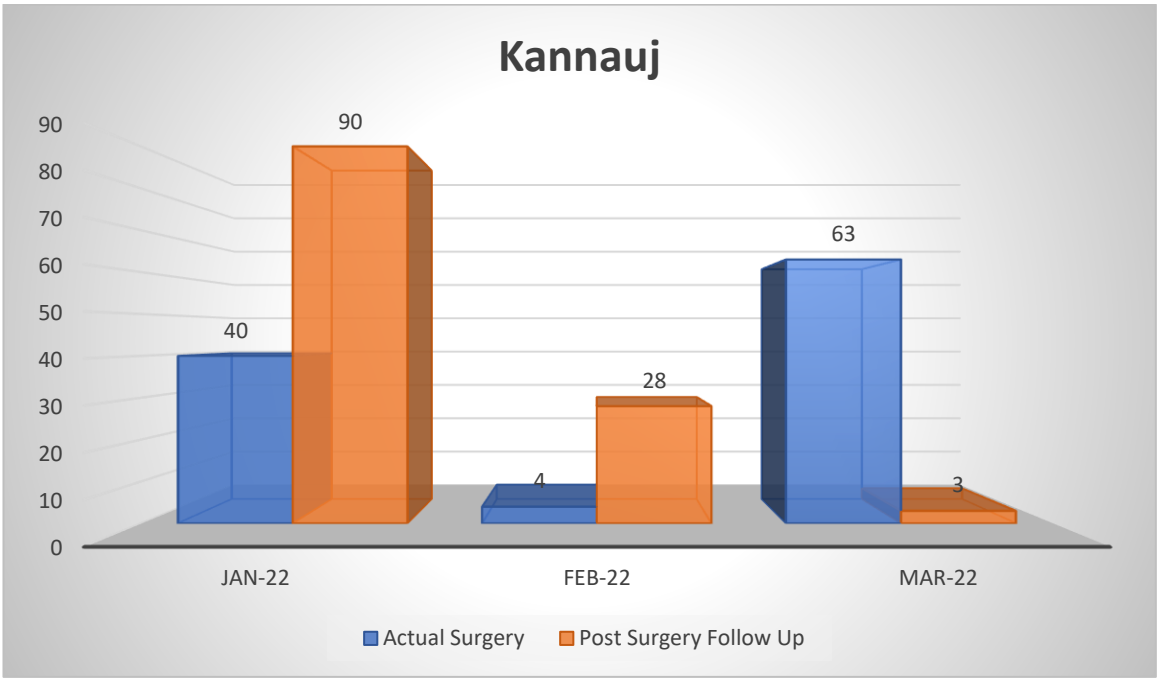
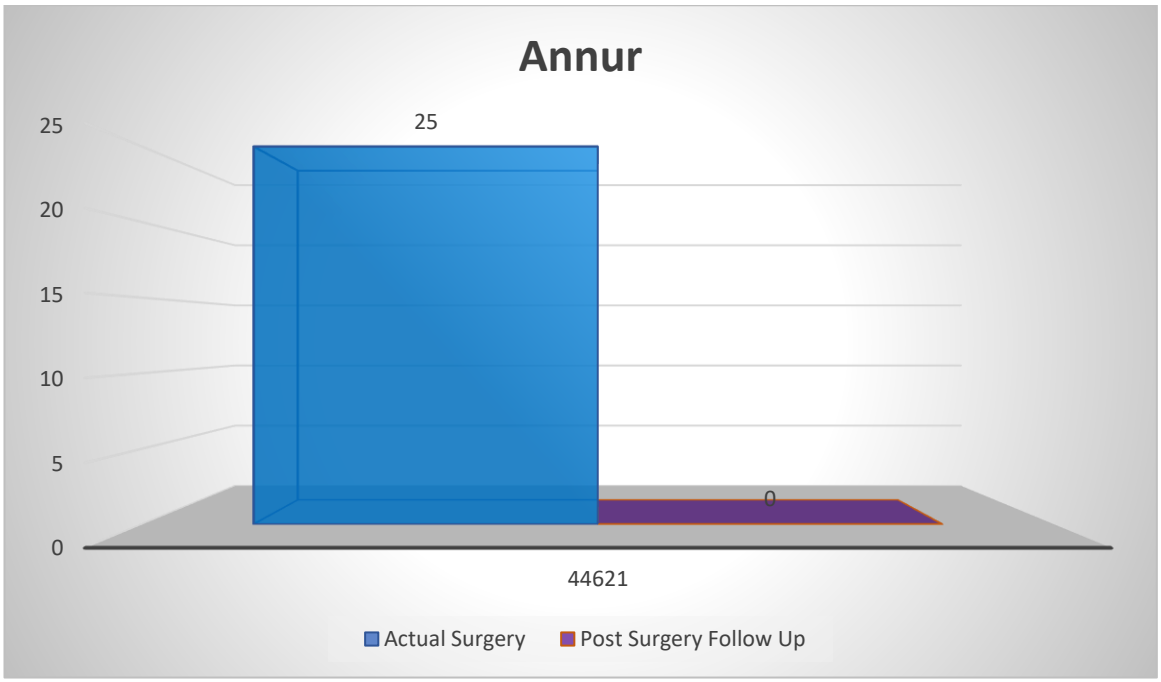


Fig: 4.3 - Number of actual surgeries and post-surgery since – 1st Jan 2022 – 31st March 2022

Fig: 4.3 According to this graph it depicts that on the month of January 40 surgery was done followed by on the month of February and March 4 and 63 surgery was done respectively. But the follow up was done in the month of January, February and March are 90, 28 and 3 respectively.

As per Master sheet Data (Paying Surgery)



W

Fig: 4.4 - Number of actual surgeries and post-surgery in March 2022

Fig: 4.4 The graph depicts that the post-surgery follow up was not done properly as a result the count is too low.

As per Master sheet Data (Paying Surgery)

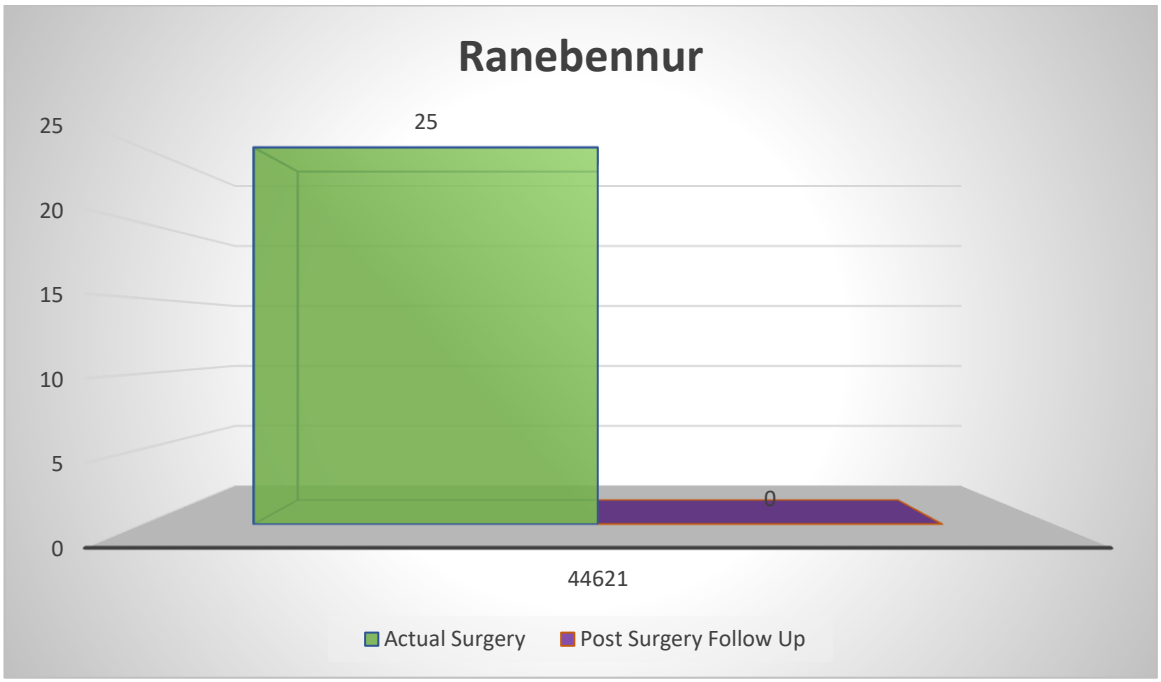


Fig: 4.5 - Number of actual surgeries and post-surgery in March 2022

Fig: 4.5 The graph depicts that the post-surgery follow up was not done properly as a result the count is too low.

As per Master sheet Data (Referral Report)

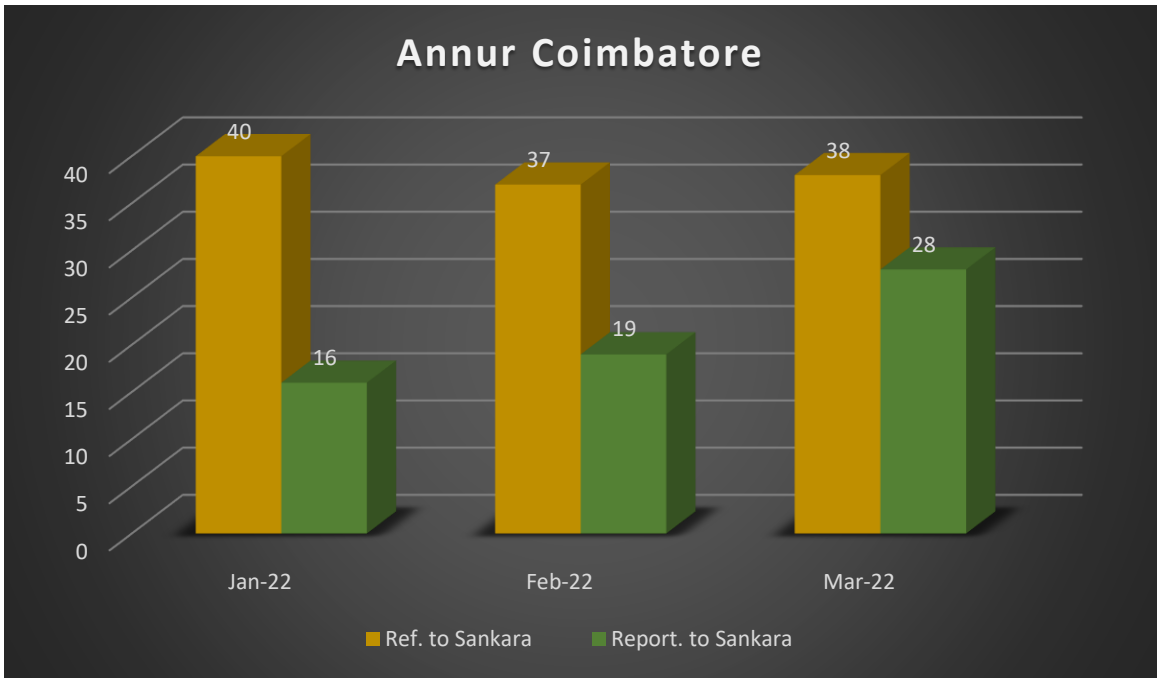


Fig: 4.6 - Number of actual surgeries and post-surgery since – 1st Jan 2022 – 31st March 2022

Fig: 4.6 The graph depicts that proper follow up was not done after the patient visited vision cent that is why the number of patients reporting to the Sankara Eye Hospital is less.

As per Master sheet Data (Referral Report)

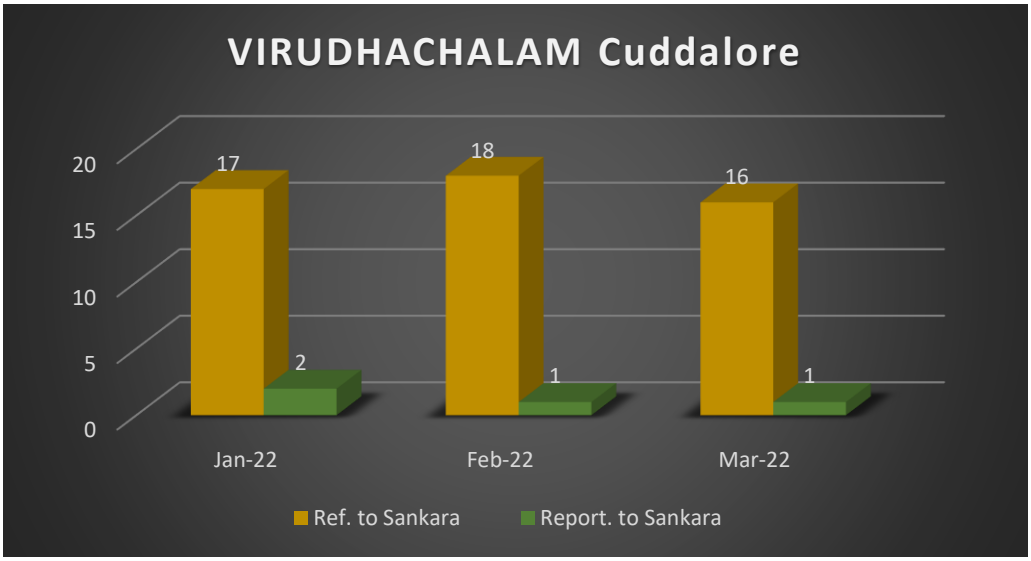


Fig: 4.7 - Number of actual surgeries and post-surgery in since – 1st Jan 2022 – 31st March 2022

The graph depicts that proper follow up was not done after the patient visited vision cent that is why the number of patients reporting to the Sankara Eye Hospital is less.

Chapter-06: Observations

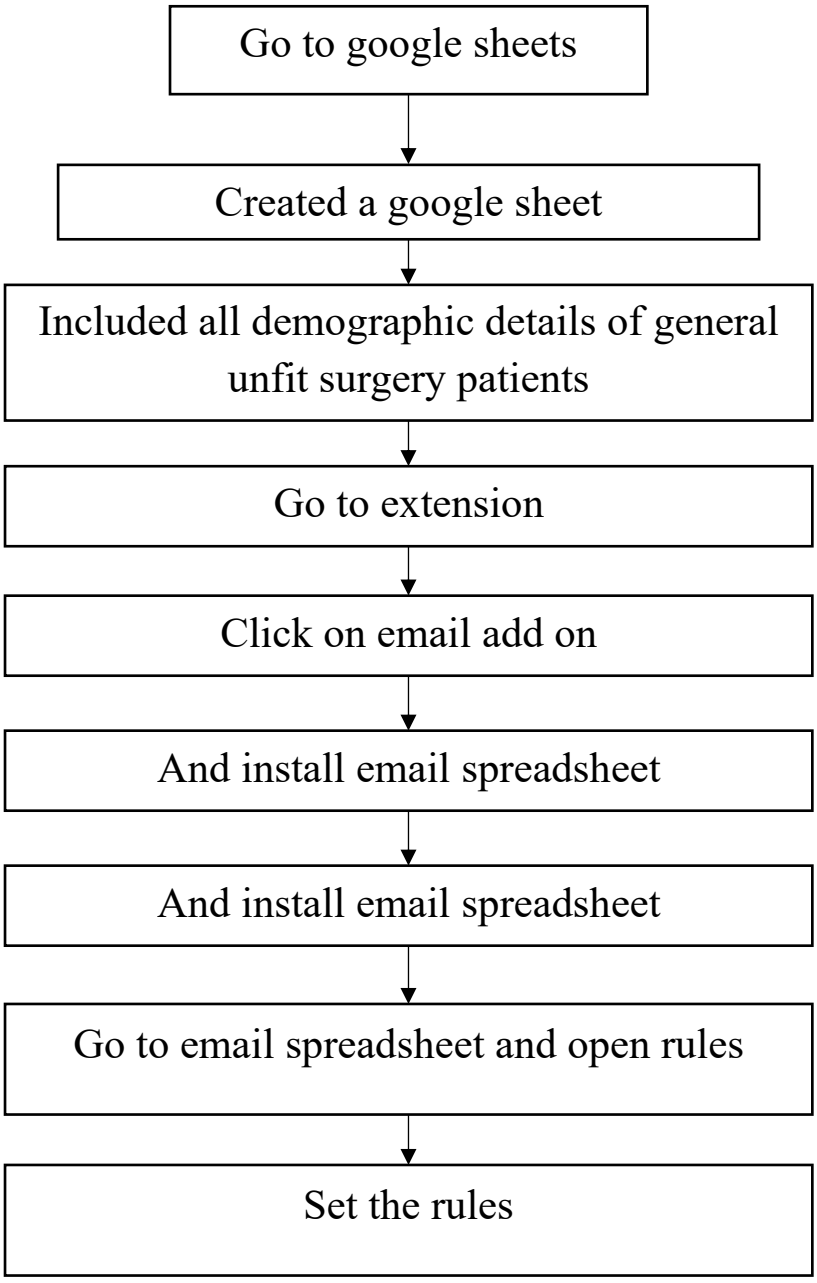
- The record of Post OP follow up was not maintained properly.
- Incomplete data was maintained in MocDoc.
- It is observed that some of the vision center doesn't have any record of paying patient record.
- In some Vision center it has been manually maintained in a notebook/Excel.
- In the Referral report proper follow – ups must be done so that maximum no of patients should report in the base hospital.
- This is all a result of the Hospital MIS system's lack of provisions.

Chapter-07: Recommendation

7.1 Strategies and Recommendation to Improve the Performance of Vision Centers

- Ensuring patient attend their post discharge follow up care. Regular follow ups and proper communications will lead to improve patient's outcome.
- Proper follow up must be done on a regular basis from the vision center staff to the patients after their surgery is being done.
- Proper monitoring of the data must be done from the vision center executive from the MHQ.
- It will increase overall patient satisfaction and ultimately increase the revenue of the hospital

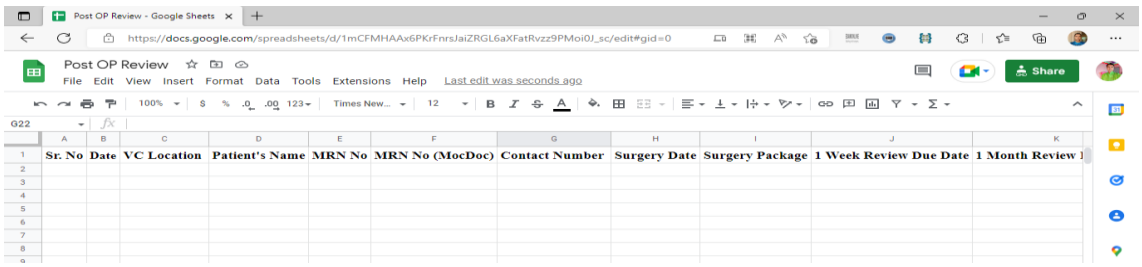
Steps For Developing a Tool:

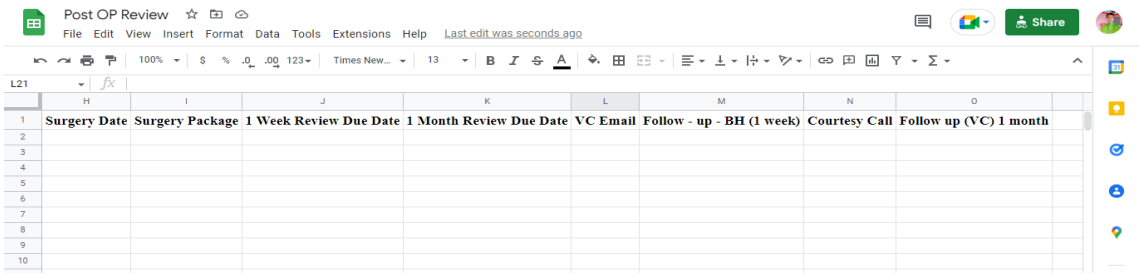


Tool for tracking Post OP Follow-up patients and Referral Report:

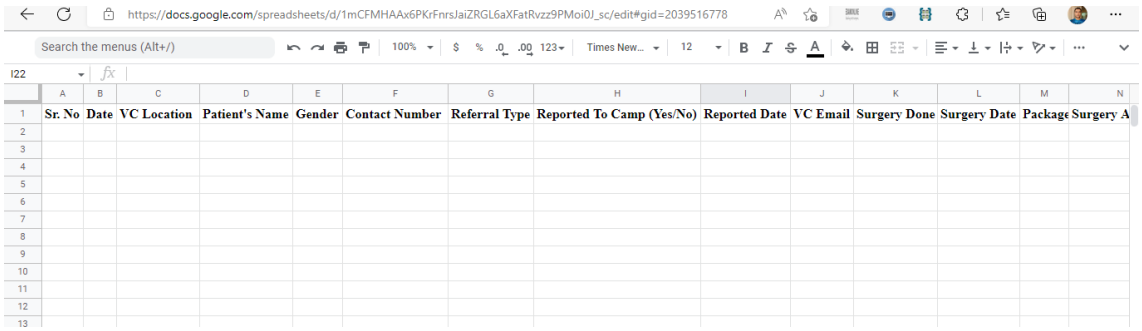
They will be able to monitor these patients on a regular basis with the use of google sheet.

For Post OP follow-up:





For Referral Report:



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