ANNUAL ACTIVITY REPORT 2014

A NEW HOPE FOR DIFFERENTLY ABLE CHILDREN

B. P. EYE FOUNDATION

Children's Hospital for Eye ENT and Rehabilitation Services (CHEERS)
Rt. Honorable Prime Minister Mr. Sushil Koirala officially Inaugurated CHEERS on 2014 April 30

CHEERS Family
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Life Member Nepal Association for The Welfare of the Blind, Life Member B.P. Eye Foundation, Vice President Doctor’s wife’s Association, Social Activist supporting education of orphan children and children employed in households. She is also President of Ankur Foundation working for children with multiple disability She is an active fund raiser for B.P. Eye Foundation

Ms. Sonia Pokhrel, Member

Social worker, special interest in hearing and speech problems, Chairperson of Kalyan Mani Acharya Dixit Trust for Hearing and speech

Dr. Sanjib K Upadhyay, Member

Former Director of Nobel Medical College Teaching Hospital, Executive Director, Children Hospital for Eye ENT and Rehabilitation Services (CHEERS)
The year 2014 is in some ways a watershed year for BP Eye Foundation. To begin with, this year was second full year of operation of our second flagship project “Children Hospital for Eye ENT and Rehabilitation Services” allowing us to review our performance against a base line. This year also marks the graduation of 111th Doctor of Medicine (Ophthalmology) and 66th Baccalaureate in Optometry from our first flagship project B.P Koirala Lions Center for Ophthalmic Studies in partnership with Institute of Medicine, Tribhuwan University Teaching Hospital.

Looking back it is gratifying to observe that our closely monitored indicators confirm that we were on track in 2014 with regard to our declared policy of gender, child and environment friendliness. So were our pro-people, pro-poor and proactive philosophy well supported by our performance indicators. For example, over half of people we have served (33,000 out of 55,000), have been served close to their homes through four of our key approaches: Day Screening and Treatment Services (DSTS), School health program, Remote Rural mobile health camps and outreach services at designated static clinics. Our pro-poor commitment is also evidenced by a very low registration fee of NRs. 50 and heavily subsidized other services at base hospital and no charges for community outreach services. About NRs. 6,500,000 were spent on community outreach services. The hospital provided over NRs. 20,000,000 in charity to patients coming to the hospital in 2014. In addition, all children with incurable vision and/or hearing impairment or both went through a life changing experience at our Enabling Center and received completely free boarding, meals and tuition and dress at an annual expense of NRs. 6,000,000. We are able to provide affordable care because of the generosity of our supporters within and outside the country. Regarding children with blindness and deafness, we have enrolled over 39 preschool age children in Early Childhood Development Centers with 17 currently undergoing training at our “Enabling Center”. Proactive nature of our work is confirmed by the fact that we did not just wait for patients to come to our hospital with advanced illness but went out to the community reaching out to over 33,000 of them close to their homes. This also enabled us to fulfill our pledge of gender and generational equity because farther away we moved from the hospital; greater was the access to services by women, and children (girls and boys). We saw more women patients and operated on more women (60%), a situation not often seen in “Reactive” hospitals (those who only wait for patients to come to them). Incidentally, we made significant step forward by including more women members (now 6 out of 15 member Executive Committee), while we have always more women general members.

This year we also earned a title of “opportunists” by undertaking opportunistic screening for Diabetes, Hypertension (major national health problems and killers and disablers) and Open Angle Glaucoma (major robber of sight) free of cost to patients over 35 years of age coming to hospital. These value added services have helped hundreds of persons who were unaware of their disease in knowing that they had the disease, receiving treatment and learning about their disease. Launching of “Student-led screening of school children for refractive correction” — an activity of the students, by the students, for the students is destined to lead to democratization of health. While right of every child to go to school is accepted as universal human rights, over 95% of the disabled children are not in schools and those of them who are in there enter and exit late from schools. Determined to change this situation, we have initiated a “Early Intervention program for Conserving Hearing and vision in Pre-School Children” for screening and treatment of children enrolled in Early Childhood development Centers so that we can catch them young before brain development is completed so as to give them an opportunity to be at par with non-disabled children. To take this further we hope to be able to start hearing screening of infant and newborn children in 2015 and continue for many more years.

On the policy and advocacy front, our sustained advocacy and active participation has brought the nation close to release of Eye Health Policy by the Ministry of Health and Population soon. Our membership on the National Committee for Ear and Hearing care is bringing in convergence of efforts to develop a national ear care policy and expansion of Ear Nose and Throat services. For sustainable eye and care development we have enhanced capacity of 782 health (Female Community Health Volunteers and grass roots health workers) and, non-health (teachers and students) workers through various training programs.
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"B.P. Eye Foundation (BPEF), established in 1991, is a Nepalese national non-government, not for profit autonomous organization, formally registered with appropriate authorities of government of Nepal. It works, among others, in areas of Health, Education and Empowerment of people at risk of or actually suffering from disability to lift them out of poverty.

With establishment of a Center of Excellence for Human Resource Development - B.P. Koirala Lions Center for Ophthalmic Studies at Institute of Medicine, Tribhuvan University with grants from Lions Sight First we have turned out 111 ophthalmologists (which is three Quarter of all Nepali ophthalmologists) and 85 Optometrists (90% of all Nepali Optometrists) who are now key personnel manning all the eye hospitals and eye departments of Nepal, in many instances as leaders of the institutions. This has helped Nepal to rapidly expand eye care services to almost all 75 districts of the country and receive several international awards. This center has also treated over 2 million patients, operated on over 100,000 patients and contributed to education of over 1,000 medical graduates and 1,500 nursing graduates.

Foundation has now turned its attention to child development with health and education of children with sensory impairment as an entry point. For this purpose, it has successfully established a Children’s Hospital for Eye ENT and Rehabilitation Services (CHEERS) in Bhaktapur. This innovative facility aims to incorporate all elements of service including: prenatal screening and genetic counseling, immunization to prevent major childhood infections, medical and surgical treatment, providing assistive devices and a novel facility of an Enabling Center for empowering blind, deaf and deaf-blind children (and adults), a pre-school to prepare them to be admitted to early childhood development centers - all under one roof. 54 children with visual and or hearing disability between the ages of 3 and 6 years have been enrolled at Enabling Center of CHEERS. After being trained, 31 of them are now enrolled in early childhood development centers (ECDCs) for the first time in Nepal, 17 more will be enrolled once they complete their training at Enabling Center. CHEERS is being used by ministry of education as a learning resource for government teachers, with several batches of teachers and ECDC staff benefitting from learning experience at CHEERS.
The Foundation has received and managed grants from governments (Nepal, Japan etc.) and INGOS (Sight First, Sight Savers, Kadoorie Charitable Foundation, Rotary International, Lions Sight First program etc.). It has pioneered: day care cataract surgery, dedicated children eye ear camps; an integrated education and eye health facility for children for the first time in the country. It has created history by making doors of education open to young CWBVI, currently excluded in Nepal and many parts of Asia.

The Foundation also works in the area of advocacy and health policy development. Some examples of successful advocacy include tax waiver on assistive devices; mid-term review of Vision 2020: The Right to Sight; integration of eye health services in general health services in new health policy. With its sustained advocacy together with its partners, the Foundation has been successful in bringing in Rubella and Measles vaccination on board national immunization program. With efforts of the Foundation, a Vision Alliance has been set up with participation of departments of education and health, NGOs like B. P. Eye Foundation, Nepal Netra Jyoti Sangh (NNJS), Nepal Eye Program (Tilganga Institute of Ophthalmology), Nepal Association for the Welfare of the Blind (NAWB), Nepal Association of the Blind (NAB) and International Council for Education of All Visually Impaired (ICEVI), Nepalese Association of Optometrists (NAO) and other stakeholders. This Alliance is poised to ramp up efforts for routine vision screening of school children (not available as yet) through a program to train school teachers. For this purpose over 1,000 teacher-trainers are being trained with shared responsibility between different stakeholders.

The Foundation is well represented in major policy platforms with its membership of Eye Health Policy Advisory Committee; National Committee for Ear and Hearing Care; High Level Health Policy Advisory Committee of Ministry of Health; Education For All Visually Impaired (EFAVI) National Task Force of Ministry of Education; Vision Alliance (A combined initiative with Ministries of Education and Health).

National Capacity Building is a core function of the Foundation. Reference has been made to training and education of ophthalmologists, optometrists, medical and nursing graduates earlier. This year it has trained 254 Female Community Health Volunteers; 58 primary health care personnel (such as health assistants and allied health personnel) for Eye and ENT examination and treatment; 261 school teachers, 209 school students for vision and hearing screening.

CHEERS is also providing educational opportunities (Rotating Internship) to Audiology graduates of Tribhuvan University Institute of Medicine as well as a full year structured internship to graduates in Optometry from universities abroad. Soon a training program for a mid-level ENT workforce will be started with affiliation from Council for Technical Education and Vocational Training (CTEVT), to address the acute shortage of mid-level ENT personnel.
1 Community Based Activities

B.P. Eye Foundation is a people-centered, pro-poor, proactive organization which has deep roots in the society because of its community-based programs, especially focusing on the people marginalized by the mainstream national development process. In pursuit of this goal it operates a variety of programs; those conducted during 2014 are as below.

1.1. School Health Program

1.1.1) Screening of School Children

- 8,692 students were screened
- 53% were female
- 6.58% (185) had Hearing Impairment
- 9.23% (282) had Visual Impairment

This is a regular activity undertaken by the Foundation. Children were screened at their own school for Eye and ENT problems and were found as following; In these screening programs 282 children were provided with glasses and 185 with hearing aids.

1.1.2) Health promotion activities

Apart from the screening of school children, these children were also provided with health promotion activities which also included taking care of ears and eyes, avoiding injuries, Human Rights Based Approach to child Health and Disability Awareness and Rights.
1.2. Remote Rural Mobile Health Camps

In coordination with Ministry of Health and Population (MoHP), Ministry of Education (MoE) and Ministry of Federal Affairs and Local Development (MoFALD), BPEF conducted six dedicated children’s Eye, ENT, and Pediatric Health camps at remote and hard to reach areas of Dolakha, Kavrepalanchowk and Sindhupalchowk districts of Nepal. The camps were conducted in two stages: Initially at a pre-camp, health facility in-charge, Female Community Health Volunteers (FCHVs), primary level teachers and secondary school students were trained on eye and ear care. This was done with a view to inform local population well in advance so that a large number of people benefit from the camp as well as to ensure sustainability of the activities of the camp after it was completed.

### Details of No. of trained personnel in 2014

<table>
<thead>
<tr>
<th>District</th>
<th>No. of Site</th>
<th>FCHV</th>
<th>Teachers</th>
<th>Students</th>
<th>Health workers</th>
<th>No. of Health Clubs established</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sindhupalchok</td>
<td>2</td>
<td>73</td>
<td>87</td>
<td>54</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Kavre</td>
<td>2</td>
<td>74</td>
<td>71</td>
<td>62</td>
<td>19</td>
<td>11</td>
</tr>
<tr>
<td>Dolakha</td>
<td>2</td>
<td>107</td>
<td>87</td>
<td>93</td>
<td>19</td>
<td>15</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>6</strong></td>
<td><strong>254</strong></td>
<td><strong>245</strong></td>
<td><strong>209</strong></td>
<td><strong>58</strong></td>
<td><strong>36</strong></td>
</tr>
</tbody>
</table>

In second stage actual Eye, ENT and pediatric health camps were held. A total of 5,200 patients were examined in the camps (1,556 in Dolakha, 1,856 in Kavre and 1,788 in Sindhupalchowk) in 2014. BPEF also participated in Eye, ENT camp conducted by Community Workers Society (CWS) in Sindhuli and total of 287 patients were examined. Altogether 245 patients from the camps were provided with medicines, glasses and 5 with hearing aids free of cost. 272 patients were advised further examination. Only 74 patients of these referred patients visited our health facilities and received appropriate treatment while the rest were lost for follow up. A study to identify the barriers for accessing health facilities after being referred from the health camp is under preparation.

In addition VA chart, 33 health facilities were equipped (1 Primary Health Care Center, 13 Health Post and 19 Sub Health Post) with Visual Acuity Chart, Aural syringe, Otoscope, Jobson Hobe Probe, Tuning fork and Register for Recording. Posters on eye and ear care were also provided. Similarly, 36 health clubs were established and 209 students trained to carry on with the services.

1.3 Day Screening and Treatment Services (DSTS)

This is part of B. P. Eye Foundation’s commitment to serve neighborhood community. A day long screening is conducted in three districts of Kathmandu valley for those who can’t come to hospital for various reasons. They are conducted in partnership with health posts, sub health post, Village Development Committees (VDCs,) local clubs, women’s group and community based organization (CBOs); 35 DSTS were carried out and 6,488 patients examined (57% for eye checkup, 32% for ENT checkup and 11% for Pediatric health checkup). Medical treatment was provided to 2,581, glasses to 352, hearing aids to 30 and 458 were referred to CHEERS for further evaluation and treatment.
1.4 Static Outreach Clinic
As a matter of policy, BPEF/CHEERS works in collaboration with existing health and education systems supporting them and building their capacity. As of now regular outreach clinics are held twice a week each at a community run Primary Health Care and Resource Center (PHCRC) at Chapagaun and government run PHC at Lele. During the year under review 2,724 persons (1,052 male, 1,672 female) were provided services close to their homes. Among them 201 were referred and 104 (51.7%) received specialized services at CHEERS.

1.5 Health promotion activities
Promoting health and preventing diseases is a hallmark of BPEF’s operational strategy. It does this both at its hospital and in the community. There is a dedicated health promotion unit at the hospital with education materials to which patients have easy access on the ground floor. In addition BPEF/CHEERS produced different IEC materials for (altogether 3000 poster of 7 types) and conducted awareness campaign. A total of 2,597 children (1,130 boys and 1,467 girls) and 1,897 adults (791 male and 1,106 female) participated in health promotion activities.
### Table 3: Summary of beneficiaries from community activities

<table>
<thead>
<tr>
<th>Beneficiaries</th>
<th>Eye examination and treatment through camp/ORC/DSTS/school screening at ORC</th>
<th>ENT examination and treatment through camp/ORC/DSTS/school screening at ORC</th>
<th>Pediatric health examination and treatment through camp/DSTS/school screening at ORC</th>
<th>Empowerment through training</th>
<th>Screening of patients by trained</th>
<th>Referred to HF by trained FCHV</th>
<th>Examination of patients by trained Health workers in their HF</th>
<th>Health promotion</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Children</td>
<td>5,916</td>
<td>5,247</td>
<td>3,057</td>
<td>2,597</td>
<td>1,717</td>
<td>1066</td>
<td>129</td>
<td>201</td>
<td>2,597</td>
</tr>
<tr>
<td>Adult</td>
<td>5,418</td>
<td>3,244</td>
<td>-</td>
<td>1,897</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1,897</td>
</tr>
<tr>
<td>FCHV</td>
<td>-</td>
<td>254</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>846</td>
<td>679</td>
<td>1,897</td>
<td></td>
</tr>
<tr>
<td>Teachers</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Students</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>209</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Health workers</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td>11,334 (4,755 M, 6,579 F)</td>
<td>8,491 (3,792 M, 4,699 F)</td>
<td>3,057 (1,544 M, 1,513 F)</td>
<td>5,276 (2,283 M, 2,993 F)</td>
<td>1,717 (1,001 M, 716 F)</td>
<td>1066 (666 M, 400 F)</td>
<td>129 (62 M, 67 F)</td>
<td>201 (67 M, 134 F)</td>
<td>846 (498 M, 348 F)</td>
</tr>
</tbody>
</table>
2 Institution Based Activities in 2014

2.1 Children’s Hospital for Eye ENT and Rehabilitation Services (CHEERS)
Children Hospital for Eye ENT and Rehabilitation Services (CHEERS) started providing service to general population from 3 December 2012 to mark the International day of Persons with Disability. Within two years of its starting of services, CHEERS has gained popularity due to its patient centered services, child and disabled friendly as well as neat and clean environment. CHEERS now has patients coming from almost all parts of the country seeking quality Eye and ENT services.

2.1.1 Clinical Services at CHEERS
A total of 32,809 patients (16,684 F, 16,125 M) availed different services at CHEERS. A breakdown of some common services is shown in the table below. Various types of services provided at CHEERS are shown pictorially.

<table>
<thead>
<tr>
<th>Unit</th>
<th>Service users</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Female</td>
</tr>
<tr>
<td>OPD</td>
<td>16,125</td>
<td>16,684</td>
</tr>
<tr>
<td>Refraction, Low vision and Contact Lens</td>
<td>4,810</td>
<td>5,126</td>
</tr>
<tr>
<td>Orthoptics</td>
<td>447</td>
<td>675</td>
</tr>
<tr>
<td>RUAS *</td>
<td>720</td>
<td>1,078</td>
</tr>
<tr>
<td>Procedures</td>
<td>2,036</td>
<td>2,489</td>
</tr>
<tr>
<td>Laboratory</td>
<td>681</td>
<td>398</td>
</tr>
<tr>
<td>Surgery unit</td>
<td>174</td>
<td>157</td>
</tr>
<tr>
<td>Special Investigations (X ray, Visual field, Biometry etc.)</td>
<td>327</td>
<td>343</td>
</tr>
</tbody>
</table>

*Rehabilitation Unit for Audiology and Speech
Photographs Showing Different In-House Activities at Base Hospital

2.1.2 Rehabilitation Services

Rehabilitation Unit is designed with a view to counsel and assist disabled children and adults as well as training their family members for taking care of a disabled person at home. This year 21 children (5 female and 16 male) with disability have been trained at CHEERS, **14 visually impaired children who graduated from CHEERS have been enrolled in 10 different early childhood development centers (ECDC) of 9 different districts.** Thus the door to ECDC is now open for children with disability. To take proper care of those children school headmaster, facilitators and caretakers have been also trained on mobility and daily living skills activities. This effort of B. P. Eye Foundation –CHEERS (Hospital) has been a milestone in the campaign “Education for all” of Government of Nepal.

| Detailed Number of Children with Disability who have been admitted to ‘Enabling Center’ in CHEERS in 2014 |
|---|---|---|
| S. No. | Children With Disability | Total Numbers | Boys | Girls |
| 1 | Blind | 10 | 8 | 2 |
| 2 | Low vision | 3 | 2 | 1 |
| 3 | Deaf | 5 | 0 | 5 |
| 4 | Multiple Disabilities with blindness | 3 | 1 | 2 |
| **Total** | **21** | **16** | **5** |
2.2 B. P. Koirala Lions Centre for Ophthalmic Studies (BPKL COS)

Taking up the challenge of augmenting the eye care workforce in Nepal, BPEF entered into partnership with Tribhuvan University, and developed a center for development of human resource for eye care. BPKL COS was established at the Institute of Medicine through a tri-partite agreement between BPEF, Tribhuvan University and Lions Sight First Program. In 2014, BPKL COS provided eye care services to 115,736 patients including at OPD, and various outreach services. 24,129 patients received specialized services in its various specialty clinics. Altogether 3,134 patients were provided surgical services including 26 corneal grafts during the year 2014. Also, 6 Ophthalmologists and 4 Optometrists graduated from this center in 2014. Reader is referred to BPKL COS annual report for more detailed information at the following website: http://www.iom.edu.np/?page_id=184

3. Innovative Initiatives of BPEF
3.1 Diabetes, Hypertension and Glaucoma Program

Diabetes is well known as a killer disease but not so well known as a disabling condition. It causes at least three types of disabilities: Physical (limb amputation), Visual (blindness) and cognitive (poor performance on Mini-Mental State Examination (MMSE). High blood pressure is an important cause of disabling visual impairment as well as physical disability from cerebral stroke of which it is a major contributor. As a disability-friendly organization we could not wait any longer to let more people become disabled. To respond to these challenges, B P Eye Foundation has initiated a diabetes-hypertension-glaucoma (DHG) program on World Diabetes Day 2014. All individuals over 35 years of age reporting to either the base hospital at CHEERS or in any of its outreach activities are screened for blood glucose, blood pressure and intraocular pressure. During this short period, of a total of 1,236 (622 in Hospital and 614 in Outreach) screened, 31% were found to have raised Blood sugar. Likewise 45% had raised blood pressure. This program is therefore being continued. This is a useful means to detect diabetes and hypertension as well as raise awareness about them.
3.2 Student led vision screening

BP Eye Foundation is a recipient of a global competitive grant from USAID’s Childhood Blindness Program for its innovative project entitled "Student-Led Screening of School Children for Refractive Error Correction". This innovative year-long project, examines ways to address empowering non-health personnel to conduct screenings among school children. Upon successful completion of the training course, trained students will conduct vision screenings at their schools with refractive error or other eye conditions for treatment by optometrists or local eye care centers. A total of at least 10,000 children will be screened by the trained students with an estimated 1,200 children referred. A similar number of children reported to have normal vision by student screeners will be reassessed by optometrists to test for false positive and false negative referrals. Statistical analysis to evaluate the validity of the screening conducted by trained students will be performed. Results from the project could have a significant impact on vision screenings in remote areas. This will greatly facilitate a hesitant government to introduce compulsory vision screening at the time of school enrollment.

This project was launched on October 15, 2014 and will be completed in September 2015. By the end of December 2014, 54 students from 9 schools of Banke district were trained and have been carrying out screening of vision of their peers.

3.3 Early Intervention for Conserving Hearing in Pre-school Children

This project was born out of the concern that every day 3 – 6 children are born deaf in Nepal, that every third child in school has ear problem, and every third of them has hearing impairment. Sadly, much of it remains undetected until child is lot older by which time the small window of opportunity to treat hearing impairment is closed. We therefore wanted to detect hearing problems in children while they were still in pre-schools. The goal of screening is to identify and treat children (ages 3-5 years) likely to have hearing loss and for ear health problems which is not being currently done in Nepal. It will also help raise awareness among students, teachers, parents of students and community about ear and hearing health. 13, 274 children from 476 ECDC in Bhaktapur district will be screened for ear health by a team of ear health professionals from CHEERS about 3,318 will receive medical treatment and 200 are expected to receive hearing aids and 64 will receive surgery. Over 8,000 people from the school community and its surrounding will be made aware on ear health. (Assumption each school has 40 participants; parents and teachers)200 teachers and 200 facilitators from ECDC’s will be oriented on ear health screening who in turn will be instrumental on further referral (1 teacher and 1 facilitator from each school will participate).

This project is important because a successful outcome in one district would also help health authorities to replicate it in other districts.
3.4 Development of Ear Health in Nepal

A Memorandum of Understanding (MoU) was signed between Indian Embassy and B. P. Eye Foundation on ... to develop Ear health care services in Nepal by training human resources, by establishing District ear care centers, organizing mobile camps and school screening so that people with ear problems have ease of access to ear care and incidence of hearing impairment is reduced. The Project will start in January 2015 and the outcome will be reported on next annual report.

4 Academic and Research Activities

The Academics and Research Department at BP Eye Foundation brings together scholars of varying disciplines from different countries to enhance clinical skills of the staff. Different studies are carried out under the guidance of research experts and supervision of ethical review board.

4.1 Elective/ Internship Program

There are clinical and community elective/ internship programs for students from certificate to postgraduate level. The students from various national and international institutes come to CHEERS to join the programs. Currently students in health care management, optometry, audiology and speech pathology, nursing and general medicine are receiving training. During their internship, the students acquire defined clinical skills under direct supervision of Ophthalmologist, ENT specialist, Optometrist and Audiologist. The department is preparing itself to invite students in pharmacy, laboratory, optical and hearing dispensing and public health disciplines in the near future. The department is equipped with a full-fledged library and well supported with IT facilities to connect to research community globally.

4.2 Continuing Professional Development

Regular Continuing Medical Education (CME) activities are held to update staff with latest developments.

a. One week CPD on ENT was organized in September with support of guest ENT surgeon from Netherland Dr. J. Brogstein (ENT Specialist) and his team in which 12 ENT surgeons from Nepal participated 9 (3 surgeon from CHEERS).

b. One week CPD on ENT, Eye and Low Vision was organized in October with support of Guest Specialist S. V. Raman (Ophthalmologist of Plymouth), Hisham Khalil (Consultant ENT Surgeon, Director of Clinical Studies, Derriford Hospital UK), David Adams (PhD Head Optometry, Dept. of Plymouth Hospital NHS Trust + Hon Associate Prof), Mrs. Pam Adams (Optometrist and Low Vision Specialist Plymouth University), Nehal Mandoure (Ophthalmologist, Plymouth University-UK)

4.3 Research Program

The following research is being carried out by B. P. Eye Foundation in the upcoming year 2015:

i. Barriers to accessing tertiary health care in Nepal

ii. Prevalence of Diabetes Mellitus and Hypertension among patients attending hospital for ocular and ENT complaints.

iii. Microbial flora of suppurative otitis media.

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<th>Partners and Supporters</th>
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<td>![Partners and Supporters Logos]</td>
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- **Activity Report 2014**

- **Partners and Supporters**
  - **Tilganga Institute of Ophthalmology**
  - **Australian AID**
  - **LIONS INTERNATIONAL**
  - **THE KADOORIE CHARITABLE FOUNDATION**
  - **US AID FROM THE AMERICAN PEOPLE**
  - **NAWB**
  - **tergooli**
  - **ROUNDA NEW YORK**
  - **Sightsavers**
  - **ICEVI**
  - **Nepal Netra Jyoti Sangh**
  - **Karuna Foundation**
  - **Nepal Association of Ophthalmic Surgeons**
  - **Japan Official Development Assistance**
  - **Community Welfare Society**
Photo Gallery

Children from rehabilitation center singing national anthem on annual day

Patients smiling after cataract surgery at CHEERS

Musical practice session at rehabilitation centre

CHEERS director providing ENT services at rural camp site

Health worker training by CHEERS team

BPEF chairman with officials from Japanese Delegation

Little graduates from rehabilitation center

Camp team on the way to Dolakha district
Executive director visiting Lele (an outreach clinic) site with international team

Visually impaired children playing musical instruments

Plantation in the surroundings of CHEERS

ENT surgeon examining patients at CHEERS

Eye examination with portable slit lamp at camp site

President of Lions Club International with Lions country and CHEERS team
Kids playing at the child play section

Child selecting spectacles at the optical shop

BPEF chairman with President of Lions Club International

Audiologists performing hearing evaluation at the camp site

Mrs Madhuri Singh giving out warm clothing to the children of Enabling Center

Patients smiling after cataract surgery done at base hospital supported by Lions Club International

BPEF board members and life members with Rt. Honorable Prime minister