



# Pakistan Institute of Community Ophthalmology

*Hayatabad Medical Complex, Peshawar*



ANNUAL REPORT

2015

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## EXECUTIVE SUMMARY

Pakistan Institute of Community Ophthalmology (PICO), Hayatabad Medical Complex Peshawar is an internationally renowned Institute of Ophthalmology. Human Resource Development, Research, and Comprehensive Eye Care Program are the three main pillars of the institute and all its functions and progress revolve around them.

Pakistan Institute of Community Ophthalmology (PICO), as an institutional requirement develops different reports showing its progress. As some of its activities are also funded by its International Partners, PICO therefore also fulfills its obligation to its Partners by acquainting them about the latest progress on its different programs on regular basis and as and when required. PICO finally consolidates all its progress in the form of its annual report which is published and disseminated among all the key stakeholders by end of January each year.

In its HRD Program, PICO is running various academic programs like MPH in Community Eye Health, MPH (General), M. Phil. Visual Sciences, Bachelor of Vision Sciences, Post Graduate Diploma and certificate courses for Ophthalmic Technicians. PICO is affiliated with Khyber Medical University, Khyber Pakhtunkhwa for its Degree and Post-graduate program and with Medical Faculty, Khyber Pakhtunkhwa for its diploma/certificate programs. In the year 2015, the studies of old session students of MPH (CEH) Continued while process for fresh admissions for the session 2015 was completed by the end of 2015. Similarly, the four classes of BSc Vision Sciences were continued as per routine while admission process for the new incumbent was completed. PICO started FSc Ophthalmic Technology in the year 2015. Likewise, the admission process for the fresh intake in Ophthalmic Technician Course was completed in the year 2015. The administration of PICO continued its struggle to meet best possible standards of the academic, accommodation, registration and other essential requirements of its students by providing them the qualified teaching faculty, well furnished classrooms and academic environment in the library and suitable hostel accommodation facilities.

Research in any field is not only the academic requirement of the students but it is also of great utility for the society. It provides solution to the problems in the specific areas and new insights for future developments/improvements. PICO gives great importance to its Research and Development Program.

The Comprehensive Eye Care (CEC) Cell of PICO is responsible for planning, implementation, monitoring & evaluation of the District Comprehensive Eye Care Program. In the year 2015 the major achievements of the CEC Cell included up gradation of the Eye Departments of three hospitals, one each Teaching, DHQ and THQ hospital. Fresh Need Assessment of the District Eye Care Program is being conducted to assess the present status of the eye departments in the districts and find out deficiencies for further improvement in the program. These deficiencies will be included in the New Provincial PC-I for Prevention and Control of Blindness, which will be proposed for inclusion in the Health Sector ADP for the FY 2015-16. The approval of PC-I for construction of the PICO hostel was another great achievement of PICO. The tenders have been called and the technical and financial evaluation of the Contractors is being carried out. The construction on the hostel is expected to begin in January 2015. When completed, it would resolve the long standing issue of accommodation for the PICO students coming from the far flung areas. CEC Cell PICO also celebrated the World Glaucoma Week and World Sight Day with Great Spirit in the year 2015. Multiple activities regarding awareness and advocacy events were arranged for dissemination of important eye care information to the general public. In the year 2015, one Consultant Community Ophthalmologist and one Medical Officer were appointed in the CEC Cell on regular basis, which further strengthened the CEC Cell. It will enable the CEC Cell to play its role more affectively in the prevention of avoidable blindness in the province. Regarding HRD strengthening twelve new recruitment done in the year 2016.

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## 1. Human Resource Development

### Teaching & Training:

#### a. M.Phil Vision Sciences:

M. Phil Vision Sciences, a two years' program started from 1<sup>st</sup> March 2015. Total students enrolled in this program are 11 including 01 foreign student from Nigeria. Senior most faculties of HMC & KGMC are involved in teaching of M.Phil Vision Sciences. Each student has been awarded with an individual Supervisor for the purpose of practical training in OPD as well as for research. PICO is in process of arranging online / video conferencing international teaching facilities for students of this program. Fully equipped Computer Lab program is also in the process of establishment. 1<sup>st</sup> semester examination was done in 14-17 September 2015. Result was declared on 14 December 2015, all students successfully promoted in 2<sup>nd</sup> semester without only foreign student from Nigeria. He also terminated from his course because of absentees from class. The proposed date of 2nd semester examination is 22<sup>nd</sup> February 2016. New comers have interviewed. The classes have been starting since 8<sup>th</sup> February 2016.



#### b. MPH (Community Eye Health):

Exams have been conducted and 80% result has been obtained from the students. In session 2014 three students were failed to reappear in the exams out of which one left after reappearing in the test. In session 2015 two students were failed out of eight as eight students were enrolled in 2015

Workshop on management and communication skills was conducted by Mr. Zia Khan (Public Administration & Communication)

In February 2015 Dr. Raja Para Segaram conducted one week workshop on Vision 2020.





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In April students visited DMRC Medical Rehabilitation Complex Charsadda which is the only nearby eye health care center and also done a qualitative study by taking Interviews from staff and Patients. They also visited LRBT Akora Khattak Nowshera



In May 2015 six days workshop on “Health System Research” was conducted by Prof. Dr. Tasleem Akhtar (Prof.Amaratus Research KMU). Students were taught on all aspects of Operational Research in Health System to identify and solve problems from different fields of health systems.

In June 2015 Students conducted a small scale hospital based study on prevalence of Blindness and learn how to collect and compile Data. A four days session on Formulation of PC –1 and governments developmental process was conducted by Mr. Pervez Akhtar in which the students were oriented on different proforma of planning commission used for developmental projects and different tiers of the provincial government for processing and approval of developmental projects.

In August 2015 MPH students have been participated in Ophthalmology Conference at Nathia Gali. Annual exam which usually takes place in first week of December was delayed due to non availability of Chief examiner Dr. Raja Para Segaram. The exam was conducted on 17 Feb—20 Feb 2015.

The students of senior batch i.e. 2014-2015 were allotted supervisors and research topics for their dissertations. Most of the students have submitted their Dissertations to supervisors which are under review.



#### c. MPH General

The MPH Program has a two-year curriculum requiring 60 credit hours. A total of 24 credits are accumulated in eight core required courses, representing the fundamental domains of public health: biostatistics, epidemiology, environmental health sciences, health policy and administration, social and behavioral sciences. 10 Students are entitled for this Self Finance Program and it has been running since 15<sup>th</sup> Feb,2016. Students receive six credits for two courses in the concentration area (General Public Health; Hospital Management & Health Care Services; and Family Health) of their choice, six credits for two elective courses, and six credits through a public health field practicum, usually encompassing at least one semester of the MPH program that will culminate in six credit hours of thesis work. Previous experience or education pertaining to public health may increase the student's flexibility in course selection.

#### d. Bachelor of Vision Sciences

This program is of four years duration which is consisting of eight semesters. In 2015 total numbers of students were 179. From the 2nd Year, students join the clinical Department in the department of Ophthalmology Hayatabad Medical Complex as to learn practical work in the field of Vision Sciences. The objective of the course is to provide advanced training to the best of these graduates so that get specialization in their area of interest. These graduates will meet the needs / requirements of optometry in secondary and tertiary eye care institution.

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All the courses activities are being conducted in four semesters which includes sessions of;

- Theory (augmented by practical demonstrations).
- Clinical placements at the clinical department of Ophthalmology, Hayatabad Medical Complex (HMC), Peshawar.

In the 2nd year BVS, Ophthalmologists from the Department of Ophthalmology along with internal faculty teaches eye diseases aiming to enhance knowledge and skills.

To improve and maintain the quality of education the institute invites senior faculty from Department of Ophthalmology HMC to teach the 7th semester students in relevant fields.

### Undergraduate Courses

(Bachelor of Vision Sciences /Ophthalmic Technician Course/ FSC Ophthalmic Technology)

Course Offered at Undergraduate Level:

S. no	Course	Duration	Proposed intake/ year	Affiliation
1	BSc. Vision Sciences	4-years	20-50	KMU
2	Ophthalmic technician training course	2-years	15	Medical Faculty KPK
3	F. Sc Ophthalmic Technology	1-year	5-10	KMU

#### a. Bachelor of Vision Sciences

##### Intake in the year 2015

- Number of students in BVS 1st year = 51
- Number of students in BVS 2nd year = 46
- Number of students in BVS 3rd year = 45
- Number of students in BVS 4th year = 27
- Ophthalmic Technician Course 1<sup>st</sup> year =09
- Ophthalmic Technician Course 2nd year=30
- FSc Ophthalmic Technology 1<sup>st</sup> Year= 10
- FSc Ophthalmic Technology 2nd Year=13

##### Trained graduates till 2015

- 151 MPH Students
- 208 Graduates in BVS
- 405 Ophthalmic Technicians
- 55 Ophthalmic Nurses

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In the theoretical session learning is facilitated via classroom teaching, practical demonstrations and discussion. The entire course curriculum for the semester January to December 2015 was carried out successfully. Students fully utilized the Clinical Department of Ophthalmology HMC for practical training.

High qualified faculty from KGMC are teaching the BVS and OTC 1<sup>st</sup> year, which has a very fruitful impact on the student's learning regarding basic medical sciences since start of this session.

In the 2<sup>nd</sup> year BVS, Ophthalmologists from the Department of Ophthalmology along with internal faculty teaches eye diseases aiming to enhance knowledge and skills.

To improve and maintain the quality of education the institute invites senior faculty from Department of Ophthalmology HMC to teach the 8<sup>th</sup> semester students in relevant fields.

A special training on Contact lens fitting techniques and hands on training of the students of final year was conducted by Mr. Ali Minto, who is a contact specialist. A two week module on research Methodology and epidemiology was conducted by Dr. Zahid Jadoon. He also facilitated the students in their research dissertations which is the requirement of BVS degree Course.

#### **b. Ophthalmic Technician Course**

All the academic activities for two classes of OTC were carried out as planned. Students of 2<sup>nd</sup> year got hands on training in the OPD of Ophthalmology Department HMC.

The examination of ophthalmic technician was conducted by medical Faculty as per practice. PICO has no role in the conduction of examination. The semester examinations were conducted in June. Total Number of students appeared in the examination were 30 students of 1<sup>st</sup> semester and 10 Students of 3rd Semester.

#### **Examination of Ophthalmic Technician Course**

This program is of Two Years duration and from the 2<sup>nd</sup> Year students join the Ophthalmology Department, Hayatabad Medical Complex.

The examination of 1<sup>st</sup> semester and 3<sup>rd</sup> semester of ophthalmic technician was held in May 2015 by the Medical Faculty while the 2<sup>nd</sup> semester and 4<sup>th</sup> semester of Ophthalmic Technician examination was held in December 2015. Result is awaited.





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## Collaboration with National Vocational and Technical Training Council (NAVTTTC) for Ophthalmic Technician Course:

National Vocational and Technical Training Council (NAVTTTC) is Federal level organization located at Prime Minister Secretariat Islamabad. NAVTTTC supports 15 additional students of Ophthalmic Technician course at PICO for two years from 2014-2015. This program was in addition to the current ongoing diploma in Ophthalmic Technicians. The two years collaboration ended in January 2016.

### FSc. Ophthalmic Technology

The Ophthalmic Technician Diploma certificate is a dead end to the career of the Ophthalmic Technicians. With this qualification candidates do not have opportunities to improve their qualifications to a higher level. In order to open venues of further education for the ophthalmic technician, a two year certification course i.e FSc. Ophthalmic Technology has been initiated since 2014. This will open options for ophthalmic technicians to upgrade their education to graduate and post graduation level.

The affiliation of this two years course is with the Board of Intermediate and Secondary Education Peshawar (BISP). The total number of seats for FSc Ophthalmic Technology is 10. The Course was advertised in June 2015 and the applicants for the subject course were 30. The Academic Session of FSc Ophthalmic Technology started from September 2015 as per the BISP rules. For this particular course Physics and Chemistry laboratory established to get hands on training which an integral part of FSc curriculum.

### Semester Examination

BVS Examination Prior to conduct the final semester examination, midterm exam and internal assessments which is a full fledged exercise and requirement of KMU, was carried out by the faculty of undergraduate courses. KMU change the examination pattern from subjective to objective type. The following evaluation criteria was shared by the KMU i.e.

Internal Assessment	=	10%
Mid Term Examination	=	20%
Final Term Examination	=	70%

The spring semester examinations of all the classes were conducted by the Khyber Medical University in June 2015. This was followed by summer vacation, In September 2015 fall semester started. The fall semester examination was conducted in December 2015. The detail of number of students who appeared class wise given below;

#### **Fall semester examination December, 2015**

##### **1st year B. S Vision Sciences (2nd semester exam)**

Total number of student appeared in 2nd semester examination were 51. Result is awaited.

##### **2nd year B. S Vision Sciences (4rd Semester Exam)**

There were 51 students who appeared in the 2nd year examination. Result is awaited.

##### **3rd year B. S Vision Sciences (6th semester)**

There were 46 students who appeared in the said examination. Result is awaited.

##### **4th year B. S Vision Sciences (8th semester)**

There were 27 students who appeared in the examination. Result is awaited.

### Admission 2016:

The admissions of BVS were finalized through NTS followed by interview at PICO. Entry Test was conducted by National Testing Services on dated 26th October 2015. Applicants from Baluchistan and Gilgit Bultistan were exempted from entry test.

- Total number of students applied for the BVS Course **203**
- Number of Students appeared in the Test **203**
- Interview for Bachelor of Vision Sciences (BVS) were held on 16-17 November 2015.
- Number of Students appeared in Interview **44**
- Number of Students selected according to seat distribution given in Prospectus **40**

OTC admission was finalized through interview by admission committee on 21th November 2015. Interview was held for OTC on 15 November 2015.

- Number of Students applied for the course **12**
- Number of Students from Government Service **02**
- Number of Students appeared in Interview **12**
- Number of Students selected according to seat distribution given in Prospectus **10**

### Other Activities

#### Refresher training Course for Trained Ophthalmic Technician:

One week refresher course was organized for Ophthalmic Technician in December 2015. Total 15 Ophthalmic technicians participated.

#### JCAHPO Certification:

The Joint Commission on Allied Health Personnel (JCAHPO) has been done in March 2015. Total 24 students appeared in the COA and COT certification examination.

S.No	JACAHP Certification Examination	Total Candidates	Pass	Fail
1	COA Certification Examination	20	15	05
2	COT Certification Examination	04	02	02

The Joint Commission on Allied Health Personnel (JCAHPO) is planned to be held in first week of March 2016. Total 60 students have applied for the COA certification.

#### ICO Certification Examination:

International Council of Ophthalmology Certification examination in Basic Sciences, Optics & Refraction and Clinical Sciences was held at PICO April 2015.

S.No	ICO Certification Examination	Total Candidates	Pass	Fail
1	Basic Sciences Certification Examination	12	11	01
2	Optics & Refraction Certification Examination	13	11	02
3	Clinical Sciences Certification Examination	21	09	12

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### **1. Distribution of Medical Kit Ophthalmic**

Medical Kits were distributed among the 20 students of BVS 2<sup>nd</sup> & 3<sup>rd</sup> year each aiming to enhance their practical skills.

### **2. Participation in Eye Camps**

PICO encourages student for participation in volunteer activities which will help them in their carrier building and it also shape student personalities temperament.

PCIO is regularly carrying out Free Eye Camps in collaboration. Students of undergraduate Courses as per practice actively participated in the free eye camps organized by PICO, in collaboration with the Lions Club.

### **3. Education Expo 2015**

PICO faculty and trainee students participated in the education expo organized by the Jung Media Group where they also offered free eye check up services for the visitors. The Chief Guest of the Expo was the Governor Khyber Pakhtunkhwa he lauded the PICO efforts and presentation in the expo.

### **4. Sports week**

As a part of extracurricular activities the Institute arranged a week sports activities. For this purpose Board of Intermediate and Secondary Education Peshawar sports ground was officially arranged to carry out the outdoor sports.



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## 2. Eye Health Promotion & the Prevention of Blindness

### ACTIVITIES OF COMPREHENSIVE EYE CARE CELL:

Comprehensive Eye Care (CEC) Cell, Pakistan Institute of Community Ophthalmology, HMC Peshawar is a technical hand of the Government of Khyber Pakhtunkhwa, Health Department in Eye Care Services. Its aim is to provide preventive, promotive, curative and rehabilitative eye care services. It has also been notified as the Focal Point of Health Department, Govt. of Khyber Pakhtunkhwa for all the eye care services throughout the province.

#### 1. District Ophthalmologists Workshop 9<sup>th</sup>-11<sup>th</sup> June, 2015

A 3 days' District Ophthalmologist Workshop was conducted from 9<sup>th</sup> to 11<sup>th</sup> June, 2015 at PICO under the National Program for Prevention and Control of Blindness, Khyber Pakhtunkhwa. Total 12 persons from different districts participated in the workshop. Lectures on different areas of medical and general health care issues were delivered. The specific areas included Diabetes, Diabetic Retinopathy, Vision 2020, Community Eye Health, Government working in budgeting and the Govt. Procurement process. At the end of the workshop the participants were awarded with certificates.







## 2. Community Development Workshop for Trainee Medical Officers 15<sup>th</sup>-20<sup>th</sup> June, 2015.

As a part of Continues Medical Education (CME), one week Workshop was conducted for TMOs from 15<sup>th</sup> to 20<sup>th</sup> June, 2015 at PICO. Total 15 TMOs from the three teaching hospitals i.e. LRH, KTH and HMC participated in the workshop. Lectures on Vision 2020, Cataract Program in Pakistan, Developmental Planning Process in the Govt. Sector and different aspects of Health Care Management, Team building and Leadership were given. At the end of the workshop the participants were awarded with certificates.



## 3. Celebration of World Glaucoma Week (8<sup>th</sup>-14<sup>th</sup> March, 2015)

PICO celebrated Glaucoma week with full spirit. This year it was celebrated from 08<sup>th</sup> to 14<sup>th</sup> March 2015. Theme for this year was "BIG" (BEAT INVISIBLE GLAUCOMA).

Planned activities for this year as per WGA (World Glaucoma Association) guidelines;

- Involving glaucoma patients by organizing a screening event at Hayatabad Medical Complex, Peshawar.
- Give a lecture to a patient support group
- Participate in radio & TV shows to talk about glaucoma and to answer questions,
- Contact newspapers to publish information about glaucoma.

PICO planned following activities for this year World Glaucoma Week

- Media campaign for Glaucoma awareness.
- Hospital based activities free screening camp.

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- Patient group discussion for dissemination of awareness regarding Glaucoma.
  - Outreach activities & screening camps.
  - School & College activities regarding awareness of Glaucoma.

#### **MEDIA CAMPAIGN FOR GLAUCOMA AWARENESS:**

In this regards media personal meeting was called on 04<sup>th</sup> march 2015 at PICO conference room in which representative from different printing & electronic media participated. They were briefed regarding the Glaucoma awareness and Glaucoma week theme.

Talk shows on FM Khyber Pakhtunkhwa Radio and Radio Pakistan were also arranged on awareness and importance of WGW celebration.

#### **MAIN HIGHLIGHTS OF WGW CELEBRATION:**

**On 8<sup>th</sup> of March 2015** regarding Glaucoma awareness, detail coverage was given in different daily news papers including English, Urdu & Pashto.

**On 9<sup>th</sup> of March 2015** coverage was given by media personal to inaugural ceremony of free screening camp at casualty Hayatabad Medical Complex, Peshawar. Telephonic interviews by different FM Radio stations were arranged regarding Glaucoma awareness.

**On 10<sup>th</sup> of March 2015** special interviews were arranged by FM Khyber Pakhtunkhwa official channel and radio Pakistan Peshawar regarding Glaucoma week. In which detail discussion was made regarding Glaucoma awareness.

**On 11<sup>th</sup> of March 2015** a team from PICO visited PTV center Peshawar and arranged free screening camp. Media coverage by PTV News Islamabad and Peshawar center was given. In which Glaucoma awareness activities and role of PICO was highlighted in all news bulletins especially in Khabarnama at 9pm.

**On 12<sup>th</sup> of March 2015** a team from PICO visited Radio Pakistan Peshawar and arranged free screening camp. Seminar on Glaucoma awareness at radio Pakistan auditorium was also arranged in which PICO students and Dr. Junaid Faisal Wazir deliver their talks related with Glaucoma awareness and Glaucoma week celebrations.

At the end of WGW, a press release was issued by PICO and was shared with all printing and electronic media.

#### **HOSPITAL BASED ACTIVITIES FREE SCREENING CAMP:**

In this regard free screening camp at casualty HMC was arranged for full week. During full week 720 people were screened for Glaucoma with air puff tonometer in which 160 people were found with raised IOP and were referred to consultant Eye OPD, HMC for further management.



#### **PATIENT GROUP DISCUSSION FOR DISSEMINATION OF AWARENESS REGARDING GLAUCOMA:**

In this regard one day activity was arranged at PICO Conference Hall on 10<sup>th</sup> March 2015 in which Glaucoma patients and their relative participated. Advocacy was done with Glaucoma patient group and their relatives regarding Glaucoma risk factors, nature of disease and importance of regular screening.





### OUTREACH ACTIVITIES & SCREENING CAMPS:

Banners, brochures and flyers regarding Glaucoma awareness and importance of Glaucoma week celebration were distributed in different districts throughout the Province. Screening camp at PTV center Peshawar was arranged on 11<sup>th</sup> of March 2015 in which 215 PTV employees were screened for Glaucoma. Out of 215, 32 PTV employees were found to be with raised IOP and were referred to consultant Eye OPD, HMC.



Second screening camp at Radio Pakistan Peshawar was arranged on 12<sup>th</sup> March 2015. In which 110 employees were screened for Glaucoma. Out of which 13 were came out with raised IOP and were referred to consultant Eye OPD, HMC for further management.





### SCHOOL & COLLEGE ACTIVITIES REGARDING AWARENESS OF GLAUCOMA:

In this regard activity was arranged for Eye Care Professionals at PICO Conference Hall on 14<sup>th</sup> of March 2015. Presentations were made by PICO students regarding importance of Glaucoma week, Glaucoma risk factors and importance of Glaucoma therapy compliance.





#### **WORLD SIGHT DAY (WSD) 8TH OCTOBER 2015:**

World Sight Day is observed around the world by all partners involved in preventing visual impairment or restoring sight. It is also the main advocacy event for the prevention of blindness and for "Vision 2020: The Right to Sight", a global effort to prevent blindness created by World Health Organization (WHO) and the International Agency for the Prevention of Blindness (IAPB).

#### **SOME IMPORTANT FACTS ABOUT BLINDNESS:**

- About 285 million people are visually impaired worldwide;
  - 39.5 million are blind and
  - 246 million have low vision (severe or moderate visual impairment)
- Preventable cause are as high as 80% of the total global visual impairment burden

#### **World Health Organization (WHO) Action for Universal Eye Health**

- The Action Plan identifies its purpose as to 'increasing access to comprehensive eye care services
- That is integrated into health systems'.
- Each year, we will focus on one aspect of the theme to develop a "**Call to Action**". For 2015, the call to action is:

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### i. Get your Eyes Tested

The call to action recognizes a vital aspect of a successful and sustainable eye health network – an informed and regular end-user base which accesses eye care services at different points, based on need, age and other such factors.

- Works with multiple Audiences
- Works with multiple areas of focus

### Celebration of WSD and Pakistan Institute of Community Ophthalmology, HMC, Peshawar Pakistan



PICO CEC Cell also held a one day District ophthalmologists meeting at PICO so as to orient them about the importance of celebration of World Sight Day and play their role in raising awareness about the Eye Care among the masses in their respective districts.

#### PICO Actions with Respect to World Sight Day:

PICO, HMC, Peshawar Pakistan marked this day with eagerness and organized three events in different venues and manners as:

- District Ophthalmologist Meeting at PICO, HMC
- Awareness Raising and Capacity Building of School Teachers at ILMS School Hayatabad Peshawar
- Free Eye Screening Camp for Staff of FATA Secretariat, Peshawar
- Posting and Dissemination of Awareness Material
- Media Coverage



## Ophthalmic Meeting





## FATA Secretariat





#### LIMS School



#### 4. SUPPLY OF OPHTHALMOLOGY EQUIPMENT TO TWO HOSPITALS.

In the CFY 2014-15, Rs. 28.000 million were allocated for supply of ophthalmology equipment to two hospitals i.e. Ayub Teaching Hospital, Abbottabad and THQ Hospital Naurang, Lakki Marwat under the National Program for Prevention and Control of Blindness, Khyber Pakhtunkhwa. The purchase process was completed in March 2015 and the supply was completed in May 2015. Total cost of ophthalmological equipments during the CFY 2014-15 was Rs. 27.927 million.

#### 5. FREE SURGICAL EYE CAMPS.

In the CFY 2014-15, Rs. 3.380 million were allocated for total Eight free surgical eye camps under the National Program for Prevention and Control of Blindness, Khyber Pakhtunkhwa. Under the said program, medicines, IOIs and consumables were purchased for the eye camps.

The first free surgical eye camp was held in DHQH Hangu from 24<sup>th</sup>-28<sup>th</sup> March, 2015 in which total 600 patients were seen in the OPD, 300 patients were provided free medicines and total 97 surgeries were performed.

The 2<sup>nd</sup> free surgical eye camp was conducted at DHQ Teaching Hospital, D.I Khan from 12<sup>th</sup>-16<sup>th</sup> May, 2015. In this camp total 1410 patients were seen in the OPD, 300 free medicines were given and a total of 92 patients were operated for cataract surgeries.

The 3<sup>rd</sup> free surgical eye camp was conducted at DHQ Teaching Hospital, Bannu from 25<sup>th</sup>-29<sup>th</sup> May, 2015. In this camp total 1290 patients were seen in the OPD, 674 free medicines were given and a total of 117 patients were operated for cataract surgeries.

In six months' period a total of 3300 patients were seen in the OPD, free medicines were given to 1274 patients and total 306 cataract surgeries were performed. The remaining 5 camps will be conducted in the financial year 2015-16.

S.No	Camps	OPD	Free Medicine	Surgeries
1	DHQH Hangu (24 <sup>th</sup> – 28 <sup>th</sup> March, 2015)	600	300	97
2	DHQTH D.I.Khan (12 <sup>th</sup> – 16 <sup>th</sup> May, 2015)	1410	300	92
3	DHQTH Bannu (25 <sup>th</sup> - 29 <sup>th</sup> May, 2015)	1290	674	117
<b>Grand Total</b>		<b>3300</b>	<b>1274</b>	<b>306</b>







6. **FREE EYE SCREENING CAMPS IN PARTNERSHIP WITH GULBAHAR LIONS CLUB, PESHAWAR.**

Apart from the Free Surgical Eye Camps, PICO also conducts free eye screening camps, in which patients are screened for refractive errors, provided with medicines and glasses and the patients screened for cataract surgeries are then referred to HMC. Following is the details of the free eye screening camps:-



**i) Free Eye camp at Village Tarnab, Peshawar on 1<sup>st</sup> Feb. 2015.** In this camp, three doctors and 6 optometrists participated from PICO. While the Lions Club provided administrative support. In this camp 510 patients were seen, about 340 patients were provided with free medicines and glasses for refractive errors.

**ii) Free Eye camp at Village Jabasni, Gadoon Area Distt. Swabi on 25<sup>th</sup> April, 2015.** In this camp, the Honorable Secretary Health, Govt. of Khyber Pakhtunkhwa, Mr. Mushtaq Jadoon also accompanied the PICO Team of Doctors and Optometrists. This camp was conducted on the special directions of the Secretary Health. In this camp, more than 580 patients were seen, about 213 patients were provided with free medicines and glasses. This was a very successful camp.

**iii) Free Eye camp at Village Speenkhak, Pabbi, Cherat Road, Peshawar on 14<sup>th</sup> June, 2015.** This camp was also conducted by a PICO Team of three doctors and 6 optometrists. In this camp 553 patients were seen, about 315 patients were provided with free medicines and glasses for refractive errors.

**iv) Free Eye camp at Fakir Kalay Pajjagi Raod, Peshawar on 6<sup>th</sup> September, 2015.** This camp was also conducted by a PICO Team of three doctors and 6 optometrists. In this camp 435 patients were seen, about 227 patients were provided with free medicines and glasses for refractive errors.

**v) Free Eye camp at Zamung Kor Orphanage Charssada on 5<sup>th</sup> August, 2015.** This camp was also conducted by a PICO Team of three doctors and 6 optometrists. In this camp 583 patients were seen, about 278 patients were provided with free medicines and glasses for refractive errors.

**vi) Free Eye camp at Fata Secretariat Warsak Road on 8<sup>th</sup> October, 2015.** This camp was also conducted by a PICO Team of three doctors and 6 optometrists. In this camp 225 patients were seen, about 160 patients were provided with free medicines and glasses for refractive errors.

**vii) Free Eye camp at Rashid Garhi Pabbi Chirat Road on 13<sup>th</sup> December, 2015.** This camp was also conducted by a PICO Team of three doctors and 6 optometrists. In this camp 556 patients were seen, about 370 patients were provided with free medicines and glasses for refractive errors.

S.No	Camp No	Venue	Date	OPD	Refraction/Glasses	Cataract Surgery
1	84	Tarnab Farm Peshawar	2/1/2015	510	340	37
2	85	Village Gabsni Gadoon	4/25/2015	580	213	13
3	86	Chirat Road Pabbi	6/14/2015	553	315	43
4	87	Fakir Kalay Pajjagi Raod, Peshawar	9/6/2015	435	227	30
5	89	Zamung Kor Orphanage Charssada	8/5/2015	583	278	42
6	88	Fata Secretariat Warsak Road	10/8/2015	225	160	15
7	90	Rashid Garhi Pabbi Chirat Road	12/13/2015	556	370	76
		<b>Total</b>		<b>3442</b>	<b>1903</b>	<b>256</b>

## 7. **MURAD EYE BANK**

PICO has the state of the art eye bank facility, where corneal transplants are made possible for the corneal blind patients. This is remarkable service of PICO, HMC in the Khyber Pakhtunkhwa. Murad Eye Bank is having international collaboration with Sri Lanka Eye Donation Society for providing corneal tissues and support of poor patients. From 1<sup>st</sup> Jan- 31<sup>st</sup> December 2015 seventeen patients under went corneal transplant through Murad Eye Bank.

### **Services**

Murad Eye Bank provides following services to corneal blind patients.

- ✓ Provision of corneal tissues.
- ✓ Provision of corneal transplant facilities.
- ✓ Support of poor patients.
- ✓ Providing corneal grafts is the main function of Murad Eye Bank.
- ✓ In this regards Murad Eye Bank imports Cornea from Sri Lanka Eye Donation Society that are Provided to Corneal Blind Patients.

#### **List of Patients Operated In Jan to December 2015**

S.NO	Patient Name	Donors Cornea Number	Surgeon Name
1	Miss Maria	68692	Dr. Mir Zaman
2	Miss Shahida	67979	Dr. Mir Zaman
3	M.Bashir	68076	Dr. Mir Zaman
4	Muhammad Nazir	68077	Dr. Sadiqullah
5	Atif	68745	Dr. Sadiqullah
6	Shamsher	69068	Dr. Mir Zaman
7	Bas Gul Bibi	69069	Dr. Mir Zaman
8	M/O Aman Ullah	69699	Dr. Sadiqullah
9	M. Salman Fazal	69700	Dr. Mir Zaman
10	Jan Bibi	69565	Dr. Mir Zaman
11	Bas Gul Bibi	69568	Dr. Mir Zaman
12	Gul Zubana	70820	Dr. Sadiqullah
13	Azam Bibi	70822	Dr. Sadiqullah
14	Saeed Ullah	70821	Dr. Nazim
15	Muqaddas Saleem	71046	Dr. Sadiqullah
16	M. Gul Khan	71005	Dr. Sadiqullah
17	Rafah Ud Din	71040	Dr. Sadiqullah

#### 8. Micro Surgical Training Center (MSTC)

MSTC is now partially supported by FHF in the form of training of Ophthalmologists from Afghanistan.

Gulbahar Lions Club, Peshawar also provides support in the form of medicine and IOL's. Salaries of the staff are supported by PICO.

#### STATISTIC OF CLINICAL WING 2015 DEPARTMENT OF OPHTHALMOLOGY PICO MSTC, HMC, PESHAWAR

S.No	Surgical Procedures	Months												Grand Total
		Jan	Feb	March	April	May	June	July	Aug	Sept	Oct	Nov	Dec	
1	Cataract	36	22	22	31	34	19	3	1	20	24	30	13	253
2	Phaco					05	01	0	0	0	1	1	3	11
3	Keratoplasty	01	02	02			01	0	0	0	2	3	0	11
4	Pterygium	03	01	02			01	0	0	3	0	1	0	11
5	Chalazion	01	01	01	01	0	0	0	0	0	0	0	0	04
6	Entropion	2	0	0	0	01	0	0	0	0	0	0	0	03
7	Scleral Graft	1	0	0	0	0	0	0	0	0	0	0	0	01
8	ROS	4	8	10	8	3	5	5	0	1	1	3	1	49
9	A/C Wash	0	0	0	0	1	0	0	0	1	0	1	0	3
10	IOL Recentrations	0	1	0	0	0	0	0	0	0	0	0	0	1
11	Removal of IOL	0	0	0	1	0	0	0	0	0	0	0	0	1
12	Other	2	1	1	0	0	1	1	1	0	1	1	1	9
13	Minor Procedure	06	09	11	08	04	06	4	3	5	2	7	9	74
	<b>Total</b>	<b>20</b>	<b>23</b>	<b>27</b>	<b>18</b>	<b>9</b>	<b>34</b>	<b>13</b>	<b>5</b>	<b>30</b>	<b>31</b>	<b>47</b>	<b>27</b>	<b>431</b>

#### 11 M&E VISITS OF COMPREHENSIVE EYE CARE CELL, PICO.

CEC Cell of PICO has played an important part in the up gradation of Eye Departments of the province. So far, One Centre of Excellence (HMC), Peshawar, five teaching hospitals (LRH, KTH, Peshawar, Ayub Teaching Hospital, Abbottabad, SGTH Swat and DHQ Teaching Hospitals, 23 DHQ Hospitals (except Kala Dhaka) and six THQ Hospitals.

##### Monitoring & Supervision

Performance of the district eye departments is regularly monitored by CEC Cell of PICO through monthly reports and filed monitoring visits to keep an updated account of the performance and issues of the eye departments. A team comprising of Dr. Junaid Faisal Wazir, Consultant Community Ophthalmologist and Mr. Pervez Akhtar, Program officer PICO visited these sights and collected the essential information on a pre-set monitoring proforma.

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### **1. DHQ Hospital Haripur:-**

The Eye Department of the DHQ Hospital Haripur was visited on 12/10/2015.

#### **Findings:**

**Infrastructure:** The hospital is newly built and has wide area of 200 kanal. It has independent Eye Department, OPD, OT and has 15 dedicated beds (08 for male and 07 for female).

**Equipment:** The Eye Department has been provided with all the essential ophthalmology equipment for OPD & OT.

#### **Recommendations:**

1. The hospital is functioning well. It needs to be supported in provision of some equipment in OT and OPD to make it functional at optimal level.
2. The vacant posts may be filled.
3. The Eye Department is directed to submit the Monthly M&E Report on regular basis.

### **2) DHQ Hospital, Abbottabad**

The DHQ Hospital Abbottabad was visited on 13/10/2015

#### **Findings:**

**Infrastructure:** The hospital has a dedicated OPD, Consultant and MO rooms and a dedicated OT with shared waiting area. It has 24 beds for male and female shared with ENT

**Equipment:** The hospital is well equipped and has all the essential equipment for eye care except Ophthalmic Phacoemulsification/Machine.

#### **Recommendations:**

The Eye Department needs repair and provision of some new equipment for the purpose of improvement, for which the Public Private Partnership funds may be utilized.

### **3) DHQ Hospital, Mansehra.**

The DHQ Hospital Mansehra was visited on 14/10/2015.

#### **Findings:**

**Infrastructure:** The hospital has 8 beds (4 males + 4 females) in the hospital. The hospital has dedicated Eye OPD, OT and rooms for MOs and consultants.

**Equipment:** The hospital has all the standard eye care equipment except Phaco machine.

#### **Recommendations:**

MS of the hospital has asked for posting of a qualified ophthalmologist. The repair of equipment needs to be supported by the Public Private Partnership fund.



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#### **4) DHQ Hospital, Battagram.**

The DHQ Hospital Battagram was visited on 15/10/2015.

**Infrastructure:** The Eye Unit of the hospital has been upgraded & made functional by the CBM. There are 18 dedicated beds (9 male+9 female) for eye patients. The hospital has independent OPD, consultant room, doctors' room, main OT for the eye patients.

**Equipment:** The hospital has all the essential & standard eye care equipment except Automatic Pneumatic Tonometer, Refraction Box, Argon Laser, Phaco machine, B Scan and DCR, Squint & Glaucoma sets which were not available in the hospital.

#### **Recommendations:**

The Govt. needs to appoint the District Ophthalmologist on regular basis for sustainability of current performance of the Eye Department.

#### **5) DHQ Hospital/RHC, Kohistan.**

The DHQ Hospital/RHC Kohistan was visited on 16/10/2015.

**Infrastructure:** The hospital has an independent building with OPD, waiting areas, OT and Wards of 8 beds. But the major problem is of supply of water in the OT, without which OT is not possible.

**Equipments:** All the essential eye equipment has been provided but only the OPD equipment is under use to some extent

#### **Recommendations:**

1. Creation of post of District Ophthalmologist and its appointment.
2. Repair of Eye OT & supply of water.
3. For the time being, it is proposed that the Eye surgeon of Distt. Kohistan may be negotiated/ requested for fortnightly visit and surgeries by providing some incentives.

#### **6) DHQ Hospital, Charsadda.**

The DHQ Hospital, Charsadda was visited on 17/10/2015.

**Infrastructure:** Hospital got a good infrastructure, fully functional outpatient department separate male, female wards (each 10 bedded) and a well equipped OT which they are sharing with ENT Department.

**Equipment:** The hospital has got all the necessary ophthalmology equipment.

#### **Recommendations:**

1. Existing OT needs some minor repairs.
2. Needs some new equipment and repair of existing equipment to run the operations smoothly.

#### **7) THQ Hospital, TANGI**

The said hospital was visited on 17/10/2015.

#### **Infrastructure:**

The Eye OPD, one consultant room and one waiting room were available. Operation Theater was shared. There is no ward available.

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**Equipment:**

Slit Lamp, Applanation Tonometer, Vision Testing drum, Direct & indirect ophthalmoscope (need repair), retinoscope (need repair), Refraction box with trial frame, focimeter, Fundus camera (not working), keratometer, A scan, instrument trolley, operating microscope (02, one is not functioning), autoclave, operating table, cataract set (not functional) and steam sterilizer.

**Recommendations:**

Posting of District Ophthalmologist on urgent basis.

**iii) THQ Hospital Shabqadar**

The said facility was visited on 17/10/2015

**Infrastructure:** Infrastructure wise, it has a good Eye unit, having a separate outpatient department and shared OT

**Recommendations:**

One support staff needs to be trained in eye care (technician course) to support the District Ophthalmologist.

**7) DHQ Teaching Hospital, D.I. Khan.**

The DHQ Teaching Hospital, D.I. Khan was visited on 19/10/2015

**Infrastructure:** There were 10 rooms for OPD and a separate ward of 20 beds (10 male & 10 female beds) plus 4 isolation rooms for Eye Diseases. It has an independent OT with three OT tables.

**Equipment:** The hospital has got all the standard eye equipment required for a teaching hospital

**Recommendations:**

A full time and independent head of eye department needs to be notified for full time service provision & supervision.

**8) DHQ Hospital, Tank.**

The DHQ Hospital, Tank was visited on 20/10/2015

**Infrastructure:** At present no isolated eye care infrastructure but the hospital has wide space and an independent eye care services can be started.

**Equipment:** The hospital has got all the standard eye equipment required for a DHQ hospital level

**Recommendation:**

It is suggested that the post of District Ophthalmologist may be filled on urgent basis, as the equipment will deteriorate if not utilized and remained in stores/packed for long period.

**9) THQ Hospital, Serai Naurang.**

The DHQ Hospital, Tank was visited on 21/10/2015

**Infrastructure:** At present no isolated eye care infrastructure but the hospital has wide space and an independent eye care services can be started. However, it has got an independent OPD but no surgical facilities/interventions at present.

**Equipment:** The hospital has got all the standard eye equipment required for a THQ hospital level

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**Recommendation:**

The EDO (H), MS and District Ophthalmologist need to sit together to take measures for security and utilization of the eye equipment/department and start surgeries there.

**10) DHQ Hospital, Karak.**

The DHQ Hospital, Karak was visited on 22/10/2015.

**Findings:**

**Infrastructure:** Eye Department of the hospital has independent OPD, Consultant rooms 20 bedded wards, and shared OT.

**Equipment:** It has been provided with all the essential equipment required as per standards for a DHQH Hospital but most of equipment need repair

**Recommendations**

The hospital is functioning well. It has good surgical rate but the daily OPD needs improvement. The vacant posts of eye department may be filled urgently.

**11) DHQ Hospital, Daggar Buner.**

The DHQ Hospital Daggar, Buner was visited on 26/10/2015

**Findings:**

**Infrastructure:** Eye Department of the hospital has independent OPD, Consultant room, Refraction room, waiting areas, furnished OT and 20 bedded wards.

**Equipment:** It has been provided with all the essential equipment required as per standards for a DHQ Hospital

**Recommendation:**

The M&E Team feels that there is no difficulty in record keeping and compilation if the District ophthalmologist himself takes initiative.

**Major Issues**

From the above, it can be seen that the most common problems in the Eye Departments of almost all the hospitals is the deficiency of staff

Some of the essential equipment has been out of order and require minor repairs, but the hospitals are unable to make these repairs. PICO has proposed for establishment of an electro-medical workshop at PICO to provide the M&R facilities for eye departments of all the hospitals.

PICO needs support of the Health Department to direct the eye departments of all the hospitals to provide regular reports to PICO.



### Summary of Findings, Issues & Remarks/ Recommendations

S-No	Hospital	HR Issues	Equipment Requirements	Issue	Remarks/Recommendations
1	DHQH Haripur upgraded by Fred Hollows Foundation in 2003-04	One post of each Optometrist (BPS-17) and Ophthalmic Technician (BPS-09) is vacant	Cataract sets, Microscope, A-Scan, Direct & Indirect Ophthalmoscope required	Vacant posts & new equipment required.	Meet the equipment requirement through Public Private Partnership Funds.  Fill the vacant posts.
2	DHQH Abbottabad upgraded in 2006-07 under the NP for PCB	The posts of District Ophthalmologist (BPS-18), Optometrist (BS-17) and 03 Ophthalmic technicians are vacant	Cataract sets, Indirect Ophthalmoscope, retinoscope, surgeon stools and table for surgery are additionally required while Lasers, Autorefractor, Microscope, Slit lamp, A&B Scan require repair.	Vacant posts & Repair of existing equipment and some new equipment required.	Meet the equipment requirements through PPP. Filling of vacant posts.  M&R Workshop at PICO is required for permanent solution.
3	DHQH Mansehra upgraded in 2006-07 under the NP for PCB	One post of Optometrist (BS-17) is vacant	one new trial box, trial lens set, B Scan and universal trial frame are required and ophthalmoscopes, retinoscope Slit Lamp & Microscope need repair	The OT performance of the hospital is below mark. The MS of the hospital demanded for provision of a qualified Distt. Ophthalmologist.	The hospital to meet the equipment M&R and new equipment requirement from the Public Private Partnership funds and transfer/posting of an ophthalmologist from Haripur (there are two ophthalmologists in Haripur) is recommended at DHQH Mansehra.
4	DHQH Battagram upgraded by CBM in 2003	Post of District Eye Specialist, optometrist & ophthalmic technician are vacant	Phaco, B Scan & DCR sets required, while Direct ophthalmoscope, retinoscope & microscope	The most important problem is of sustainability after the INGO (ALP) ceases its	The Govt. need to appoint the District Eye Specialist on permanent basis and PICO need to take up the equipment issues with the donors.

			require repair	support.	
5	DHQH Dassu Kohistan upgraded by NP for PCB, SSI, FHF in 2006	Post of District Eye Specialist, optometrist & ophthalmic technician are vacant	Nil	Refurbishment and provision of regular supply to Eye OT. District Eye Specialist require to be filled	Creation of post of District Ophthalmologist and its appointment. Repair of Eye OT & supply of water. For the time being, it is proposed that the Eye surgeon of Distt. Kohistan may be negotiated/requested for fortnightly visit and surgeries by providing some incentives. Technician from prefferi needs to be transferred at the hospital.
6	DHQH Charsadda upgraded by FHF in 2003	One post of Optometrist newly created and is lying vacant	B Scan, Autoref and an Air puff Tonometer are additionally demanded. While, Slit lamp, Retinoscope, phaco machine needs repair.	Appointment on the post of optometrist & repair of essential equipment	The existing Eye OT may not be shifted.  Appointment on the post of optometrist & repair of essential equipment.  Existing OT needs some minor repairs.
7	THQH Tangi upgraded in 2010-11 by the National Program for PCB	The post of Eye Specialist is vacant	All essential equipment is available. Some equipment needs repair	Filling of vacant post of eye specialist	The vacant post of eye specialist may be filled on urgent basis to start the eye care services again. In addition, one of the technicians needs to be trained in ophthalmology.
8	THQH Shabqadar upgraded in 2010-11 by the National Program for PCB	District ophthalmologist is posted there/ No issue	available	One support staff needs to be trained in eye care (technician course).	One support staff needs to be trained in eye care (technician course) to support the District Ophthalmologist.
9	DHQ teaching Hospital D.I. Khan upgraded by FHF & NP for PCB 2013-14	Assistant Prof., District Ophthalmologist, JR, Optometrist and Ophthalmic Technician are lying vacant	All the essential equipment has been provided	i) Some key posts are lying vacant ii) The Prof. Incharge is the C.E of GMC, there is no permanent	A full time and independent head of eye department needs to be notified for full time service provision & supervision.  The vacant posts need to be filled in order to utilize the eye department as per standards of a teaching hospital.

				head of the Eye Deptt. iii) The surgeries rate is not in proportion to the staff available; moreover, only cataract surgeries are performed in the hospital.	
10	DHQH Tank upgraded by NP for PCB in 2013-14	The posts of a Distt. Ophthalmologist, optometrist and ophthalmic technician are sanctioned but are lying vacant.	All the essential equipment has been provided.	The eye department is totally non-functional due to non-availability of Distt. Ophthalmologist.	The vacant post of Distt. Ophthalmologist and other eye care staff needs to be filled immediately to functionalize the eye department.
11	THQ Hospital Sarai Naurang, Lakki Marwat upgraded by NP for PCB in 2014-15	District ophthalmologist is posted there	All the essential equipment has been provided.	The eye department is non-functional due to the facilities not provided by the hospital. The DO is worried about the security of the eye equipment.	The EDO (H), MS and DO need to sit together to take measures for security and utilization of the eye equipment/department and start surgeries there.
12	DHQH Karak upgraded by Sight Savers International, in the year 2000.	Two posts of ophthalmic technicians (vacant) and one newly created post of Optometrist is lying vacant	Since, the hospital was upgraded in 2000, therefore some of the equipment like 02	No specific issue.  Vacant posts need to be filled.	The eye department is functioning well. If the vacant posts are filled, the utilization of the eye department will further increase.

			Direct ophthalmoscopes, 02 retinoscope, 01 autoclave requires repair. While A&B Scan (urgently required), YAG Laser and cataract sets are urgently required.		
13	DHQH Daggar, Buner upgraded by FHF in 2004	one post of ophthalmic technician and one newly created post of Optometrist is lying vacant	Phaco machine & B Scan is demanded by the Distt. Ophthalmologist, while slit lamp, direct ophthalmoscope and retinoscope, Universal trial frame, keratometer and one microscope require repair	The Distt. Ophthalmologist was asked to compile and submit the data to PICO but he refused to do so and proposed for some incentives for his staff to do this work. Data was not available with him in a presentable form.	The MS & Distt. Ophthalmologist of the hospital need to be directed by the Health Department to record, maintain and provide monthly & quarterly report to PICO.



### Photo Gallery

#### M&E Visits of District Eye Departments Oct, 2015



### M&E Visits of District Eye Departments Oct, 2015





M&E Visits of District Eye Departments Oct, 2015



The top-left photograph shows a person in a white shirt sitting in a room with windows. The top-right photograph shows a window with a metal grille. The bottom-left photograph shows a page of the 'STOCK BOOK' ledger with entries for 'OPHTHALMOSCOPE' and 'Refraction box'. The bottom-right photograph shows another page of the 'STOCK BOOK' ledger with entries for 'Refraction box' and 'Lead Quarten'.



### 3 Extra Curricular Activities

#### a. **Sports Week:**

Was organized in the 2<sup>nd</sup> week of March 2015. Series of sports activities including cricket, football, badminton, speech competition and painting were carried out throughout the week.

S.No	Games	Final Positions
1	Badminton (Girls)	Sidra (3 <sup>rd</sup> Year) Shah Rukh (2 <sup>nd</sup> year)
2	Badminton (Boys)	Adnan (4 <sup>th</sup> Year) Omer (1 <sup>st</sup> Year)
3	Football (Joint Team)	1 <sup>st</sup> Year, 3 <sup>rd</sup> Year, MPH (CEH), M. Phil (Vision Sciences)
4	Cricket	2 <sup>nd</sup> Year
5	Painting	Simra (1 <sup>st</sup> Year)
6	Speech Competition (English)	Palwasha (1 <sup>st</sup> Year)
7	Poetry	1 <sup>st</sup> & 3 <sup>rd</sup> Year





#### b. Education Expo 2015:

PICO participated in Education Expo 2015 organized by Jung Media Group held on 19 May, 2015 at Pearl Continental Hotel Peshawar. The Honorable Governor Khyber Pakhtunkhwa was a chief guest of the event. PICO stall in the expo consisted of awareness material regarding different courses offered in Vision Sciences at PICO. Besides, refraction facility was also provided on the stall for the visitors. The Honorable Chief Guest underwent refraction in the said stall.





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#### 4: New Developments in PICO 2015

1. Physics and Chemistry lab developed for of FSc. Ophthalmic Technology.
2. Construction work of PICO Hostel started in June 2015.
3. Finance department issued sanction for creation of 32 posts of optometrists in 24 district and 08 tertiary care hospitals.
4. Keeping in view the security of students and staff of PICO, CCTV system was installed in June 2015.
5. The 3<sup>rd</sup> meeting Provincial Blindness Control Board was held in February 2015 at PICO. The Honorable Secretary Health chaired the meeting. Important decisions on issues related to deficiency of Eye Care staff in the hospitals, the Provincial Eye Health Plan and establishment of new academic block of PICO were made in the meeting.



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6. Mr. Brain Doolan (FHF CEO) along with his senior management Mrs. Rashin Choudary (Program Development Coordinator), Mr. Farooq Awan (Acting Country Manager) & Mr. Mustafa Khan (Project Officer) visited PICO and received briefing on different projects being executed by FHF and PICO in collaboration. Some areas for future partnership with PICO were also discussed.





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7. Training of 13 Medical Officers in Primary Eye Care, health system strengthening for managing childhood blindness, diabetes and diabetic retinopathy of district Peshawar held at PICO with collaboration of FHF on 18<sup>th</sup> – 20<sup>th</sup> April, 2015.



8. PICO Evaluation: In the PICO international partners meeting held in February, 2014, it was decided that evaluation of the PICO in terms of its management, HRD function and Comprehensive Eye Care Cell functioning may be carried out prior to making funding decisions to PICO by the partners. Owing to this decision, the partners selected the consultancy firm “CHIP Training & Consultations” for the job. The firm carried out the initial need assessment during March-May 2015 and is in process of finalizing the evaluation report.



9. A joint initial meeting of PICO, SightSavers & FHF to discuss the concept paper of their new project for improvement of eye care services in 04 districts of Khyber Pakhtunkhwa was held at PICO in June 2015. It was decided that a team representative of PICO, FHF and SightSavers to conduct situational analysis survey in four districts of Khyber Pakhtunkhwa including Haripur, Mansehra, Swabi & Swat to examine OPD & OT particularly cataract surgeries annual output, existing human resources, current equipments being used, to explore the strength and weaknesses of each stakeholder and to see cross sectoral linkages and collaboration among different eye care services providers. The role and responsibilities of the partners in this new project were discussed and agreed to build a capacity of the existing health work force in primary eye care, extensive awareness raising, information, education and communication material with simple and straight messages, to develop a referral

recording system at the district level, role of LHWs, Paramedics, Ophthalmic Technicians and Medical Technicians in recording the referrals at the district level.

10. CEC Cell of PICO started the RAAB DR Survey in district Nowshera, involving MPH CEH students, in June 2015. The survey is in process and the results of the survey will be shared with all important stakeholders. It will provide basis for planning the Eye Care Program in the said district.

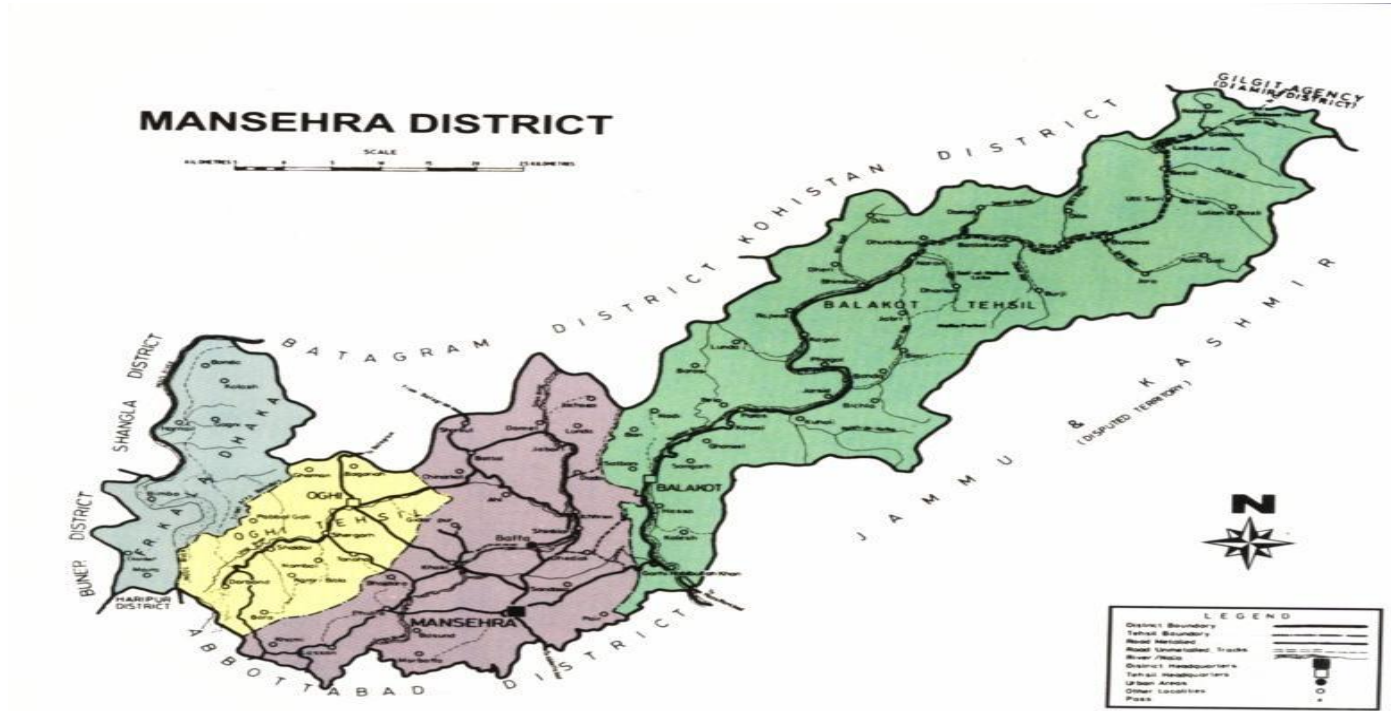
## **5: Trachoma survey in District Karak, Mansehra and Mardan Khyber Pakhtunkhwa (KPK).**

This survey was conducted to assess the prevalence of Trachoma (Eye Disease) in three districts Karak, Mansehra and Mardan (these districts were selected on the basis of high risk factor for trachoma) in fulfillment of Global Trachoma Mapping Project (GTMP). Prof DR. Nasir Saeed, Dean Pakistan Institute of Community Ophthalmology (PICO) Hayatabad Medical Complex (HMC) Peshawar, vide circular letter (No 1-23/PICO/CCO/vol 3 15-16 Dated 31-8-2015) deputed five teams of trained Optometrists (who underwent specific training and after qualifying exam at Nigeria had certification from GTMP, UK) to work as graders. They were supervised by DR Junaid Faisal Wazir Consultant community Ophthalmologist PICO HMC (who underwent global supervisor training and after qualifying exam at Nigeria had certification from GTMP, UK). The teams carried out comprehensive survey in District Karak, Mansehra and Mardan and then submitted a detailed report after completion of the subject survey. Each team had one recorder and one grader. For selection of recorders, Dr. Junaid Faisal Wazir conducted recorders training and examination according to GTMP protocols as supervisor. To full fill the job, three days' recorders training was conducted at PICO, HMC and six recorders were qualified for the survey. The purpose of the survey was to collect data on the status of Trachoma in these three districts and implement SAFE (Surgery Antibiotics Face wash & Environmental change) strategy if Trachoma is present.

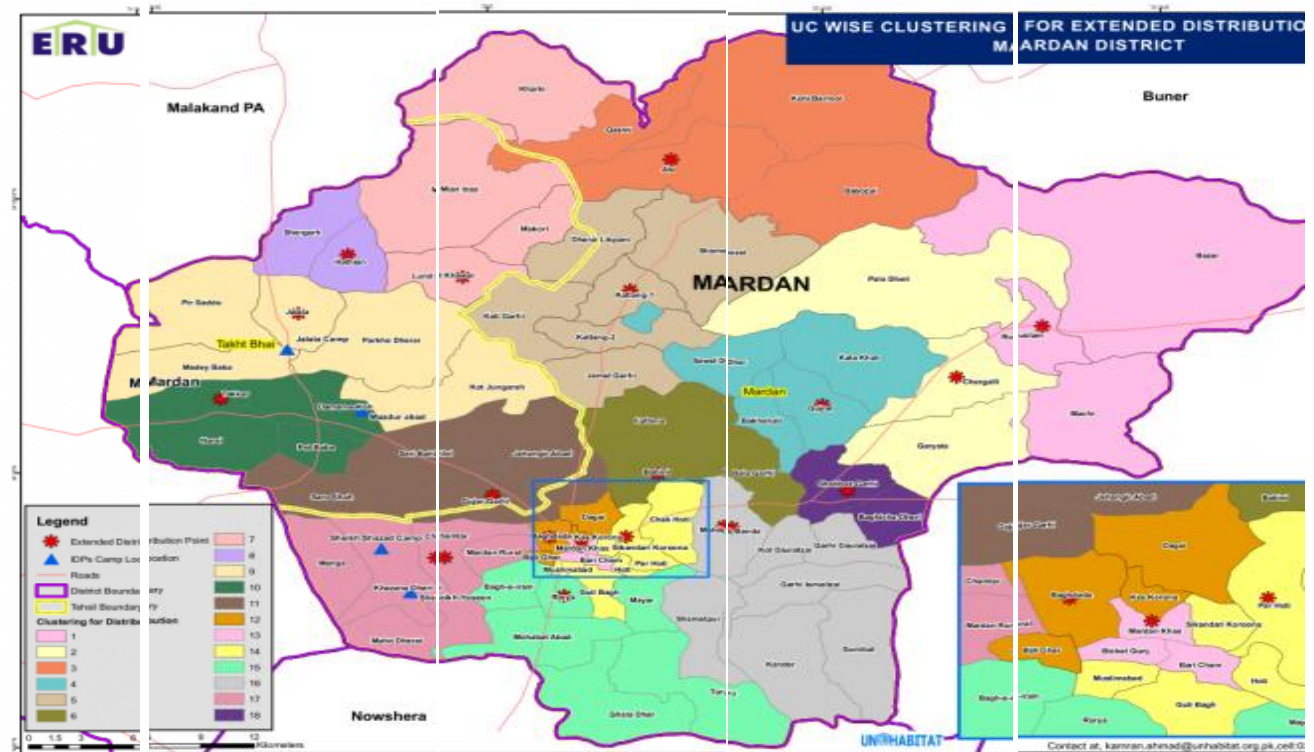
### **1. Survey in District Karak:**



c. District Mansehra, 2nd project district:



**DISTRICT MARDAN**





## Survey in Detail with Date and Cluster codes of All District

Date:8/10/2015	village	Tappi karak	Rehmatabad	Garori	Lucky ghandaki	Karak
	cluster	052	051	070	072	071
	Population	3171	4648	1238	2884	828
Date:9/10/2015	village	Mita khel	Tiran khel	Kanda	Dabli	Shagai
	cluster	073	074	090	088	091
	Population	6472	1775	4515	2243	2128
Date:10/10/2015	village	Ahmad khel	Biland khel	Ghari khel	Sirat khel	Talab khel
	cluster	076	077	078	079	080
	Population	1053	1649	422	3410	1324
Date:12/10/2015	village	Dhada khel	Garjwal khel	Kota killi	Khawja khel	Tarkha koi
	cluster	081	082	084	083	085
	Population	2634	643	653	1200	5705
Date:13/10/2015	village	Ali khel	Tarki khel	Badinkhel	Ghundmirakankhel	Kamalizarakhel
	cluster	059	064	060	061	062
	Population	1611	3149	2639	5365	1587
Date:14/10/2015	village	Jandri	Mashki Khel	Nashpa	Shahidankoli Khel	Manger Khel
	cluster	065	066	058	067	063
	Population	5798	170	467	233	2324
Date:15/10/2015	village	Garoricha Khel	Kabirkilla	Deli Mela	Shawahindokash	Dhandidal Khel
	cluster	068	069	055	056	057
	Population	1213	5687	5487	290	3535
Date:17/10/2015	village	Dab	Isak			
	cluster	053	054			
	Population	4866	4985			
Date:16/10/2015	village	Azar khel	Chain khel	Sarobi		
	cluster	092	094	096		
	Population	541	3306	801		
Date:17/10/2015	village	Kandu khel	Mamni	Faqirabad khasra		
	cluster	099	100	098		
	Population	3775	480	1600		
Date:19/10/2015	village	Alamsheri	Khojakilli	Soratklii	Jahangir banda	warnahmadad
	cluster	113	112	115	111	116
	Population	1943	17027	10571	7656	11945
Date:20/10/2015	village	Shawnasrati	Shenawagudi	Thatar	Miankibanda	Chakmanzai
	cluster	103	105	114	102	104



	<b>Population</b>	1371	25091	5970	13735	1371
Date:21/10/2015	<b>village</b>	Choukara	Ahmad Wala	Siraj khel	Takhatnasrati	Sarkiwalaghar
	<b>cluster</b>	110	109	107	108	106
	<b>Population</b>	25062	769	7388	21360	4263
Survey In Detail With Date And Clustercodes Of All Districts Mansehra:						
Date:26/10/2015	<b>village</b>	Nokot	Tarha tarla	TarhaUtla	Hafizbandiutli	Hafizbanditarli
	<b>cluster</b>	181	182	183	178	177
	<b>Population</b>	3829	1897	1466	753	345
Date:27/10/2015	<b>village</b>	Band piran	Inayat abad	Chitigati	Gandhian	Lang shareef
	<b>cluster</b>	174	179	175	176	180
	<b>Population</b>	6136	4175	1968	1587	1382
Date:28/10/2015	<b>village</b>	khawajgan	Sherpur	Malik pur	Trangi	Gulibagh
	<b>cluster</b>	206	211	207	173	172
	<b>Population</b>	2777	3047	3694	6673	3747
Date:29/10/2015	<b>village</b>	Pandheri	Mairajia	Khaki	Maswalshareef	Khola
	<b>cluster</b>	202	198	204	201	203
	<b>Population</b>	3104	1438	7641	1619	1157
Date:30/10/2015	<b>village</b>	Girwal	Shania bala	Badadi	Shankiari	Bajnah
	<b>cluster</b>	170	171	184	185	187
	<b>Population</b>	1995	3460	5982	15552	7084
Date:31/10/2015	<b>village</b>	Baffalaghmani				
	<b>cluster</b>	165				
	<b>Population</b>	3617				
Date:31/10/2015	<b>village</b>	Bisian	Jigarbalola	Tranna	Hassa	
	<b>cluster</b>	006	008	004	016	
	<b>Population</b>	3107	4189	742	578	
Date:02/11/2015	<b>village</b>	Bat Karar	Balakot	Garlat	Shoha Inajaf khan	Pat Seri
	<b>cluster</b>	014	001	015	003	032
	<b>Population</b>	515	11351	11956	4877	686
Date:03/11/2015	<b>village</b>	Hassari	Kashta	Talhatra	Gari habibullah	Bara Kot
	<b>cluster</b>	037	039	043	013	012
	<b>Population</b>	757	1472	2649	15753	3553
Date:04/11/2015	<b>village</b>	Jabbi	Karnol	Batorha	Sukhdur	Gulmera
	<b>cluster</b>	038	009	034	042	036
	<b>Population</b>	476	2856	1622	934	2374
Date:05/11/2015	<b>village</b>	Kotbalalla	Kiwai	Paras	Bonja	Shohalmazullah
	<b>cluster</b>	040	056	057	055	033

	<b>Population</b>	1450	3093	5029	5626	1794
Date:06/11/2015	<b>village</b>	Hassam Abad		Sangar		
	<b>Cluster</b>	063		064		
	<b>Population</b>	505		6626		
Date:06/11/2015	<b>village</b>	Arbora	Darha	Oghi		
	<b>Cluster</b>	427	428	429		
	<b>Population</b>	4965	5156	11553		
Date:07/11/2015	<b>village</b>	Gojrbandi	Bajna	Shergharh	Ismail Bandi	Chamsair
	<b>Cluster</b>	436	478	482	437	435
	<b>Population</b>	2260	3110	2901	2200	3210
Date:09/11/2015	<b>village</b>	Belain	Jaskot	Kolaki	Tawara	Dilbari
	<b>Cluster</b>	421	420	422	423	418
	<b>Population</b>	5030	3214	5473	8161	3661
Date:10/11/2015	<b>village</b>	Rahim kot	Birbut	Phagora	Shawnggli	Bandi
	<b>Cluster</b>	436	432	471	472	431
	<b>Population</b>	3210	1582	1555	2081	2178
Date:11/11/2015	<b>village</b>	Galibaral				
	<b>Cluster</b>	480				
	<b>Population</b>	2823				
Date:12/11/2015	<b>village</b>	Bagarrian	Ghanian	Shamdara	Chulungian	
	<b>Cluster</b>	417	419	424	425	
	<b>Population</b>	2063	7270	4433	15833	
Date:13/11/2015	<b>village</b>	Bathobani	Naryala	Kathai		
	<b>Cluster</b>	479	462	425		
	<b>Population</b>	2281	1226	4995		
Date:13/11/2015	<b>village</b>	Baidra	Baobandi			
	<b>Cluster</b>	288	289			
	<b>Population</b>	1834	346			
Date:11/11/2015	<b>village</b>	Gojran	Jhangi	Parhana	Thakarmera	
	<b>Cluster</b>	390	391	392	393	
	<b>Population</b>	2100	3397	3292	1948	
Date:14/11/2015	<b>village</b>	Jalloo	Khowari	Shahelia	Pihoraj	Basband
	<b>Cluster</b>	299	306	302	301	290
	<b>Population</b>	2645	2309	1703	788	1127
Date:20/11/2015	<b>village</b>	Arbab khan	Gohatar	Jabba	Mundhar	Phagla
	<b>Cluster</b>	271	273	274	275	276
	<b>Population</b>	871	830	5615	1352	2946

Date:21/11/2015	village	chattabatta	Rerh	Sandasar	Attar Sehsha	Chehr
	Cluster	336	337	338	272	327
	Population	3840	2248	3058	2265	2890
Date:24/11/2015	village	Chakia	Khushala	Kotkay	haddobandi	Labarkot
	Cluster	283	287	309	321	310
	Population	2933	1028	5810	1209	7566
Date:16/11/2015	village	Kotkay	Kunairsharif	Marer	Kandartowara	Nadrey
	Cluster	084	086	088	089	082
	Population	1060	5176	835	797	1820
Date:17/11/2015	village	New Kalli	Polosa	Lashora	Garhihussanzai	Payen
	Cluster	091	092	073	081	067
	Population	1776	5143	3061	1981	4388
Date:18/11/2015	village	Biyani	Bimbal	Kotlay	Sormal	Judba
	Cluster	065	066	158	161	133
	Population	2413	4102	700	1261	5423
Date:19/11/2015	village	Shahdag	Gumbat	Cheer	Shagaikhail	Gigani
	Cluster	144	157	120	143	127
	Population	1751	448	2179	5032	1509
Date:23/11/2015	village	Daumera	Jigal	Kanddaur	Sadu khan	Zizari
	Cluster	123	182	136	141	155
	Population	2817	415	2081	1724	1483
Survey In Detail With Date And Cluster codes Of All Districts Mardan						
Date:25/11/2015	village	Gumbat	Kandar	Qasam	Mohibbnada	Sharif Abad
	Cluster	015	017	018	005	019
	Population	14646	5252	7622	12083	3150
Date:26/11/2015	village	Ghalandher	Khao	Bhagobandi	Khwajarashaki	Chauki
	Cluster	010	011	008	022	009
	Population	8690	1090	5288	4174	4556
Date:04/12/2015	village	Diwankhel	Parkhodheri	Makori	Shahbat khel	Lundkhwar
	Cluster	140	141	133	142	132
	Population	3556	11520	11719	8270	31671
Date:05/12/2015	village	Nari	Jamra	Saro Shah	Ferozpur	Shahbaig
	Cluster	160	159	161	158	162
	Population	4335	1945	7369	5557	5310
Date:16/12/2015	village	Rahmatabad	Shah Baig			
	Cluster	156	162			

	<b>Population</b>	3505	5310			
Date:07/12/2015	<b>village</b>	Char gali	Khairabad	Nodeh	Surkhdheri	China
	<b>Cluster</b>	125	126	118	127	084
	<b>Population</b>	9244	2599	5267	6055	4365
Date:08/12/2015	<b>village</b>	Cherchor	Lakpani	Dheri	Kunj	Katlang
	<b>Cluster</b>	086	090	087	099	098
	<b>Population</b>	3985	5315	9550	1955	23248
Date:09/12/2015	<b>village</b>	Urya	Taja	Machi	Jalal Ismailzai	Jalal Daulatzai
	<b>Cluster</b>	109	108	107	106	105
	<b>Population</b>	158	831	10384	904	1453
Date:10/12/2015	<b>village</b>	Kati Garhi	Shamsi	Shero	Sawaldher	Bilandi
	<b>Cluster</b>	095	096	097	121	120
	<b>Population</b>	7083	2054	9291	19606	5270
Date:11/12/2015	<b>village</b>	Bari Kab	Kotar Pan	Kata Khat	Hamzakot	Alai
	<b>Cluster</b>	092	094	093	112	083
	<b>Population</b>	4432	5098	9271	1867	4330
Date:16/12/2015	<b>village</b>	Rustam				
	<b>Cluster</b>	119				
	<b>Population</b>	21785				
Date:12/12/2015	<b>village</b>	Bazaar	Baringon	Baroch	Pitaomalandri	Sorimalandri
	<b>Cluster</b>	080	074	075	077	078
	<b>Population</b>	8274	1193	2075	1560	1219
Date:14/12/2015	<b>village</b>	Fatima	Gadar	Hamza khan		Qazi abad
	<b>Cluster</b>	048	049	050		051
	<b>Population</b>	12164	8078	4481		2979
Date:15/12/2015	<b>village</b>	Shahbaz Garh	Bhai khan	Garyala	Baghechadheri	Husai
	<b>Cluster</b>	069	055	056	057	052
	<b>Population</b>	23087	3952	10232	1815	7676
Date:16/12/2015	<b>village</b>	Sheikh Yousaf		Surkhabi		
	<b>Cluster</b>	065		082		
	<b>Population</b>	7976		2224		
Date:17/12/2015	<b>village</b>	Chamdheri	Bakhshali	Kakidheri	Gujrat	Jhungara
	<b>Cluster</b>	047	044	045	058	059
	<b>Population</b>	2558	16241	597	11241	5988
Date:18/12/2015	<b>village</b>	Mardan	Garidaulatzai	Kotismailzai	Garhi ismailzai	Kotdaulatzi
	<b>Cluster</b>	068	053	061	054	060
	<b>Population</b>	13467	18982	6146	13113	7175



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## 6: CONCLUSION:

Trachoma is a major preventable cause of blindness in developing countries. According to recent estimates, about 6 million people currently suffer from irreversible blindness due to trachoma in Africa and Asia. Another 152 million suffer from the disease and need treatment and about 540 million are at risk of infection.

The incidence and prevalence of trachoma has shown a significant decrease in many endemic countries of SEAR during the past few decades. This decrease has been mainly due to improved sanitation, water and housing, and implementation of control measures.





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