



ARAVIND EYE CARE SYSTEM

#### Genesis of MLOP program Aravind model

- Started 27 years ago
- \*To counter the non availability of the trained personnel
- \*To create a cost effective model
- \*In house training and job specific model



#### **Selection Criteria**

Education - 12<sup>th</sup> (H.S.C) standard

Age 17-18 years

Experience - Fresh candidates with

no work experience

Background - Rural, low income family

Recruitment is done after a written exam and interview



# Focus on Nursing Students

- Learning at School
  - Rote
  - Memorize
  - What teacher says
  - Little direct applications

- Learning as Adults
  - As Needed
  - Practical
  - Job Related
  - Self directed
  - Professional



Aravind Eye Hospital has 25 years of experience in training ophthalmic assistants

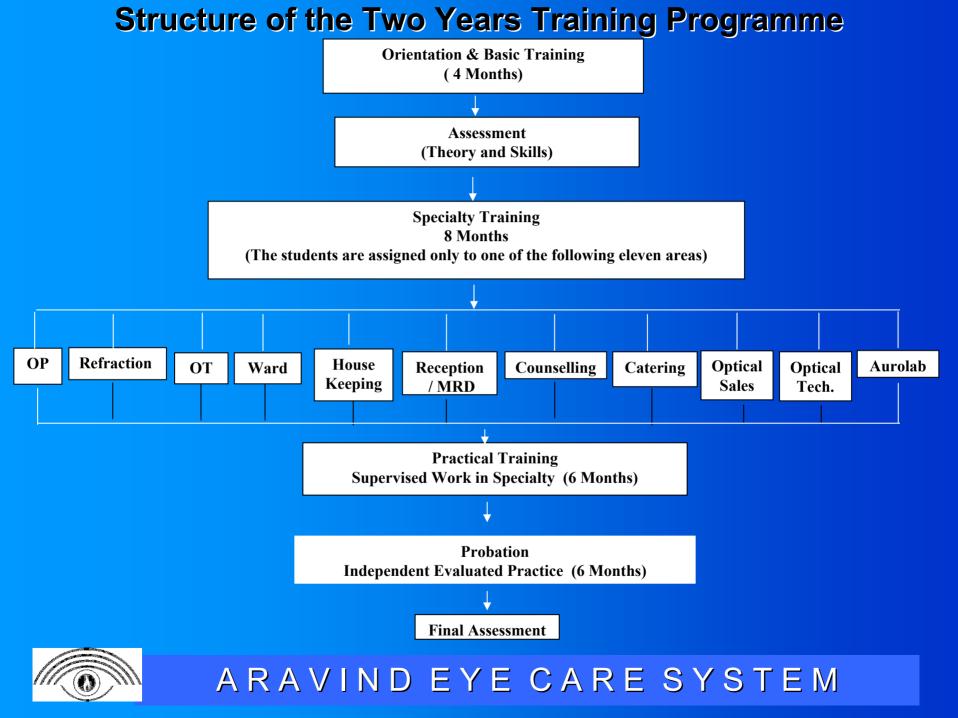
(<u>M</u>id

**L**evel

**O**phthalmic

Personnel)





### Skills

- Patient care
- Assisting doctors
- Human relation skills
- Arayind values
- Medical and ophthalmic emergencies
- Use of instruments



# Basic training - knowledge

- Human Anatomy ,physiology
- Anatomy of the eye
- Common eye diseases
- Ocular pharmacology, microbiology, biochemistry
- Ophthalmic instruments



#### **Attitude**

- Values, culture
- Compassion
- Working habits



#### **Aravind Values & Culture**

#### **Character**

- Acquired through upbringing, family values, societal expectations
- Spiritual basis
- No short cuts
- Sincerity ,straight forward approach

#### Discipline, decorum: Dress, Time, Place

- Commitment- Dedication & hard work with simplicity
- Transparency Sharing of knowledge and Experience
- Team Spirit

- Positive attitude, Ethican
- Punctual
- Honest with Integrity
- Flexible
- Adaptable
- Loyal
- Effective & Unbiased communicator



# Teaching Methodology

- Lectures with slide shows
- Clinical demonstrations
- Observation
- Hands-on practice under supervision
- Group Interactions
- Seminars, Workshop



# Teaching aids

- Books in house
- Books from outside
- Slide sets with hand outs
- Videos
- CD
- Compiled from internet



## **Evaluation**

- Weekly Assessment
- Log books with indicators
- Examination viva, practical performance and clinical spot test,
- Problem solving



## Curriculum Development – Design

#### Objective:

- To train the Ophthalmic Paramedical Personnel to develop various competencies which will enable them to work in clinical areas such as OP, Ward, OT, Refraction, Counselling and support services like Aurolab, Reception, Housekeeping, and Catering.
- To have a standardize curriculum that could be accepted and followed by all Satellite hospitals



#### **Curriculum Outcomes**

- Students become partners in their own learning
- Faculty become better teachers.
- Curriculum is <u>reviewed</u>, is <u>consistent</u>, and can be <u>revised</u> as needed
- Curriculum can be <u>shared</u>



# **Learning Content**

- Holistic
- Integrated

| Theory    | What do I Need to Know?   |
|-----------|---|
|           | Why do I Need to Know This?   |
| Practical | What do I Need to do ? Skills, Application, Performance.            |
| Attitude  | How do I relate to Patients, Doctors, etc.?  Communication / Values |

Student Focused



## **Estimate of Time Allocation**

#### Basic (4 Months)

• Theory - 60%

Practical20%

Orientation to Aravind - 20%

#### **Specialty Training (32 Weeks)**

• Theory - 20%

Practical70%

Attitude- 10%



## Curriculum format

#### **Student Manual**

Overall Goals (major content areas)

#### For Each Goal:

- Leaner Objectives
- Content
- Student exercises / practical
- Key points to remember
- Self assessment (Question, Exercises)
- Reference (For further study)

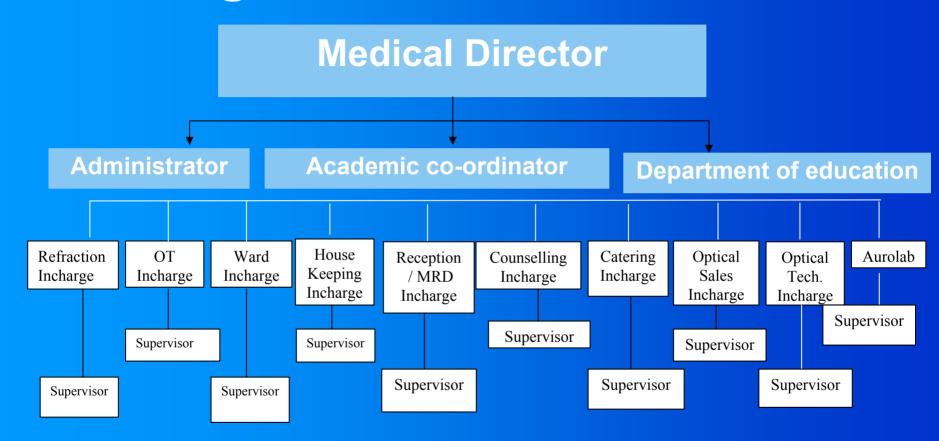


#### Accreditation

By JCAHPO Since 1995 for Ophthalmic Assistant Course



## Organizational structure





### Paramedical Transfer Cycle

Paramedical Training 2003 - 2005 Candidate`X' First 5 months in the Main Hospital



CBE, TVL, MDU, THENI, PONDI

Confirm after 2Yrs & work in each Satellite hospital for 2 yrs

2Yrs Completion

Training
Discontinue
Any reason like
illness/marriage

July - December 2003 CBE 'X'

January - June 2004 CO

July - December 2004 (\*\*) **PONDI `X'** 



### Retention

- Exposure Opportunities within India and abroad
- Congenial environment to work
- Continuous Medical Education CME
- Stipend during their training period ()
- Motivation through Job rotation
- Yoga & Meditation classes to manage stress
- Recreation through competitions in Aravind hospitals
- Recreation Exposure to trade fairs, exhibitions, Aurofarm



### Welfare

- Provident fund benefit
- Facilities like Bank, Post office, canteen
- Hygienic food and accommodation
- Employee Welfare Activities
- Subsidized house rent
- Free Lunch, Nutritious porridge & Tea
- Free health check for the paramedics
- Eye care benefit for employee & family
- Skills development through handicraft (free classes)



## Out patient department



- Orientation to the eye lids, Lacrimal apparatus, conjunctiva, cornea, lens, glaucoma, retina, Neuro ophthalmology, pediatric ophthalmology, Uvea
- History taking
- Vital signs
- Pre operative preparation
- Administration of drops and ointments
- Visual acuity
- Organizational Behavior





### Refraction

- Visual acuity
- Optics and refraction
- Ocular motility and strabismus
- Contact lens
- Visual fields
- LVA
- USG
- Optical dispensing











# **Operation theatre**

- Dress discipline
- Theatre discipline
- Ocular pharmacology





- Sterilization
- Trolley setting
- Assisting in surgeries
- Organizational behavior



### Ward

- Orientation to ward set up
- Admission and discharge procedures
- Pre-op preparation and post op care
- Sterilization









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