

**INTERNATIONAL EYE FOUNDATION**

“SEEING 2000”

Increasing the Quality and Quantity of  
Ocular Surgery in Children to Ameliorate Childhood Blindness

*Report No. 1*  
*August 25, 1995 - October 31, 1996*

Submitted to:

**U. S. A. I. D. BHR/PVC**

Cooperative Agreement No.: FAO-0158-A-00-5015-00

Proposed Grant Period: August 25, 1995 - August 30, 2000

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**Submitted: March, 1997**

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The following report is the submission for the International Eye Foundation (IEF) project, "Seeing 2000"- Increasing the Quantity and Quality of Child Ocular Surgery. This report covers the period August 25, 1995 to October 31, 1996.

## I. BACKGROUND

### *Purpose/Aims*

"Seeing 2000" seeks to support and strengthen national and international NGOs and charity hospitals in developing countries to expand and improve their clinical and surgical services to blind and visually impaired children in underserved areas. The goal is to increase the quality and quantity of ocular surgery performed on children to ameliorate childhood blindness.

### *Specific objectives*

Design of 8 of the 9 "Seeing 2000" projects responded to at least two of the three Primary Objectives (Objectives 1-3), and to the Secondary Objectives (Objectives 4-6), when the secondary objectives contributes to increasing child ocular surgery. One "Seeing 2000" project, a survey of blind schools in South Africa met only one Primary Objective and was partially funded. The information collected in this survey would later facilitate the achievement of "Seeing 2000" objectives by providing accurate data. The survey was to be conducted by a recognized expert in this field.

### Primary Objectives:

1. Increase by 20% or more the number of children receiving needed surgery for correctable ocular conditions in the areas being served.
2. Increase by 50% or more the number of children under age six years receiving eye examinations in the areas being served by a project. This may include conducting a survey of facilities housing blind and visually impaired children using the WHO protocol and methodology.
3. Identify at least one ophthalmologist or clinical officer within each project area and enhance their capacity to treat children clinically and surgically through additional training.

### Secondary Objectives (*if they contribute towards increasing ocular surgery in children*):

4. Increase by 10% or more the number of visually impaired children enrolled in blind schools who can be visually rehabilitated (spectacles, low vision aids, etc.) and integrated into a regular environment/school.
5. Support existing efforts to increase awareness of ocular disease in children, its management and referral, in the medical communities of the regions being served through primary eye care workshops.
6. Support existing efforts to increase awareness of ocular disease in children among parents and the general public through education/promotion activities and local media.

## II. ACCOMPLISHMENTS BY QUARTER

*August 25 - November 30, 1995*

- Completion of the Cooperative Agreement negotiation.

*December 1, 1995 - February 28, 1996*

- IEF advertised the Program Coordinator position and candidates were interviewed.
- The Request for Application was drafted with assistance from an outside consultant, Anne Ralte.

*March 1, 1996 - May 31, 1996*

- "Seeing 2000" Program Coordinator, Lori Carruthers, MPH was hired March 1.
- April 4, the "Seeing 2000" Request for Application was revised and sent to more than 70 organizations and individuals. The World Health Organization Partnership Committee of International Non-governmental Organizations Dedicated to the Prevention of Blindness and the Education and Rehabilitation of the Blind, and its observers comprised the core recipients of the mailing list.
- Thirty-one Expressions of Interests were received and seventeen completed "Seeing 2000" proposals were received by the May 30 deadline.

*June 1, - August 30, 1996*

- The independent Review Board met on June 9. The Review Board comprises three voting members, Dr. Marilyn Miller, Dr. Maynard Wheeler and Dr. Jim Sprague. Victoria Sheffield, Executive Director of the International Eye Foundation and Cathy Jane Bowes, Program Officer for United States Agency for International Development, ex officio non-voting members, observed.
- Of the seventeen proposals submitted, nine projects were chosen for funding, totaling \$203,000. We asked four organizations to revise and strengthen their proposals and resubmit them. Four proposals were not accepted at this time.
- The contracts and the reporting manual with the technical and financial reporting guidelines were developed and sent to grant recipients.
- Four projects were sent their first disbursement of "Seeing 2000" funding on August 15. These projects were: L.V. Prasad Eye Institute, India; Lady Reading Hospital, Pakistan; Lions SightFirst Eye Hospital, Malawi; International Centre for Eye Health's survey of Blind Schools in South Africa.

*September 1, 1996 - November 31, 1996*

- The remaining 5 projects received their first funding disbursement throughout the quarter, after the signed "Seeing 2000" contracts and disbursement plans were received by IEF/Bethesda. These projects were: Aravind Eye Hospital, India; Pontificia Universidad Catolica de Chile; Bulgarian Eye Foundation; Lumbini Eye Care Project, Nepal; and Mount Sion Centre for the Blind, Papua New

Guinea.

- The first quarterly financial and technical reports were due in the International Eye Foundation's Bethesda Headquarters office, November 30.
- Photographs of the projects at Lady Reading Hospital in Pakistan, Catholic University in Chile, Lumbini Eye Care Project in Nepal, the project in Malawi, Aravind Eye Institute in India and the L.V. Prasad Institute in India were received.

### III. PROJECT'S OBJECTIVES

The data shown below were collected from project reports covering the period August 1, 1996 - October 31, 1996.

1. *Increase by 20% or more the number of children receiving needed surgery for correctable ocular conditions in the areas being served.*

Universidad Catolica, Chile	5	
L. V. Prasad Eye Institute, India	504	
Lions SightFirst Eye Hospital, Malawi	141	
Lumbini Eye Care Project, Nepal		54
Lady Reading Hospital, Pakistan	188	
Mount Sion Centre for the Blind, Papua New Guinea	7	
<b>TOTAL</b>		<b><u>899</u></b>

2. *Increase by 50% or more the number of children under age six years receiving eye examinations in the areas being served by a project. This may include conducting a survey of facilities housing blind and visually impaired children using the WHO protocol and methodology.*

L. V. Prasad Eye Institute, India	294	
Lumbini Eye Care Project, Nepal	439	
Lions SightFirst Eye Hospital, Malawi	2646	
Lady Reading Hospital, Pakistan	1079	
Mount Sion Centre for the Blind, Papua New Guinea	90	
ICEH, South Africa	1311	
<b>TOTAL</b>		<b><u>5859</u></b>

3. *Identify at least one ophthalmologist or clinical officer within each project area and enhance their capacity to treat children clinically and surgically through additional training.*

Universidad Catolica, Chile

**Two ophthalmologists** working in the Children's Hospital without formal training are receiving training on-

site with the Project Director. These two doctors have been working at the Children's Hospital without formal training. Dr. Vogel has performed 2 surgeries and Dr. Ortlieb has performed 1 surgery.

Aravind Eye Hospital, India

**Five nurses** that have already received one year of general ophthalmic and refraction training received two months of pediatric ophthalmic training during September and October. Training was practical and theoretical.

Lady Reading Hospital, Pakistan

**All residents** are now serving a one month rotation in the Pediatric Eye Clinic. They are in the process of identifying a devoted resident to be trained in pediatric ophthalmology.

4. *Increase by 10% or more the number of visually impaired children enrolled in blind schools who can be visually rehabilitated (spectacles, low vision aids, etc.) and integrated into a regular environment/school.*

L. V. Prasad Eye Institute, India

75 visually impaired children were identified and 37 were rehabilitated. Spectacles and low vision aids only have been used to date because the low vision service has just been initiated.

Lady Reading Hospital, Pakistan

A preliminary assessment visit to the blind schools was completed.

Mount Sion Centre for the Blind, Papua New Guinea

Twelve children were identified and eight were helped this quarter. The remaining four children will be seen by the Doctor next quarter.

5. *Support existing efforts to increase awareness of ocular disease in children, its management and referral, in the medical communities of the regions being served through primary eye care workshops.*

Aravind Eye Hospital, India

Social workers, refractionists, eye camp organizers, school screening personnel and nurses attended pediatric eye problems theory classes.

Lions SightFirst Eye Hospital, Malawi

296 Community Health Workers and 31 Ophthalmic Medical Assistants (OMAs) and other community health personnel received training at workshops held in their districts. 39 OMAs attended a two-day national "refresher" workshop that included an orientation on "Seeing 2000" activities, jointly coordinated by "Seeing 2000" and Sight Savers International.

Lumbini Eye Care Project, Nepal

Eight field workers have been selected for training 10/27/96 - 11/7/96.

Lady Reading Hospital, Pakistan

Two Primary Eye Care Workshops were conducted in August with 94 participants.

Mount Sion Centre for the Blind, Papua New Guinea

Dr. John Farmer, an Australian Optometrist conducted a one week "refresher" course for nine nurses. The topics were: screening procedure; post operative care; and optics and refraction.

6. *Support existing efforts to increase awareness of ocular disease in children among parents and the general public through education/promotion activities and local media.*

Lions SightFirst Eye Hospital, Malawi

The promotion of awareness of ocular diseases especially trachoma, Vitamin A deficiency and ocular injuries was conducted before the screening/eye examinations. During this quarter over 2,500 children were examined; all of these children and their parents or guardian would have also attended this promotional sessions.

Lumbini Eye Care Project, Nepal

15,000 pamphlets were printed on primary child eye health education (5,000 Hindi, 10,000 Nepali). Outreach activities were conducted.

Lady Reading Hospital, Pakistan

Two television programs on child blindness were produced. Two newspaper stories were printed in local papers on child blindness.

Mount Sion Centre for the Blind, Papua New Guinea

*Health Facts Page* was published weekly in the local paper, *Goroka Nius*. This column was previously published monthly.

#### **IV. PROBLEMS/STEPS TO OVERCOME PROBLEMS**

August 1 - October 31, 1996 was the first period when "Seeing 2000" funds were disbursed to grant recipients and subsequent activities started. This was a learning time for the projects and the Project Coordinator to develop project systems.

Vacation and holiday schedules and illness of grant recipient staff slowed start up activities. These problems are unavoidable and need to be considered in programming schedules of accomplishments. Political and

economic problems posed a problem for the project in Bulgaria where banks and businesses were closed until the situation stabilized. A strike at the hospital in Chile stopped activities for two weeks. The upcoming elections in Papua New Guinea may have an impact on the project personnel traveling to remote areas and will be monitored by the "Seeing 2000" Program Coordinator.

During this initial period other delays set off a chain reaction of delays. Some of these delays were unavoidable due to the remoteness of the projects and the difficulty of timely communication. For example, the "Seeing 2000" contract was hand carried to the Lumbini Eye Care Project (LECP) in Nepal by a SEVA volunteer. The volunteer was delayed in giving the contract to the Project Director in Nepal and subsequently the contract was delayed in returning to IEF/Bethesda and therefore the disbursement of funds to LECP was delayed.

Other delays were avoidable and due to human error. In one instance, a project gave IEF/Bethesda the wrong bank account number and there was a delay in tracing the funds and redirecting them to the proper account. In another example, IEF was in error in transferring the funds and there was a delay in redirecting the funds to the proper account. This type of error should only happen once, at the time of the first disbursement. In the future, closer contact will be maintained with the projects to verify their reception and access to funds.

Not all projects began the start-up of their activities on August 1 and there was some confusion in basing their reporting on a quarterly period beginning August 1. Despite reminder faxes and e-mails sent to the "Seeing 2000" projects most projects were late in sending their Quarterly Reports to IEF/Bethesda, excepting Lady Reading Hospital, Pakistan. Once reports were received by the "Seeing 2000" Program Coordinator, clarification of specific points was needed. It is hoped that all current "Seeing 2000" projects are now clear on reporting deadlines and formats.

Accurate and clear baseline data does not exist for most of these projects. Data collected from the first Quarterly Reports may be used as baseline information. Site visits to these projects will also offer an opportunity to review the data collected before the start-up of a "Seeing 2000" project.

## **V. OUTLINE OF ACTIVITY FOR NEXT QUARTER**

"Seeing 2000" activities that will be planned by the Program Coordinator during the next quarter, November 1, 1996 - January 31, 1997 are:

### Proposals asked to resubmit

A funding decision will be made and the organizations will be informed of the decision. These organizations are: Hospital "Rodolfo Robles V." Hospital, Guatemala; Hospital Roosevelt, Guatemala; and Hospital Elias Santana, Dominican Republic. A revised proposal from the International Network for the Prevention of Blindness in Africa was not received in time to submit to the Review Board.

### Planning of site visits

An itinerary for site visits to "Seeing 2000" projects in Asia and Papua New Guinea will be developed.

### Revision of Request for Application

The Request for Application will be revised and streamlined to simplify the application and reviewing process. These modifications are being adapted from successful "Seeing 2000" proposals. The Budget section and the Monitoring and Evaluation section will more closely follow a "fill in the blank" format.

### Reporting Instructions

Additional development of a reporting instructional manual will be done to incorporate instruction on general accounting methods.

"Seeing 2000" activities that are planned by the "Seeing 2000" Projects during the next quarter, November 1, 1996 - January 31, 1997 are:

- Bulgaria Eye Foundation plans to identify the 6 ophthalmologists that will be trained.
- Pontifica Universidad Catolica de Chile plans to train nurses and general practitioners of some selected outclinics to increase the number of surgical referrals.
- Aravind Eye Institute, India plans to continue with proposed activities now that trained staff are in place.
- L. V. Prasad Eye Institute, India plans to hold a symposium on Childhood Blindness and Low Vision with the faculty from London, England.
- Lions SightFirst Eye Hospital, Malawi plans to intensify their cataract outreach services despite the rains.
- Lumbini Eye Care Project, Nepal plans to conduct house - to- house eye examinations.
- Lady Reading Hospital, Pakistan plans to double the time allotted for surgery.
- Mount Sion Centre for the Blind, Papua New Guinea plans to purchase equipment identified in their proposal.
- International Centre for Eye Health plans to analyze the data collected from their survey of the blind schools in South Africa.

## **VI. APPENDIXES**

- “Seeing 2000” Mailing List
- Minutes of the Review Board Meeting 9 June 1996
  - Attachment 1 Expressions of Interest Received
  - Attachment 2 Technical Review Criteria
  - Attachment 3 Evaluation Criteria Score sheet
- Clarifications of approved proposals
  - Bulgaria Eye Foundation
  - Lady Reading Hospital, Pakistan
  - Universidad Catolica de Chile
  - Mount Sion Centre for the Blind, Papua New Guinea
- Contract example
- Revised proposals
  - Hospital Roosevelt, Guatemala
  - Hospital “Rodolfo Robles V.”, Guatemala
  - Hospital Elias Santana, Dominican Republic
- Financial Reporting instructions
- Technical Reporting Instructions
- Photographs of “Seeing 2000” projects

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## **MINUTES**

### **INTERNATIONAL EYE FOUNDATION**

#### **"SEEING 2000" Review Board Meeting**

**9 June 1996**

1:30 p.m.

#### **Location**

**International Eye Foundation Headquarters Office**  
7801 Norfolk Avenue, Suite 200  
Bethesda, Maryland 20814

#### **In Attendance**

##### **Review Board**

**Marilyn M. Miller, M.D., pediatric ophthalmologist, Chicago, IL**  
**James Sprague, M.D., pediatric ophthalmologist, McLean, VA**  
**Maynard Wheeler, M.D., pediatric ophthalmologist, Hartford, CT**  
**Victoria M. Sheffield, Executive Director of the International Eye Foundation (IEF) (ex-officio)**  
**Cathy Jane Bowes, Project Officer United States Agency for International Development (USAID), BHR/PVC/CSH (ex-officio)**

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**Lori Carruthers, "Seeing 2000" Program Coordinator, IEF**

#### **Order of Business**

##### **Agenda Item #1 Greetings and Background Information**

The meeting started with general greetings and welcome to the International Eye Foundation office by Ms. Sheffield and Mr. Barrows. Background information was given on "Seeing 2000", noting that its budget funds

are Congressionally earmarked with a mandate to do child ocular surgery.

There were 33 Expressions of Interest (in submitting "Seeing 2000" proposals") received by the IEF with 17 proposals actually received. Follow up will be conducted on why organizations did not submit proposals, specifically Helen Keller International. *A list of organizations that submitted expressions of interest is attached to these minutes. One*

*expression of interest was received by the IEF after the Review Board Meeting.*

### **Agenda Item #2 - USAID Support of Funding for Identified Project**

Ms. Sheffield questioned whether USAID was actively encouraging the funding of the International Network for the Prevention of Blindness (Augustus Hallowonger) proposal. After a brief discussion of previous encounters with Mr. Hallowonger, it was agreed that this question would be followed up by Ms. Sheffield and/or Ms. Bowes via John Grant, head of USAID's PVC office. Ms. Bowes brought up the point that USAID was encouraging one or two new smaller organizations each year by providing USAID grant funds for the first time.

### **Agenda Item #3 - Proposal Scoring**

The Review Board received all of the project proposals prior to the meeting with Evaluation Criteria and scoring sheets.

There was a brief discussion on the most efficient method with which to proceed during the meeting. Dr. Sprague suggested scoring proposals:

**A - support for funding;**

**B - possibility but proposal needs more work;** and

**C - not suitable for funding at this time.**

This was unanimously adopted by the Review Board. If needed, the Review Board would rank the "A" proposals.

### **Agenda Item #4 - Review Order**

Proposals were discussed by geographic region. By consensus, the first region to be discussed was Asia followed by Africa, Latin America and Eastern Europe.

### **Agenda Item #5 - Proposal Review**

**Association of Blind Children (ABC), Dhaka, Bangladesh**

Funding requested: \$25,000

Project length: 12 months

Collaborating Partner: There was no collaborating partner identified in the proposal. A letter was received from Mr. Don O'Dwyer, President of Operation Eyesight Universal (Canada) that indicated ABC as a worthy organization.

Purpose: Not clear.

Strengths: The country has a dense population with a need for increased and improved child eye care services.

Weaknesses: The proposal lacks supporting documentation of cooperation from existing health system. The proposal does not define the project's implementation plan. Specific items missing are: how the project will identify children; the project's ability to monitor activities; and the capacity for receiving children in the health system.

Decision: **Score C.**

### **Association for Development of the People with Disability (ADPD), Dhaka, Bangladesh**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: No collaborating partner was identified in the proposal.

Purpose: Mention is made in the proposal of using a boat to work in an area that few other development organizations reach.

Strengths: The organization's expression of intent to conduct outreach under difficult conditions.

Weaknesses: The proposal met only one Primary Objective stated in the Request for Application (RFA). The RFA states that proposals should be designed to respond to at least two of the three Primary Objectives. 60% of funding was requested for running project operations. There was a comment that "screening does not equal sight."

Decision: **Score C.**

### **Aravind Eye Hospital, Madurai, India**

Funding Requested: \$24,999

Project length: 24 months

Collaborating Partner: Aravind Hospital is designated as a collaborating center for the prevention of blindness by the World Health Organization (WHO).

Purpose: Proposal funds are requested to develop a pediatric program to specifically find and bring for treatment children needing ocular care and surgery.

Strengths: Aravind Eye Hospital is a regional leader in eye care services. Aravind Eye Hospital has the qualified staff and infrastructure to meet the administrative and technical needs of the proposal. Dr. Miller knows personally the project director and the positive changes she made at Aravind Eye Hospital to improve services after her studies in Chicago, Illinois.

Weaknesses: None.

Decision: **Score A.**

### **L. V. Prasad Eye Institute, Hyderabad, India**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: ORBIS International, Sight Savers International

Purpose: All of the proposal funds were requested for anesthesia equipment for a new pediatric eye unit.

Strengths: Strong leader, faculty and staff. The Institute provides top quality care with a commitment to serving poor as well as paying patients. The Institute has strong ties to WHO and international organizations. The Review

Board supported the need for anesthesia equipment in conducting child ocular surgery.

Weaknesses: There was a question regarding whether all sources of funding were in line. The response was affirmative, because of the reputations of the organizations involved. There was also a question whether the organization would be able to meet our reporting needs because "Seeing 2000" grant funds are only a small portion of the overall budget. The Review Board again confirmed the integrity of the organization.

Decision: **Score A.**

### **Lumbini Rana-Ambika Eye Hospital, Bhairahawa, Nepal**

Funding Requested: \$24,964

Project length: 12 months

Collaborating Partner: Seva Foundation

Purpose: Grant funds are requested to increase the safety, awareness and utilization of child ocular surgery in the Lumbini Zone. Specific mention is made of increasing the competence of staff in administering general anesthesia.

Strengths: Well written and designed proposal, practical and needed. There was discussion of the positive reputation and work of the Seva Foundation. The Review Board noted the project's aim of increasing quality of anesthesia services indicates that services are at advanced level.

Weaknesses: None.

Decision: **Score A.**

### **North West Frontier Province, Lady Reading Hospital, Peshawar, Pakistan**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: WHO/Prevention of Blindness for Pakistan, Sight Savers International and Christoffel Blindenmission

Purpose: Proposal funds are requested for additional operating supplies and equipment, staff workshops and outreach program.

Strengths: The need for strengthening services in this densely populated area was cited as a strength. In addition, there were positive comments on the work and reputation of the project director.

Weaknesses: The Review Board briefly discussed the accuracy of total population numbers and number of children receiving surgery quoted in the proposal. It was decided that the specific numbers quoted would not have an impact on funding decision. Questions were raised on the necessity of two budget items, specifically the visual acuity drum and synoptophore. It was agreed that justification will be asked for on these items.

Decision: **Score A.**

### **Mount Sion Centre for the Blind, Papua New Guinea**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Pacific Islands Council for Blind Persons was identified as the collaborating partner. Mr. David Blyth, President of the World Blind Union and the Director of the Pacific Islands Council for Blind Persons, provided a covering support letter. Christoffel Blindenmission will also pay for some of the daily office operations of the project.

Purpose: The requested funds are to support child ocular surgery in area's outside of the capital. Currently, patients must be transported to the nation's capital by airplane.

Strengths: The Review Board approved the need for this type of activity. Review of the project director's curriculum vitae indicated his ability to perform eye surgeries.

Weaknesses: The Review Board briefly discussed whether an AB scan (\$5000) was necessary for this project. It was decided that justification will be asked for this item. There was discussion on need for this item in pediatric services. Another comment was that the age of pediatric patients is not limited to under six years and the AB Scan may be necessary for some patients.

Decision: **Score A.**

### **International Network for the Prevention of Blindness in Africa (INPBA), Washington, D.C., USA**

Project Location: Danane, West Africa

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Danane Eye Care Clinic

Purpose: Funding is requested for salaries and equipment to conduct eye surgeries in rural Danane County. The County has received a large influx of Liberian refugees.

Strengths: This proposal is an improvement over past efforts of Mr. Hallowonger and appears to demonstrate his commitment in creating a successful project. It was considered whether this proposal was a suitable opportunity for "Seeing 2000" to give an organization its first major funding and thereby nurture it in becoming a viable development organization.

Weaknesses: INPBA is a new organization with no infrastructure, no other funding sources and no track record. There was a discussion of past encounters with Mr. Hallowonger related to his criticisms of USAID. The discussion continued, focusing on the proposal and it's aim of providing services to a refugee vs. indigent population. There were mixed feelings on whether this was an appropriate use of "Seeing 2000" funds. The consensus was that more information is needed before a decision can be reached. Information needed: commitment from Ivory Coast Ministry of Health; implementation plan including how patients will be referred and outreach conducted. The Review Board wants specific and concrete information.

Decision: **Score B.**

### **Lions Sightfirst Eye Hospital, Lilongwe, Malawi**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Sight Savers International and the International Eye Foundation

Purpose: Proposal funds are requested for additional training of Ophthalmic Medical Assistants.

Strengths: There was a discussion of Dr. Chirambo's achievements to advance eye care services in Malawi and regionally in Africa. Lions Sightfirst Eye Hospital is a regional training center for SADC countries.

Weaknesses: Ms. Bowes asked whether any of the proposed activities were already funded through ChildSight. Mr. Barrows stated that the proposal activities were not funded by ChildSight.

Decision: **Score A.**

John Barrows left the meeting at this point to attend to another commitment.

### **International Centre for Eye Health, London, England**

Project Location: 19 Blind schools in South Africa and the Northern Transvaal Region of South Africa

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Christoffel Blindenmission

Purpose: The project is divided into two phases. The first phase consists of a survey of 19 blind schools. The survey will identify children that can be visually rehabilitated and collect nationwide data on the causes of blindness in children. The second phase is the strengthening of eye care services in the Northern Transvaal region.

Strengths: There was much discussion in favor of the survey and the type of data to be collected. This is supported by the past achievements of the individuals and organization. The survey will be conducted in an area where no data exists. The Review Board felt that the survey information will help the future planning activities of South African organizations and institutions. The Review Board felt that not enough information was available at this time to fund the second phase.

Weaknesses: There was a discussion of whether this proposal fit the "Seeing 2000" criteria. Ms. Bowes questioned whether South Africa is in need of US funds. A preference for giving grant funds to a local institution was expressed.

Decision: **Not applicable.**

Partial funding for this proposal was discussed. The proposal was tabled as not applicable and the Review Board's discussion moved onto the Latin America region.

**Unidad de Oftalmología, Facultad de Medicina, Pontificia Universidad Católica de Chile, Santiago, Chile**

Funding Requested: \$10,802

Project length: 12 months

Collaborating Partner: Eugenio Maul, M.D. was listed as collaborating partner. In addition, there was a support letter from Fondo Nacional de la Discapacidad (FONADIS).

Purpose: By subsidizing the costs of eye surgeries, the proposal expects to stimulate the interest and capacity to perform pediatric ophthalmology.

Strengths: The Review Board appreciated the frankness of the proposal. There were specific comments regarding the proposal statement that "the greatest value of this project will be to contribute to the development of Pediatric Ophthalmology" in Chile. It was acknowledged that the project director's mother is highly regarded in the strabismus field in Chile.

Weaknesses: Initial confusion over budget was resolved as two additional pages were found and photocopied. Some of the requested equipment was deemed "not necessary" and will be deleted from the grant.

Decision: **Score A.**

**Centro Cristiano de Servicios Medicos, Inc., Hospital Dr. Elias Santana, Santo Domingo, Dominican Republic**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Christoffel Blindenmission/Ecuador was identified as the collaborating partner.

Purpose: Proposal funds are requested to subsidize congenital cataract and glaucoma surgeries for low-income patients.

Strengths: This hospital is one of the few options for child eye care in a country where 56% of the population is below poverty level. There were many tables and graphs to illustrate the need for additional child eye care

services and their ability to maintain records.

Weaknesses: The Review Board's comments were brief and focused on the proposal's lack of sustainability and lack of emphasis on children. There was very little narrative to describe project implementation.

Decision: **Score B.**

### **Fundación para el Desarrollo de la Mujer Salvadoreña (FUDEM), San Salvador, El Salvador**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: SEE International

Purpose: The proposal mentions its aim of developing a referral system but also budgets funds for surgical equipment.

Strengths: The Review Board indicated that they would have liked to support a strong proposal from a women's development organization.

Weaknesses: The Review Board felt the proposal was too vague in its aims. The proposal writers need to clarify their intent. In addition, data was cited on children aged 5-15 years. There was no information on children 0-5 years, who are the primary beneficiaries of "Seeing 2000". The proposal was unclear and confusing to the Review Board.

Decision: **Score C.**

### **Hospital Roosevelt, Guatemala City, Guatemala**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Dr. Arturo Quevedo, Fundacion de Ojos de Guatemala is listed as collaborating partner.

Purpose: Proposal funds are requested for additional surgical equipment to enable the hospital to perform pediatric eye surgery daily and facilitate the performance of emergency eye procedures.

Strengths: Hospital Roosevelt is a public hospital in an area that needs support for pediatric eye surgeries. There is a high volume of poor patients.

Weaknesses: There was a question of the allowability of "Seeing 2000" funds of supporting a project at a government hospital. Other public hospitals supported with USAID monies were cited. *Mr. Barrows verified after the meeting that an NGO has been created to support this hospital.* The proposal and budget were not justified for pediatrics. The budget showed no prioritization of needs and was not focused. Dr. Wheeler commented on his disappointment that there wasn't more substance in the submitted proposal, as the hospital director is Harvard educated.

Decision: **Score B.**

### **Hospital "Rodolfo Robles V.", Guatemala City, Guatemala**

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: International Eye Foundation

Purpose: Funds are requested for additional staff training and additional supplies and equipment for the hospital's new Pediatric Ophthalmology Unit.

Strengths: Dr. Maria E. Sanchez has received pediatric ocular training at Aravind Eye Hospital through the IEF's ChildSight program. Additional funding would enable the hospital to further build upon the accomplishments of the IEF's ChildSight project. A letter of support was included from the Committee for the Blind and Deaf of Guatemala expressing their commitment "to support this project with infrastructure, personnel and 70% of the

budget.”

Weaknesses: There were some concerns regarding the budget. Expensive items ( \$700 for a 35 mm camera, \$1500 for data processing) were listed in the budget with weak explanations. The Review Board would like to see further justification for the need of these items. The Review Board also would like more information on the project implementation. Specific concerns were the institutionalization of activities and outreach. The Review Board would like the proposal to clarify how the grant money (and the activities supported by the grant) will have an outcome of more surgeries.

Decision: **Score B.**

The Review Board wished to partially fund the proposal for a microscope and two observerships. There was a discussion of how to balance the two Guatemala proposals. The Review Board is aware that the politics in Guatemala are sensitive. A fair solution to this dilemma was identified as sending both Guatemalan proposals back for rewrites.

### **ORBIS International, New York, New York**

Project location: Varna Bulgaria

Funding Requested: \$25,000

Project length: 12 months

Collaborating Partner: Varna University, Bulgaria

Purpose: The majority of proposal funds are requested to support salaries, transport and accommodations of expatriate ORBIS International staff in Bulgaria, while conducting training in Varna and Northeast Bulgaria.

Strengths: The past accomplishments and reputation of ORBIS International were cited as proposal strengths. Varna University has the capacity to conduct the proposed training.

Weaknesses: There was concern that requested grant funds are not for strengthening national capacity as grant funds are requested for airfares and the accommodations of expatriates. The Review Board discussed their necessity to follow the RFA’s criteria. The RFA was cited as stating, “applications will be given preference if the grant will strengthen a national institution or NGO.”

Decision: **Score C.**

### **Bulgarian Eye Foundation, Sofia, Bulgaria**

Funding Requested: \$24,600

Project length: 12 months

Collaborating Partner: International Eye Foundation

Purpose: Proposal funds are requested to support a two week in- country surgery clinic for 6 ophthalmologists from various regions of the country and training abroad for one doctor. The proposal’s aim is to train ophthalmologists, practicing in underserved areas, in pediatric ophthalmology.

Strengths: Good track record of accomplishments, previous and current USAID funded projects, good management capacity, good office infrastructure and staff, demonstrated capacity to conduct the project. In addition, the Review Board noted the determination of the project director and the need for support of activities in Bulgaria.

Weaknesses: Ms. Bowes brought up the need to clarify the budget. USAID money cannot be used to match USAID money. The Review Board desired clarification on the participation of doctors in Varna because they were briefly mentioned in the proposal but their role was not explained.

Decision: **Score A.**

The final tally was:

**A - Approved for funding**

Aravind

LV Prasad

Nepal

Pakistan

Papua New Guinea

Bulgarian Eye Found'n

Malawi

Chile

**B-needs more work**

Ivory Coast

Dominican Republic

H. Robles/Guatemala

H.Roosevelt/Guatemala

**C- not at this time**

ABC/Bangladesh

ADPD/Bangladesh

Varna, Bulgaria

**Not Applicable**

ICEH/South Africa

Closing comments of the Review Board recommended partial funding to support the survey portion of the ICEH/South Africa proposal. The funding of a survey would be a one time activity of "Seeing 2000".

Several proposals needed justification of budgeted items. If justification of items is inappropriate, funds will be reprogrammed not eliminated from total budget.

**Agenda Item #6 - Administrative Details**

The travel expense voucher form was passed out to the three Review Board members (Drs. Miller, Sprague, Wheeler) with explanation.

**Adjournment:** Ms. Sheffield and Ms. Carruthers expressed their appreciation to the Review Board for their expertise and attention to detail in their review and discussion of the proposals. The meeting closed at 6:15 p.m.

\_\_\_\_\_  
Dr. Marilyn Miller

\_\_\_\_\_  
Dr. James Sprague

\_\_\_\_\_  
Dr. Maynard Wheeler

\_\_\_\_\_  
Lori Carruthers - Secretary

## **Attachment 1**

The following is a list of Expressions of Interest received by the International Eye Foundation. Applicants highlighted in bold indicate that a proposal was actually submitted.

### **Association for Blind Children - Bangladesh**

### **Association for Development of the People with Disability - Bangladesh**

Aravind Eye Hospital - Coimbatore, India

Aravind Eye Hospital - Tirunelveli, India

### **Aravind Eye Hospital - Madurai, India**

Belize Council for the Visually Impaired, Belize

### **Bulgarian Eye Foundation - Sofia, Bulgaria**

### **Catholic University of Chile, Santiago, Chile**

### **Centro Cristiano de Servicios Medicos, Inc., Dominican Republic**

Dr. R.P. Centre, All India Institute of Medical Sciences - India

Eritrean Blindness Prevention Programme/Berhan Hospital - Eritrea\*\*

### **Fundación para el Desarrollo de la Mujer Salvadoreña (FUDEM)- El Salvador**

Fundacion Centro Colombiano de Salud Visual-Columbia

### **Hospital "Rodolfo Robles V." - Guatemala**

### **Hospital Roosevelt - Guatemala**

Helen Keller International - Chihuahua, Mexico

Helen Keller International - Rabat, Morocco

HelpAge International-Cambodia\*\*

### **International Centre for Eye Health - South Africa**

### **International Network for the Prevention of Blindness- Ivory Coast**

### **L. V. Prasad Eye Institute -India**

### **Lions Sight first Eye Hospital - Malawi**

### **Lumbini Eye Care - Nepal**

Maryknoll- Cambodia

### **North West Frontier Province, Pakistan**

ORBIS International - Mongolia

### **ORBIS International -Varna, Bulgaria**

ORBIS International - Armenia (First Eye Clinic)

ORBIS International - El Salvador (Hospital Rosales)

### **Pacific Islands Council for Blind Persons -Papua New Guinea**

Preak Ang Duang National Eye Hospital - Cambodia

St. John Ophthalmic Hospital - Israel

Tanzania Society for the Blind (received expression of interest 5/15)\*

Gwanda Provincial Hospital - Zimbabwe (received expression of interest 6/11)\*

- \* IEF informed them that the May 30 deadline of proposal application must be observed.  
\*\* IEF received fax stating from them stating they were unable to submit at this time.

## **Attachment 2**

## Technical Review

“Seeing 2000” RFA proposals will be evaluated using the following criteria. All proposals should be read with the intent that they will be funded.

Each section (Organizational Capability and Proposed Personnel, Project Concept and Management Plan, Fiscal Management and Budget) will receive one score following the description. The raw score will be multiplied by the points allocated to each section. Section scores will be totaled for the proposal's final score.

Raw Score and Description Table

RAW SCORE	DESCRIPTION
.9 - 1.0	EXCELLENT - Comprehensive and complete. Meets or exceeds all RFA requirements. Exemplifies complete understanding of the technical requirements of the project, and demonstrates in detail how to accomplish the task.
.7 - .8	GOOD - Meets or exceeds most if not all RFA requirements. May have some outstanding aspects.
.5 - .6	ACCEPTABLE - Generally meets RFA requirements. Omissions are minor or easily correctable. Implementation of an acceptable project is anticipated.
.3 - .4	ACCEPTABLE (with reservations) - Meets RFA requirements but has some negative aspects. Could be made technically acceptable with assistance.
.0 - .2	UNACCEPTABLE - Gross omissions. Failure to understand problem areas. Failure to respond to requirements. Little or no chance of success in completing the described project.

For example, Proposal A is scored .6 for Organizational Capability and Proposed Personnel. This section has 40 total points. 40 points are multiplied by .6 for a score of 24. Project Concept and Management Plan is scored at .7 and is multiplied by 40 (section points) for a total of 28 points. Fiscal Management and Budget is scored .3 times 20 (section points) for a total of 6 points. Proposal A has a final score of 58 points.

**Attachment 3**

**Evaluation Criteria**

**"Seeing 2000" Increasing the Quality and Quantity of Ocular Surgery in Children to Ameliorate Childhood Blindness**

**Project Title:** \_\_\_\_\_

**Organizational Capability and Proposed Personnel: (40 points)**

- Track record and previous relevant experience, past or current programs in ophthalmology.
- Compatibility of project concept with organization's goal.
- Experience in managing funds. Has the ability to comply with grant conditions, taking into account all existing and current commitments.
- Demonstrated experience with and ability to backstop and support field operations and staff.
- Curriculum vitae of proposed key person.
- Track record or existing linkage with WHO/PBL Partnership Network.
- Country eligible for assistance by USAID funds.

Section Score: \_\_\_\_\_ x 40 points = \_\_\_\_\_

**Project Concept and Management Plan: (40 points)**

- Compatibility of project concept with "Seeing 2000" goals and objectives.
- Presents clearly and concisely the problems to be addressed, beneficiaries and the results to be reached at project end.
- Technical merits of project design, innovative approaches and reasonableness of objectives within proposed time frames.
- Quality and appropriateness of monitoring and evaluation plans.
- Will seek to close existing gaps so that services are expanded and improved to blind and visually impaired children in underserved areas.
- Initiate new and needed activities in underserved populations.
- Will strengthen national institution or NGO.

Section Score: \_\_\_\_\_ x 40 points = \_\_\_\_\_

**Fiscal Management and Budget: (20 points)**

- Completeness of budget.
- Accuracy of calculations.
- Appropriateness, reasonableness and allocability of costs in each category, and demonstrated ability to comply with USAID regulations and provisions.
- Potential for leveraging funding from other sources.

Section Score: \_\_\_\_\_ x 20 points = \_\_\_\_\_      Total Points: \_\_\_\_\_

Reviewer: \_\_\_\_\_      Date: \_\_\_\_\_

SUBGRANT AGREEMENT, made and entered into by and between International Eye Foundation, Incorporated, a nonprofit corporation located at 7801 Norfolk Avenue, Bethesda, Maryland 20814 USA (hereinafter referred to as the "Grantor" or "IEF") and . . . located at \* \* \* (hereinafter referred to as ". . ." or "Subgrantee").

WHEREAS, International Eye Foundation and the United States Agency for International Development (USAID), as a part of Cooperative Agreement number FAO-0158-A-00-5015-00, shall provide funding for the program specified below.

THIS AGREEMENT WITNESSETH:

#### ARTICLE I

##### PURPOSE

IEF hereby awards a grant to . . . to carry out program objectives, which are consistent with the purposes set forth in the IEF's "Seeing 2000" Project as follows:

1. The Subgrantee shall provide activities as stated in the proposal submitted to the IEF dated May 30, 1996.
2. The Subgrantee shall participate directly in the monitoring and evaluation of the project.
3. The Subgrantee shall provide outputs and reports as required by the IEF, and USAID to document its activities.

#### ARTICLE II

##### PERIOD OF AGREEMENT

The period of this agreement shall be from August 1, 1996 for a period up to 12 months unless amended by the IEF and the Subgrantee. All expenditures paid with funds provided by this agreement must be incurred for authorized activities that take place or commence during the period of the agreement.

### ARTICLE III

#### AMOUNT AND PAYMENTS

- A. The total estimated amount of this SUBGRANT Agreement for the period shown in Article II above is \$25,000.
- B. IEF hereby obligates the amount of \$25,000 for program expenditures during the period August 1, 1996 through July 31, 1997.
- C. . . . shall submit an initial projection of expenses. . . . shall request reimbursements from IEF every month, after submission of a detailed invoice corresponding to the approved budget line items.
- D. Any funds received must be accounted for by the Subgrantee, otherwise refunded by the  
Subgrantee to the IEF.

### ARTICLE IV

#### ITEMS OF EXPENDITURE AND ACCOUNTING DATA

- A. Transfers of funds between the listed items in the proposal budget shall not exceed a ten (10%) percent increase or decrease of the total budget without obtaining the prior written approval of the IEF to make such a transfer. The procedures to be followed are outlined in the Standard Provision entitled "Revision of Grant Budget."
- B. The Recipient shall comply with all laws, rules, procedures and regulations concerning Federal grants as they may relate to the administration of this grant made pursuant to the Act, including the Attachment IV, the United States Agency for International Development "Mandatory Standard Provisions for U.S., Nongovernmental Grantees," and the "Optional Standard Provisions for U. S. Nongovernmental Grantees."
- C. The provisions of Office of Management and Budget Circular A-110 "Uniform Administrative Requirements" shall apply to any nonexpendable personal property purchased with funds provided by this agreement.

## ARTICLE V

### Agency for International Development (AID) ELIGIBILITY RULES FOR GOODS AND SERVICES

- A. Ineligible and Restricted Goods and Services: If AID determines that the grantee has procured any of the restricted or ineligible goods and services specified below, or has procured goods and services from unauthorized sources, and has received reimbursement for such purpose without the prior written authorization of the grant officer, the grantee agrees to refund to AID the entire amount of the reimbursement. AID's policy on ineligible and restricted goods and services is contained in Chapter 4 of AID Handbook 1, Supplement B, entitled "Procurement Policies".
1. Ineligible Goods and Services. Under no circumstances shall the grantee procure any of the following under this grant:
    - (i) Military equipment,
    - (ii) Surveillance equipment,
    - (iii) Commodities and services for support of police or other law enforcement activities,
    - (iv) Abortion equipment and services,
    - (v) Luxury goods and gambling equipment, or
    - (vi) Weather modification equipment.
  2. Ineligible Suppliers. Funds provided under this grant shall not be used to procure any goods or services furnished by any firms or individuals whose name appears on the "Lists of Parties Excluded from Federal Procurement and Non Procurement Programs." AID will provide the grantee with a copy of these lists upon request.
  3. Restricted Goods. The grantee shall not procure any of the following goods and services without the prior written authorization of the grant officer:
    - (i) agricultural commodities,
    - (ii) motor vehicles,
    - (iii) pharmaceuticals,
    - (iv) pesticides,
    - (v) rubber compounding chemicals & plasticizers,
    - (vi) used equipment,
    - (vii) U.S. Government-owned excess property, or

(viii) fertilizer.

B. Source and nationality: The eligibility rules for goods and services based on source and nationality are divided into two categories. One applies when the total procurement element during the life of the grant is over \$250,000 and the other applies when the total procurement element during the life of the grant is not over \$250,000 or the grant is funded under the Development Fund for Africa (DFA) regardless of the amount. The total procurement element includes procurement of all goods (e.g., equipment, materials, supplies) and services. Guidance on the eligibility of specific goods or services may be obtained from the grant officer. AID policies and definitions on source (including origin and componentry) and nationality are contained in Chapter 5 of AID Handbook 1, Supplement B, entitled “Procurement Policies.”

1. For DFA funded grants or when total procurement element during the life of this grant is valued at \$250,000 or less, the following rules apply:

(i) The authorized source for procurement of all goods and services to be reimbursed under the grant is AID Geographic Code 935, “Special Free World,” and such goods and services must meet the source (including origin and componentry) and nationality requirements set forth in Handbook 1, Supp. B, Chapter 5 in accordance with the following order of preference:

- a. The United States (AID Geographic Code 000),
- b. The Cooperating Country,
- c. “Selected Free World” countries (AID Geographic Code 941), and
- d. “Special free World” countries (AID Geographic Code 935).

(ii) Application of order of preference: When the grantee procures goods and services from other than U.S. sources, under the order of preference in paragraph (b) (1) (i) above, the grantee shall document its files to justify each such instance. The documentation shall set forth the circumstances surrounding the procurement and shall be based on one or more of the following reasons, which shall be set forth in the grantee’s documentation:

- a. The procurement was of an emergency nature, which would not allow for the delay attendant to soliciting U.S. sources,
- b. The price differential for procurement from U.S. sources exceeded by 50% or more the delivered price from the non- U.S. source,
- c. Compelling local political considerations precluded consideration of U.S. sources,
- d. The goods or services were not available from U.S. sources, or
- e. Procurement of locally available goods and services, as opposed to procurement of U.S. goods and services, would best promote the objectives of the Foreign assistance program under the grant.

2. When the total procurement element exceeds \$250,000 (unless funded by DFA), the following applies: Except as may be specifically approved or directed in advance by the grant officer, all goods and services financed with U.S. dollars, which will be reimbursed under this grant must meet the source (including origin and composition) and nationality requirements set forth in Handbook 1, Supp B, chapter 5 for the authorized geographic code specified in the schedule of this grant.
- C. Marine insurance: The eligibility of marine insurance is determined by the country in which it is placed. Insurance is placed in a country if payment of the insurance premium is made to, and the insurance policy is issued by an insurance company located in that country. Eligible countries for placement are governed by the authorized geographic code, except that if Code 941 is authorized, the Cooperating country is also eligible. Section 604(d) of the Foreign Assistance Act requires that if a recipient country discriminates by statute, decree, rule, or practice with respect to AID-financed procurement against any marine insurance company authorized to do business in the U.S., then any AID-financed commodity shipped to that country shall be insured against marine risk and the insurance shall be placed in the U.S. with a company or companies authorized to do marine insurance business in the U.S.
  - D. Ocean and air transportation shall be in accordance with the applicable provisions contained within this grant.
  - E. Printed or Audio-visual Teaching materials: If the effective use of printed or audio-visual teaching materials depends upon their being in the local language and if such materials are intended for technical assistance projects or activities financed by AID in whole or in part and if other funds including U.S. - owned or U.S. -controlled local currencies are not readily available to finance the procurement of such materials, local language versions may be procured from the following sources, in order of preference:
    1. The United States (AID Geographic Code 000),
    2. The Cooperating Country,
    3. "Selected Free World" countries (AID Geographic Code 941), and
    4. "Special Free World" countries (AID Geographic Code 899).
  - F. Special Restrictions on the Procurement of Construction or Engineering Services: Section 604(g) of the Foreign Assistance Act provides that AID funds may not be used for "procurement of construction or engineering services from advanced developing countries, eligible under Geographic Code 941, which have attained a competitive capability in international markets for construction services or engineering services." In order to insure eligibility of a Code 941 contractor for construction or engineering services, the grantee shall obtain the grant officer's prior approval for any such contract.

## ARTICLE VI

### ALLOWABILITY OF COSTS

Allowability of costs incurred under this agreement will be determined generally in accordance with Office of Management and Budget A-122 "Circular A-122 "Cost Principles for Nonprofit Organizations."

- A. . . . shall use United States flag carriers and economy class service for travel supported under this agreement. Per diem costs charged to this agreement by . . . shall be limited to the per diem amounts stipulated in the budget and to the applicable schedules in effect on the date of travel.
- B. Compensation to consultants in amounts exceeding the budget must be approved in advance by IEF on the basis of salary history and standards of comparability.
- C. Under no circumstances are expenditures for entertainment, gifts, gratuities, donations, alcoholic beverages, fines, or penalties allowable under this grant.

## ARTICLE VII

### REPORTING AND EVALUATION

. . . shall provide to IEF and retain in its permanent files the following written reports necessary to monitor the progress of program activity and ensure compliance with legislative requirements. Guidelines for Program Reports and Financial Reports will be provided by the IEF to the Subgrantee.

- A. Program
  - 1. The Subgrantee shall submit quarterly progress reports. These reports are due by the thirtieth (30th) day following the end of the period covered in the report.
  - 2. The Subgrantee shall prepare a Final Report, including a comprehensive and detailed report of activities, and an evaluation of accomplishments under the Agreement. The Final Report will be due thirty (30) days after the termination of the funding period. The Final Report shall be combined with the project's last quarterly report.
- B. Financial

1. The Subgrantee shall provide monthly account reconciliation reports. This report is due no later than the thirtieth (30th) day of the month following the reporting period.
2. The Subgrantee shall provide quarterly financial reports. This report will contain the: quarterly transaction report; quarterly expense summary; and signed verification of the accuracy of the report by the Project Director. This report is due no later than the thirtieth (30th) day of the month following the reporting period.

C. Expenditure Estimates

1. The Subgrantee shall provide modifications to expenditure estimates to ensure that excess funds do not accumulate in . . . 's accounts.

## ARTICLE VIII

### RESPONSIBILITIES

- A. In carrying out the purposes of this agreement, . . . shall be responsible for planning, organizing, and administering the program to conduct activities consistent to with the purposes of the IEF and the "Seeing 2000" program objectives . . . shall not provide grant funds to other organizations.
- B. . . shall be subject to the appropriate IEF oversight procedures. These procedures include the following:
  1. Record-keeping. . . agrees to keep records that shall fully disclose the amount and the disposition of the funds granted under the terms of this agreement and facilitate an effective audit. The records maintained by the . . . shall reflect the total cost of the project or undertaking in connection with which such funds are given or used, and the nature of that portion of the cost of the project or undertaking supplied by other sources. Grant records shall be maintained for three (3) years following the date of the submission of the final financial report.
  2. Audit.
    - a. . . shall establish procedures and assign responsibility so that IEF can perform (or require to be performed) selective, independent auditing or other forms of verification of the information submitted by subrecipients to ensure compliance with grant terms and objectives.

The audit shall be conducted at the place or places where the accounts of . . . are normally kept. All books, accounts, financial records, reports, files and all other papers, things or property belonging to or in use by . . . and necessary to facilitate the audit shall be made available to the person or persons conducting the audit; and full facilities for verifying transactions with any assets held by depositories, fiscal agents, and custodians shall be afforded to such person or persons.

- b. IEF reserves the right to conduct or have conducted its own audit of . . .'s records in the exercise of its obligations under this grant. Any such audit shall be conducted at the place or places where accounts of . . . are normally kept. The representatives of the International Eye Foundation shall have access to all books, accounts, records, reports, files and all other papers, things, or property belonging to or in use by . . . pertaining to financial transactions relevant to this grant and necessary to facilitate the audit; and they shall be afforded full facilities for verifying transactions with any assets held by depositories, fiscal agents and custodians. All such books, accounts, records, reports, files, paper, and property of . . . shall remain in the possession and custody of . . .

## ARTICLE IX

### INDEMNITY

. . . agrees to indemnify IEF and its Officers and Directors, including cost of defense, for any claim made against them arising out of . . .'s performance of this grant agreement. This indemnity shall be in excess of IEF's insurance policies, but not limited by the scope of such policies.

## ARTICLE X

### AMENDMENTS AND MODIFICATIONS

No amendment or modification of this Agreement shall have any force or effect unless it is in writing and signed by an authorized representative of IEF and the authorized representative of . . .

## ARTICLE XI

### TERMINATION

- A. If the United States Agency for International Development deems it in the best interest of the United States to terminate its agreement with IEF, IEF may terminate this Grant by giving . . . thirty (30) days notice in writing. . . . may terminate the agreement for any reason by giving IEF thirty (30) days notice in writing. In the event this agreement is terminated under this provision, . . . shall immediately terminate any subgrants or other obligations that it may have entered into involving funds provided under this agreement and shall settle all outstanding liabilities and all claims resulting from the termination of subgrants and other obligations. Any balance of funds received from IEF that is unused and found to be unnecessary to liquidate outstanding obligations shall be returned to IEF.
- B. IEF may terminate this Subgrant if it is determined that there are significant noncompliance by . . . with the terms and conditions of the agreement. In the event IEF believes there is significant noncompliance, it shall so inform . . . in writing. Within ten (10) working days after receipt of notification, . . . may respond to IEF indicating steps taken to remedy its noncompliance. Should IEF determine that these actions are insufficient, it reserves the right to terminate the Grant. Such termination must be in writing and must set forth the reasons for termination must be in writing and must set forth the reasons for termination. In the event of any such termination, IEF reserves the right to take such action as may be necessary to recover any unexpended, unobligated, and unallowable funds provided hereunder.

## ARTICLE XII

### DEBARMENT, SUSPENSION, INELIGIBILITY AND VOLUNTARY EXCLUSION

In accepting this Grant, . . . certifies that neither it nor its principals are presently debarred, suspended, proposed for debarment, declared ineligible, or voluntarily excluded from participation in this agreement by any U.S. Government department or agency.

## ARTICLE XIII

### INVESTMENT PROMOTION

No funds or other support provided hereunder may be used in a project or activity reasonably likely to involve the relocation or expansion outside of the United States of an enterprise located in the United States of an enterprise located in the United States if non-U.S. production in such relocation or expansion replaces some or all of the production of, and reduces the number of employees at, said enterprise in the United States.

No funds or other support provided hereunder may be used in a project or activity the purpose of which is the establishment or development in a foreign country of any export processing zone or designated area where the

labor, environmental, tax, tariff, and safety laws of the country would not apply, without the prior written approval of USAID.

No funds or other support provided hereunder may be used in a project or activity which contributes to the violation of internationally recognized rights of workers in the recipient country, including those in any designated zone or area in that country.

IN WITNESS WHEREOF, the parties hereto have executed this agreement as of the dates indicated herein below.

Please sign all three copies. Send two (2) copies to the IEF and keep one (1) for your records.

...

INTERNATIONAL EYE  
FOUNDATION

_____	SIGNATURE	_____
_____	Typed Name	_____
_____	Title	_____
_____	Date	_____

**“SEEING 2000”**

INTERNATIONAL EYE FOUNDATION

Financial Reporting Instructions

## **July 1996**

The purpose of these instructions is two-fold. The first is to instruct the user in the International Eye Foundation's financial reporting needs for "Seeing 2000". The second is to provide information on particular areas of accounting. Blank forms, which can be photocopied if necessary, are included at the end.

Comments, on how these instructions can be improved for your use, can be forwarded to the International Eye Foundation's (IEF) Bethesda Headquarters.

### **I. BUDGET**

All proposed modifications to the budget submitted with the project proposal must be approved by the IEF.

Grant recipients may not exceed their approved budget total. Grant recipients that underspend their projected budget will not receive the left-over funds.

Grant funds are considered not spent when no acceptable receipt is presented to the IEF. Grant funds advanced to the grantee, but not accounted for, must be reimbursed by the project to the IEF.

## **II. DISBURSEMENT OF FUNDS**

Grant funds will be disbursed to "Seeing 2000" projects by bank transfers. The amount will be received in the appropriate local currency. Projects will only receive advances to cover expenses and/or purchases for a period of up to three months.

Purchases of equipment that require United States (US) dollar payments may be requested from the IEF. A copy of the supplier's invoice and banking details must be forwarded to the IEF for payment. Upon verification of the budgeted expense, IEF will make the transfer.

Money requested by the Project Director for each disbursement should be based on the budget. In general, the United States Agency for International Development (USAID) requires that grant funds should not remain unused in accounts for a period exceeding thirty (30) days. The IEF may require valid receipts before we disburse additional funds. Justification and listing of expenses for the amount requested must also be given.

Generally, funds must be requested by the 10th or 25th day of the month. Amounts requested by the 10th of the month should be available for your use between the 16th and 20th. Amounts requested by the 25th should be available for your use between the 1st and the 5th day of the following month. Funds will not be disbursed at other times. Therefore, appropriate financial planning must be done to meet project needs. Funds should be requested in US Dollar amounts.

### **A. USAID Standard Provisions for goods and services**

All "Seeing 2000" project expenditures must meet the USAID's requirements for the Standard Provision of Goods and Services. This complete document is attached.

The IEF would like to highlight a few of the key points contained in the USAID document governing the procurement of goods and services. **Many of the items listed may not pertain to your grant budget.**

#### Air Travel and Transportation

**US carriers must be used, when available, for international travel.**

#### Goods and Services

The following items may not be bought:

- military equipment
- surveillance equipment
- abortion equipment and services
- weather modification equipment
- luxury goods and gambling equipment
- commodities and services for support of police or other law enforcement activities

Items may not be bought from suppliers whose name appears on "Lists of parties Excluded from Federal Procurement and Nonprocurement Programs". USAID will provide the list upon request.

The following items may be bought with prior approval from USAID:

- agricultural commodities
- motor vehicles
- pharmaceuticals**
- pesticides
- rubber compounding chemicals & plasticizers
- used equipment**
- US government owned excess property
- fertilizer

Items must be bought from US sources, when available. A grantee may procure something from other than US sources if the following order of preference is met, including documentation. The order is:

- procurement was of an emergency nature,
- price differential for procurement from US sources exceeded by 50% or more the delivered price from the non-US source,
- compelling local political considerations,
- not available from US sources,
- buying local goods would best promote objectives of the Foreign Assistance

program under the grant.

Printed or audio-visual teaching materials must be bought from US sources. However, when language appropriate materials are not available from US sources, they can be purchased elsewhere. Priority is given to in-country purchases. Third country purchases are allowable. Reference the USAID document to identify allowable countries.

## **B. Unallowable Costs or Expenditures**

Expenditures not meeting the USAID's Standard Provision of Goods and Services, not put forth in the project proposal budget and not contributing to the project objectives will not be funded or reimbursed. In addition, costs expressly unallowable by US federal law shall not be billed to this US Government funded grant or to the indirect cost rates. Unallowable costs include:

- Alcoholic beverage costs
- Interest costs for operating funds
- Incidental gratuities, tips, bribes
- Fines
- Tax payment penalties
- Bad debts and directly associated collection and legal cost
- Legal fees defending fraud and litigating appeals against the US Government
- Entertainment cost, such as parties, gifts, and the like, except where expressly allowed by government agencies with proper documentation
- Gains and losses on assets other than depreciated assets
- Congressional lobbying, etc.
- Contributions and donations
- Airfare costs in excess of the lowest customary standard, coach or equivalent airfare offered during normal business hours, except as authorized under specific circumstances and documented and justified
- Membership in Social, Dining or Country Clubs

## **III. FINANCIAL REPORTING PROCEDURES**

Complete and accurate financial reports must be received by the IEF in a timely manner. IEF's continual disbursement of grant funds to recipients is dependent upon information contained in the monthly account reconciliation sheet, quarterly financial report, the quarterly technical report and other correspondence.

It is essential that all "Seeing 2000" projects establish a system for tracking expenditures. If an accounting system does not already exist within your organization, it will be necessary to develop one. IEF will work with you to create an accounting system for your "Seeing 2000" funds.

Financial expenditures must be described according to the eight major categories outlined in the Request for Application. These categories are:

- Personnel
- Office Operations
- Travel
- Project Supplies
- Training
- Evaluations and Surveys
- Other Direct Costs

- Equipment

All categories may not be necessary for your project. The length of the financial report will be determined by need.

Consistency in how you record the transactions is very important. If you recorded an expense as *supplies* the first time, it should continue to be a *supply* in further transactions. It is helpful, but not necessary, to identify expenses using the IEF expense code numbers. A listing of IEF expense codes and a description of each item follows in Annex 1.

#### A. **Monthly Reporting**

A **monthly account reconciliation report** must be sent to the IEF Bethesda Headquarters each month. This information can be faxed, or sent by mail or courier. This report must be received by the IEF no later than the 30th day of the month following the month on which you are reporting.

The monthly account reconciliation shows the existing balance, the addition of monies transferred into the account from IEF, the subtraction of expenses and the remaining balance (which will be carried over to the next month as the existing balance). If no transactions occur, a monthly account reconciliation form must still be sent to the IEF.

The monthly account reconciliation provides a summary of the months receipts and expenditures.

An example of the monthly account reconciliation follows.

**“Seeing 2000” - International Eye Foundation**

**Project Name:** Name of Project

**Project Location:** City, Country

**Monthly Account Reconciliation**

a. Balance from previous month (in local currency)	5,000
b. IEF Transfer (in local currency)	155,000
<b>c. Subtotal (in local currency) a + b</b>	160,000
d. Expenses (in local currency)	145,000
<b>e. Balance (in local currency) c - d</b>	15,000
f. Amount in Bank (in local currency)	9,300
g. Petty Cash (in local currency)	5,700
<b>h. Balance on Hand (in local currency) f + g</b>	15,000
i. IEF Transfer Amount Received this month (in U.S. Dollars)	\$2,500
j. IEF Transfer Amount Received this month (in local currency)	15,500

\_\_\_\_\_  
Project Director

\_\_\_\_\_  
Date

## B. Quarterly Reporting

A complete financial report must be sent by mail or courier to the IEF Bethesda Headquarters. Forms that must be included in this quarterly financial report are:

1. **Quarterly Transaction Sheet** (including receipts)
2. **Quarterly Expense Summary**
3. Cover Letter with **the signature of Project Director**

Original signed documents, supporting documentation and receipts must accompany these forms. The complete report must be received by the IEF no later than the 30th of the month following the end of the quarterly reporting period. We recommend that you keep a photocopy of all documentation and receipts for your files.

The use of computer generated reports is highly encouraged. The most important attribute of the financial report is that the information is accurate, legible and timely. If you do not have a computer available, a handwritten transaction sheet is acceptable.

Computer diskettes with the above information should be labeled to identify the project, time period of information contained on the diskette and type of computer spreadsheet (i.e., Quattro Pro or Lotus 1-2-3). IEF can make available to your project a customized spreadsheet for Lotus 1-2-3 or Quattro Pro with the IEF accounting codes included. If familiar with Quicken, accounts may be completed using this program.

### 1. Quarterly Transaction Sheet

The **transaction sheet** is a listing of all project expenses and must contain the following information: date of expense; description briefly identifying expense; receipt number assigned by project in chronological and numerical order; check number corresponding directly to expense (including reimbursement from petty cash); and expense code number (IEF's list of accounting codes, preferred). Additional columns may be added if this will aid your project in recording and tracking funds.

IEF's chart of accounts may be referenced for budget line item codes or your existing code system may be used. However, costs will need to be identified according to the eight major expense categories as described above.

The **transaction sheet** must be accompanied with supporting documentation of expenses as they apply to your projects. This type of documentation includes, but is not limited to:

- receipts**
- timesheets**
- travel vouchers.**

IEF is enclosing a rubber stamp that is to be stamped on all transaction receipts. The rubber stamp

contains labeled areas in which the project accountant will identify the amount paid, the accounting code for the expense and the check number or petty cash number that reimbursed the expense. The front of the receipt is to be stamped and filled with the appropriate information. An example of a transaction sheet follows.



<b>TOTAL</b>				8500
--------------	--	--	--	------

**2. Quarterly Expense Summary**

The expense summary is the tallying or totaling of expenses by expense code against your original budget. Costs or expenses will be subtracted by line item from the proposed budget to indicate the sum remaining for each line item. The amount or percentage allocated to indirect costs in your project proposal will be reflected in the amount placed in the line below the subtotal line.

An example of a Quarterly Expense Summary follows.

**“Seeing 2000” - International Eye Foundation**

**Project Name:** Project name

**Project Location:** City, Country

**Quarterly Expense Summary** for the quarter 10/1 to 12/31 1996

<b>Budget Line Item</b>	<b>Amount Budgeted</b>	<b>Amount Previously Spent</b>	<b>Amount Spent This Quarter</b>	<b>Total Remaining</b>
<b>601</b>	<b>3000</b>	<b>0</b>	<b>1500</b>	<b>1500</b>
<b>616</b>	<b>5000</b>	<b>2000</b>	<b>0</b>	<b>3000</b>
<b>609</b>	<b>5000</b>	<b>0</b>	<b>2000</b>	<b>3000</b>
<b>635</b>	<b>10000</b>	<b>1000</b>	<b>5000</b>	<b>4000</b>
<b>643</b>	<b>2000</b>	<b>500</b>	<b>0</b>	<b>1500</b>
<b>Subtotal</b>	<b>25000</b>	<b>3500</b>	<b>8500</b>	<b>13000</b>
<b><u>Indirect Costs</u></b>				
<b>GRAND TOTAL</b>	<b>25000</b>	<b>3500</b>	<b>8500</b>	<b>13000</b>

### **3. Cover letter with Signature of Project Director**

The signature of the Project Director is required on documents as indicated in the example forms and financial report cover letter. This assures the IEF that the Project Director is assuming responsibility for the contents.

## **IV. SUPPORTING DOCUMENTATION**

Additional forms or supporting financial documents may be requested by the IEF. These include bank statements or canceled checks, petty cash vouchers, time sheets, travel expense reports and other documents directly related to receipt or disbursement of grant funds. For example, complete and accurate timesheets should be included with quarterly financial reports when grant funds are used to pay for this expense.

Additional forms for tracking expenses are included in this manual. These forms are not meant to replace forms that you may currently have but to provide a system for tracking expenses that your organization may not already have in place. If these forms, or your own substitute forms are used, they should accompany the quarterly transaction report when supporting an expense. Forms should be signed by the Project Director.

### **A. Transaction or Expense Receipts**

Receipts must be clearly numbered and ordered chronologically and numerically. Expenses of more than US\$250 should be paid by check, not cash. Translation of receipts is recommended for prompt reimbursement. This can be done on the reverse side of original receipts and in the blank area or reverse side of photocopied receipts. Original receipts are strongly preferred. However, if this is not possible, photocopied receipts are acceptable.

In the event that there is no receipt available for an expense, a substitute receipt must be made by the project. Receipts should contain the following information: date(s) of purchase or expense; description of expense; amount; name and signature of person receiving funds (if possible); signature of project director.

### **B. Time Sheet**

The time sheet should be a record of the dates and hours for which persons are paid by the project. This record may be kept weekly, bi-weekly or monthly, whichever is appropriate to your project needs.

### **C. Travel Expenses**

A travel expense report is to be used when expenses are incurred for project travel (IEF expense codes 621, 622, 623, 624, 627, 628, 645, 654, and 655). It is essential that all

related information is completed on the form. Receipt numbers can also be included to ease the tracking of expenses.

## **Key Points**

- 1. Establish a system or method of recording expenses (and receipt of funds in-kind) and use this method throughout the entire funding period.**
- 2. Identify an accountant or administrator to handle the daily project financial transactions.**
- 3. Contact the IEF Bethesda Headquarters immediately with any problems or questions.**
- 4. Document everything. Send one copy (original copy) to IEF, keep one copy (photocopied) for your records.**
- 5. Maintain receipts for expenses in numerical order and time order.**
- 6. Checks should be written for expenses more than US\$250 equivalent.**
- 7. Be legible, accurate and on time.**
- 8. Project Director signs reports.**
- 9. Be consistent.**

**“Seeing 2000” - International Eye Foundation**

**Project Name:**

**Project Location:**

**Monthly Account Reconciliation**

a. Balance from previous month (in local currency)	
b. IEF Transfer (in local currency)	
<b>c. Subtotal (in local currency) a + b</b>	
d. Expenses (in local currency)	
<b>e. Balance (in local currency) c - d</b>	
f. Amount in Bank (in local currency)	
g. Petty Cash (in local currency)	
<b>h. Balance on Hand (in local currency) f + g</b>	
i. IEF Transfer Amount Received this month (in U.S. Dollars)	
j. IEF Transfer Amount Received this month (in local currency)	

---

Project Director

---

Date





<b>GRAND TOTAL</b>				
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**“Seeing 2000” - International Eye Foundation**

**Project Name:**

**Project Location:**

To: Lori Carruthers, “Seeing 2000” Program Coordinator

I am sending you our quarterly financial report for the period \_\_\_\_\_ to \_\_\_\_\_ 199\_\_\_\_.

I have included:

- i Current Monthly Account Reconciliation
- i Transaction Sheet with supporting documents and numbered receipts
- i Quarterly Expense Summary
- i Diskette of Account Information (optional)
- i Other
  - i Travel Expense Sheet
  - i Time Sheet
  - i \_\_\_\_\_
  - i \_\_\_\_\_
  - i \_\_\_\_\_

Signed,

---

Project Director

---

Date

**Project Name:**

**Project Location:**

**Travel From:**

**To:**

**Purpose of Trip:**

	Dates								
Accounting Codes	Items	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Sunday	TOTALS
	Breakfast								
	Lunch								
	Dinner								
	Subtotal/Per Diem								
	Lodging								
	Transportation								
	Fuel								
	Other								
	Other								
	TOTALS								

**Name:**

**Authorized By:**

**RECEIPT**

**Project Name:**  
**Project Location:**

**Date of purchase:** \_\_\_\_\_

**Description:** \_\_\_\_\_  
**Name of purchaser:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of purchaser**

\_\_\_\_\_  
**Signature of Project Director**

=====  
**RECEIPT**

**Project Name:**  
**Project Location:**

**Date of purchase:** \_\_\_\_\_

**Description:** \_\_\_\_\_  
**Name of purchaser:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of purchaser**

\_\_\_\_\_  
**Signature of Project Director**

=====  
**RECEIPT**

**Project Name:**  
**Project Location:**

**Date of purchase:** \_\_\_\_\_

**Description:** \_\_\_\_\_  
**Name of purchaser:** \_\_\_\_\_

\_\_\_\_\_  
**Signature of purchaser**

\_\_\_\_\_  
**Signature of Project Director**

## ANNEX 1

# "Seeing 2000" INTERNATIONAL EYE FOUNDATION CHART OF ACCOUNTS DEFINITIONS

### PERSONNEL

- 601 Salaries**  
All employees paid on a regular basis. It should include any bonus, vacation payment, back pay or any termination payment paid to an employee.
- 605 Benefits - Insurance**  
Payments for premiums of medical insurance or for the direct payment of medical bills.
- 606 Benefits - Other**  
Benefits paid on behalf of an employee which are a condition of employment. Examples are: Leave grant, payment of provisional/driver's license, death benefits, etc.
- 608 Temporary Help**  
Persons working for the project on a short-term basis usually on a daily or weekly wage.
- 609 Local Consultants**  
Persons working for the project on a short-term basis whose job requires special skills.

### OFFICE OPERATIONS

- 611 Insurance**  
The cost of fire & theft insurance for office equipment and/or bonding insurance.
- 612 Office Security**  
Services purchased for security of an office or home (does not include payrolled staff).
- 613 Printing/Film Developing/Duplication**  
The costs of photocopying, film development and printing of general office materials (may include the cost of toner for copier).
- 614 Equipment & Furniture Maintenance**  
Maintenance agreements and repairs for equipment and furniture for the project.
- 615 Office Equipment(<\$5000)**  
Items costing more than \$25 but less than \$5000 which have a useful life of more than one year. Examples are: fax machines, small copiers & calculators.
- 616 Supplies - Office**  
Items having a useful life of less than one year and a unit price of less than \$5000. Examples are: pens, pencils, log books, etc.
- 617 Postage & Courier**  
The costs of postage and courier for local & international dispatch.
- 618 Office Rent/Utilities/ Maintenance**  
Monthly rent, water, electricity, garbage and maintenance (grass cutting) of the office.
- 619 Telephone, Telex & FAX**  
Telephone & fax charges, line & phone installation and repair.

## **TRAVEL**

- 621 Airfare-International**  
The cost of airline tickets to travel outside the country (may include a local segment).
- 622 Airfare/Transport-Local**  
The cost of airfares, buses and other forms of local transport within the country.
- 623 Per Diems & Allowances-Int'l**  
All costs associated with travel outside the country. Examples are: Lodging, meals, allowances, passports, taxis, visas, airport taxes etc.
- 624 Per Diems & Allowances-Local**  
All costs associated with travel, lodging & meals (excluding transport) within the country of a general nature.
- 626 Vehicle Rental (self explanatory)**
- 627 Vehicle - fuel & oil (self explanatory)**
- 628 Vehicle - maintenance & spares (self explanatory)**
- 629 Vehicle - insurance/license/registration (self explanatory)**

## **PROJECT SUPPLIES**

- 631 Medical Supplies**  
Examples are: medicines, consumables, surgical supplies, etc.
- 633 Other Project Supplies**  
Supplies purchased for the project which do not fall into any of the other categories of office, training, or medical (e.g., survey forms)
- 634 Shipping/Storage/Clearing**  
The cost of shipping items by sea or air freight plus any customs charges or storage costs.
- 635 Project Equipment (<\$5000)**  
Equipment purchased for the project which are not for the office or training and are less than \$5000.

## **TRAINING**

- 641 Supplies**  
Items used for training purposes having a useful life of less than one year and a unit price of less than \$5000.
- 642 Equipment (<\$5000)**  
Items costing more than \$25 but less than \$5000 that have a useful life of more than one year and used for training purposes. Examples are: overhead and slide projectors, cameras etc.
- 643 Educational Materials & Training**  
The cost for materials which can be used to educate staff or community. Examples are: employee training courses, books, subscriptions & publications.
- 644 Per Diems/Allowances/Meals**  
The costs of meals, drinks or daily allowances given to participants during a training course (may include staff and others).
- 645 Transportation**  
The cost of transporting participants of training courses to, during & from the course.
- 646 Facility Rental**

The cost of renting space to hold a training, may include coffee break costs but should not include meals which are charged to account # 644

**EVALUATIONS & SURVEYS**

- 651 Consultant Fees**  
Fees paid to consultants to conduct evaluations and surveys (may be contracted & paid from Bethesda).
- 652 Consultant Travel & Per Diem**  
All costs associated with consultants' travel, meals & lodging while conducting evaluations and surveys.
- 653 Local Consultant Fees**  
Fees paid to local consultants to assist or conduct evaluations and surveys.
- 654 Staff Travel**  
Transportation costs for staff when assisting or conducting evaluations and surveys.
- 655 Staff Per Diem**  
Meals & lodging costs for staff when assisting or conducting evaluations and surveys.

**OTHER DIRECT COSTS**

- 661 Professional Fees**  
Fees for services which are of a professional nature and are paid to a company rather than an individual.
- 664 Registrations & Dues**  
Fees paid for memberships or participation in workshops, seminars etc.
- 665 Other Fees**  
Bank charges and other fees not covered by any other category.

**EQUIPMENT (>\$5000)**

- 682 Office Furn./Equipment** Items having a unit price more than \$5000
- 683 Training Equipment** Items having a unit price more than \$5000
- 684 Medical Equipment** Items having a unit price more than \$5000

**“Seeing 2000” - International Eye Foundation  
Accounting Codes**

<b>Personnel</b>	611 Insurance
601 Salaries	612 Office Security
605 Benefits - insurance	613 Printing/Duplication/ Film Developing
606 Benefits - Other	614 Maintenance
608 Temporary Help	615 Office Equipment (<\$5000)
609 Local Consultants	616 Supplies - Office
	617 Postage & Courier
	618 Office Rent/Utilities/ Maintenance
<b>Office Operations</b>	

619 Telephone & Fax

669 Miscellaneous

**Travel**

621 Airfare - International  
622 Airfare/Transport-Local  
623 Per Diems & Allow.-Int'l  
624 Per Diems & Allow.-Local  
626 Vehicle Rental  
627 Vehicle - fuel & oil  
628 Vehicle - maintenance and spares  
629 Vehicle - insurance/license

**Equipment**

682 Office Furniture/Equipment  
683 Training Equipment  
684 Medical Equipment

**Project Supplies**

631 Medical Supplies  
633 Other Project Supplies  
634 Shipping/Storage/Clearing  
635 Project Equipment (<\$5000)

**Training**

641 Supplies  
642 Equipment (<\$5000)  
643 Educational Materials & Training  
644 Per Diems/Allowances/Meals  
645 Transportation  
646 Facility Rental  
647 Educational Stipends & Allowances  
648 Printing/FilmDeveloping/ Duplication

**Evaluations & Surveys**

651 Consultant Fees  
652 Consultant Travel & Per Diem  
653 Local Consultant Fees  
654 Staff Travel  
655 Staff Per Diem  
659 Other Evaluation & Survey Costs

**Other Direct Costs**

661 Professional Fees  
664 Registration & Dues  
665 Other Fees  
666 Advertising

## I. Quarterly Technical Report

“Seeing 2000” grant recipients must send **Quarterly Technical Reports** to the International Eye Foundation (IEF). These reports are due by the fifteenth (15th) day of February, May, August, and November and will cover the prior three-month period. These reports will contain narrative and quantitative information as it relates to the attainment of stated objectives, and should be brief.

Preliminary copies of the quarterly reports may be faxed or e-mailed to the IEF. However, **a type written or word processed report must be sent by mail or courier and be received by the IEF by the last day of February, May, August and November.**

Financial information will be sent monthly. Procedures for financial reporting are explained in the accompanying “Seeing 2000” Financial Reporting Instructions.

The quarterly report at minimum must contain:

- quantitative data regarding the increase in the number of surgeries performed on children and the attainment of stated objectives using attached tables
- a narrative description of the accomplishments and problems related to the objectives

Additional supporting materials are encouraged as a part of the Quarterly Report. Possible items to include are: further narrative detail on accomplishments (populations served, etc.), ‘before and after’ photographs; other photographs; educational materials developed for health workers and/or the community such as posters, pamphlets, flyers; newspaper articles referring to outreach activities; and cassette tapes or videotapes relating to project activities.

### Quantitative information

Use the attached tables as appropriate. Sources of acceptable and verifiable measurements include: eye examination log books; surgery records; and surveys and should be those stated in your project proposal. Information on where these measurements are made, for example at which hospital or clinic, must be identified. It is also important to record when these events occurred, for example the dates of a training course or community-based education and promotion activities.

### Narrative

Describe: new activities initiated in underserved populations; and how projects address closing existing service gaps so that services are expanded to serve the target population.

Stories of project milestones, successes and failures should also be recorded in an effort to establish a record of lessons learned. Discuss any circumstances which may have assisted the project and/or produced unexpected benefits. Information sharing on overcoming obstacles may aid another project.

Identify any problems or constraints which have affected the project. Describe strategies which have been used to overcome these constraints and plans for addressing them in the future.

Identify who is managing and maintaining the health information system. Describe how the information being collected is being shared with data collectors, project staff, counterparts and community members. Provide any names of changes in project personnel and their positions.

Complete and accurate Quarterly Reports must be received by the IEF in a timely manner. **IEF's continual quarterly disbursement of grant funds to recipients is dependent upon information contained in the quarterly report and monthly financial reports.** Grant recipients who are unable to maintain their timetable of activities and deviate from their budget without justification will not receive additional funding until the problem is clarified.

Information from these reports and any other additional communications will be used to monitor project goals and objectives. Information from these quarterly reports will be compiled and presented to the United States Agency for International Development (USAID).

## **II. Monitoring**

Grant recipients will be monitored by the IEF on their progress toward achieving their Primary and Secondary Objectives, as stated in their proposal. Objectives and minimal indicators were outlined in the Request for Application (RFA). These are not inclusive, grant recipients were encouraged to design additional appropriate indicators.

IEF will monitor the project's ability to:

- implement activities in order to achieve stated objectives
- implement activities according to their proposed timeline
- report as scheduled
- report completely and accurately

Tools used by the IEF to monitor grant recipients will be:

- monthly and quarterly financial reports
- objective based Quarterly Report
- verification of records, patient log books, other measuring tools during visits by the IEF staff

Baseline information will be taken from the information contained in the grant proposal or additional information collected by the project before project interventions begin.

Feedback on the information contained in the reports will be given by the IEF's Headquarter Office. Site visits by the IEF's staff will be conducted in order to discuss project developments and to collect information. Grant recipients will be advised in advance of the visits. Verification of logs, records and other measuring tools also will be conducted. It is not expected that all projects will require a site visit and most projects will receive only one.

Following are tables that are to be used to quantifiably measure your stated objectives. Projects will respond to some, but not necessarily all of the objectives. Projects will choose tables to correspond to the objectives cited in their project's proposal. The tables have been designed to include baseline information, data collected during and/or after the intervention, and data comparison. The tables and narrative headings

are meant as guidelines. Please provide any additional information that you find appropriate to your project.

If you have comments or suggestions, please feel free to contact the IEF.

*During the life of "Seeing 2000", the methods and indicators used to monitor and evaluate this project may evolve. This evolution of methods is not meant to change the results of this program, rather, to increase the efficiency and efficacy of collecting and analyzing data. Your input is crucial; we hope to create an open dialogue between your organization and the IEF.*

Objective 1: Increase by 20% or more the number of children receiving needed surgery for correctable ocular conditions in the areas being served.

Project Name:

Project Location:

Children 0 - 15 years

	Baseline data		1st quarter _____ to _____		2nd quarter _____ to _____		3rd quarter _____ to _____		4th quarter _____ to _____		QUARTERLY TOTAL		QUARTERLY TOTAL - FEMALES	
	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15	0 - 6	>6-15	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15
examinations under anesthesia														
cataract extr. w/out IOL														
cataract extr. w/ IOL														
corneal transplant														
corneal ulcers - surgical debridement														
removal of corneal and conjunctival foreign bodies														
enucleation														
evisceration														

**Objective 1: Increase by 20% or more the number of children receiving needed surgery for correctable ocular conditions in the areas being served.**

	Baseline data		1st quarter _____ to _____		2nd quarter _____ to _____		3rd quarter _____ to _____		4th quarter _____ to _____		QUARTERLY TOTAL		QUARTERLY TOTAL - FEMALES	
	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15	0 - 6	>6-15	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15
glaucoma														
lacrimal - lacerations of canaliculi														
lacrimal- dacryosyestec- tomes														
lacrimal probing														
lacerations of lid														
lid surgery - entropian														
lid surgery - ectropian														
orbit & oculoplasty														
strabismus														
trauma -corneal laceration														

**Page Three**

**“Seeing 2000” - International Eye Foundation**

**Number and Types of Surgery by Age**

**Objective 1: Increase by 20% or more the number of children receiving needed surgery for correctable ocular**

**conditions in the areas being served.**

	<b>Baseline data</b>		1st quarter _____ to _____		2nd quarter _____ to _____		3rd quarter _____ to _____		4th quarter _____ to _____		<b>QUARTERLY TOTAL</b>		<b>QUARTERLY TOTAL - FEMALES</b>	
	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15	0 - 6	>6-15	0 - 6	>6-15	0 - 6	>6 - 15	0 - 6	>6 - 15
trauma - intraocular foreign body														
trauma - orbital fractures														
trauma - lid and facial suturing														
traumatic retinal detachment														
other (identify)														
other (identify)														
<b>TOTAL</b>														

## **Number and Types of Surgery by Age**

**Objective 1: Increase by 20% or more the number of children receiving needed surgery for correctable ocular conditions in the areas being served.**

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected benefits:**

**Information collected from**

**Information collected by**

**Date**

Objective 1 Secondary Information0

### Surgery Outcomes Children 0 - 15 years

\* For children less than 10 years, ask parent or guardian. For children 10 years or greater, ask the child.  
Identify and adapt the following tables to match surgeries conducted.

IDENTIFY SURGICAL PROCEDURE \_\_\_\_\_

Can the Child see better?	Baseline data	1st quarter	2nd quarter	3rd quarter	4th quarter	TOTAL
YES						
NO						
not known						

List reasons why answer is NO.

List reasons why answer is not known.

### FOR STRABISMUS AND PLASTIC SURGERIES

Is the Child's appearance improved?	Baseline Data	1st quarter	2nd quarter	3rd quarter	4th quarter	TOTAL
YES						
NO						
not known						

List reasons why answer is NO.

List reasons why answer is not known.

*Objective 1 Secondary Information*

## Surgery Outcomes Children 0 - 15 years

**\* For children less than 10 years, ask parent or guardian. For children 10 years or greater, ask the child. Identify and adapt the following tables to match surgeries conducted.**

### FOR LID SURGERY AND REMOVALS

	<b>Baseline data</b>	1st quarter	2nd quarter	3rd quarter	4th quarter	
YES						
NO						
not known						

List reasons why answer is NO.

List reasons why answer is not known.

**Information collected from**

**Information collected by**

**Date**

**“Seeing 2000” - International Eye Foundation**

**Objective 2: Increase by 50% or more the number of children under age 6 years receiving eye examinations in the areas being served by a project. This may also include conducting a survey of facilities housing blind and visually impaired children using the WHO protocol and methodology.**

**Project Name:**

**Project Location:**

	<b>Baseline data</b>	1st quarter _____ to _____	2nd quarter _____ to _____	3rd quarter _____ to _____	4th quarter _____ to _____	<b>YEARLY TOTAL</b>
<b>TOTAL EYE EXAMS</b>						

Survey information (*methodology type*):

Survey conducted (*date*):

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected Benefits:**

**Information collected from**

**Information collected by**

**Date**

*Objective 2 Secondary information*

**Project Name:**

**Referred for Examination by other health care workers**

<b>Referred by:</b>	<b>Baseline data</b>	<b>1st Quarter</b>	<b>2nd Quarter</b>	<b>3rd Quarter</b>	<b>4th Quarter</b>	<b>TOTAL</b>
Doctors						
Nurses						
Clinical Assistants						
Community Health Workers						
Other (identify)						
Other (identify)						
Other (identify)						
<b>TOTAL</b>						

**Referral Cachment Area**

<b>Referral Area</b>	<b>Baseline Data</b>	<b>1 st Quarter</b>	<b>2nd Quarter</b>	<b>3rd Quarter</b>	<b>4th Quarter</b>	<b>TOTAL</b>
local*						
district/province*						
regional*						
not known						
<b>TOTAL</b>						

*Please identify the geographic range in kilometers.*





**“Seeing 2000” - International Eye Foundation**

**Objective 3: Identify at least one ophthalmologist or clinical officer within each project area and enhance their capacity to treat children clinically and surgically through additional training.**

**Project Name:**

**Project Location:**

**Verifiable Enrollment, Attendance and Completion of Training Course**

dates	enrollment date	attendance form verified	course completion
name of trainee:			
name of trainee:			

Name of Course \_\_\_\_\_

Name of Institution \_\_\_\_\_

Supervising Ophthalmologist \_\_\_\_\_

Address of Institution \_\_\_\_\_  
 \_\_\_\_\_  
 \_\_\_\_\_

Number of hours of classroom instruction \_\_\_\_\_

Number of hours of practical experience \_\_\_\_\_

Number of hours of observation \_\_\_\_\_

Number of operations performed \_\_\_\_\_

Number of operations assisted \_\_\_\_\_

**Information collected from** \_\_\_\_\_

**Information collected by** \_\_\_\_\_

**Date** \_\_\_\_\_

**“Seeing 2000” - International Eye Foundation**

**Objective 3: Identify at least one ophthalmologist or clinical officer within each project area and enhance their capacity to treat children clinically and surgically through additional training.**

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected Benefits:**

**Information collected from**

**Information collected by**

**Date**

**“Seeing 2000” - International Eye Foundation**

**Objective 4: Increase by 10% or more the number of visually impaired children enrolled in blind schools who can be visually rehabilitated (spectacles, low vision aids, etc.) and integrated into a regular environment and school.**

**Project Name:**

**Project Location:**

**Number of Visually Impaired School Aged Children ( 6 years - 15 years)  
Assisted with Low Vision Aids and Spectacles**

	1st quarter _____ to _____	2nd quarter _____ to _____	3rd quarter _____ to _____	4th quarter _____ to _____	<b>TOTAL</b>
r of y d n ied					
r of n d					
r of n itated					
<b>L</b>					

**“Seeing 2000” - International Eye Foundation**

**Objective 4: Increase by 10% or more the number of visually impaired children enrolled in blind schools**

**who can be visually rehabilitated (spectacles, low vision aids, etc.) and integrated into a regular environment and school.**

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected Benefits:**

**Information collected from**

**Information collected by**

**Date**

**“Seeing 2000” - International Eye Foundation**

**Objective 5: Support existing efforts to increase awareness of ocular disease in children, its management and referral, in the medical communities of the regions being served through primary eye care workshops.**

**Project Name:**

**Project Location:**

**Number of Persons by Worker Category Receiving Workshop Training**

Number of Workshops	Number of doctors attending	Number of nurses attending	Number of clinicians attending	other (specify)	other (specify)	<b>TOTAL</b>
<b>TOTAL</b>						

**List the date(s) and visit description of all international visitors at your facility.**

**“Seeing 2000” - International Eye Foundation**

**Objective 5: Support existing efforts to increase awareness of ocular disease in children, its management and referral, in the medical communities of the regions being served through primary eye care workshops.**

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected benefits:**

**Information collected from**

**Information collected by**

**Date**

**“Seeing 2000” - International Eye Foundation**

**Objective 6: Support existing efforts to increase awareness of ocular disease in children among parents and the general public through education/promotion activities and local media.**

**Project Name:**

**Project Location:**

Education/Promotion Activities Conducted

	date	date	date
y and location ( <i>identify</i> )			
y and location ( <i>identify</i> )			

Estimated audience reached for each activity:

**Secondary Information**

KAP survey of parents/general public\*

	date and location	date and location	date and location
y conducted			
y conducted			

**\*Please attach report of survey**

**“Seeing 2000” - International Eye Foundation**

**Objective 6: Support existing efforts to increase awareness of ocular disease in children among parents and the general public through education/promotion activities and local media.**

**Achievements:**

**Problems:**

**Plans for next quarter:**

**Unexpected Benefits:**

**Information collected from**

**Information collected by**

**Date**

### **III. Final Report**

The project Final Report will be due in the IEF Bethesda Headquarters no later than thirty days (30) after the end of the project's funding period. The report will cover the entire funding period. This detailed report will contain a narrative portion including a quantitative section relating to project objectives, a financial portion describing proposed and actual spending of the IEF grant funds and comments concerning the impact of the project and potential for project sustainability.

Additional information regarding the final report will be sent to the projects during the final quarter of their funding period.

#### Narrative Report

Compare accomplishments with proposal objectives and explain differences. Describe any circumstance which may have aided or hindered the project in meeting objectives. Describe unintended positive and negative effects of project activities.

Identify any problems or constraints which have affected the project. Describe strategies which have been used to overcome these constraints and plans for addressing them in the future. Discuss any circumstances which may have facilitated implementation and/or produced unexpected benefits.

Are there any steps the project and the IEF should take to make the lessons learned by this project more widely known? Are there any issues or actions that should be considered as a result of this project? Outline the main lessons learned regarding the entire project which could be applicable to other projects. Be sure to address specific interventions, sustainability and expenditures.

#### Quantitative information

Using the tables listed above, provide project totals and percentages, as appropriate.

#### Project Expenditures

Budget analysis will summarize the grant funds spent by line item (account code).

- compare actual budget with proposed budget
- explain differences

#### Project Sustainability

What is the current ability of your organization, other NGOs, the Ministry of Health or other relevant local institutions to provide the necessary financial, human and material resources to sustain effective project activities once funding ends? What resources has the community contributed and will continue to contribute that will encourage continuation of project activities after donor funding ends?

## **IV. Evaluation**

The project will be evaluated according to its ability to fulfill the objectives. This will be done by measuring and verifying the project's inputs and outputs.

Individual projects will be evaluated using:

- monthly Transaction Report and Quarterly Financial Reports
- Quarterly Technical Reports (narration and data tables)
- Final Report
- site visits

IEF's evaluation will include visits to some of the project sites and review of documents from all projects. Major tasks in each site visit are:

- a. Discussing with project staff regarding progress
- b. Review all project-related documentation
- c. Collection and review of qualitative data
- d. Recommendations and lessons learned

IEF's evaluation of "Seeing 2000" projects will follow these topics headings:

### **1. Accomplishments**

What are the measurable inputs (e.g., training of staff, purchase of equipment), outputs (e.g., performed, outreach conducted), and outcomes (e.g., number of children rehabilitated, number of children with sight restored )? How many children 6 years and under have benefitted from "Seeing 2000"?

### **2. Relevance to increasing ocular surgery in children**

What are the interventions and blindness prevention activities initiated by the individual projects? Is the focus of interventions appropriate to make an impact on the key problem areas of eye care, given the human, financial, and material resources available to the program and community?

### **3. Effectiveness**

What is the relationship between accomplishments for this period and objectives? What are the constraints to meeting objectives and reaching underserved groups?

#### **4. Relevance to Development**

Has the project strengthened local capacity to provide clinical and surgical services to children in underserved areas?

#### **5. Design and Implementation**

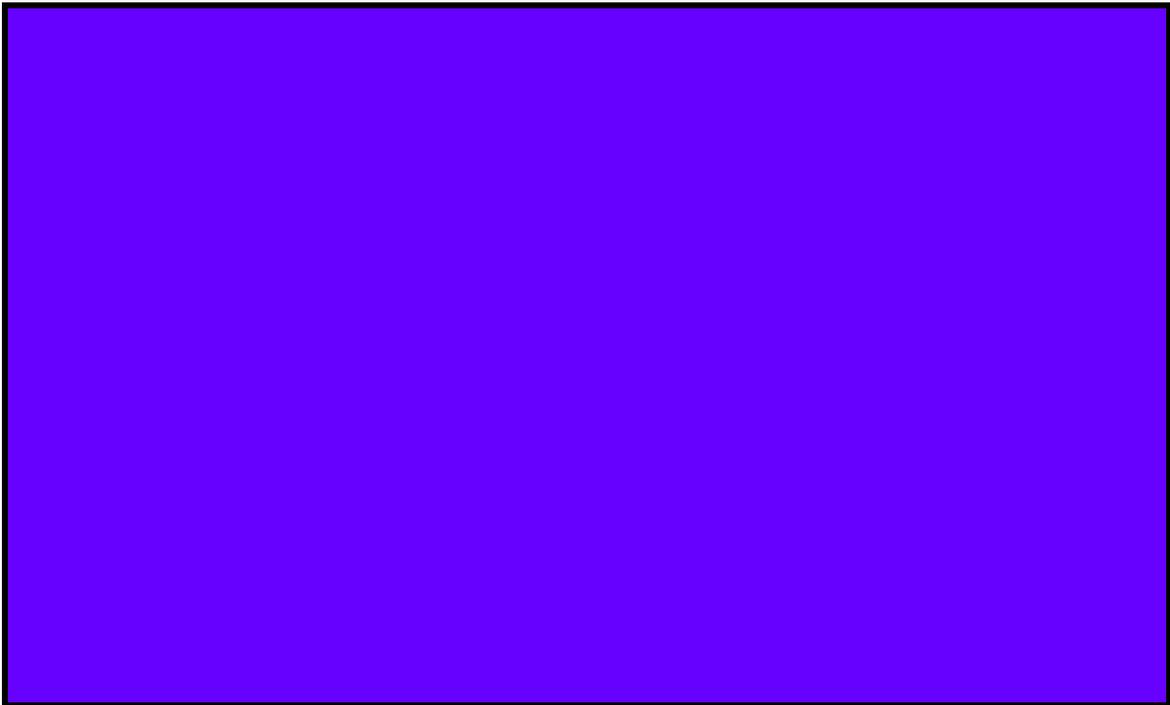
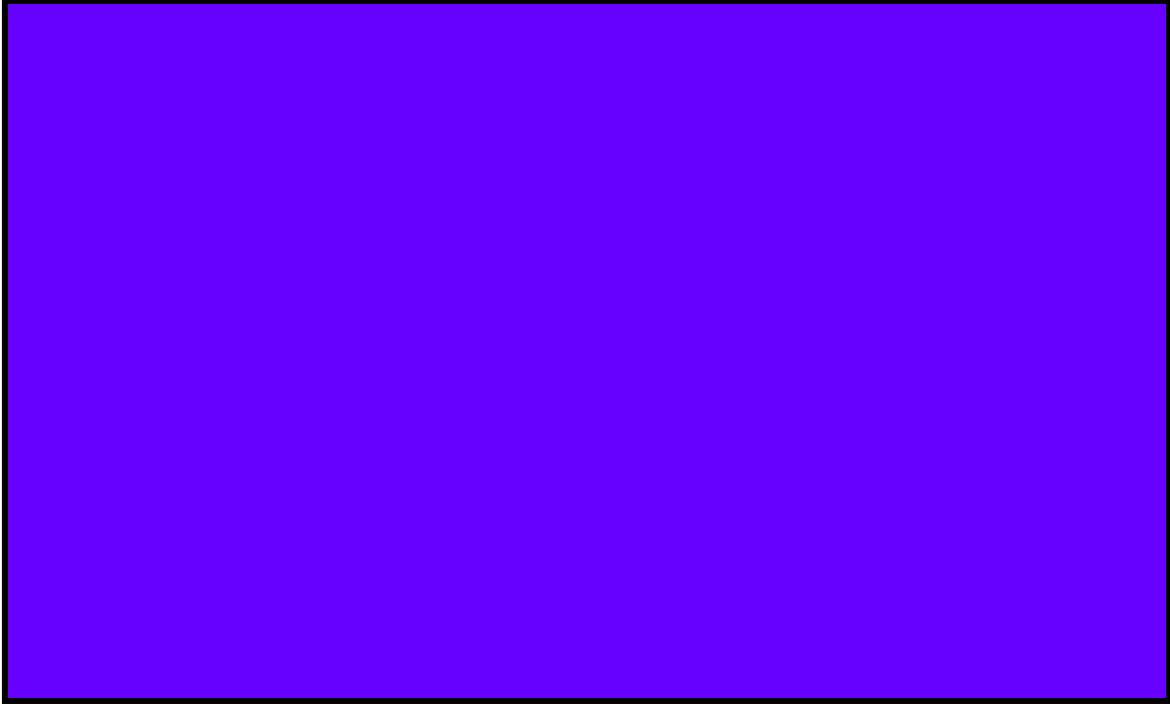
Are there any particular aspects of project design or implementation which may have had a positive or negative aspect on meeting project and program objectives? Consider the following:

- Design
- Management and Use of Data
- Service Provision and Community Activities
- Human Resources (Utilization and Appropriateness)
- Supervision and Monitoring
- Use of Funding
- Use of Technical Support
- Assessment of Counterpart Relationships
- Effective Networking
- Budget Management

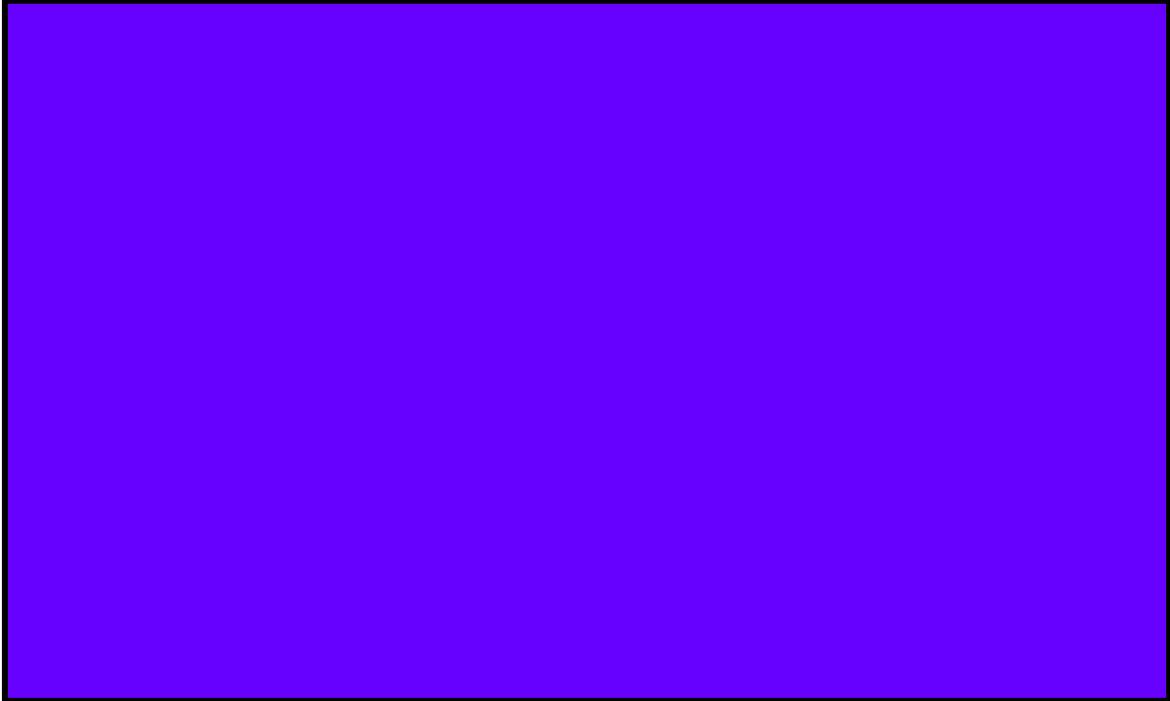
#### **6. Sustainability**

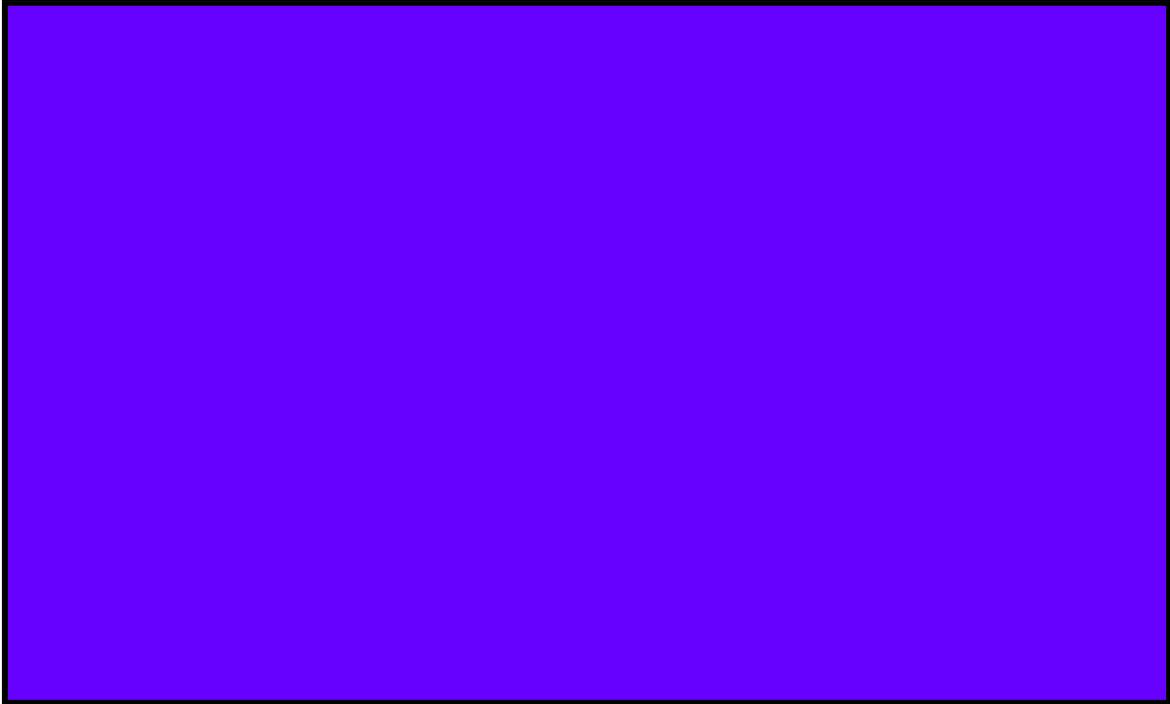
#### **7. Recommendations**

L. V. Prasad Eye Institute, Hyderabad, India  
Project Director: G. N. Rao

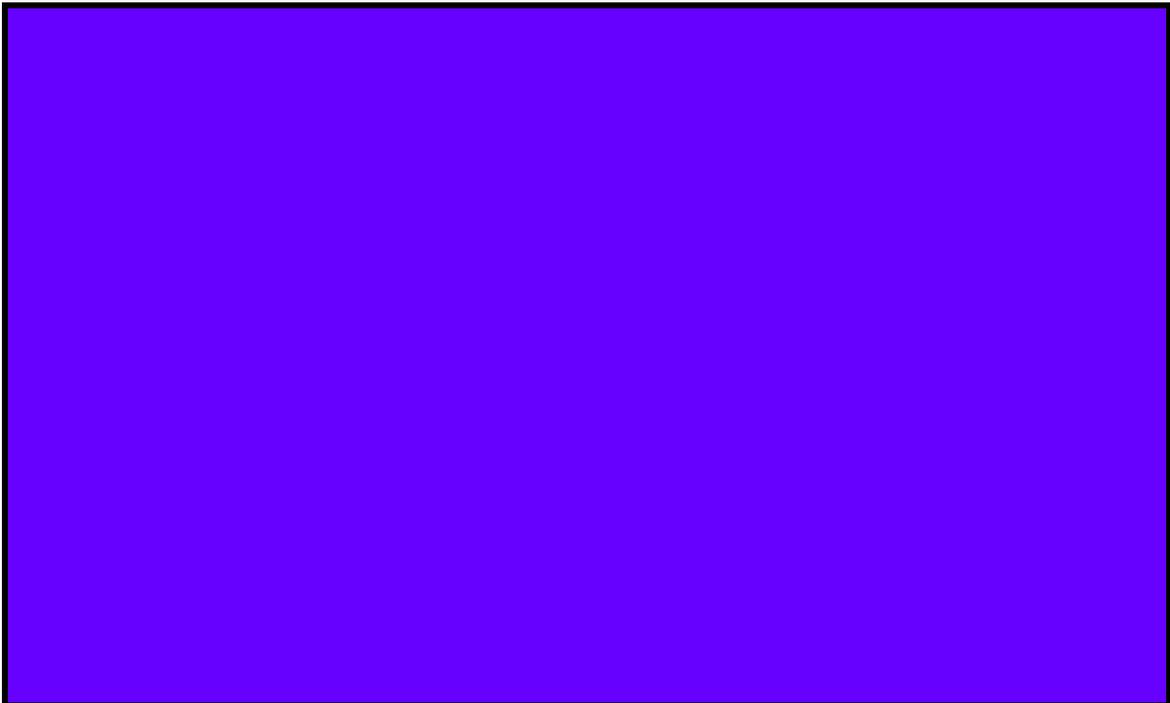


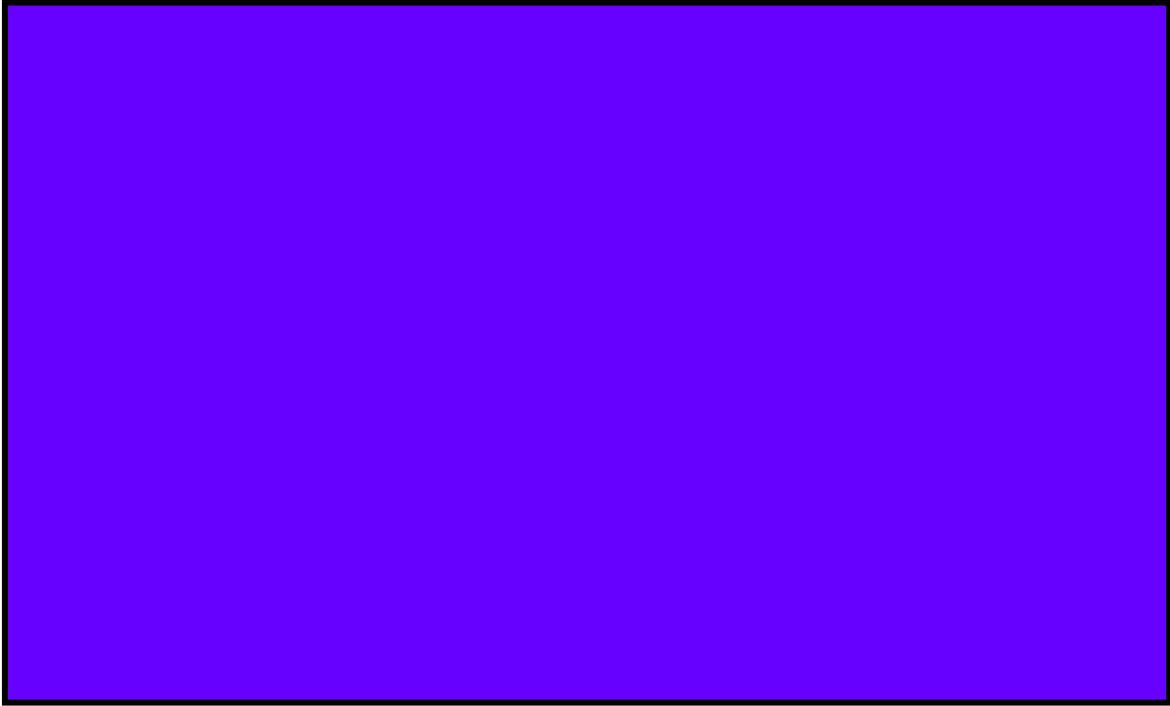
Lady Reading Eye Hospital, Peshawar, North West Frontier Province, Pakistan  
Project Director: Professor Mohammad Daud Khan



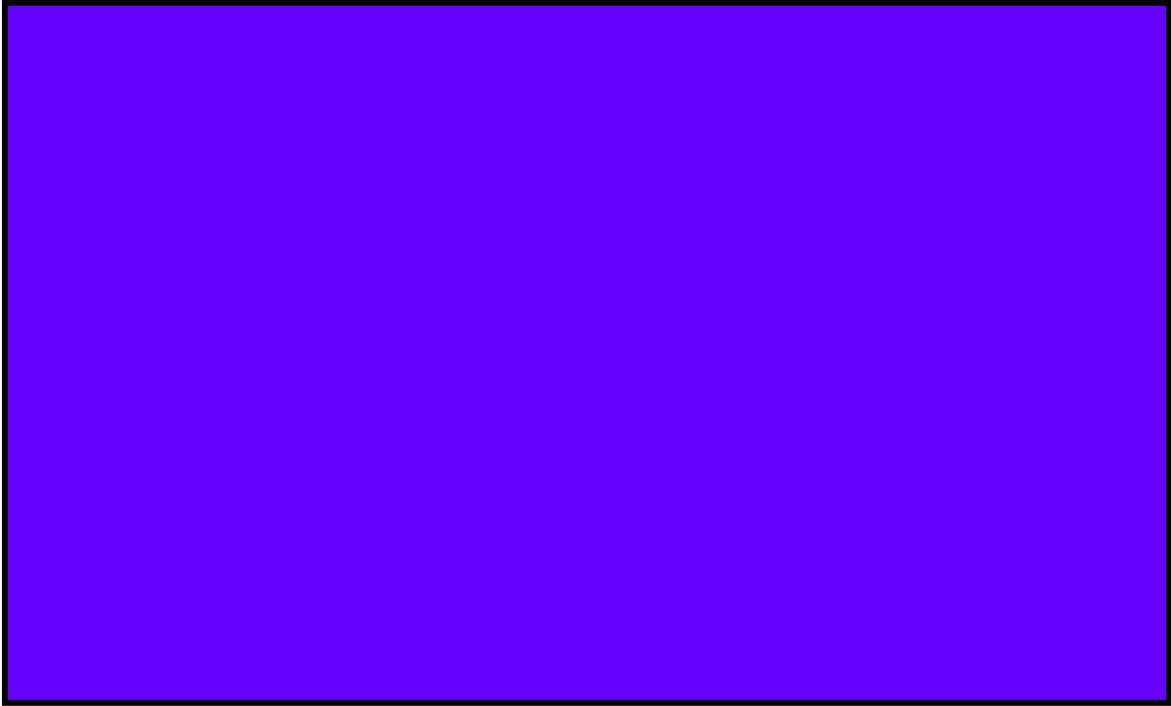


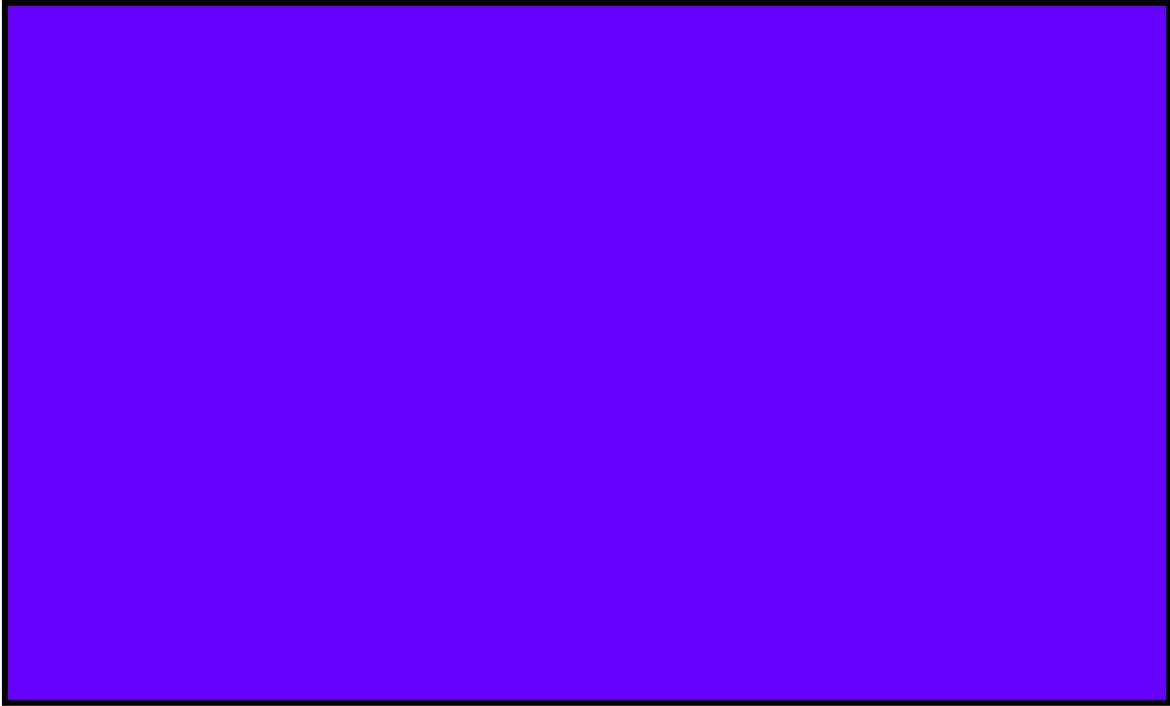
Aravind Eye Institute, Tamilnadu, India  
Project Director: P. Vijayalakshmi





Lions Sightfirst Eye Hospital, Lilongwe, Malawi  
Project Director: Moses Chirambo, MD





Unidad de Oftalmología, Pontificia Universidad Católica de Chile, Santiago, Chile  
Project Director: Hernan V. Iturriaga, MD

