ROTARY CLUB OF CALCUTTA LABANHRAD

R.I. DISTRICT NO. 3291  CLUB NO. 82911

Web Site: rotaryclubofcalcuttalabanhrad.org
Email: info@rotaryclubofcalcuttalabanhrad.org

15 BED RURAL EYE HOSPITAL

Village: Kuliapara, P.O. Dhobapara, Dist. West Bengal, India
Executive Summary

To meet the needs of eye care, diagnosis and treatment, of the rural and economically distressed segment of the community, a State of the Art Eye Hospital is proposed to be constructed under the Rotary Foundation's Global Grant Program. Sponsor for the Proposed Eye Hospital will be the Rotary Club of Calcutta Labanhrad (Club No. 82911 within the RI District 3291) and will be located at the Village of Kuliapara, in the Hoogly District of the State of West Bengal, India. The proposed environment friendly hospital will be designed to diagnose and treat all eye diseases generally prevalent in the poor as well as the tribal population of the area with minimal financial resources.

One of the Central Themes of Rotary International is “Disease Prevention and Treatment”. In rural parts of the State of West Bengal, India many poor including tribal population do not have access to affordable health care facilities for treatment of various eye diseases as well as other diseases that are easily treatable. Many become blind for lack of early detection and treatment of eye diseases. Amongst a few rural clusters of villages there are a few Government hospitals/clinics that are called Block Hospitals. Most of the Block Hospitals have poor infrastructures and do not have properly qualified staff and physicians and dispensaries to treat patient and in most cases do not have any qualified eye care professionals.

In major urban and semi urban areas of the State there are plenty of Private for profit Eye Hospitals but these facilities are inaccessible to rural poor because of high cost. Some of the rural people do not have even resources to pay for the transportation cost to the urban area treatment facilities.

The proposed eye hospital will be housed initially in a new two storied reinforced concrete structure with exterior plastered brick walls and with foundation provisions for adding another two stories for future extension. Total floor area, in two floors, will be approximately 4700 square foot and will be equipped with modern diagnostic and surgical equipment. Facilities in the hospital will include a laboratory, visual examination and testing room, ultrasound room, laser room, and eye procedure room. Facility will have separate male and female wards with adequate toilet facilities. Each ward will have 14 beds. Space will be provided for store, pharmacy, nurses and doctor’s room, and offices with waiting lounges on each floor. The water supply will be from the village with a standby deep tube well. The village has electricity but the power supply is interrupted frequently. A standby generator will be provided.
The facility will remain open every day with one eye specialist on duty with adequate supporting staff. Initially, the major surgeries will be performed two to three days a week based on demand. This surgical team will be available five days a week.

The estimated total project cost is INR 57,92,000 (equivalent US $ 98,000). Our current estimate for the start of the project is expected to be on 15th December 2014 and our projected completion date is January, 2016. Formal inauguration of the facility is expected during the first January 31, 2016.

Expected contribution from each Rotary Club, assuming TRF will Fund 50% of the cost of the project US$ 98,000., will be:

<table>
<thead>
<tr>
<th>Sponsoring Club</th>
<th>Amount (US$)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rotary Club Of Calcutta Labanhrad</td>
<td>17,000</td>
</tr>
<tr>
<td>Global Partner Rotary Club -1</td>
<td>16,500</td>
</tr>
<tr>
<td>Global Partner Rotary Club -2</td>
<td>16,500</td>
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<tr>
<td>Rotary International TRF</td>
<td>47,500</td>
</tr>
<tr>
<td><strong>Total Cost</strong></td>
<td><strong>98,000</strong></td>
</tr>
</tbody>
</table>

Rotary Club Of Calcutta Labanhrad plan to fund the building component of the Project which is estimated as US$ 48,800, from expected donations. This is in addition to US$ 17,000. required as a sponsoring club under global grant program.

The estimate of the time line for the project is based on the assumption that one or two willing global cosponsoring Rotary Clubs will be on board for this proposed eye hospital by December 2014. Current estimated cost is based on preliminary market price of supplies and vendors preliminary quotes of major equipment. On receipt of two Global partners’ consent and signed MOU(s), firm prices for the supplies and equipment will be sought through tendering process for confirmed final cost estimate of the project which will be submitted to the Rotary Foundation.
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1. Introduction

1.1. An overview of the role of Rotary International

RI President Gary C.K. Huang chose “Light Up Rotary” as his theme for 2014-2015. As the teachings of the Chinese philosopher Confucius said, “It is better to light up one candle, than to sit and curse the darkness.”

In many parts of the world, darkness comes to an individual when s/he loses his eyesight due to lack of access and lack of resources to treat eye diseases. Affordable eye care and treatment is nonexistent in rural tribal and poor populations in many villages in West Bengal, India. For lack of access to eye hospitals in rural West Bengal, many people suffer unnecessarily from eye diseases that eventually lead them to live a life in partial or full darkness. With adequate treatment in appropriate eye care facilities, people can live a quality of life similar to people living in urban and semi urban areas of the country.

One of the six main areas of focus of Rotary International is “Disease Prevention and Treatment.” Eye disease prevention and treatment matches perfectly with the RI president’s theme of “light up Rotary” as prevention of blindness in one individuals’ life is equivalent to the illumination of candles for the individual and his/her family members. The proposed eye hospital will light up candles for thousands of patients over the years to come. A modern eye hospital with full capabilities for eye care and treatment is envisaged as a large project that can only be funded through Rotary Foundation’s Global Grant Program.

This draft project concept report, prepared by the Rotary Club of Calcutta Labanhrad, will serve as an invitation to one or more Rotary Clubs from the United States. We hope to partner with these clubs in order to fulfill the eye care needs of a large section of rural poor and economically distressed communities in Hoogly District of West Bengal, India.

1.2 Rotary Club of Calcutta Labanhrad, R.I. District 3291

The Rotary Club of Calcutta Labanhrad, R.I. District 3291 (Club No 82911) was chartered by Rotary International on February 10, 2010. We are a five year old young but dynamic club. During the last five years, we have completed many community services projects in the area of health, sanitation and water supply, and education. The club members have contributed to the Rotary Foundation. In the health area, our first
effort was the conduct health camps for the economically distressed and natural disaster affected area populations. We also conducted a life style disease awareness program. This year we have already completed two thalassemia-screening camps for two schools in the neighborhood.

We have also already completed a under matching grant program in partnership with Rotary Club of Farhan, United Kingdom to provide operating theatre equipment for gynecological patients at Nandigram Block Hospital. We have provided separate toilet facilities for boys and girls in two primary schools including potable water supply for the students and teachers of the school under District 3291 EIWRT Grants.

The proposed eye hospital project is our biggest endeavor to serve the needy and poor rural communities in the District of Hoogly, West Bengal, India. Our club is qualified as per R.I. District 3291. The R.I. grant program has satisfied project completion reports for all projects.

1.3 Draft MOU Between Rotary Club of Calcutta Labanhrad (RCCL) and the District

As stated in Para four of section 1.2, RCCL is qualified per requirements of R.I. District 3291. This is enclosed in ‘Appendix A.’ The MOU will be signed by the appropriate Club and District officials prior to the filing of the global grant application form.

1.4 Draft MOU Between R.I. District 3291 and the Rotary Foundation

The Rotary Foundation is aware that our R.I. District 3291 is well qualified for participation in the global grant program. The R.I. District official will sign an appropriate MOU before filing the Global Grant Application Form. The Draft MOU is included in ‘Appendix B.’

1.5 Partnership with Netra Pradip Rural Eye (NPRE) Trust

At the start of the Rotary year 2014-2015, RCCL officials traveled to a few districts within the state of West Bengal to identify potential rural tribal areas where existing eye care and treatment facilities were either non existent or minimal for impoverished communities. The club officials also visited two eye hospitals that were run by non-profit trusts serving poor communities.
One of the non-profit trusts operated small eye care facilities in the Village of Kuliapara in the district Hoogly in the State of West Bengal. The name of the trust governing the eye care facility is Netra Pradip Rural Eye Trust (NPRET). This existing eye care facility does not have the land area to grow laterally or vertically. They are also constrained by lack of resources and cannot move to a new facility. On the other hand, the patient load has increased dramatically. Two of the trustees are eye doctors. One eye doctor is Dr. P.K. Bakshi, an eminent pioneering eye surgeon West Bengal. Dr. P.K. Bakshi is one of the founding members of the famous B.B. Eye Foundation, which has eye hospitals in three locations in Calcutta, the capital city of West Bengal. After discussions with Dr. P.K. Bakshi, now retired from the B.B. Eye Foundation, regarding RCCL’s desire to establish an eye hospital serving impoverished communities, he agreed to partner with RCCL. RCCL also recently established a charitable trust named Rotary Club of Calcutta Labanhrad (RCCL) Charitable Trust. Thus, the proposed Eye Hospital of RCCL is to be constructed in a nearby new plot of land to be procured by NPRET with an expanded floor area and additional new diagnostic and surgical equipment to make this proposed eye hospital a state of the art eye hospital that will be able to serve the needy neighboring communities within a radius of 15-20 miles.

A draft MOU has been prepared and is under review by the trustees of both RCCL Charitable Trust and NPRET trust. The MOU is included in ‘Appendix C’ of this Project Concept Report. The advantage of this arrangement is that the Proposed is that the proposed eye hospital will be run by medical professionals working in the area with oversight by the trustees of RCCL charitable Trust and the NPRET trust.

2. Rotary International and Its Objectives

One of the primary foci of the Rotary Foundation is the policy focus on Disease Prevention and Treatment. The Foundation grants enable Rotarians to prevent disease and promote health by

- Improving capacity of local health professionals
- Enhancing health infrastructure of local communities
- Preventing physical disability resulting from disease
- Supporting career minded professionals related to disease prevention and treatment
The RCCL’s proposed Eye Hospital meets all of the above TRF’s policy objectives.

2.1 Location of the Proposed Hospital and communities to be served

The proposed eye hospital will be located in the Village of Kuliapara, P.O. Dhopapara, District Hoogly in the State of West Bengal. It will be situated on the State Highway Pandua-Kalua Road. Both Pandua and Kalua are relatively large size towns in the Hoogly district. Kuliapara is about 80 km (50 miles) north of Calcutta. The driving time is 2.5 hours by local roads. From Howrah station, a train connects Kalua via Bandal Junction and travel time to Kalna by train from Howrah is about 2 hours ride. Kuliapara is five miles southwest of Kalna and Pandua, which also has a rail connection 12 miles southwest of Kuliapara. Private buses run between Kalna and Pandua.

2.2 An Overview of rural health and eye care in West Bengal

Government of the State of West Bengal through legislation establishes health care facilities for the citizen of the State. Typically 2/3 villages having a population of 10000 will have a health center (OPD), an area with population of about 100000 will have Block Primary Health Center (BPHC), an area having a population of 500000 will have Rural Health Centre (RHC) and Sub Divisional Hospital (SDH) are for areas covering population of more than 500000. In every District there is one District Hospital (DH) if the population is more than 500000 instead of RHC.

In addition, Medical Colleges and Regional Institutes provide treatment to the citizenry at a reasonable cost if they are Government.

BPHC operates OPD and generally has a registered physician and an optometrist who checks the Eyes, do refraction and screens patients for cataracts.

RHC have one or two optometrist. Their role is similar to the one in BPHC but has additional responsibilities of keeping statistics on the blind population of the area and participates in eye check-up camps at the schools.

Sub Divisional Hospitals (SDH) have 1-2 Eye surgeons and 1-2 Optometrist. At this type of hospital they perform cataract surgeries (IOL, SICS) along with other minor eye surgeries and conduct eye camps in the hospital itself.

District Hospital, if available in the District, has generally 2-4 eye surgeons and 1-2 optometrists and undertake cataract (IOL,SICS,and PHACO), Glaucoma, squint, DCR.
like surgeries if they are confident that they can handle. They also run eye care OPD on daily basis.

Though the above is per mandate of the legislation, because of poor infrastructures and resource constraints of the government, in all levels of hospitals eye care for the general population, particularly for the poor, is considered inadequate.

Many non-governmental organizations like Rotary Clubs are building eye care facilities in the rural and underserved areas. But their numbers are still small compared to the needs of the rural poor communities.

2.3 Demographic Information of the Projected Service Area for the Proposed Eye Hospital

Riddhi Management Services Pvt. Limited, Salt Lake, Kolkata is one of the Pioneering enterprise in the State of West Bengal who maintains most extensive and reliable demographic information relating to the population by village administration, age distribution, tribal population, education level, health insurance coverage, population below poverty line (BPL) by village and many other statistical data that are useful for working in the rural sectors of India.

Mr. Kamal Pal, Executive Director of Riddhi Management Services volunteered to provide demographic information for the estimated service area of the proposed eye hospital project in village of Kuliapara, in the District of Hoogly. The following are the summary of information provided by Riddhi Management Services for the estimated 20 km zone service area:

- Number Of Village Administrative (GP) Zone … … … 26
- Population of the projected service area … … 5,57,000
. Population below poverty line (BPL) ... ... ... 1,95,000
. BPL population current enrolled in National Health Insurance (RSBY) 1,26,000
. Population above the age of 60 ... ... ... 37,000
. Estimated Number of blind people ... ... ... 5,500

2.4 Current Eye hospital and future needs.

Hoogly District of the State of West Bengal covers an area of 1216 square miles with population of 55,20,380, a population density of 4540 per square mile (2011Census). Major private eye hospitals are:
. Disha in the Town of Barrackpore
. NetraDarpan in Pandua
. Kalna Eye Hospital
. Netra Pradeep in Kuliapara
One new eye hospital at Bandel by the Rotary Club of Bandel has recently been inaugurated.
To serve the rural population of Hoogly more eye hospitals are needed.

3.0 Rotary Club of Calcutta Labanhrad and Partner in the Proposed Project

3.1 Our Club

The Rotary Club of Calcutta Labanhrad (RCCL) is only five (5) year old and was chartered by the Rotary International on February 10,2010. The current President is one of the Charter members of the Club. Since the charter of the club RCCL got involved in the community services projects in the area of health, education, sanitation and water supply projects. Health projects undertaken are:

- Medical Camp in Sunderban area devastated by tropical Cyclone Ayla. Five medical practitioners with nurses, medicine and Inner Wheel Club volunteers participated in examining about 400 patients and provided medicines for common ailments and recommended further treatments to about 30 patients of which six of them needed cataract surgery. RCCL club provided transportation cost to the six eye patients and arranged for their cataract surgery as per pre-arrangement with a local eye hospital free of cost.
• Sponsored and arranged for a seminar on life-style disease with a medical camp for screening for cardio-vascular disease and other life style disease parameters for the participants attending the seminar.

• Conducted blood sample collections in collaboration with the School of Tropical Medicine for students in the age group of 15-18 years in two schools for screening of potential Thalassemia carrier.

Sanitation Projects undertaken by the Club were:

• Construct separate toilet facilities for boys and girls with septic tank, install potable water supply line, storage tank, pump and water purifier filter (aqua guard) for one private school in one of the economically distressed community.

• Construct a new toilet facility for boys and upgrade exiting toilet for the girl students of the school including supply of one water purifier.

In undertaking the above and other smaller projects in the area of education, water supply and participation as co-host clubs, RCCL realized the need for more funds to undertake community services for the needy communities in the area of education, health, sanitation and water supply. To collect donations from business community and other sympathetic patrons, RCCL recently formed and registered a charitable trust named Rotary Club OF Calcutta Labanhrad (RCCL) Charitable Trust. It is a legal entity that will be capable of receiving donations from local business community and local patrons as well as donations from foreign patrons and philanthropic and charitable organizations. A bank A/C for the Trust has been opened and the club is in the process of obtaining Tax exemption status from the Income Tax Department of the Govt. of India for newly formed RCCL Charitable Trust.

Patrons of the Club, mostly from the friends and relatives from India and abroad of the current club president have verbally promised significant donations to the RCCL Charitable Trust if the RCCL embarks on a large scale health project to serve the rural poor and neglected populations of the State of West Bengal. This offer of donations were discussed with the Board of Directors of the club in Board Meeting and the Board approved and community services team to look for a Site to establish a state of the art eye hospital in a needy poor rural community in State of West Bengal. Board members as well as the other members of the club also promised to seek donations from local businesses and their own friends and relatives. Availability of adequate donation will
enable the RCCL to undertake other community services projects in the area of literacy and education, improve sanitation in schools around the needy communities and other activities meeting the goals of the RI Dist. 3291 and Rotary International.

The criteria set out by the board members were that the proposed eye hospital facility should be within 2/3 hours of driving distance or transportation by rail from the club's current location so that the interested club members can visit the site during the construction phase as well as during the operation phase of the facility.

### 3.2 RCCL Partner and Consultants for the Proposed Project

Netra Pradip Rural Eye Trust (NPRET) is one small eye clinic cum hospital located in The Village of Kuliapara, a rural community about 50 miles (80 km) north of Kolkata, the capital city of the State of West Bengal. Dr. P.K. Bakshi, founding member of NPRET is the RCCL’s consultant medical expert for the proposed eye hospital project. Dr. Bakshi, an eminent Eye Surgeon of India has an MD degree from AIIMS has also DO degree from London and is FRCS (Edin).

The current NPRET operated eye care facility does not have adequate space in its current location and the demand for eye care services is increasing continuously. As discussed earlier, NPRET agreed to move the NPRET operation in RCCL proposed new facility with all of their diagnostic and surgical equipment as well as the staff. Dr. Bakshi is advising RCCL about required floor place and additional diagnostic and surgical equipment needed to make the proposed RCCL nonprofit facility as one of the state of the art Eye Hospital in the State of West Bengal serving the needs for one of the rural community.

Ms. Ivy Nandy, a professional architect, is working on the layout of the hospital that will meet health and safety standards required by the state and local regulatory agencies. Her services are voluntary.

Mr. Suranjnan Dutta, a retired vice president of reputed local consulting engineering firm will provide the services of structural engineer for this project and his services will also be voluntary.

The current President of the Club, Mr. Chitta R. Bhattacharya is a retired registered professional engineer and is an experienced civil and environmental engineer. He will be responsible for design of water supply, fire protection, sanitary and solid waste...
disposal facilities. In addition he will be a member of the Project Management team for during planning, design and construction of the facility and will remain as a member of the management committee that will be responsible for overseeing the smooth and sustainable operation of the facility.

Two senior Rotarians of the club-Rtn Subrata Munshi, an electrical engineer by profession, now the Managing Director of Naval Engineering firm and Rtn. Swapan Basu, a mechanical engineer by profession and owner of a crane manufacturing facilities will provide their expert knowledge in electrical and HVAC system design and construction of the facility. Mr. Swapan Basu is also the President of The RCCL Charitable Trust

Another member of RCCL, Dr. Prof Santanu Munshi, is a faculty member in the School of Tropical Medicine and will advise on various medical issues to be addressed during the design and operation stages. Dr. Munshi is also the secretary of RCCL Charitable Trust.

Other members supporting the project will be:

- Rtn. Asutosh Jaiswal- Current Club Treasurer
- Rtn. Rajdeep Dutta – Current Club Secretary
- Rtn. Subrata Mitra – Treasurer RCCL Charitable Trust who will keep track of donations and disbursement of fund by the trust.
- Rtn. N. S Taragi, PP of the Club to advice on accounting/record keeping for Grant funded project.
- Rtn. Partha S Upadhaya, President Elect, 2015-2016 He will provide the continuity link for final implementation and efficient long-term operation of the facility.

4. Proposed Eye Hospital Project

4.1 Project Rationale
Many rural communities in India do not have easy access to hospitals or medical clinic. In certain rural area even if there is a small hospital none has any dedicated eye care professionals. Because of resource constraints many members of the rural community are not able to consult physician for their eye problem and in many cases some become blind. A typical hospital in rural area generally does not have adequate infrastructure and good hygienic condition and is often poorly maintained.

There are plenty of private modern eye hospitals in urban and semi urban areas and all are for profit operation. Rural poor do not have means to use those facilities. During the last few years Rotary Clubs, Lions Clubs and Seva (USA) and a few other charitable institutions are building eye hospitals in India. But the total numbers of eye hospitals that are being built or has been built are too few for the large number of rural communities those still need this type of eye hospitals. RCCL’s attempt to build the proposed eye hospital is to fill the need of the communities in the Hoogly District of the State of West Bengal. This will help the rural population in general particularly those rural folks who are below the poverty line.

4.2 Overview of the Proposed Eye Hospital

The proposed eye hospital will be located in village Kuliapara in the District of Hoogly. The site is located on Kalna- Pandua Road, a state highway. The city of Kalna is about 5 miles north east of Kuliapara. Public transportation is available from Kalna to Pandua and neighborhood villages though the system is overcrowded.

The proposed eye hospital will be housed in a two storied reinforced concrete structure with exterior brick walls. The building foundation and structure will be designed to add two more floors for future expansion of the facility. The floor plan of the building is shown in Appendix D1 and D2. The electric supply will be from the State Electricity Board distribution system. Because of reliability issues with the electric supply, a stand by generator will be provided. Water supply will be from a deep tube well to be installed at the property. Wastewater treatment will be performed with on- site septic tank system.

4.3 Project Sustainability
Rotary International and Rotary Districts all over the world believe that any rotary club that sponsors a community service project with a large investment from the Rotary Foundation Grant and/or District Foundation Grant must be sustainable over the life of the project. Any grant application shall include enough information to show that the club-sponsored project will be sustainable and self-supporting in the long run.

NPRE Trust, a non-profit eye clinic started operations at the Kuliapara facilities with the used diagnostics and surgical equipment in the year. The clinic is opened for 2-3 days in a week for surgeries. Appendix E1 to E3 shows the patient load and surgeries performed by NPRE Trust clinic during the last four years.

In 2011, the Government of India started a National health Insurance Program for families of Indian Citizens who are below the poverty line (BPL). This program for BPL families is called “RSBY” Rastriya Shayastha Bima Yoyana-National Health Insurance Program (web address: http://www.rsby.gov.in and online registration at http://www.nhp.gov.in/insurancescheme/national-health-insurance-scheme). BPL cardholders are given a biometric card with a nominal registration fee of Rs 460/ (USD 8) per cardholder. This card enables any member of the cardholder’s family (max five members) to access any private or government run medical establishment for any illness including eye care and provides for all expenses for outpatient visits, treatment and medicine. Funds are paid by the national health insurance plan electronically to the service provider subject to annual reimbursement limits per family. The insurance scheme provides the amount of reimbursement for medical procedures performed by the medical service provider. For large populations, as in India, the issuance of BPL cards to needy families and its subsequent registration process takes tremendous effort and a significant amount of time. Not many BPL cardholders are yet registered with the RSBY; many are in the process of getting their card in the projected service area of the proposed eye hospital. RSBY also empanel medical establishments (hospital, clinics, etc.) who are eligible for participation in RSBY. The NPRE Trust, which will be partnering with the RCCL Charitable Trust, has been approved as an Eye Care provider under RSBY.

Based on the RSBY Data on enrollment of BPL beneficiaries in the Hoogly District where the proposed hospital has been only 63% (547,375 vs. 347,485). The enrollment program started in February 15, 2012. With the increase in participation of BPL members in RSBY, our expectation is that the free cases will reduce significantly and
the paying patient population will increase at least four fold, including non-BPL groups of people. We anticipate that there will be a corresponding increase in the number of eye surgeries with the availability of newer and efficient diagnostic and surgical equipment that will be available at the proposed Eye Hospital at Kuliapara.

Assuming that the service territory for the Proposed Eye Hospital will be all villages and small towns within a radius of 20 km (12.5 miles), the total population that will be served will be about 5,57,000 (2011 census), of which about 184,000 will be BPL members.

Kuliapara Village is part of Hoogly district, but is also close to the districts of Nadia and Bardhhaman. The 20 km radius service territory will include some of the Rural areas of Administrative District (GP-Gram Panchayat) of two neighbouring districts.

From the Government of India Census 2011 Data, estimate number of 5,500 blind individuals is alarming. The RSBY program, the Proposed Eye Hospital at Kuliapara, and similar facilities will enable the rural poor to prevent blindness most of them are preventable.

The hospital operation business model should include considerations for revenue generation, including the rental of floor space in the proposed Eye Hospital to other outpatient clinics, such as General Medical Practitioners, Obstetricians and gynecologists, eye bank operations and pediatric eye care. The local rural administration has already approached the trusts for providing such services to the BPL as well as non-BPL residents of the community. The objective of this additional revenue generation is to establish a fund for maintenance of the facility as well as capital accumulation for replicating similar facilities in other rural areas.

RCCL sponsored proposed eye hospital project in the village of Kuliapara will be in partnership with Netra Pradeep Rural Eye Trust (NPRET) which started its operation in the year 2010. Demand for eye care services has grown considerably since the start of their operation.

NPRET’s audited financial data for the year 2012-2013 indicate that there was a surplus of INR 75,142 which included a depreciation amount of INR 4,25,814. As stated earlier, demand for eye care services has increased and NPRET is unable to in its current place because of space limitations and resource constraints. Proposed new eye hospital will provide more space and with additional procured equipment will help the rural population by providing improved services to more patients. With increased
enrollees in the National Health Insurance Program (RSBY), revenue stream will improve as more enrollees will take advantage of their accessibility to the health care through RSBY. Previously NPRET was provided free services to the rural poor as the BPL patients could not afford to pay.

Also, patient who can pay will avail the local modern improved facilities near home instead of travelling to big for profit urban facilities where rates could be two or three times higher than the local charitable trust will charge.

Proposed business model will design a rate structure for both BPL and non BPL patients in such a way that the revenue stream should be able to meet the operating expenses with a provision for a sinking fund to procurement of replacement equipment as well as for future growth.

4.4 Role of RCCL, R. I. District 3291 and the Rotary Foundation

The Rotary Club of Calcutta Labanhrad, Club No 82911, R.I. District 3291 is the sponsor club. Through the RCCL charitable trust, RCCL is committed to collect donations of INR 38,00000 (US $65,000) for this Kuliapara Eye Hospital Project. Sponsor Club, two international co-host clubs, R.I. District 3291 trust fund and the Rotary Foundation will contribute INR 57,92,000 (US $98,000).

As per Rotary Foundation Global Grant norms, a separate bank account will be opened and maintained from the start to completion of the project with the oversight from R.I. District 3291 officials. All procurement will be performed using best business practices.

4.5 Patrons and Professionals Supporting the Project are:

Expected donations for the project are:

1. President 2014-2015 of RCCL  
   INR 6,00,000
2. Friends and Relatives of President  
   INR 10,00,000
3. RCCL Club Members  
   INR 2,00,000
4. Donations from Indian Corp Sector  
   INR 20,00,000

Total  
INR 38,00,000
The following professionals will provide volunteer services for the Proposed Eye Hospital

- Ms. Ivy Nandy, Architect
- Mr. Suranjan Dutta, AMICE, Structural Engineer
- Mr. Niren Ball, Construction Supervisor
- Rtn. Subrata Munshi, Electrical Work
- Rtn Swapan Basu, HVAC and Fire Protection
- Drs. P.K. Banshi and Dr. Munshi, Equipment Procurement and Installation
- Rtn. Chitta R. Bhattacharya, Project Management
- Rtn. Rajdeep Dutta, Communication
- Rtn. Asutosh Jaiswal, Treasurer
- Rtn. Subrata Mitra, Treasurer, RCCL Charitable Trust
- Rtn. P.S. Upadyay, Member, Management Team
- Rtn. N.S. Taragi, Advisor, Accounting and Reporting

Post completion, the new RCCL president will constitute a committee to work with the NPRET doctors and staff to ensure operation of the facility on a sustainable basis and will recommend further improvements and services to generate revenue for future expansion and/or replication of a similar facility in another rural location.
5.0 Project Financial

The following table summarizes the estimated total cost in INR for the proposed Kuliapara Eye Hospital,

<table>
<thead>
<tr>
<th>Description</th>
<th>Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Land about 8700 square feet to be provided by NPRET</td>
<td>0.00</td>
</tr>
<tr>
<td>Building And Structure</td>
<td>0.00</td>
</tr>
<tr>
<td>2 Storied Building Approx. total Floor Area of 4700 SFT</td>
<td></td>
</tr>
<tr>
<td>with provision to grow vertically by another 4500 SQ in two floors</td>
<td></td>
</tr>
<tr>
<td>Water Supply, Fire protection and sanitation</td>
<td>3,50,000</td>
</tr>
<tr>
<td>Hospital Furnitures, Cabinetry, Back Up Generator</td>
<td>4,90,000</td>
</tr>
<tr>
<td>New Equipment and Hospital Sundries</td>
<td>41,00,000</td>
</tr>
<tr>
<td>• Visulus Ophthalmic Yaj III Laser/Zeiss/Alcon:</td>
<td></td>
</tr>
<tr>
<td>16,00,000</td>
<td></td>
</tr>
<tr>
<td>• Bscan (Topcon): 8,00,000</td>
<td></td>
</tr>
<tr>
<td>• Phaco M/C (Zeiss/ Laureate): 14,00,000</td>
<td></td>
</tr>
<tr>
<td>• Hospital Sundries: 3,00,000</td>
<td></td>
</tr>
<tr>
<td>Hospital Sundries</td>
<td>3,25,000</td>
</tr>
<tr>
<td>Total including 10% contingencies</td>
<td>57,91,500</td>
</tr>
<tr>
<td>Rounding Up</td>
<td>57,92,000  (US$ 98,000)</td>
</tr>
</tbody>
</table>

5.2 Funding Partners
The following are the proposed funding partners:

Sponsor: Rotary Club of Calcutta Labanhrad US $17,000
Rotary Club of …… USA US $16,500
Rotary Club of …… USA US $16,500.
R.I. District 3291 & Rotary Foundation US $ 48,000.

Total US $98,000.

6. Implementation Plan

6.1 RCCL’s Role Pre and Post Completion

RCCL will establish a committee of seven (7) members, four from the current Board of Directors, two from Global Partner Clubs, and two from the future Board, the incoming President Elect and Treasurer Elect. This committee will oversee the procurement, construction, and installation of new and existing equipment. An NPRE Trustee will advise and select new equipment to be procured, will negotiate the price with the vendors, and will provide day-to-day supervision at Kuliapara during construction. This will happen in tandem with support of volunteer construction supervising engineer selected by RCCL. The NPRE Trustee and his/her representative will supervise the installation of the equipment and arrange for training of the Resident Medical Officer (RMO) (to be hired for daily operations). The NPRE Trustees will also organize medical camps in various rural villages to identify potential and future patients. RCCL will organize and sponsor a RCC by recruiting youth members of the community to serve as support staff during the construction and operation.

6.2 R.I. District 3291 Role Pre and Post Completion

The R.I. District Official will guide and advise the RCCL committee on financial reporting, procurement, and preparation of completion reports. The District official will assist in the establishment of a management committee of Rotarians from the RCCL, District, and members of the NPRE Trust for a smooth and sustainable operation of the facility when completed.
6.3 Rotary International’s Role

Rotary International will review the Project Report and advise the RCCL and District 3291 officials in the preparation and processing of the Global Grant Application. Once the grant is approved they will also assist in establishing a time line for reporting at various stages of implementation of the project.

6.4 Partner’s Role in day-to-day Operations

The Netra Pradip Rural Eye Trust (NPRET) is RCCL’s main partner for the operation of Kuliapara Eye Hospital project. NPRET has established their reputation as the area community’s best eye care facility. With new equipment and a new spacious proposed facility, the will be able to provide services to the needy population of the area in a sustainable way by virtue of their presence in the community during the last four years. RCCL and NPRE Trustee committee will move forward to make the Kuliapara Eye Hospital a landmark project of Rotary International, RCCL, R.I. District 3291 for serving an impoverished rural district in West Bengal, India.

6.5 Time Line of Kuliapara Eye Hospital Project

1. Project Concept Report to Potential Global Partners
   September 2014

2. Selection of Global Partner
   30 October 2014

3. TRF Grant Application
   15 October 2014

4. Complete plan, specifications and tender amount
   (a) For building
   15 November 2014
   (b) For equipment

5. TRF Approvals and MOU with Global Partners
   15 December 2014

6. Start Construction
   04 January 2015

7. Complete Construction and equipment installation
   15 January 2016

8. Inauguration of Kuliapara Eye Hospital
   31 January 2016
7.0 Future Projects

To serve the community’s needs in overall healthcare, we plan to expand the building vertically to provide additional eye care facilities as well as outpatient clinics to be operated by other disciplines on a revenue sharing basis.