

# Note: Education at LVPEI

I grew up in a small village in Rajasthan about 60 kilometres from Jaipur. My village had a small, primary health centre (PHC) to meet our health needs. However, the PHC physician was absent most of the time. We had to depend on the local Registered Medical Practitioner or the PHC nurse for our care. I have distinct memories of the difficult journey to Jaipur for simple health problems the PHC should have serviced locally. In all the decades since my childhood the situation has not changed much in India's hinterlands—we do not have enough health care providers, nor do we have them where we need them. What explains this chronic undersupply of health professionals? I find myself nodding in agreement with the WHO's 'Global Strategy on Human Resources for Health - Workforce 2030' report:

*“Improving health service coverage and realizing the right to the enjoyment of the highest attainable standard of health is dependent on the availability, accessibility, acceptability, and quality of healthcare workforce. [The report] identifies that the chronic under-investment in education and training of health workers and the mismatch between education and employment strategies particularly in relation to health systems and population needs are contributing to continuous shortages. The problem is compounded by difficulties in deploying health workers to rural, remote, and underserved areas.*

Addressing these twin issues—underinvestment in training and poor deployment strategies of trained personnel—is at the heart of the LVPEI pyramidal model. The LVPEI pyramid ensures the availability of health care services in remote and rural areas by investing in training and education programs to build an adequately trained quality and appropriate workforce.

## Education at LVPEI

The LVPEI's education program started much before the construction of the institute. In those days, our journal clubs and classes ran in the Prasad Film laboratories next door. The early years focused on improving the clinical skills and knowledge of ophthalmologists and optometrists. Soon, we started programs for other cadre of eyecare personnel including allied ophthalmic personnel, eye bank personnel, community health workers, eyecare managers and other support staff. Today the educational activities across the LVPEI network are carried out under the umbrella of the Standard Chartered–LVPEI Academy for Eye Care Education. Under Dr Avinash Pathengay's leadership, the Academy has successfully molded itself into a 'Global Resource Centre for Eye Care Education' for all cadres of eye care professionals.

## Tech-enabled training

Internet technologies and social media present novel opportunities to share new-age eye care educational products at scale. Therefore, our Academy has been investing in technology products for enhancing both the quality and reach of our educational efforts. An estimated 10,000 knowledge seekers have benefitted from our educational content developed for social media platforms such as the LVPEI Digital Education YouTube channel. Concepts such as “Just a Minute” (JAM) pearls, Attention to Retention (A2R), U&I attract large subscription numbers.

The COVID-19 pandemic got us started on several hybrid on-line educational programs. These include the Creative Learning Series, online annual class series, Bedside teaching, Systematic Surgical Skill Transfer (SSST), AHA–Creative learning series and more. Other new initiatives include CKC (Consuming Knowledge Consciously) focusing on active learning processes and education of

educators of health. These diverse ideas re-configure how eye care training is delivered at LVPEI. It allows us to tailor specific, user-focused content that makes learning a lot more bite-sized and modular. This approach has transformed our alumni into lifelong learners, equipped with new skills to keep pace with today's ever-changing landscape.

## Impact through collaboration

This February, we hosted a large delegation from the Flaum eye institute, University of Rochester NY, and discussed several educational programs. Our engagement with this university goes back a long time: their school of Nursing helped us with parts of our ophthalmic nursing curriculum. They continue to assess our nurse-training and help us achieve practice standards. With this trip, the scope of engagement will grow even more diverse. They are going to help us train trainers for ophthalmic imaging we deploy in the LVPEI network. The most intense conversations though, were around a 'global' ophthalmology fellowship. What would international electives look like? How do we set up exchange opportunities between the Flaum and LVPEI?

Our engagement with the Flaum Eye Institute is emblematic of our many collaborations with various national and international organizations. These include IIT Hyderabad, Hyderabad Central University, Manipal University, BITS Pilani, GITAM University in India and Stanford University, Yale University, University of Rochester, NY, Case Western Reserve University, Cleveland, University of New South Wales, Sydney, City University London and many more.

## Education that makes a difference

February also saw us co-host the "High Level Meeting on Integrated People-Centered Eye Care" with the WHO South-East Asia regional office. The meeting marked the launch of the **Action plan 2022-2030** for the South-East Asia region. A key factor for this plan's success will depend on how the region will address the acute shortage of eye care professionals.

LVPEI is interested in the capacity building of several organizations both within and outside the country. Working with various national and international governmental and non-governmental organizations, we work to ensure access to permanent and dependable eye care for all including those living in underserved areas.

In three-and-half decades, our Academy has trained over 58,000 eye care professionals. These include 4000 rural and tribal youth employed in various organizations including LVPEI, thereby securing social and financial security both for themselves and their families. This is the LVPEI promise, and this has been our legacy so far.

There is also an ineffable aspect of the LVPEI education experience that sets us apart; that extra 'sauce' layered on top of all these tangible elements. I have been a beneficiary too of the LVPEI magic. I began at LVPEI as a short-term cornea fellow in 1993. On the very first day, I learnt valuable lessons in punctuality, appropriate dressing, proper communication, and professionalism. One of my colleagues was sent out to come back only when he had proper shoes. Another one was locked out of the classroom--he was late by one minute. A senior colleague was reprimanded for not addressing a patient with respect. It soon became clear to me that education at LVPEI was not limited to a syllabus, it would leave us a well-rounded, responsible, and disciplined citizen. My three-month tenure was not fun, it was quite grueling in fact. Yet, I decided to come back in 1996 for one more year of fellowship. Soon, I became part of LVPEI forever – and why not, it transformed my life and professional career. I am sure there are many alumni like me across the world.

- Prashant Garg