

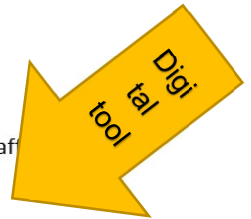
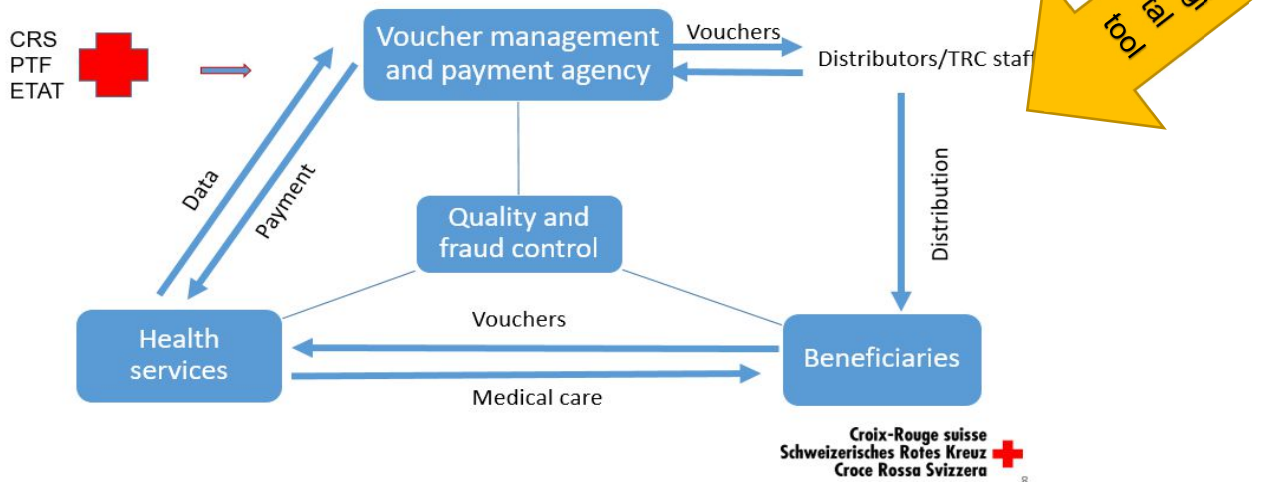
Real-time assessment of eligibility to receive free voucher for cataract operation in Togo

Introduction: The Togo Red Cross Society (TRC), supported by the Swiss Red Cross is implementing an eye health project in the region Plateaux in Togo. From 2015 to 2018, the project supported annually in average 6'000 persons with access to eye health services, in particular to ensure that people suffering from blindness through cataract are operated and gain full eye sight (average annual operations = 330). Up to 2018, the SRC paid the costs of the health providers for consumables and supplies, and additionally people paid flat rate service fees for their cataract surgery independent of the operated person's socio-economic status and ability to pay. Because of that, only 40% of the persons detected with cataract went for an operation in the end. In order to make services more equitable and take into account already existing health insurance and reimbursement mechanisms, the project changed the approach to provide personalized and more targeted support to ensure that the most vulnerable people indeed access the service. The digital health tool helps to identify and verify whether persons are eligible to obtain subsidized services. The subsidy pays for around 90% of the cataract surgery costs (total costs=70 CHF), the remaining 10 % (8 CHF) are paid by the client.



Cataract voucher implementation model:

The new paradigm: functioning (3)



Digital Health Tool:

- 1) During the regular outreach services to the remote villages of the Region Plateaux, Red Cross volunteers from the Togo Red Cross do a history taking and vision screening of severe vision impaired and blind people.
- 2) Once a person is identified as potentially having a cataract and being eligible for surgery, the Red Cross volunteer applies a digital questionnaire with 10 questions to the person using Open Data Kit Kobo collect in a smartphone. The questions are the same questions as the Poverty Probability Index questionnaire.
- 3) Once all questions are asked, the questionnaire is sent electronically together with the corresponding GIS data to the respective program coordinator in the field or in the headquarter in Lomé. They elicit the total score of the questionnaires answers. The volunteers are blinded towards the score, in order to ensure neutrality and minimize fraud.
- 4) If the score is below 31 points (=58,5 % probability of poverty) the person receives a voucher for subsidized cataract surgery in the nearest eye hospital run by the Ministry of Health. The cut-off point was determined by the Togo Red Cross
- 5) The field coordinator communicates the result within 2-5 minutes to the respective Red Cross volunteer via SMS or phone call. The score is not communicated, only the result "Voucher yes or no" is communicated to the volunteer.
- 6) If the result is "yes", the person receives the cataract voucher. The person is responsible to access the services at own preference and choice.
- 7) After the surgery, the voucher is encashed by the project. However, payment is not yet done digitally.
- 8) Six weeks after surgery, the operated person is tracked via GIS data to check the surgery outcome and vision improvement after surgery to determine quality of services and/or to take corrective measures.

Result till date after 6 months of pilot implementation:

- 272 persons received a cataract operation. 94 persons were eligible for the subsidy and received a voucher. 68 vouchers were used. Utilisation rate is 72% versus previously 40%.
- Drop-out rate needs to be further examined to find out which other access barriers to cataract surgery for the most vulnerable persons exist.
- GIS system facilitated the tracking of the operated persons for the follow-up and vision testing for quality purpose.
- Further digitization of the payment/reimbursement system to the provider may be explored.

