

# Barriers to uptake of referral services within LV Prasad's ICARE pyramid: A study of Nava Bharat Eye Centre Khammam District, Andhra Pradesh, India

## Questionnaire for Defaulting Subjects

Subject ID :  (This will be the Unique ID)

### Information from Hospital Records

NB M.R.D.No. :   
(ex: N5555 or P5555)

Status: 

1	Paying
2	Non-paying

 Age:  yrs.

Respondent's Name:

Address: House number   
 Village   
 Mandal   
 District   
 Telephone no.

Gender: 

1	Male
2	Female

Distance from SC(in kms)

Date of first visit to the hospital(dd/mm/yyyy) :

Date of referral to tertiary center (dd/mm/yyyy) :

Total No. of visits to NB Eye Centre before referral/including referral:

No. of visits to NB Eye Centre after referral:

Name of the referring Doctor:

Diagnosis: RE (OD)   
 LE (OS)   
 Both (OU)

Reason for referral:

Referred as: (Economic status)

1	Paying
2	Non Paying

Referred to: (Clinics)

1	Cornea
2	Glaucoma
3	Retina
4	Childrens eye care
5	Neuro ophthalmology
6	Low vision / CSE
7	Emergency
8	Oculoplasty
9	Other (list) <input style="width: 150px;" type="text"/>

Appointment status:

1	Emergency
2	Priority
3	Regular

Referred to: (tertiary center)

1	LVPEI, Hyderabad
2	LVPEI, Vijayawada
3	Others,specify <input style="width: 200px;" type="text"/>

Referral ref. No:

**Visual acuity details from day of referral :**

(mention the codes as given in the table below)

Visual Acuity	Presenting	BCVA
RE (OD)		
LE (OS)		

Codes for recording Visual acuity

Visual Acuity	Code
6/6	1
6/9	2
6/12	3
6/18	4
6/24	5
6/36	6
6/60	7

3/60	8
2/60	9
1/60	10
CF	11
PR accurate	12
PR inaccurate	13
NPL	14
Not Listed	15

(If parts is mentioned in the record,  
code it to the next number)  
e.g. If 6/6p is mentioned, then code  
it as 2  
Consider completely read line

Other relevant notes from referral:

### Family/Individual Demographic Information

(applicable for both Compliant and Non-Complaint subjects)

*to be collected by Field Investigator*

Investigator's name :

Date of Interview :

Subject ID :

**Individual demographic information**

1. Name of the respondent :

2. Are you interested to participate in the study?

1	Yes
2	No

2.1. If No, please mention the reason(-98, not applicable)

3. Are you the head of the family?

1	Yes
2	No

4. No. of family members living in home :

5. Marital status:

1	Married	3	Widowed
2	Unmarried	4	Separated

6. Type of family:

1	Single/Unimember
2	Nuclear
3	Extended
4	Joint
5	Others

7. Languages spoken:

1	Telugu	
2	Hindi	
3	Urdu	
4	English	
5	Others,specify	<input type="text"/>

8. Type of house:

1	Kutchha (Roof and floor kutchha)
2	Semi pakka (Roof or floor pakka)
3	Pakka (Roof and floor pakka)

9. Education

9.1 Type of schooling:

1	No schooling
2	Formal Schooling
3	Informal Schooling

9.2 If formal schooling, years completed (max 15) :

 (0-12)

Professional/Technical degree (if any) :

 (1-3)

**10. Present occupation : (on day of interview)**

1	Professional
2	Executive/manager
3	Business person
4	Teacher/educator
5	Sales personelle
6	Clerk/service
7	Skilled labourer
8	Unskilled labourer (Farm)
9	Unskilled labourer (Non-farm)
10	Owner of cultivated land
11	Work on water
12	Home duties
13	Armed service/police
14	Retired
15	Student/trainee
16	Others
17	Unemployed
18	Home maker

**12. Income of the total family (monthly) :**

Rs.

**13. Are you the main earning member in family?**

1	Yes
2	No
3	Contribute to family income

**14. Do you have medical insurance?**

1	Yes
2	No

**14.1 If yes, what type of medical insurance?**

1	Private
2	Rajeev Arogyasri
3	ESI
4	Govt insurance
5	Others,specify <input type="text"/>
-98	Not applicable

**11. Employment :**

1	Gov't employee
2	Private employee
3	Self employed
-98	Not applicable

**Information on treatment and clinical services**

*(applicable to both complaint and Non-compliant subjects)*

**1. Do you understand why you have been referred to the tertiary centre?**

1	Yes
2	No

**2. If yes, what was the reason for referral?(-98, not applicable)**

**3. Did the consultant/staff at NB Eye Centre explain the referral process?**

1	Yes - explained well and clearly understood
2	Yes - explained, but I did not clearly understand
3	Yes - explained poorly, and I did not understand
4	No - Not explained to me

## Information on uptake of referral services - Defaulting Subjects

### Barriers to uptake of referral services

#### Personal Barriers

1	I cannot afford to travel to the tertiary centre (economic)
2	I cannot afford the treatment costs - paying patients (economic)
3	Cannot afford lost wages of me or accompanying person (economic)
4	There is nobody to accompany me to the tertiary centre (logistics)
5	I do not know where the tertiary centre is in Hyderabad/Vijayawada (logistics)
6	The tertiary centre is very far from my home (distance)
7	I am afraid of traveling to the tertiary centre (fear)
8	I am afraid of the procedure for which I have been referred for (fear)
9	I do not understand why I need to go to a tertiary centre (awareness)
10	The dominant family member does not feel the need for further travel and treatment (family)
11	I am too busy to go to the tertiary centre for further treatment (time)

#### Medical/Ocular Barriers

12	I am able to see adequately and do not require further treatment at this time
13	Other health problems prevent me from traveling to the tertiary centre
14	Old age - I do not see the need for treatment at my age

#### Institutional Barriers

15	LV Prasad did not help to arrange the appointment and facilitate the referral
16	I am not satisfied with the treatment I have received thus far from LV Prasad
17	I decided to visit another medical centre

#### Other reasons (specify)

18	
19	
20	

**If more than one response, then list them in decreasing level of importance :**

Most important barrier:

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Second most important barrier:

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Third most important barrier:

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