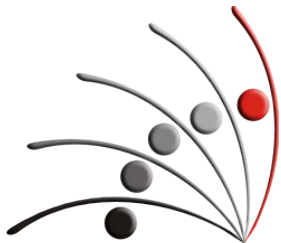


GROUP PRACTICE – DISHA A SUCCESS STORY

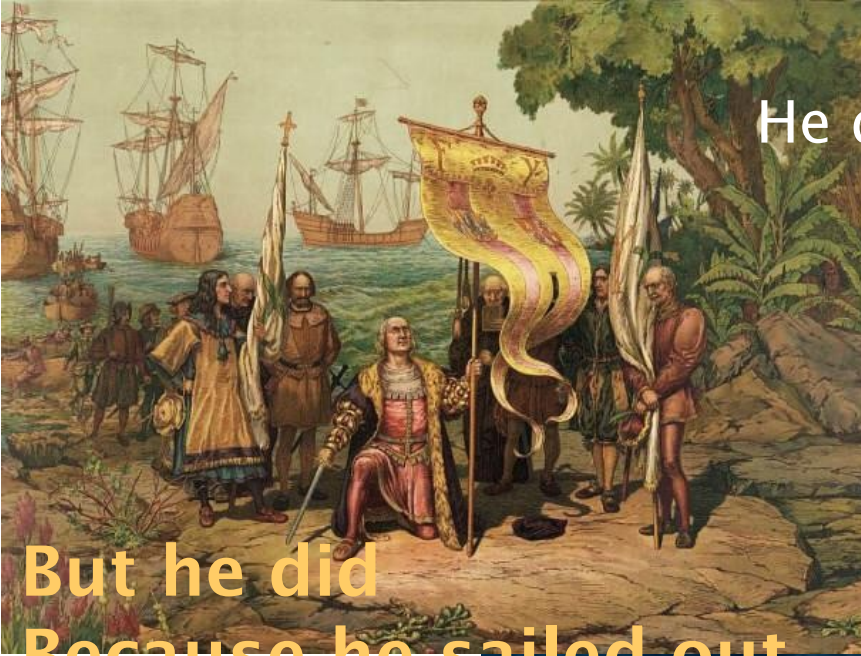


Open Vision Together
Disha Eye Hospitals

Dr. Debasish Bhattacharya
Chairman, Disha Eye Hospitals

Columbus went to discover India

He discovered America instead



**But he did
Because he sailed out**

**Much in life occurs
more by default
than by design**

A map of West Bengal, India, with various districts labeled. A red outline highlights the Barrackpore district and its surrounding areas, including parts of North 24 Parganas, South 24 Parganas, and the city of Kolkata. The text is overlaid on the map.

By default I started practicing in Barrackpore because it was my home town

And I did not get the conventional Govt. job after *MS*

Got a “kick in the back” from a City Nursing home that I designed

Little did I know

3 crore people had to cross my home town from the neighboring districts to go to Kolkata the only city of West Bengal

Barrackpore

My practice grew leaps and bounds

**By default we got land for Disha
on the railway line close to the station**



- **Today**

**Our hospital is a visible
reminder of our services
on B.T. Road
to 10 lacs people
who commute
to the city every day**

Disha's Inception Time was

Magic years of 90s

**Open inspiration of Institutions like Aravind, SN,
JAI, AIIMS**

**Open teaching of AIOS for private practitioners
me**

**Open India towards a unique capacity building
of the innovations of modern ophthalmology**

**Anybody who wanted to do anything
did it**

The Right Mix of the Group

I was lucky to have friends like them

- Who would maximize my practice in their free time even before we started DISHA
- They were in Govt. jobs
- We were from the same medical college
- 38 to 41 years a perfect age to sail out
- I was the senior most, the proposer and had the most to give
- We complemented each other
- Me a *Cataract* surgeon, TKH, *Glaucoma*; Basak, *Cornea*; Sinha, *Retina*
- We were colleagues and not subordinates



We agreed to ...

- **The All Out Approach**
- I left my practice
- They sacrificed their Govt. jobs to start Disha Eye Hospitals

- A Private Ltd. Companionship on 1st May 1997

- We all worked on a salary of Rs. 10000/month

- **Stable Board**

- They hold 10% each for their sweat equity I hold 70% for my contributions

- **Initial footfalls**

3 thousand IOLs and 20 thousand patients were available from my practice to start with



1 “All patients can come to you”



1920 - 1993

2 “Charge every patient”

PARTICIPATION

Ease

3 Health is Pride. Never say poor because it effects Pride.

DISHA.... Respecting Abilities



- Our goal is simple – to provide quality eye care to everyone respecting their ability to pay
- We knew poor quality is very costly
- The common man's pride propelled us from a small town practice to a state of art tertiary care hospitals



60 thousand paid surgeries, 7 lacs OPD, 20,000 lasers/Yr.

	98-99	99-00	00-01	2001-02	2002-03	2003-04	2004-05	2005-06	2006-07	2007-08	2008-09	2009-10	2010-11	2011-12	TOTAL
SICS/ PHACO	4152	6668	10029	12223	14729	17700	18697	21860	23134	25860	28122	30037	31343	34185	278739
CORNEA	22	137	155	179	209	176	247	405	595	656	712	1090	1187	1313	7083
LASIK										184	325	318	418	500	1745
GLAUCOMA	29	156	235	264	270	459	364	382	507	631	683	710	625	880	6195
OCCULOPLASTY	103	283	388	566	1018	1315	182	1847	1829	2223	2617	3107	3429	3945	22852
VR SURGERY	3	201	326	496	786	856	1391	1425	1724	2146	2288	2130	2011	2632	18415
MISCELLANEOUS	23	324	427	481	456	231	604	1041	1152	1386	1631	1788	1919	2612	14075
TOTAL	4332	7769	11560	14209	17468	20737	21485	27758	29977	34685	38699	41746	44243	46067	360735

In 3 hospitals with 45 full time consultants and 400 staffs



In 2012-13

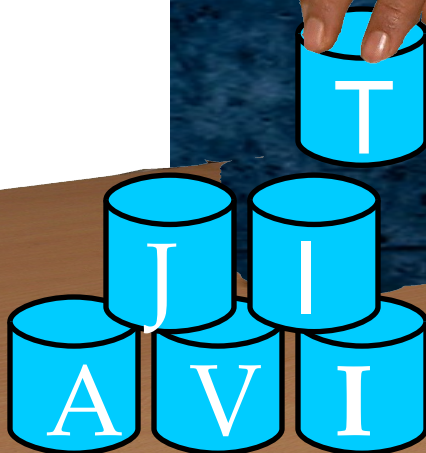
In DISHA we believe

**Senior Doctors' Reputation
Transfers
as Growth to the next generation**



In DISHA we believe

ding
onal Effort
tes
tal Performance



**In DISHA.... We encourage ourselves to go out
learn and present**

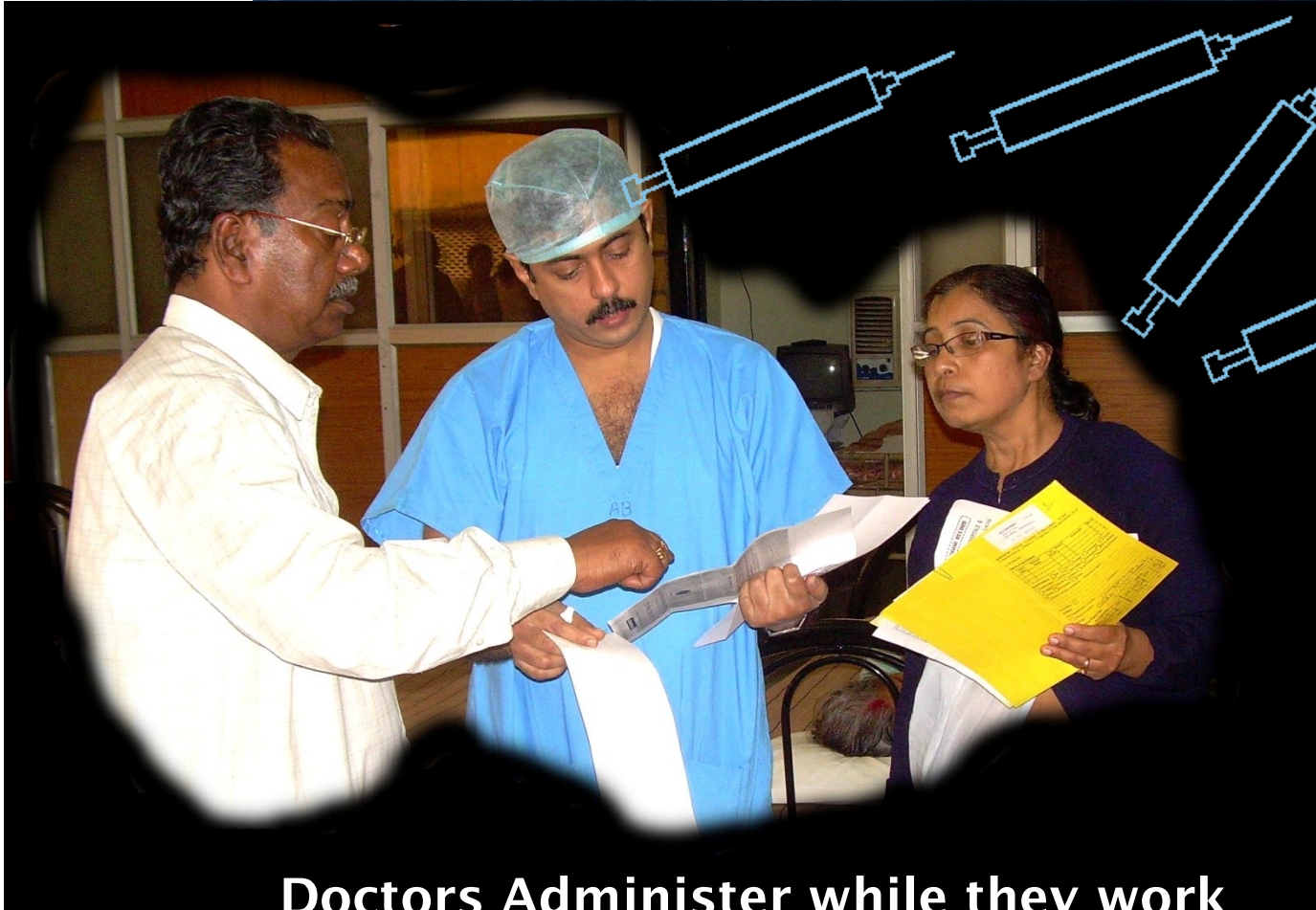


And the trend continues today



Grand Prize, ASCRS 2010

In DISHA.... We believe in Doctors governance



**Doctors Administer while they work
Senior staff supervise at work**

In DISHA.... We believe in Collegiality of Doctors



**Doctors Tea room is the board room
where opinions crystalizes into strategies
and decisions**

In DISHA.... We believe

Only Happy doctors

Give Happy patients



Best practices in India are Group Practices



We may say they are family but the common world is

FAITH



Which prompts us to Give knowing we will Get



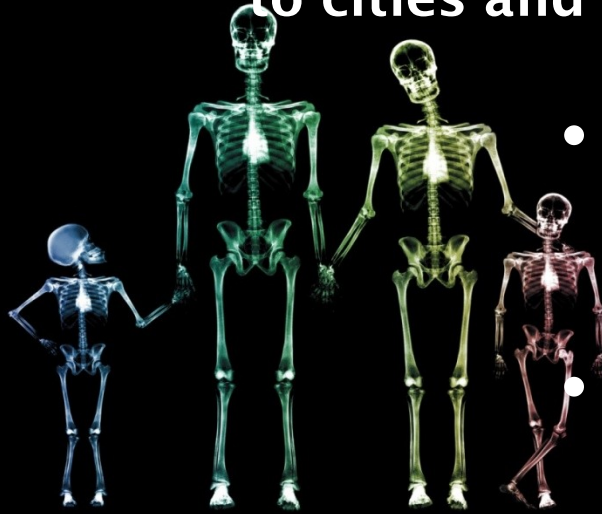
- I met a young friend's family after a long time
- Their cuddly baby daughter, my favourite stood in front of me 5' 6" tall
- In awe I said "my baby is a lady now"
- She smiled as if in repentance of our good times
- "Uncle, I had no other option"

Continuity Propagation Growth is not Optional

Changing Time Defining Moment ...

Today do we...

- Continue in our small town or run for affordability to cities and even small towns.



- Have friends or just work associates in a cosmopolitan nuclear family overloaded with affordability

- Put effort to win a patient and develop a WOM brand or just get paid for our work

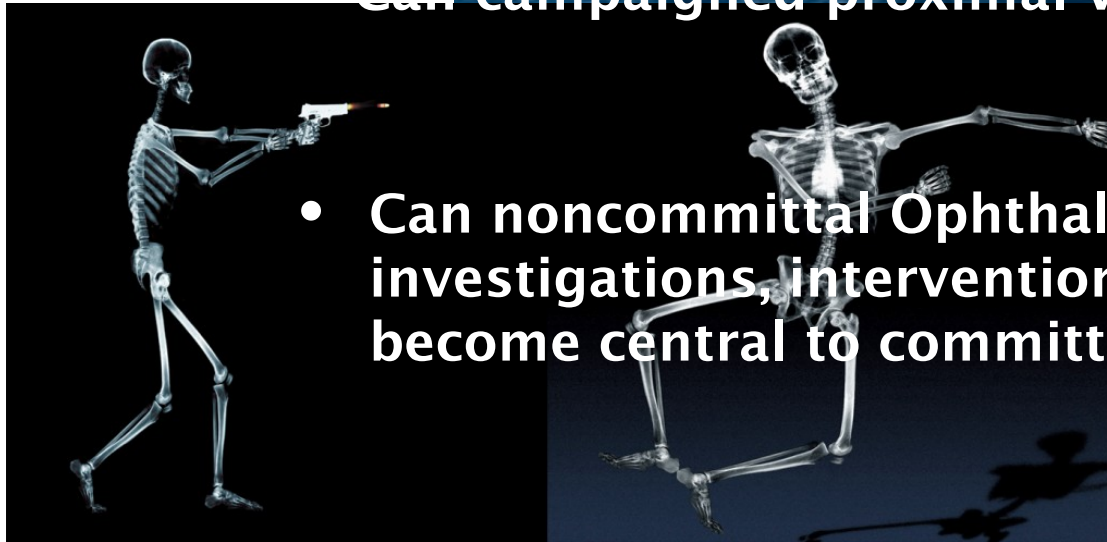
- In the time run sacrifice today's comfort for a more efficient future

- Rely on technology to simplify critical Ophthalmology into a more convenient one

As affordability progresses ...

organised hospitality replace individual effort ?

can campaigned proximal visibility replace WOM ?



- Can noncommittal Ophthalmology (specs, investigations, interventions, refractive) become central to committal Ophthalmology ?

Will the young pride to gift their parents
hospitality and synthetic technology care
their convenient visible hospital ?

Respect their time and follow our value
to address proximities



2012

Durgapur (200 KM away) in Steel city a 20,000 sq. ft. multi specialty hospital

Baguiati a 8000 sq. ft. peripheral city cataract surgi centre

Baranagar a 3500 sq. ft. peripheral city OPD

2013

Howrah a 20,000 sq. ft. Multi specialty hospital

Behala a 8000 sq. ft. peripheral city cataract surgi centre

New town 50 thousand sq. ft. city hospital

2014

The tall structures have to be spooked with smaller out patient services

By structured organisational growth and financial understanding

Health concepts are slow to change

We need not beat their minds



We have time to reduplicate with responsibility



Open Vision Together

DISHA EYE HOSPITALS

Thank You