Piramal Foundation
About Swasthya – Expertise & Differentiators

Founded in 2007, Piramal Swasthya is a registered non-profit organization and works towards making healthcare accessible, affordable and available to all segments of the population, especially those most vulnerable.

Our Vision:
Transforming Health ecosystems through high impact solutions, Thought leadership and Partnerships

Our Reach:

- One of the largest PPP implementers of country in Public Health Domain.
- Technology enabled solutions
- Clinical Decision Support System of 85 Algorithms & 645 Disease Summaries
- Comprehensive community focused primary healthcare models
- Data and Analytics driven interventions for impact
- Largest Human Resource - 400+ Doctors - 50+ Specialists - 1000+ Paramedics

Expertise

Focus Areas –
- Reproductive Maternal Neonatal Child + Adolescent Health
- Non -communicable diseases (Diabetes & Hypertension)

Epidemic Management –
- Non-Communicable diseases (Diabetes & Hypertension)
- Personalized Patient care

Technology & Software –
- Near real time data update
- Automated data capture and quality assurance
- Individual Patient disease profiles

Project Execution –
- Multiple state long term program management

Community Focused –
- Customized interventions

Differentiators

- One of the largest PPP implementers of country in Public Health Domain.
- Technology enabled solutions
- Clinical Decision Support System of 85 Algorithms & 645 Disease Summaries
- Comprehensive community focused primary healthcare models
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Piramal Swasthya Mission, Principles and Drivers

A. Mission

Health for all – Democratizing Healthcare

B. Principles

The three foundational principles behind Piramal Swasthya beliefs and solution are:

- Accessibility – Healthcare should be accessible for everyone
- Availability – Healthcare should be available for everyone
- Affordability – Healthcare should be affordable for everyone

C. Key Drivers

Information and Communication Technologies (ICT)
Scalable solutions customized to client’s requirements
Cost Effective - through Partnerships with Governments
Strategy Roadmap 2020

Vision

Transforming the Health Eco System through High Impact Solutions, Thought Leadership & Partnership

• Evolve to be an expert on adolescent girls and maternal health
• PSMRI Brand: Expert inputs to policy making, in identified focus areas. Preferred employer in the public health domain

• Every project operates as a high impact solution leading to outcomes
• Projects measured for outcome through third party assessment agencies
• Advanced analytics engine on all projects

• All projects should be sustainable (financial parameters & beneficiary focussed non financial parameters)
• Self sustainable organization (besides generating surplus for investments into innovations)
• Preferred partner status with large multilateral organisations

• Partners (governments, multilaterals, CSR) should seek us for not only best practices in implementation but be sought for knowledge and innovation: move up the value chain
Piramal Swasthya covered ~ 7.98Cr cumulative beneficiaries till end December, 2016 (Since 2007)

<table>
<thead>
<tr>
<th>Number of Beneficiaries</th>
<th>For FY 2016-17</th>
<th>Till Date (Dec-2016)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unique beneficiaries</td>
<td>9,832,816</td>
<td>64,226,572</td>
</tr>
<tr>
<td>Revisits</td>
<td>444,578</td>
<td>15,670,885</td>
</tr>
<tr>
<td>Total Beneficiaries</td>
<td>10,277,394</td>
<td>79,897,457</td>
</tr>
</tbody>
</table>

Channel-wise Beneficiary Coverage Numbers

- **Health Helpline Call Center**
  - 2014-2016: 39,72,582
  - 2015-2016: 59,21,081
  - 2016-2017 till Dec: 50,65,742

- **Mobile Health Vans**
  - 2014-2016: 16,10,478
  - 2015-2016: 27,33,224
  - 2016-2017 till Dec: 51,67,670

- **Telemedicine Services**
  - 2014-2016: 34,726
  - 2015-2016: 34,663
  - 2016-2017 till Dec: 43,982

*Health Helpline Call Center = HIHL + MCTS
*Mobile Health Vans = MHS + PPTCT
Swasthya’s ICT and mobility platforms address gaps of healthcare availability, access and delivery through:

• Remote Health Advisory & Intervention Services

• Community Outreach Program

• Telemedicine Services
Our Services

• **Remote Health Advisory & Intervention Services**
  - 24×7×365 non-emergency health helpline supported by algorithms and disease summaries
  - Patient tracking system
  - Credible advice on acute minor conditions
  - Healthcare predictive analytics
  - 41 million beneficiaries have been served.

• **Community Outreach Program - Mobile Health services**
  - Once-a-month day primary health service for rural populations
  - 36 million patients have been provided medical services at their doorstep.
  - Screening and diagnosis of chronic conditions
  - Promotive care, Patient tracking and Drug dispensation

• **Telemedicine Services**
  - Specialist services provided by connecting remote populations to urban doctors
  - Healthcare to vulnerable groups in difficult to reach remote areas
  - Access to specialist care and Drug prescription
  - 70+ Telemedicine Centres across India serving 1 lakh+ beneficiaries
Remote Health Advisory & Intervention Services

104 HIHL provides round-the-clock medical advice, counselling, directory information and complaint registry services by using medically validated algorithms and disease summaries.
Any citizen can obtain medical information and advice, avail counselling services, request directory information, or lodge a service complaint against any public health facility.

Piramal Swasthya's cutting-edge software enables qualified and trained paramedics, counsellors, and doctors utilize to triage callers.

**Core Services:** Health Advice; Counselling; Directory Information; Service Improvement

**Benefits:**
- Free of cost access, 24x7 Services
- Addresses minor ailments and provides guidance for major ailments
- Grievance redressal provides a platform to voice out complaints
- Directory information provides guidance about hospitals and services offered.

Every 5 Seconds, HIHL serves 1 Beneficiary
Mobile Health Services

MHS is a once a month, fixed day outreach program that delivers multiple health services through Mobile Medical Units to un-served & underserved rural population at their doorsteps.
Core Services and Benefits

- MHS tackles barriers rural people face accessing primary healthcare.
- Mobile health units – vans equipped with technology, medical devices, medicine and health workers – deployed to villages that the public health system does not serve.
- Primary focus on chronic diseases, maternal and child health and minor ailments.

**Core Services:** Screening/lab tests; Referrals; Patient Education; Prescriptions; Monitoring

**Benefits:**
- Medical services at patients' doorsteps.
- Screening, diagnosis and treatment of select chronic diseases.
- Augmented quality of patient profile at referral centres.
- Near real-time information flow tracking & follow up. Platform for delivery of additional health services such as counselling for de-addiction etc.

**Impact:** Each MMU visits two villages in a day covering 3000 population
- Each MMU would cater to approximately 40 – 50 Villages and approximately a population of 60,000 in a month
Mobile Health Services

Once a month, fixed day outreach program that delivers multiple health services through Mobile Medical Units to un-served & underserved rural population at their doorsteps.

Core Services:
- Screening/lab tests
- Referrals
- Patient Education
- Prescriptions
- Monitoring

Program Name: Chandranna Sanchara Chikitsa (Since 2016)

Mobile Health Van – Service flow

- Counter 1: Beneficiary Data Registration
- Counter 2: Vital Data recorded & Passed on to Doctor
- Counter 3: Diagnostic and Laboratory Testing
- Counter 4: Doctor consultation
- Counter 5: Drug dispensing

Out/ Referral

State Demographics

<table>
<thead>
<tr>
<th>Region</th>
<th>South India</th>
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</thead>
<tbody>
<tr>
<td>State</td>
<td>Andhra Pradesh</td>
</tr>
<tr>
<td>Capital</td>
<td>Amravati, Hyderabad</td>
</tr>
<tr>
<td>Districts</td>
<td>13</td>
</tr>
<tr>
<td>Total Area</td>
<td>160,205 km²</td>
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<tr>
<td>Density</td>
<td>308/km² (800/sq mi)</td>
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<tr>
<td>Population</td>
<td>49,386,799</td>
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Program Scope:
- 277 Mobile Medical Vans with State-of-the-art primary health facilities
- Program outreach covers
  - ~14,000 villages
  - ~35 million Population
- Real time data flow from remote locations to the Chief Minister’s dashboard
- ~1700 staff (Doctors and paramedics)

Service Highlights:
- Over 3.8 million beneficiaries registered in 9 months
- Nearly 28% beneficiaries are identified as Chronic patients
- ~53110 Van service days

Learnings:
- Diabetes and hypertension are the highest among beneficiary group and the prevalence can be brought down by preventive measures
- Pregnant women are to be made aware about healthy practices to be followed during pregnancy
- Need for educating pregnant women on Institutional deliveries
Telemedicine Services

Telemedicine Solution bridges the gap of specialist services by connecting the patients at smaller dispensaries & health centres with bigger hospitals that have specialist doctors through video conferencing.
Core Services and Benefits

• Delivering the most accessible and affordable care by focusing on both the beneficiary and the doctor and providing high quality specialists with the medical data they need in settings that make both beneficiary and doctor comfortable.
• TMC utilizes medically-validated equipment and digitally interfaces with software for easy and accurate dataflow.

• **Core Services:** Screening/Lab Tests; Specialist Consultation; Patient Education

**Benefits:**
• Specialist access for population near patients' doorsteps
• Reduced load of complex illnesses on public health system
• Augmented quality of patient profile at Community Health Centres
• Quick and timely advice/counseling of patients; Increase in the scope of services without creating additional physical infrastructure in remote areas
• Reliable diagnostics, drugs, and treatment
• Early diagnosis and better treatment management

• **Impact:** Partnered with State Governments & philanthropic organizations to run several telemedicine initiatives and have reached more than 1 lakh beneficiaries through 70+ telemedicine centres across India.
Case study **Tribal Health Program**

Provides access to specialist consultation in remotest of the areas where there is no or limited availability of healthcare resources.

**Core Services:** • Screening/lab tests • Referrals • Prescriptions • Monitoring

**Program Model – Field Operations**

1. **Field Paramedic Team:** Comprises Driver and Community Health Worker
2. **Remote hard to reach Tribal Villages**
3. **Telemedicine Centre in remote location is connected via broadband to specialists in cities**
4. **Specialist Doctor virtually advises the pregnant women who visit the Telemedicine Centre**

**Program Name: Asara Tele Health Programme, Araku Valley (Since 2010)**

**Region Demographics**

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<tbody>
<tr>
<td>State</td>
<td>Andhra Pradesh</td>
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<tr>
<td>Habitations</td>
<td>181</td>
</tr>
<tr>
<td>Population</td>
<td>43,000</td>
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**Program Highlights:**

- Extremely remote, hilly and difficult to access terrain
- Covers 181 Habitations with 43,000 population in the program area
- Maternal care services provided to over 8,156 pregnant mothers
- Focus on reducing the IMR/MMR in the project area

**Impact Highlights:**

- Institutional deliveries significantly improved to 39.87% (from 18.53%) with Antenatal intervention during the program period
- Zero Maternal Mortality recorded in past 2 years
- 82.08% pregnant women delivered healthy babies (weight of baby reported > 2.5 kgs) deliveries attended by Medical Officer and Staff nurses
- 117 Local Birth Attendants trained in the program area
- Committed to impact 4000 lives in 5 years (2015 - 2020) by touching 800+ pregnant women every year

**Learnings:**

- Remote and difficult to access areas need customized and integrated models / interventions
- Sensitivity to cultural issues and sustained engagement with the beneficiaries is very important to build trust
- Local capacity building is key to put health on community priority agenda
- Interventions should be sustained over long term for actual impact
### MCTS Services

<table>
<thead>
<tr>
<th>MCTS services</th>
<th>Assam</th>
<th>Arunachal Pradesh</th>
<th>Himachal Pradesh</th>
<th>Karnataka (Vathsalyavani)</th>
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### PPTCTC service

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<th>PPTCTC services</th>
<th>Rajasthan</th>
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### Other Services - Impact

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<th>Other services</th>
<th>eSwasthya</th>
<th>WDF</th>
<th>I-Hear</th>
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Note: MCTS Arunachal Pradesh service was started from March, 2015.
WDF project service was closed from May 2014.
Our partners

Partnerships are a key fulcrum for scalability, replicability and technology adaptation. Piramal Swasthya partners with Governments, iNGOs and CSR clients to scale interventions and deepen the traction with communities in the most underserved areas. Partners seek us for not only best practices in implementation but for expertise and innovation.
Thank You

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