

BHARAT FORGE



KALYANI

# CSR IMPACT ASSESSMENT EXECUTIVE SUMMARY REPORT TELEMEDICINE CENTRES

Implementing Partner: Doorstep Health Services Private Limited



SOULACE CONSULTING PVT. LTD.

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## CHAPTER 1

# INTRODUCTION



*Tele Consultation at the Clinic*

### ABOUT THE CSR FIRM

Bharat Forge Limited is a company with a longstanding commitment to corporate social responsibility (CSR) initiatives. Over the years, Bharat Forge has continuously reshaped and realigned its CSR initiatives to better align with the government's vision for social development and the nation's development agenda. The company's belief in giving back to society has driven it to accomplish more through its CSR efforts each year under the governance of its dedicated CSR initiatives. Bharat Forge's CSR projects and programs are designed to be in sync with both state and national priorities in CSR, as well as with the United Nations' Sustainable Development Goals (SDGs). Following the introduction of the CSR Act in 2014, the company has further streamlined its CSR projects to ensure compliance with the regulatory framework.

With its deep-rooted commitment to social responsibility, Bharat Forge Limited presents itself as a valuable CSR partner, leveraging its experience, resources, and alignment with development goals to drive meaningful and impactful social change through strategic CSR interventions.

### ABOUT THE IMPLEMENTING PARTNER

Doorstep Health Services (DHS) is a private limited company that specialises in providing telemedicine-enabled primary healthcare services with a focus on last-mile care delivery. DHS operates with the firm belief that consultations alone cannot complete the care cycle without on-ground support. As a pioneer in this space, DHS prides itself on high responsiveness, medical proficiency, accessibility, and appropriate care delivery. DHS takes an integrated approach by owning and managing all its services, positioning itself as a one-stop solution for primary healthcare needs. The company believes that a robust primary healthcare system is the key to good health, and it aims to offer a comprehensive range of services under one umbrella.

## CHAPTER 2

### RESEARCH METHODOLOGY



*Patient Interaction at the Clinic*

BFL Limited commissioned SoulAce to conduct an impact assessment study to evaluate the immediate and enduring impacts of the program implemented under the health thematic area. The impact assessment study was conducted in the fiscal year 2023-24.

#### OBJECTIVES OF THE STUDY

The primary objectives of the study were to:



To assess the benefits that the program catered to for the beneficiaries through the health facilities and services.



To evaluate the impact the project activities generated among rural families of Satara and Bhimashankar districts in Maharashtra.



To ascertain the sustainability of the project after completion of the project.



To gauge the relevance and effectiveness of the project in terms of the needs of the beneficiaries.

#### MIXED METHOD

This evaluation employs both qualitative and quantitative methods to examine the program's objective impact and support it with subjective experiences and perspectives. Quantitative methods were utilised to gather and analyse numerical data, providing statistical insights and identifying impacts. The research design adopted a descriptive approach, aiming to present a detailed analysis and exploration of various aspects of the program supported by BFL. Descriptive research is suitable for creating an overview, identifying patterns, and understanding the current situation. By combining qualitative and quantitative research methodologies within a descriptive framework, the study sought to provide a comprehensive evaluation of the program, highlighting its impact and recommending areas for improvement. This methodological combination ensured a thorough examination of the subject, offering both depth and breadth to the analysis.

## RESEARCH DESIGN



### Project Name

Arogya Rakshak Clinics



### Implementing Partner

Doorstep Health Services



### Research design used

Descriptive Research Design



### Sampling Technique

Purposive and Random Sampling



### Sample Size

410 beneficiaries



### Qualitative methods used

Key informant Interview, Stakeholder Engagement

## SAMPLING FRAMEWORK

Sample	Sample Size
Patients received treatment from MHCs	410 beneficiaries

## KEY STAKEHOLDERS



Individuals residing in rural intervention districts



Project Staff

## STUDY TOOLS

Structured Questionnaire and Stakeholder Questionnaire tool.



### Questionnaire for Primary Beneficiaries:

A structured questionnaire was crafted to review project details for each focus area, with indicators predefined before conducting the surveys.

## COMMITMENT TO RESEARCH ETHICS



### Informed consent

The study followed strict guidelines regarding informed consent. Participants were fully informed about the study's goals, procedures, and possible risks and benefits. They were encouraged to ask questions and were able to make well-informed decisions.



### Confidentiality

Robust measures were taken to protect participants' privacy and ensure data confidentiality. Collected data was securely stored and accessible only to authorised personnel. Participant identities were anonymised or coded to prevent disclosure of personal information.



### Voluntary participation

Participation in the study was completely voluntary, and individuals had the liberty to decide whether or not they wished to participate. There was no coercion or undue influence to compel individuals to take part in the study.



### Ethical Treatment

Participants were treated with respect, dignity, and impartiality throughout the study, prioritising their well-being and rights. Any necessary assistance was provided to ensure their comfort and understanding.

## HEALTH CHECKUP AT CLINIC



## 03. EXECUTIVE SUMMARY

### ABOUT THE STUDY

Bharat Forge Limited supported Doorstep Health Services Private Limited to bring primary healthcare to rural Maharashtra's most remote and marginalised families. Leveraging telecommunication technology, the initiative reached over 8000 beneficiaries through 8 Medical Health centres set up in the Satara and Bhimashankar districts of Maharashtra. These ARCs were comprehensively outfitted to deliver holistic healthcare services. Each MHC was staffed with a dedicated team comprising medical professionals and paramedical personnel. Additionally, the clinics were furnished with an array of healthcare facilities and equipment to cater to diverse medical needs, ensuring that individuals residing in remote and underserved areas could access quality healthcare services conveniently and efficiently.

### OBJECTIVES OF THE PROGRAM



To bridge the gap in healthcare access for remote and underserved communities.



To deliver a wide range of healthcare services, including medical consultations, diagnostics, treatment, and preventive care.



To establish the necessary medical infrastructure, equipment, and human resources within the MHCs and the central Hub to provide quality healthcare services.



To promote health awareness on preventive healthcare, disease management, and overall health promotion for better health outcomes.

### Project Details



#### Implementation Year

2021-2024



#### Assessment Year

2023-2024



#### Beneficiaries

8,000



#### Location(s)

Satara and Bhimashankar districts of Maharashtra



#### Budget

55,97,000



#### Implementing Partner

Doorstep Health Services Private Limited



#### SDG Goals



- SDG 3: Good health and Well-being
- SDG 10: Reduce inequalities

# Key Findings



**78.3%**

accessed healthcare within a shorter distance of less than 1 km.



**89.3%**

of respondents reported visits lasting less than 2 hours post-intervention.



**88.0%**

of respondents opted for MHC over the traditional options.



**99.0%**

of the beneficiaries sensed a general improvement in their overall health due to the intervention.

# Key Impact



Improved access to healthcare services, effectively narrowing the gap between the healthcare available to affluent and underserved populations.



Reduced disparities in healthcare access, ensuring that marginalised communities have improved and equitable access to healthcare services.



**99.3%**

accessed MHCs for lifestyle diseases over PHCs, citing their good consultative services.

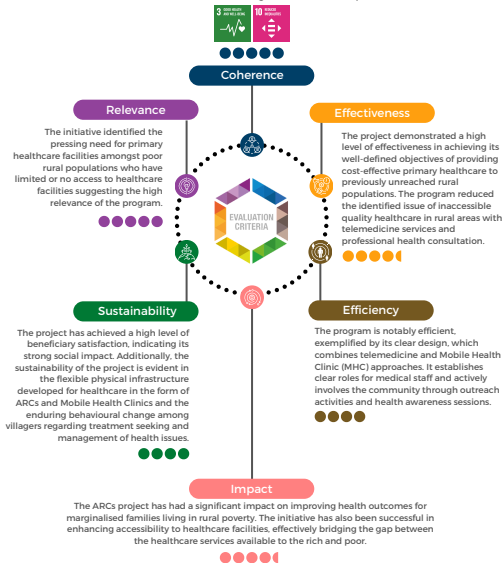


**98.3%**

of beneficiaries experienced a reduction in their financial burden as a direct result of the Mobile Health Clinics (MHCs), indicating a significant positive impact on the economic well-being of the population.

## 04. OECD FRAMEWORK

The program aligns with the following SGD Goals:  
SDG 3: Good health and Well-being, SDG 10: Reduce inequalities



Relevance



Coherence



Effectiveness



Efficiency



Impact



Sustainability



## CHAPTER 5

# RECOMMENDATIONS



ARCs should be equipped to provide more than just basic primary healthcare. They should have facilities for administering injections, providing saline, and handling emergency admissions, especially for the elderly who may require these services frequently. This would go a long way in helping any emergency treatments to the villagers. This helps in timely and effective treatment for the villagers.



Make provision of specialised medical services offered at the MHCs to include treatment for chronic conditions like diabetes and hypertension beyond diagnosis services.



The ARCs should be closely connected with the nearest Primary Health Centre (PHC) to facilitate referrals for more specialised care and to ensure access to a wider range of medicines, which are not available locally. This also includes any specialised medicines for diabetes, hypertension, tuberculosis and other health issues.



**MEDICAL TEAM AT CLINIC**

## CHAPTER 6

# CONCLUSION

The Arogya Rakshak Centre (ARCs) project, supported by Bharat Forge Limited and implemented by Doorstep Health Services Private Limited, has made significant strides in improving healthcare access and outcomes for marginalised families in rural Maharashtra. The initiative's use of telemedicine and ARCs has effectively bridged the gap between rich and poor in accessing quality healthcare services. The project has demonstrated high levels of relevance, coherence, effectiveness, and impact, as evidenced by its ability to reach over 8000 beneficiaries and provide comprehensive healthcare services. The project has effectively leveraged technology, such as telemedicine, to enhance healthcare delivery and reach remote areas. This innovative approach has not only improved access to healthcare but has also set a precedent for future initiatives to leverage technology for better health outcomes. The initiative has also empowered individuals to seek healthcare independently and has raised awareness about preventive healthcare and disease management. The project's emphasis on community participation and awareness has created a ripple effect, with villagers adopting healthier practices and becoming more proactive about their health. This behavioural change is a key indicator of the project's sustainability and long-lasting impact on the communities it serves. The ARCs project has had a positive and lasting impact on healthcare accessibility and outcomes in rural Maharashtra, setting a strong foundation for continued progress in the region.