

EXECUTIVE SUMMARY OF IMPACT ASSESSMENT OF eLAJ SMART CLINICS



Prepared by:
SATTVA



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Acknowledgement

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Executive Summary

Biocon Foundation works towards improving the public healthcare system by driving innovation, operational efficiency, and productivity. Biocon Foundation has designed eLAJ Smart Clinics to facilitate effective preventive and primary healthcare interventions for the benefit of communities with poor access to healthcare. These clinics are technology-enabled, thereby allowing for the monitoring of vital signs, conducting multiple diagnostic tests, and generating electronic patient records. Through the eLAJ model, the foundation is converting Primary Health Clinics (PHCs) into a comprehensive single-point treatment centre with systematic documentation of patient data.

Sattva Consulting undertook an impact assessment study to assist Biocon Foundation in understanding the impact created by the intervention among the communities accessing PHCs in Bangalore, Tumkur, Chikballapur, Kolar, Bagalkot and Dakshina Kannada. Sattva followed a descriptive study approach to systematically lay out the project outcomes based on various performance indicators. A case-control methodology for design was adopted to retrospectively understand the relative impact of Biocon Foundation Clinics (BFCs) and Government of Karnataka (GoK) eLAJ Primary Health Centres (PHCs), in comparison with an ordinary Government PHC or control group.

The key insights from the study and the recommendations put forward to strengthen the program are detailed in the sections below.

Key Insights

The key insights from the study for Biocon Foundation Clinics (BFCs) are as follows:

1. **Choice of healthcare facility:** 81% of patients stated that BFCs were their first choice of healthcare facility. This was attributed to the BFCs' ability to address the critical needs of the community by providing access to quality and affordable healthcare in close proximity to their homes. 76% of the patients reported to have received awareness about their health conditions and 71% of the patients reported to have received treatment due to the BFCs. In contrast, in the control group PHCs, 1 out of 4 medical staff at the control group PHCs reported that patients received awareness regarding their health conditions.

2. **Non-communicable disease (NCD):** BFCs have made a significant change in the attitude of the community, in terms of willingness to undergo diagnosis and seek medical help. In some cases, with respect to NCD clinics, **health seeking behaviour was reported to be at a point where 95% of the patients visited the clinic every month as opposed to only when ill.** However, in the control group, no specialist consultation for NCDs was reported. NCD and Child Care clinics were identified as most required at the control PHCs.

3. **Specialist clinics:** 85% of the patients reported a high satisfaction level pertaining to the services and treatment provided at the clinics. **94% of parents brought their child under five years of age to the Well Baby clinics for the first visit for a check-up or treatment** and were highly satisfied with the treatment received. **At BFCs, an affordable, scalable and effective model of oral care service is provided. 88% of the patients reported being able to prevent diseases**

due to the presence of Biocon Foundation Geriatric Care clinics. 70% of patients in the control group PHCs reported a lack of facilities for Geriatric or Child Care despite accessibility to staff for medical consultation. In the control group PHC, 53% patients reported accessibility to doctors for consultation on oral care. However 83% indicated that services were lacking in terms of awareness, diagnosis, cure and referral.

4. **Use of Electronic Medical Records (EMR):** Electronic Medical Records (EMR) were reported to be useful in tracking medical records of patients with high-risk diseases and reducing the workload of doctors and staff at BFCs. **At BFCs, 85% patients reported that the doctor is aware of their medical details.** The medical staff and data entry operators at BFCs also reported on several benefits of EMR. Furthermore, since patient details are not asked repeatedly, **DEOs reported that EMR had “reduced the workload of doctors and medical staff by 75%”** . As far as the control group is concerned, 3 out of 4 doctors and staff at control group PHC reported that they do not maintain digital records.

5. **Referral:** At BFCs, the medical staff reported that **patients referred are those who have uncontrollable Hypertension or Blood Glucose levels.** In a month, 1% of patients were referred from Austin Town to higher facilities. In Huskuru, 1% to 2% of patients were reported to be referred in a month.

6. **Change in health seeking behaviour:** 79% patients reported an increase in the importance of using medical facilities due to the BFCs. As a result, **84% of patients reported that BFCs had led to an increase in willingness to seek medical help. Additionally, 81% reported that there had been an increase in willingness to undergo diagnostic testing.** In contrast, in the control group PHC, 1 out of 4 medical staff in control group PHCs reported there was a willingness among patients to seek medical help.

The key insights from the study for GoK’s eLAJ PHCs are as follows:

1. **Choice of healthcare facility:** GoK eLAJ PHCs address a critical need of the community. For **72% patients, GoK eLAJ PHCs were the first choice for any illness.** Further, 67% patients received awareness regarding their health conditions and 41% received treatment at the GoK eLAJ PHCs. In the control group PHCs, 1 out of 4 medical staff reported that patients received awareness regarding their health conditions.

2. **Use of Electronic Medical Records (EMR):** **78% patients reported that their medical record is maintained and is referred to by the doctors** every time they visited the clinic. At the GoK eLAJ PHCs, testimonials from medical staff and DEOs indicate that EMR has been beneficial for patients and staff alike. EMR was reported to be especially helpful in cases of patients with NCDs and high-risk morbidities. At the control group PHC, staff highlighted that records are currently maintained manually and that they urgently need a DEO.

3. **Availability of diagnostic tests and treatment:** **42% patients reported that they had visited the NCD clinics for Blood Glucose level checks and Hypertension check-ups.** 56% patients reported that all tests were available at GoK

eLAJ PHCs. Among the women respondents, 82% used the services of GoK eLAJ PHC for testing and health check-ups during pregnancy. In the control group PHC, 58% reported that all tests and medicines were available. However, the doctors at the control group PHC highlighted the need for a lab technician.

4. **Change in awareness and health seeking behaviour:** GoK eLAJ PHCs brought about a change in awareness among community members regarding healthcare. 41% indicated that there had been an increase in their willingness to seek medical help. In the control group PHC, 1 out of 4 medical staff at control group PHCs reported there was a willingness among patients to seek medical help.

Based on the gaps observed during the study, Sattva has put forward the following key recommendations to strengthen the program:

1. **Strengthening the NCD & other specialist clinic services:** By providing counselling facilities for patients affected with NCDs, health seeking behaviour can be further encouraged. Moreover, according to Government officials interviewed, there was a need to increase the frequency of specialist care services. It was also suggested that Biocon Foundation could set up a unit of specialist care within General Hospitals.

2. **Scaling best practices and services by collaborating with like-minded organisations:** An exchange of best practices and services can help Biocon Foundation serve a larger community and regions. Exploring collaboration with more government bodies, institutions, and NGOs, and leveraging the digitisation of healthcare; the eLAJ program can achieve Pan-India scale.

About Sattva

Sattva (www.sattva.co.in) is a social impact strategy consulting and implementation firm. Sattva works closely at the intersection of business and impact, with multiple stakeholders including non-profits, social enterprises, corporations, and the social investing ecosystem. Sattva's work pans across multiple states in India, multiple countries in Africa and South Asia, on the ground, and Sattva has engaged with leading organisations across the globe through its practice in strategic advisory, realising operational outcomes, CSR knowledge assessments, and co-creation of sustainable models. Sattva works to realise inclusive developmental goals across themes in emerging markets, including education, skill development and livelihoods, health care and sanitation, digital and financial inclusion, energy access, and environment, among others. Sattva has offices in Bangalore, Mumbai, Delhi.