Providing preventive, curative & promotive health services to those most affected by the Pandemic.

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The Coronavirus disease (Covid-19), believed to have originated in December 2019, spread rapidly across the globe. In India, the Covid-19 Pandemic claimed 94,000 lives with a total number of cases nearing 6 million. Access to healthcare services was severely jeopardized. Healthcare resources were majorly directed towards combating the Pandemic. Medical treatment across primary, secondary and tertiary care, fell for both infectious and non-communicable diseases. As compared to March 2019, outpatient care for diabetes fell by 16.5%, mental illness fell by 42.1% and communicable diseases like respiratory infections fell by 32.5% in March 2020(S Rashmi, 2020). Due to the fear amongst people of contraction of the virus and non-availability of doctors, patients from vulnerable communities faced extreme difficulties in availing even basic medical services. Earlier Covid-19 peaked in major cities but the influx of millions of migrant workers from cities into villages triggered a fresh wave of infections in areas that had been relatively untouched by the virus (Krishnan M, 2020). There was a critical need to make affordable quality medical services easily accessible to them.

Covid-19 Pandemic Wellbeing Taskforce and MyHealthline

Intelehealth and Aaroogya Foundation spear-headed the formation of 'Covid-19 Pandemic Wellbeing Taskforce', a collaborative of more than 20 non-profit and tech companies for tech-enabled Covid-19 response at scale. MyHealthline was launched with an aim to provide timely medical services through telemedicine to vulnerable groups such as urban, rural poor, migrant and daily wage workers with no means to access medical help;

- IVR Helpline provided migrant communities, urban and rural poor 24x7 accessibility to quality general and mental health services through telemedicine and tele-education. The team consisting 2 Case Managers (paramedical) and 8 doctors from 5 specialities (General Physician, Dentist, Gynaecology, Orthopaedics and Homeopathy) consult patients on general medical concerns, Covid-19 care for suspect cases and also offer mental health counselling.
- Resource library (Covidhelp.in and aaroogya.com) increased awareness with reliable information on correct precautions and guidelines on Covid-19 in 11 languages along with sign-language for differently-abled communities.
- Self-assessment tool (Covidhelp.in) available in 11 languages enabled individuals to self-triage and assess their risk of covid-19 infection.

Populations targeted: Urban and rural poor, community workers, patients with medical concerns and elderly

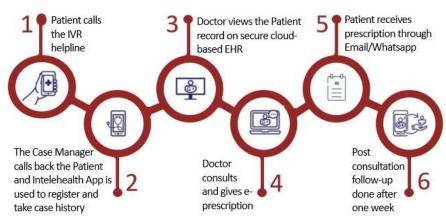
Implementing org: Aaroogya Foundation

Funder: Multiple

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MyHealthline

Taskforce members consisted of 20+ nonprofits who worked directly with vulnerable populations such as Vacha, Goonj & Pratham. These organizations disseminated the IVR helpline in their community through community workers, posters, pamphlets and WhatsApp. This network worked across many States in India such as Delhi, Bihar, Uttar Pradesh, Rajasthan, Maharashtra, Gujarat, etc.



A person in need of healthcare services calls the IVR helpline and requests for teleconsultation on general health, mental health or Covid-19 concerns. The registered call is assigned to a case-manager who classifies the case into teleconsultation or tele-education. For a teleconsultation patient, the case manager uses Ayu, which is an evidence-based digital assistant on the Intelehealth software platform containing health protocols for clinical decision support, to consult the patients and generate a comprehensive clinical note. The remote doctor views the patient record through a secure cloud-based Electronic Health Record system. The doctor consults the patient and generates the prescription which is sent to the patient via Email or Whatsapp. Follow-up care is ensured by Case Managers who follow-up with the patient after a week. A tele-education patient is managed by case managers themselves or referred to a doctor, if required. The helpline also responded to queries on PPE and their uses.

Taskforce members with community reach also distributed covidhelp.in website with resource library in their community where anyone can self-assess their risk to Covid-19 by taking a quick questionnaire. Three sets of questions developed using certified guidelines (Ministry of Health and Family Welfare, Government of india) accessed their travel history, past and current medical status. Based on the responses, the person is categorised into low, medium and high risk and are recommended appropriate precautions.

Preliminary Impact and reach reported:

- The IVR helpline received 10.088 calls.
- 40% of these were for COVID-19 symptoms, 60% for other health issues (25% for chronic health problems; 25% were for acute health issues and 10% for mental health).
- https://covidhelp.aaroogya.org/ received 6082 visitors who accessed health education resources such as the FAQ
- · section and informational videos.
- aaroogya.com received 27480 website views where people accessed the Covid-19 resources.
- •3352 individuals took the self-assessment for Covid-19. 61% of cases were assessed to be low-risk, 23% moderate risk, and 16% high-risk suspected cases.
- The helpline received calls from states across India with nearly 40% being from Delhi, and rest from UP, Bihar, Rajasthan, Maharashtra, Gujarat, Punjab and Karnataka.
- The helpline also received 104 calls (1%) for enquiries with request for PPE which were fulfilled through distributor partnerships.

Patient experiences:

Sarvana (name changed), stuck away from his ailing, financially-stricken grandparents in a small village in UP, reached out to the helpline for medical services for his grandfather who had acquired Covid-19. He booked a consultation with the helpline. The grandfather, with the right guidance and help from the Doctor, started recovering in two weeks.

"I am so thankful for getting help and that too free of cost! I had never imagined that without me travelling, my grandfather would be taken care of"

Ramdayal (name changed), a migrant worker from Bihar, Morsanda got news of his brother having difficulty breathing. In this time of lockdown, no medical services were available nearby. The brother was a patient of asthma and had suffered TB years ago. Troubled and worried, Ramdayal called the helpline. Doctors teleconsulted him and also conducted a Covid assessment. He was asked to resume asthma medication, home quarantine guidelines and referred to State helpline number. He was taken to the hospital and treatment started.