

RHCF model was one of the winning entries at iDIYA social challenge 2011 by Indian School of Business, Hyderabad

A case study
on our innovative model
of operations has been
published by
Harvard Business
School

Selected for
Yale University's
Global Social
Entrepreneurship/India
Program 2017-18.

A case study on RHCF was done by students of NUS Singapore



3 MILLION PATIENTS

TREATED WITH QUALITY CARE AND TREATMENT

Primary Healthcare for Low-income Communities of West Bengal through 9 rural centres Crisis Relief for
Affected Communities
of West Bengal with relief aid
and medical camps

We have received FICCI Healthcare Awards in 2016 and 2019

We have received
IIM Ahmedabad
and TATA Trust's
The Red Brick
Summit Social
Impact Awards
in 2017

Won 30+ other
National Awards,
Recognitions along
with features in
leading news
channels and papers

30,00,000+	Patients Treated, Since Inception, Through Our Primary Healthcare Centres
44,000+	Patients Treated at the Cyclone Amphan Medical Camps
43,000+	Families Affected By COVID And Amphan Provided with Food And Essentials Relief
15,000+	Poor And Mildly Affected COVID Patients Provided with Medicine Kits
10,000+	Patients Treated at the Cyclone Yaas Medical Camps
10,000+	Patients Treated at the Cyclone Bulbul Medical Camps
1600+	People Provided with 1st Dose of COVID-19 Vaccine
1300+	Families in Sundarbans Affected by Cyclone Yaas Provided with Food and Essentials Through Food For Work Programme
1100+	COVID Patients in Home Isolation Provided with Oxygen Concentrators During the 2 nd Wave of the Pandemic

HOLISTIC APPROACH AMPLIFIED IMPACT

CURATIVE

CARE WITH
WELL-EQUIPPED
HEALTHCARE
CENTRES ACROSS
WEST BENGAL

PREVENTIVE

CARE WITH
OUTREACH
PROGRAMME FOR
GENERAL
WELLNESS

The centres treat

35000+ patients

from densely populated regions and we focus on greater impact through maximized reach



Door-to-door screening for 40,000 people are conducted by trained women within 10-12km radius of each centre



ADVANTAGES OF RURAL BRANDING

Strong and
targeted brand
exposure in
expanding rural
market, with high
population density

Positioning of company as socially conscious and responsible for a positive brand recall

emotional
connection
score with the
consumer which
can build brand
loyalty

Combining
marketing efforts
with social
projects would aid
and impact the
rural areas

OPPORTUNITIESOF BRANDING WITH RHCF

PRIMARY CARE CENTRES

- High daily footfall of 1000+ patients (+family members accompanying them)
- Centres operate in large 1000-1500 sq.ft space with general, eye, dental and homeo depts. and pharmacies as well as a reception/waiting area
- Staff members would have uniforms
- Patients are given 1-week supply of medicines in carry bags.

OUTREACH PROGRAMME

- Our uniformed team visits each household and screens each individual member of the family
- The medical equipment and other necessities are carried in bag to each household
- A relatively substantial amount of time and engagement is involved for each family

Logo and product names on staff outfits, staff bags, medicine carry bags etc.

Products or logos displayed in centre premises and/or stated as sponsor of the programme

Discount coupons for the products for the communities

Any other method that ensures visibility and engagement with the rural masses

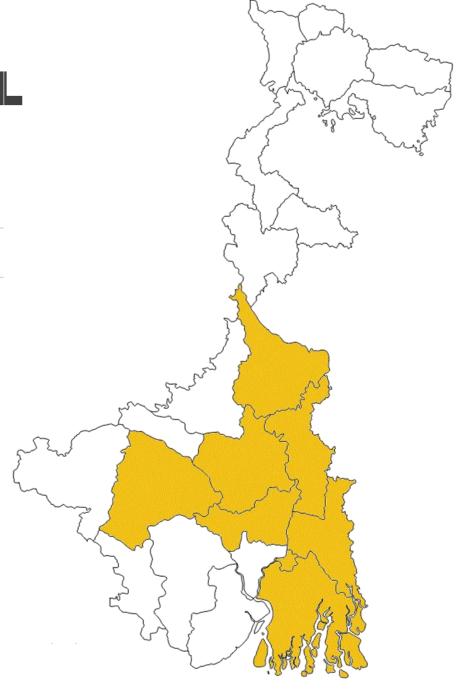




AREAS OF RURAL BENGAL WITH RHCF PRESENCE

7 Districts of W.B. with 10 Rural Primary Care Centres

DISTRICTS	CENTRES	AREAS COVERED	
Hooghly	Helan Jagatballavpur		
Nadia	Mayapur	400+ Villages 10+ Blocks	
North 24 Parganas	Manigram Swarupnagar		
Purba Bardhaman	Patuli Kusumgram		
South 24 Parganas	Jamtala		
Murshidabad	Pirtala		
Bankura	Rasulpur		



CURRENT REACH IN RURAL BENGAL

DIRECT BENEFICIARIES

75,000+

beneficiaries/ month

We treat over 35k patients each month through our 9 healthcare centres.

We screen over 10,000+ people through our outreach programme.

INDIRECT BENEFICIARIES

175,000+

people/ month

Immediate family members and friends of the patients benefit from recovery of patients or effective management of their diseases.

Our high footfall attracts rural vendors also often sell their goods in the vicinity of our centres.

REACH OF CARE

2,080,000+

people across 10 blocks of 7 districts

Each centre makes treatment accessible to 40+ villages, many of which are further away from the centres.

Our-door-to-door screenings are conducted in each household within 10-12km radius of each centre.

TRADITIONAL CHANNELS OF ADVERTISING & BRANDING

HIGH COST

LOW ENGAGEMENT & CONVERSION

TYPE	CHANNEL/ PLATFORM	REACH	COST	ENGAGEMENT & ROI
Top local newspapers	Anandabazar Patrika	Circulation: ~13 lacs Readership: ~58 lacs	One full page display ad	Low visibilityVery low engagementDifficult to measure actual reach
	Bartaman	Circulation: ~6.3 lacs Readership: ~10.3 lacs	Rs. 500,000 to 1,000,000	
ООН	Outdoor Hoardings	Varied, depending on location	1 hoarding for 1 month (average) Rs.75,000/-	High visibilityLow engagementFewer ones in rural areasDifficult to measure actual reach

BRANDING WITH RHCF

We will charge

RS. 10/- PER BENEFICIARY

treated or screened

MEASURABLE REACH AND ROI We work directly with our fairly large number of beneficiaries, making measurement of actual visibility easy.

HIGH VISIBILITY

For patients waiting at the centre and for families who are being screened, the advertised product would have a substantial time for visibility

BETTER ENGAGEMENT Combined with high visibility and a sense of trust, we have built within the communities, there is a higher chance of engagement

SOCIAL IMPACT

Promotion and advertisement of company products will have an actual social outcome and impact with measurable benefit for the under-served rural people





RURAL HEALTH CARE FOUNDATION

33 Alexandra Court. 63 Chowringhee Road.

Kolkata - 700020, West Bengal, India
+91 33 40082981 | +91 70444 92215

rhcf2009@gmail.com | communication@rhcf.in
 www.ruralhealthcarefoundation.com
 www.facebook.com/ruralhealthcarefoundation

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