



Contributing to Strengthened Primary Healthcare for Rural Communities

Quality primary healthcare is intertwined with overall outcomes in education, livelihoods, and other socio-economic aspects of life. Strengthening access in rural regions enables communities to receive essential care when they need it.



Key Levers of Primary Healthcare in Rural Areas

Access

- Centres located within or near villages ensure that communities can seek timely care without facing travel barriers.

Availability

- Availability of qualified medical professionals enables accurate diagnosis, effective treatment, and trusted patient centric care.
- Consistent access to essential medicines ensures continuity of treatment for all patients.

Affordability

- Low-cost consultations, diagnostics, and medicines make healthcare financially accessible for rural households.

Rural Healthcare Centre: A Patient-Centric Solution

- Rural Healthcare Foundation (RHCF), established in 2009, has a proven primary healthcare model designed for low-resource rural settings, operating **17 affordable Rural Health Centres** in West Bengal.
- RHCF currently reaches approximately **6 lakh patients annually** across **9 districts** of West Bengal.

- Navodyam has been partner with RHCF since 2016. Currently Rural Healthcare Centre model has been implemented in 10 centres across 8 districts, reaching around **5 lakh patients annually**.

ABOUT RHCF

RHCF is a not-for-profit organization based in West Bengal, founded in 2009, committed to providing affordable and accessible primary healthcare to underserved rural populations.

Through its network of 17 affordable primary healthcare centres, RHCF bridges critical gaps in facilities, ensuring that quality care reaches those who need it the most.

ABOUT NAVODYAM

Navodyam is an initiative of the SDMC Trust, a family foundation established in 2009 by the promoters of the SAR Group. The group owns popular brands like Livguard, Livfast, Livpure, and Lectrix.

Over the past 15 years, we have collaborated with 26 NGO partners, impacting the lives of over 2.7 million individuals, across the country. We have partnered with NGOs to implement programs on primary education, primary health, livelihoods, and safe drinking water.

Rural Healthcare Model of RHCF

1. Centre Based Model

Establishment of Centres

Centres are strategically established in remote rural areas after careful analysis of disease patterns, population density, existing healthcare facilities, and transportation access—ensuring operation 6 days a week.

Availability of Services

Patient contributing ₹200 to avail services including medical consultation by General physician (with one-week medicines), dental care, eye care, on-site basic tests, and subsidised spectacles

Qualified Medical Professionals

Each centre has qualified General Physicians, Dentists, Optometrists and patient support team.



Continuity of Care for Patients-

With majority of patients being treated for non-communicable diseases and requiring continuum support, RHCFs provide regular follow-up through healthcare professionals and tele-callers.



Referral Services-

Patients requiring secondary or tertiary care specially for eye care are referred to charitable hospitals.

2. Community Based Model

Community Outreach & Early Detection- RHAs conduct regular village screenings (BP, blood sugar, vision), enabling early identification of communicable and non-communicable diseases and reducing health risks.



- Phase 1 (Years 1-2): Establishment of rural centres with donor support (CSR, individual, and philanthropic stakeholders). Regular patient visits including chronic-care follow-ups, create a steady revenue stream, reducing the operational deficit substantially.
- Phase 2 (Year 3 onwards): Over time, centres will gradually transition into a deficit-free (Patient contribution- Expenses), self-sustaining unit that can continue delivering quality primary healthcare without long-term external funding.

Currently, 5 RHCF centres are already close to sustainability, operating with very low deficits.

Navodyam's Role

Navodyam continues to support selected centres of RHCF.

It shall assist other co-funders of RHCFs in selection, planning, monitoring, MIS, and management insights, with no additional funding.

What can you do

- Support RHCF for a minimum **two-three year project** (The per-centre budget includes a one-time CapEx of ₹17 lakhs and an annual OpEx of ₹18 lakhs).
- Expected Impact: **~40,000–50,000 rural patients** in need are provided access to quality primary healthcare in West Bengal per centre.
- RHCF plans to establish **5-6 new Rural Health Centres** every year.

Your philanthropic investment will help strengthen community health and improve the lives of thousands of rural families.

To know more: <https://navodyam.org/primary-healthcare/>
<https://www.sar-group.com/livpurefoundation.org/>

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