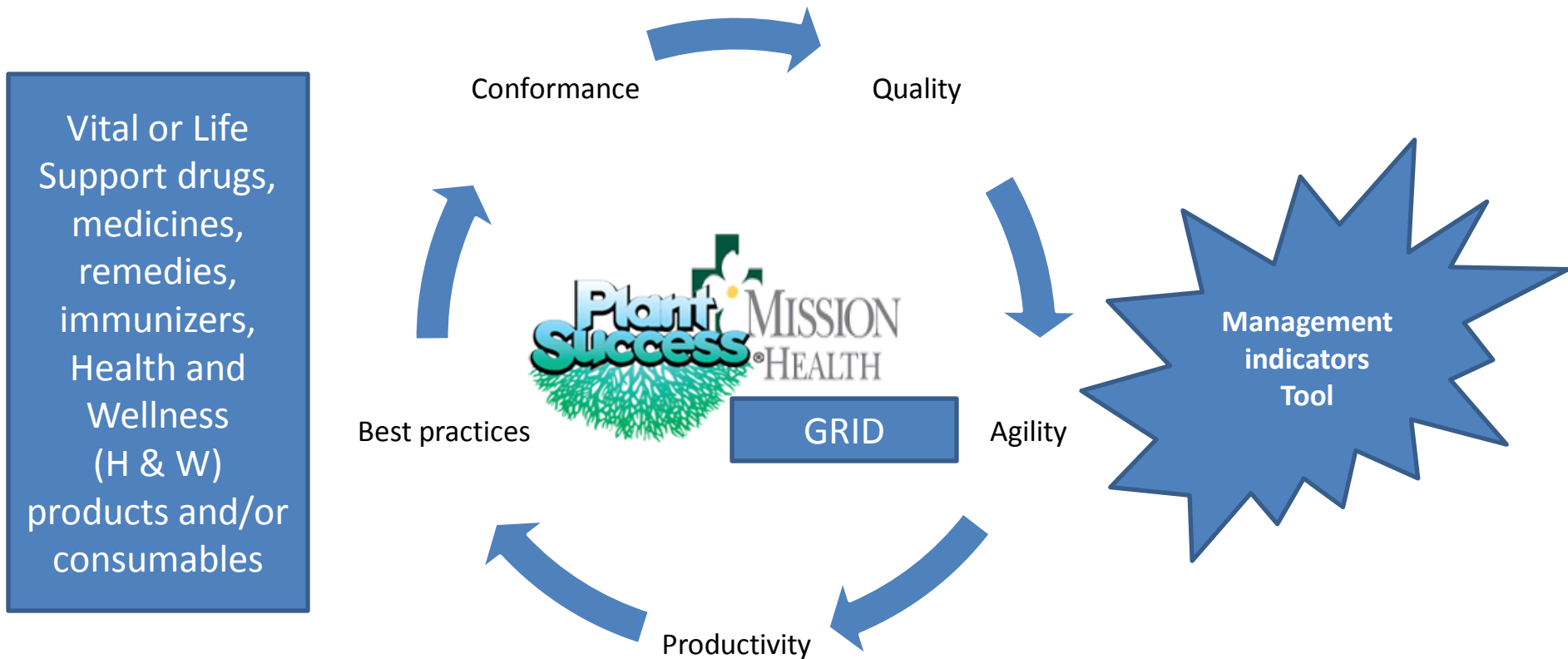


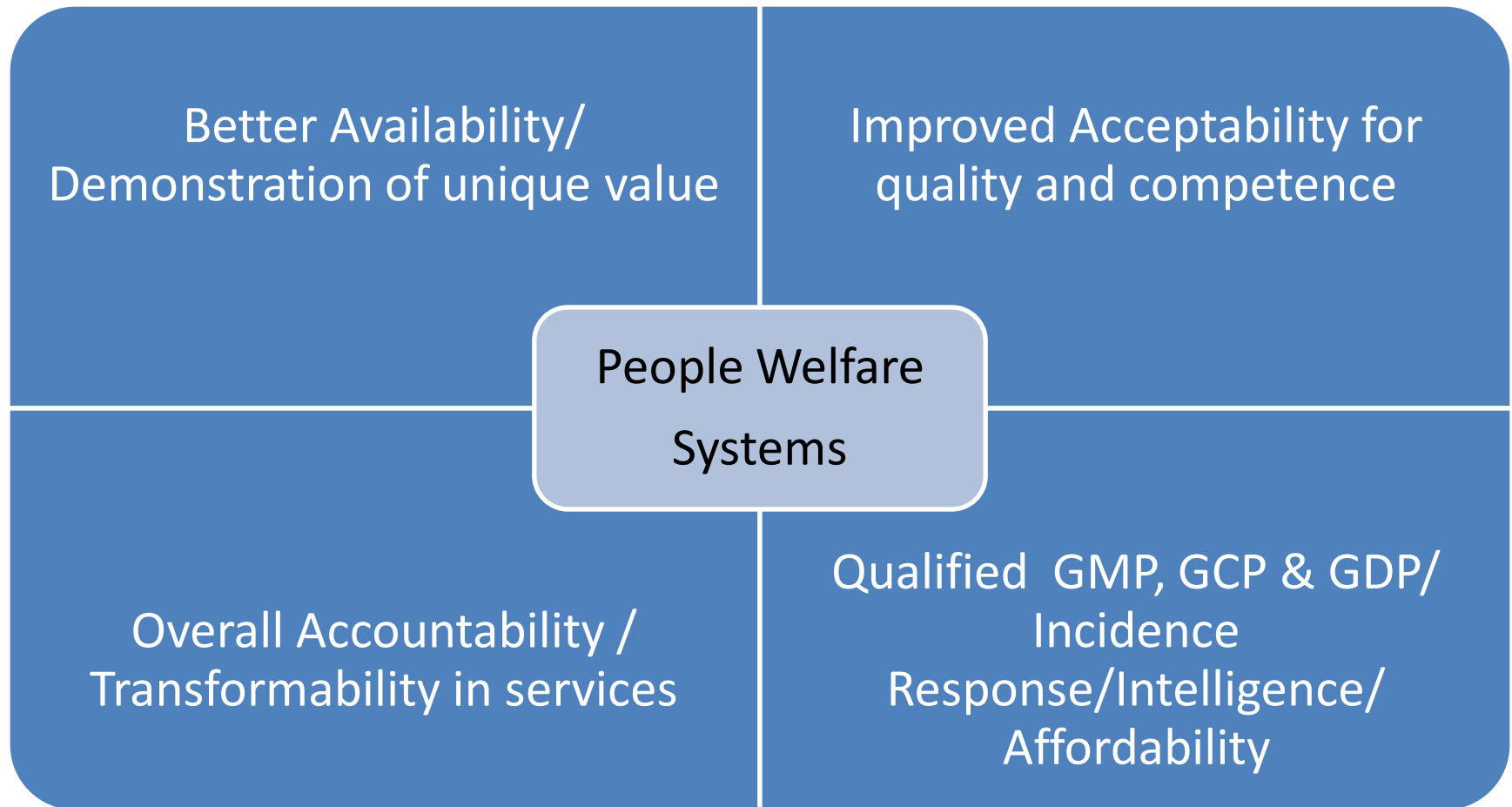
# People Welfare Systems (PWS)



**Analysis to steer ahead, taking on joint life restoration**

K.S.Venkatram , 2016-19-20

# Preview: A good Health and Wellness model demonstrates



# Preview: People Welfare Systems

- **Scope**
- People Welfare Systems (PWS) will help today's diversified health & wellness networks improve their modelling, and contribute for HGI transformation, disease mitigation and life saving in a country-wide scenario that could become agile for incidences of diseases, illnesses, disasters or emergencies.

In an increasingly agile and changing world, People Welfare Systems can help promote HGI transformation or even act like remedial **bridges** that help people avail of medical and life support services like supply of drugs, medicines, remedies, immunizers, implants, wear-on(s), healthcare accessories, nutritional products, etc with PWS intelligence in preventing gaps in critical path management, strategy and error reduction.

People Welfare Systems will help backup orientation for dealing with need, proportion, remedial thinking, and sometimes even help discuss response for incidence, illness, disaster or emergency.

HGI: Health-Growth-Immunity

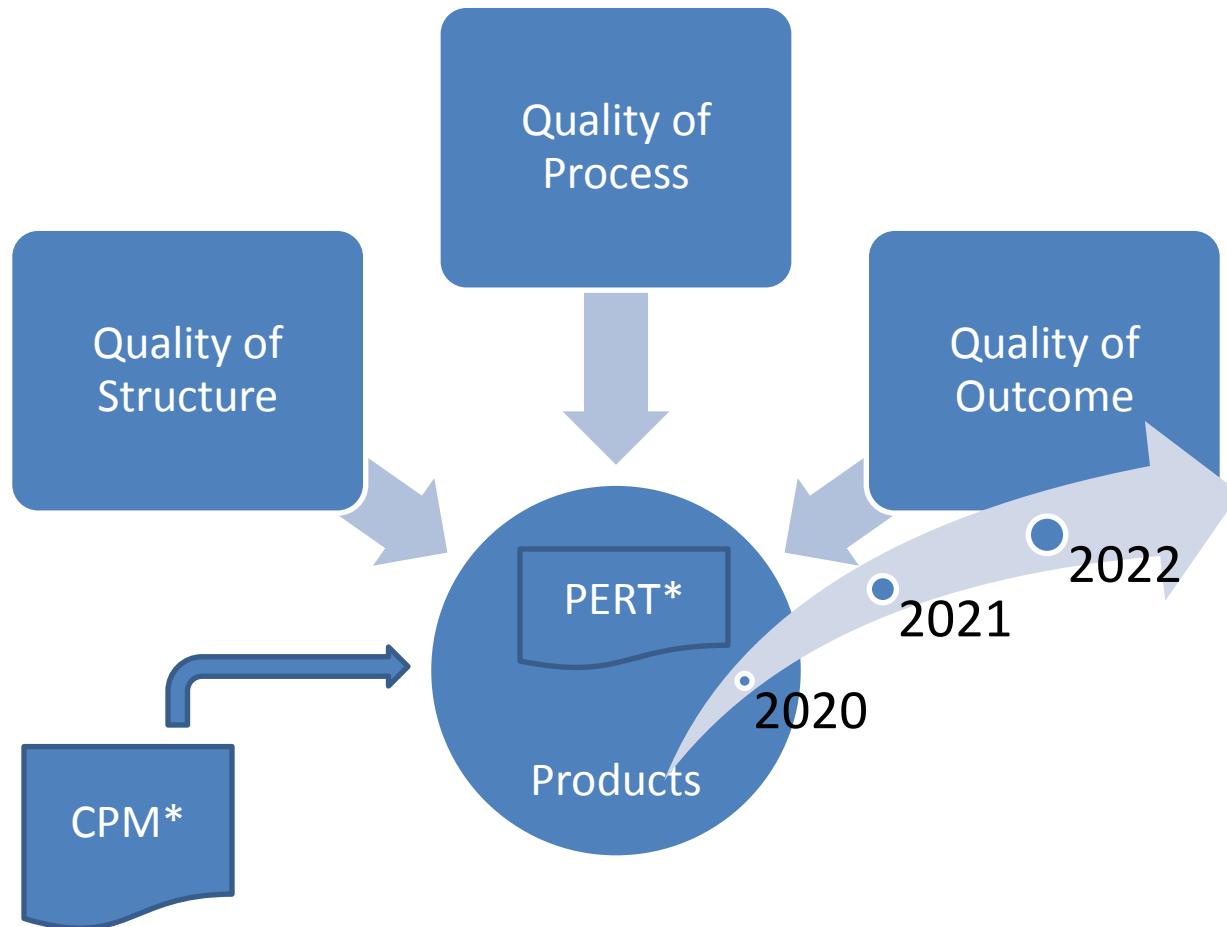
# Preview: People Welfare Systems

- **Scope**
- People Welfare Systems (PWS) transform a provider, supplier and/or distribution network and its links into an ASSET that not only demonstrates availability, ethical practices and effectiveness in meeting demand, but also helps assess vital issues affecting consumers, and manage other **situational needs like low HGI quotients, threats, emergencies, disaster mitigation or disaster management** while helping more proportionate healthcare, saving lives or reducing chances of uncontrollable incidences.

People Welfare Systems improve synergy by enforcing that a provider, supplier and/or distribution network and its link's need to be intelligently self-assessed for the following 3 macro-processes:

- a. Remedial People Welfare Management (Work in progress)
- b. Networked Supply Chain Management (Work in progress)
- c. Provider/Supplier/Distributor Relationship Management (Work in progress)

# People or Need Dimensioning and Proportion



# People or Need Dimensioning and Proportion

**Scope:** The demand/supply analysis technique involves the evaluation of people or need dimensions and proportion for vital or life support drugs, medicines, remedies, immunizers, Health and Wellness (H & W) products and/or consumables.

- It uses different parameters to identify **proportion of demand** that is
  - A. Main purpose or interest                      B. Bio-cluster for the consumer
  - C. Category of consumer
  - D. Personal preferences for products and/or consumables
  - E. Need for products and/or consumables
  - F. Connected usefulness of products and/or consumables
  - G. Consolidated network rating of products and/or consumables
- It uses different parameters to understand **dimension for supply** that is
  - 1. Rating for Regular consumption
  - 2. Rating for Risk management for improved health, growth and/or immunity
  - 3. Rating for Incidence management in incidence/infection/disease control
  - 4. Rating for Critical path management in treatment/due care/recovery
  - 5. Rating for Feedback when used for treatment/due care/recovery
  - 6. Rating for Specialty/Referrals for treatment/due care/recovery

# People or Need Dimensioning and Proportion

- **A. Person's name:** **PWS Id:**
- **B. Profile available:** Yes/No/Not applicable
- **C. Summary of profile:**
  - ☐ **Registration** complete or upto-date ☐ **Details verified or updated**
  - ☐ **Diagnostics** complete or upto-date (for e.g. COVID 19 symptoms)
  - ☐ **Need Analysis** complete or upto-date
  - ☐ **R\* Analysis** complete or upto-date (**PWS demand analysis as to whether demand is recognizable, or reflective, or reportable or responsive**)
  - ☐ **How best to serve consumer Analysis** complete or upto-date
- **Main purpose or interest:**
  - ☐ Regular consumption
  - ☐ Risk management for improved health, growth and/or immunity
  - ☐ Incidence management in incidence/infection/disease control
  - ☐ Critical path management in treatment/due care/recovery
  - ☐ Good Feedback when used for treatment/due care/recovery
  - ☐ Specialty/Referrals for treatment/due care/recovery

# People or Need Dimensioning and Proportion

- **(Health influencers) Description of people associated with the person**
- **(Health influencers) Description of business elements associated with the person**
- **(Health influencers) Description of network associated with the person**
  - [ ] Unicellular (individualistic)
  - [ ] Associated (Accentuates consumerism as part of a group/family)
  - [ ] Referral accelerator (Accentuates or accelerates need in referrals)
  - [ ] Strategic accelerator (Accentuates or accelerates need for People Welfare Systems)
  - [ ] Operational accelerator (Accentuates or accelerates need in cluster/location/city/state/country)



# People or Need Dimensioning and Proportion

- **D. Bio-cluster for this person's profile:**
- Select from
  - [ ] Couples planning for a baby
  - [ ] Mothers to be
  - [ ] Babies and children in their early years (0-12 years)
  - [ ] Teenagers
  - [ ] Young adults
  - [ ] Not so young adults
  - [ ] Senior citizens
  - [ ] Sick, afflicted and debilitated patients
  - [ ] Uncategorized consumers of vital or life support drugs, medicines, remedies, immunizers, health & wellness products

# People or Need Dimensioning and Proportion

- **E. Category of person:**
- Select from
  - ☐ Global outlook consumer
  - ☐ National level consumer
  - ☐ Urban consumer
  - ☐ Rural consumer
  - ☐ Healthcare provider
  - ☐ Corporate network
  - ☐ Social network
  - ☐ Manufacturer
  - ☐ Service provider
  - ☐ Supplier
  - ☐ Reseller
  - ☐ Third party vendor

# People or Need Dimensioning and Proportion

- **F. Category of lifestyle (before and now):**
- Select from
- ☐ Functional lifestyles (regular consumers)
- ☐ **Remedial lifestyles (consumers afflicted or recovering from diseases or outbreaks or illnesses)**
- ☐ Affirmative lifestyles (consumers who are interested in HGI/RDA/RNI policies in the path to a healthier life and/or in the foods being consumed)
- ☐ Not applicable
- HGI: stands for Health, Growth and Immunity

# PERT\*

- **G. Classification of Personal preferences for drug, medicine, remedy, immunizer, product and/or consumable:**
- Select from
  - ☐ Should be **Health-Growth-Immunity calendar specific (for e.g. 2020)**
  - ☐ Should be anytime consumable or utilizable
  - ☐ Should be best consumed in the MORNING
  - ☐ Should be best consumed in the AFTERNOON
  - ☐ Should be best consumed in the EVENING
  - ☐ Should be best consumed at NIGHT
  - ☐ Should be available ALL THROUGHOUT THE YEAR
  - ☐ Should be available SEASONALLY
  - ☐ Should be beneficial for HEALTH or WELLNESS or FITNESS
  - ☐ Should be **useful for contingency planning** (Product and/or consumable should be useful in disaster management, or emergencies, or endemics or epidemics, or to manage diseases caused by vectors) **(for e,g, 2020)**

# People or Need Dimensioning and Proportion

- **H. Need for drug, medicine, remedy, immunizer, product(s) and/or consumables:**
- Select from
  - [ ] For **Public Health Services**
  - [ ] For **Relief & Rehabilitation** (in Disaster management)
  - [ ] For **Self-managed HGI** (For H:Health G:Growth I:Immunity)
  - [ ] For **Emergency / Unforeseen proportion of need**
  - [ ] For **P2PC** (To Plan / Prevent and Control disease/infection/stock-outs/delays)
  - [ ] For **C-V-O-DC** (For Chartered Incidence Response Policy specific, Variance specific and Overhead specific assistance from the distribution/ supply chain network)

# People or Need Dimensioning and Proportion

- **I. Connected involvement and influence on need proportion, where the enabler for the PWS may be from a person or a business entity:**
  - Select from
  - ☐ **High involvement (in emergency, self-driven, shows ownership and motivated)**
  - ☐ Low involvement (partly self-driven, needs induction & training)
  - ☐ Easy to assess buying behavior (is recognizable, or reflective, or reportable or responsive)
  - ☐ **Complex buying behavior (needs immediate, needs flexi-mode of buying or ease of purchase)**
  - ☐ Variety seeking buying behavior (needs benefits differentiation details)
  - ☐ Habitual buying behavior for HGI (Health Growth and Immunity)
  - ☐ **Conflict causing buying behavior (not manageable for proportionateness, pre-disposed to buying or referring to other products and/or consumables)**

# People or Need Dimensioning and Proportion

- **J. Connected usefulness of drugs, medicines, remedies, immunizers, products and/or consumables, where the enabler for PWS may be from a person or a business entity:**
- Select from
- [ ] Environmental, Social and National health goals
- [ ] Economic relevance
- [ ] **Social interests (for e.g. 2020)**
- [ ] **Political demands for specific health indicators (for e.g. 2020)**
- [ ] Rooted interests (business policy)
- [ ] **Unified ownership for a HGI (Health Growth and Immunity) makeup (for e.g. 2020)**

# People or Need Dimensioning and Proportion

- **K. Common expectations of drugs, medicines, remedies, immunizers, product(s) and/or consumable(s) ratings:**
  - Select from
  - ☐ Excellent (Has a rank 1)
  - ☐ Good (Has a rank of 2)
  - ☐ Average (Has a rank of 3)
  - ☐ Poor (Has a rank of 4)
  - ☐ Has a risk factor (Has a rank of 5)
  - ☐ Not rated for some connections (No rank)
- **L. Consolidated network rating for the drugs, medicines, remedies, immunizers, product(s) and/or consumable(s):**
  - Select from
  - ☐ Excellent (Has a rank 1)
  - ☐ Good (Has a rank 2)
  - ☐ Average (Has a rank 3)
  - ☐ Poor (Has a rank 4)
  - ☐ Has a risk factor (Has a rank 5)



# People or Need Dimensioning and Proportion

- Relating further
- When the Rank is a Common expectation, it is a reference as to what may accentuate buying, but when the Rank is a Consolidated network rating, it is an influencer, it decides the consolidated demand for a drug, medicine, remedy, immunizer, product and/or consumable.
- Dimensioning the impact of consumer presence, exit or negative behavior
- Scenario 1: If a consumer with right consolidated ranking for drugs, medicines, remedies, immunizers, products and/or consumables and connected involvement brings more proportionateness into the network, then the departure of the consumer from the **network can be automatically adjusted for or adapted to**, as consolidated network ratings are sufficient to ensure there is no internal conflict for existing members or consumers, where internal conflict needs to be recognized and addressed by the Centre heads as it may otherwise affect the network.

# People or Need Dimensioning and Proportion

- Scenario 2: If a consumer with common expected ranking for drugs, medicines, remedies, immunizers, products and/or consumables and connected involvement brings demand into the network, then the departure of the consumer from the network will introduce a **product ripple factor** that needs to be assessed and addressed by the Centre heads as it will affect the network due to non-conformity in ratings or due to lack of dimension assuring ratings.
- Scenario 3: If a consumer with a specific network leaves the network will introduce a **network ripple factor** that needs to be assessed and addressed by the Centre heads as it will affect the network if the network type is one of the following:
  - [ ] Associated (Accentuates consumerism as part of a group/family)
  - [ ] Referral accelerator (Accentuates or accelerates need in referrals)
  - [ ] Strategic accelerator (Accentuates or accelerates strategy for People Welfare Systems)
  - [ ] Operational accelerator (Accentuates or accelerates need in cluster/location/city/state/country)

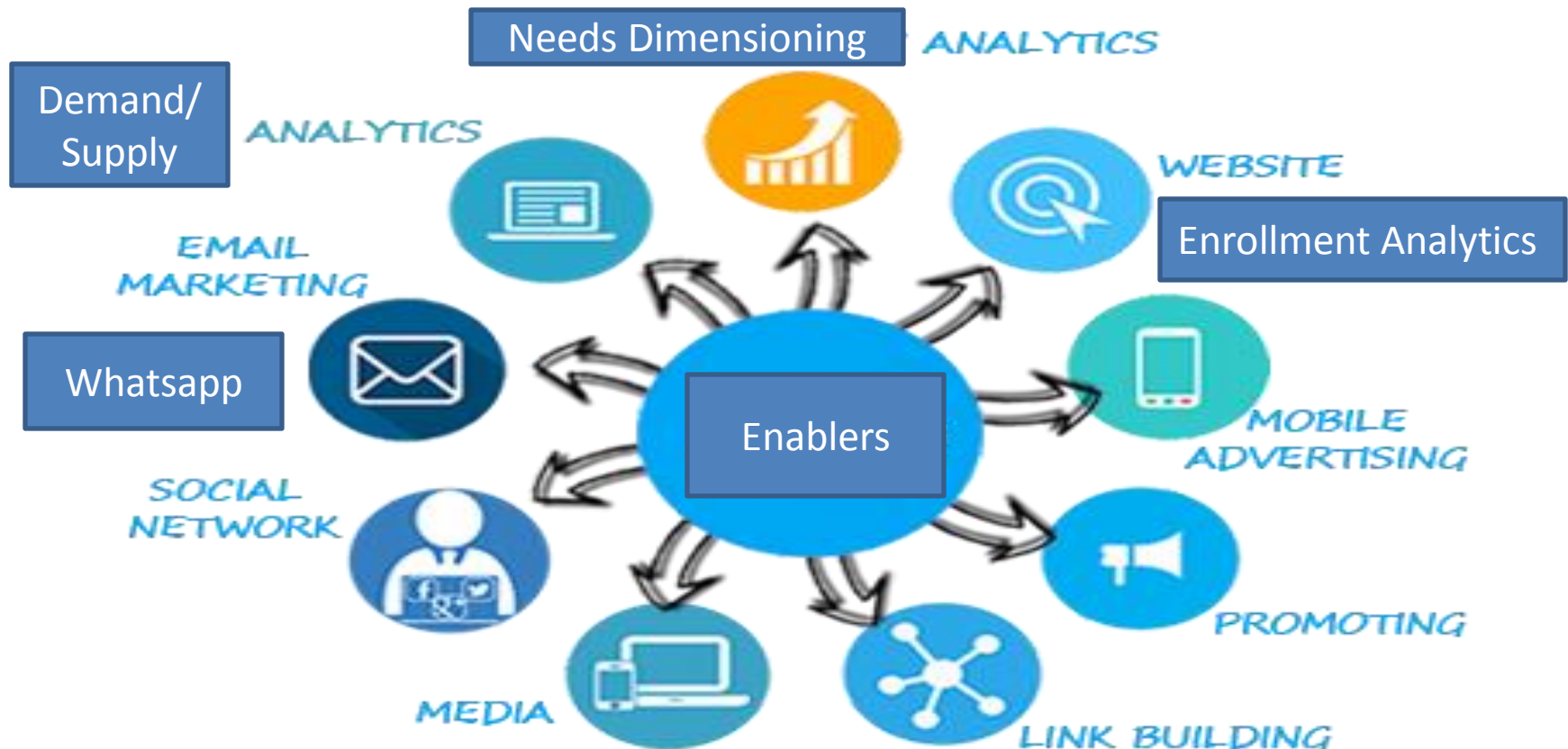
# People or Need Dimensioning and Proportion

- To understand effect on need dimensioning and proportionate demand/supply. one needs to relate to the following:
- 1. People Lifecycle Costs  
(Income Vs Expense Analysis)
- 2. People Lifecycle Patterns  
(Expected or People Welfare)
- 3. **People Lifecycle Impact**  
(Emergency or Normal Needs)
- 4. Continual Demand Improvement  
(Need Lifecycle Analysis)
- It is known that we do not have
- need dimensioning for drugs,
- products and/or services but it is
- critical to understand relationships



# People or Need Dimensioning and Proportion

- Connected enablers that help Needs dimensioning and proportionate demand/supply analytics in emergency (or normal) scenarios



# People or Need Dimensioning and Proportion

- Ranking and ensuing demand lifecycle, where healthy and safe living is emphasized



# People or Need Dimensioning and Proportion

- **Future speak**
- The Rank is only meant to help the Health & Wellness products, consumables or drugs, medicines, remedies and immunizers industry internalize efforts for a Nth Connection Facade, which accelerates endeavors to transform product making and delivery into a unified ASSET.
- The future of the People Welfare element is in developing push backs for product performance, profiling details of consumers that help need analytics, profiling details from supply endpoints (Centres) to links in the People Welfare Systems network and thereon back to the practitioner's team, R & D department or shop floor.
- The People Welfare element will subsequently help overall accessibility, availability, accountability and qualified performance of vital or life support drugs, medicines, remedies, immunizers and health & wellness products or consumables.
- People Welfare Systems and their networks can enable need dimensioning and proportion to all aspects of prioritized necessity like food/drink provisions and identified disaster management connected supplies, goods and commodities.

# People or Need Dimensioning and Proportion

- Responsiveness, and the need to be sustainable will demand that a healthcare organization plan for and successfully implement a range of quality assurance (connected) programs for a Nth Connection Facade like the following:
  1. (Normal or Emergency) Statutory compliance and PWS convergence program
  2. (Normal or Emergency) People Welfare or Patient Safety Management program
  3. (Normal or Emergency) Infection control program
  4. (Normal or Emergency) Bio-medical waste management program
  5. (Normal or Emergency) Facility and Equipment management program
  6. (Normal or Emergency) Awareness, Blind Spot reduction, Training program
  7. (Normal or Emergency) Patients Information and Education program
  8. (Normal or Emergency) Rights and responsibilities of patients program
  9. (Normal or Emergency) Disaster management program
  10. (Normal or Emergency) Sustaining performance and quality levels program
  11. Broadening Reach program to ensure the organization improves its appropriate Nth Connection market share (i.e. Where proportionate uniqueness, distinctiveness, credibility & expertise creates brand loyalty or influences referrals)

# People or Need Dimensioning and Proportion

A message that matters - \*Whatever offered to God or society with a true belief can be thought of as an activity free of ingratitude and is still generative enough for the stream of life, where we can involve others through a sense of understanding and doership”.