BeWell

Healthcare solutions from all the best doctors around the world

Rekha Leelaraman
Nivedita Thapa
Srihari Shekhar
Bhawana Mohta

Table of Contents

Introduction

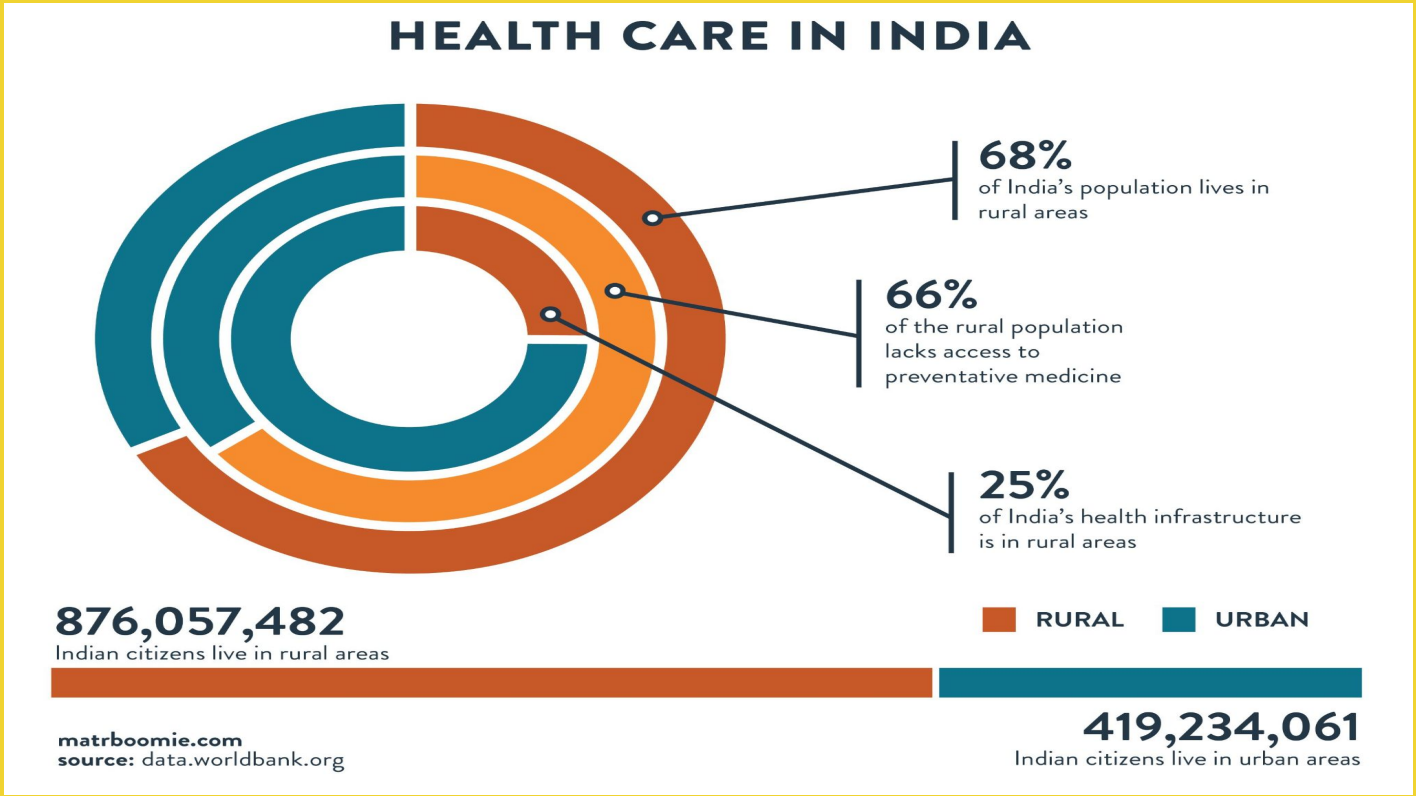
The public healthcare facilities are understaffed and under-equipped and the majority of these resources are focused on providing care in urban areas. Due to this, the rural population is subjected to healthcare that is unaffordable and inaccessible. Travelling long distances in order to get basic medical facilities is infeasible and just adds to the expenses they incur. Around 40% of the population either borrow money or sell assets to pay for hospitalization, and 25% fall below the poverty line as a result of medical expenses each year, according to National Accounts Statistics.(1)

Understaffed healthcare facilities: The number of healthcare facilities in rural areas is inadequate and even in those few hospitals the shortage of skilled healthcare personnels handicaps the whole system and those requiring care are unable to obtain it. While the number of healthcare facilities across India has increased substantially, as we indicated, the count of medical personnel has not kept pace and rural facilities have the largest gap between the supply and demand of basic health services, as measured by vacancies.(4)

Inaccessible health care for uncommon health problems: The initial stage of diagnosis cannot be done for patients suffering from rare diseases in rural areas because of lack of medical supplies and skilled healthcare workers. They need to travel long distances for such cases which proves the system's inadequacy.

Inefficient health care: Testing of new medicines are carried out on people from rural areas without their consent, taking advantage of the illiteracy that is prevailing in these areas. Such testing exploits the rural population hence they should be educated on these topics ensuring that these instances are not repeated.

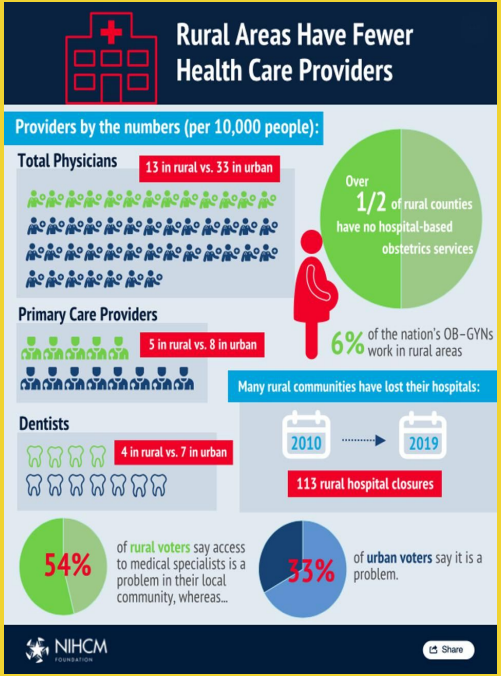
Rural Vs Urban



578,197,938

People in rural areas that lack access to adequate healthcare

Lack of Providers



Acts as a liaison between people who live in village and don't have medical access and hospitals/provider organizations.

Inaccessible health care for uncommon health problems

Suitable healthcare options for Uncommon health issues

Allow the patients to connect to the doctors virtually

Lack of Hospital Facility and healthcare services

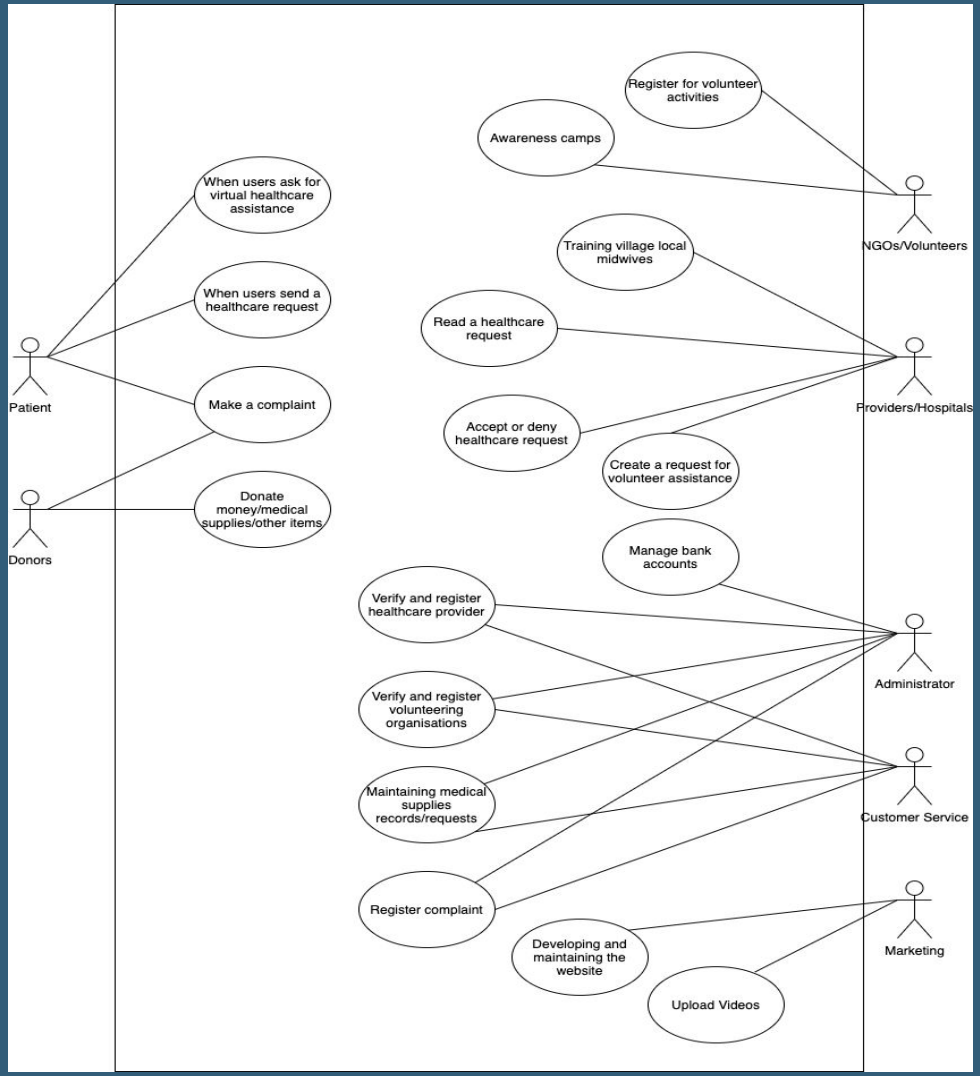
Using the funds to provide medical supplies and arrange adequate hospital facilities

Our Stakeholders

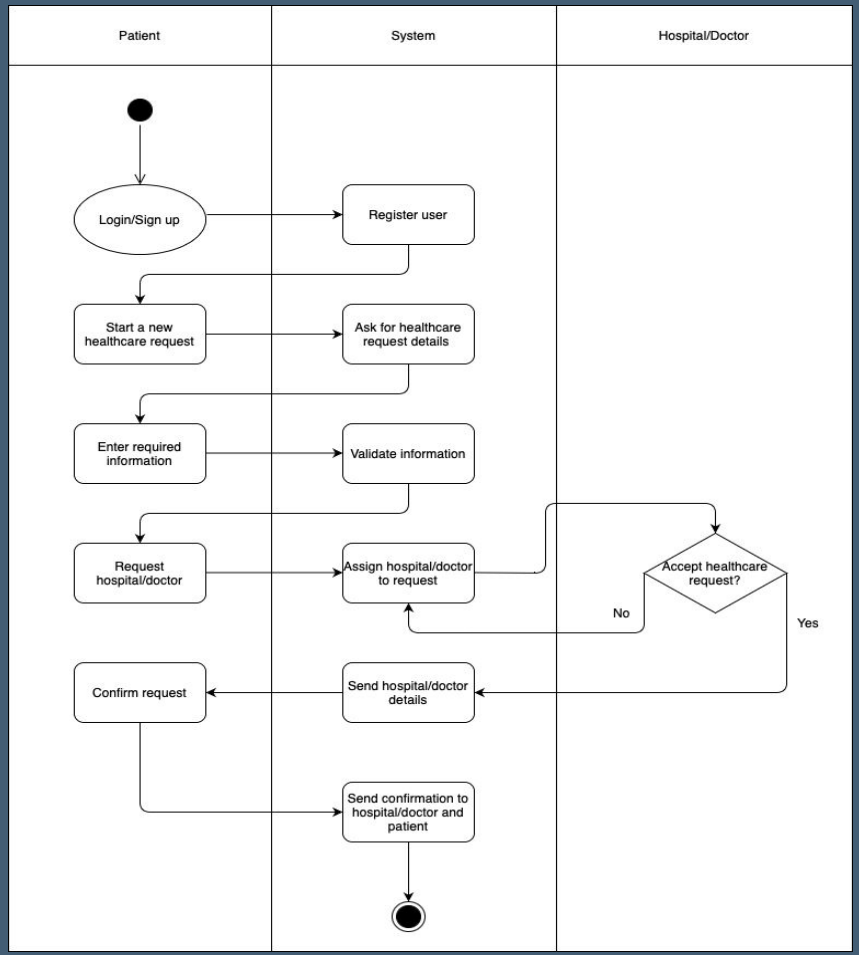
Interviews

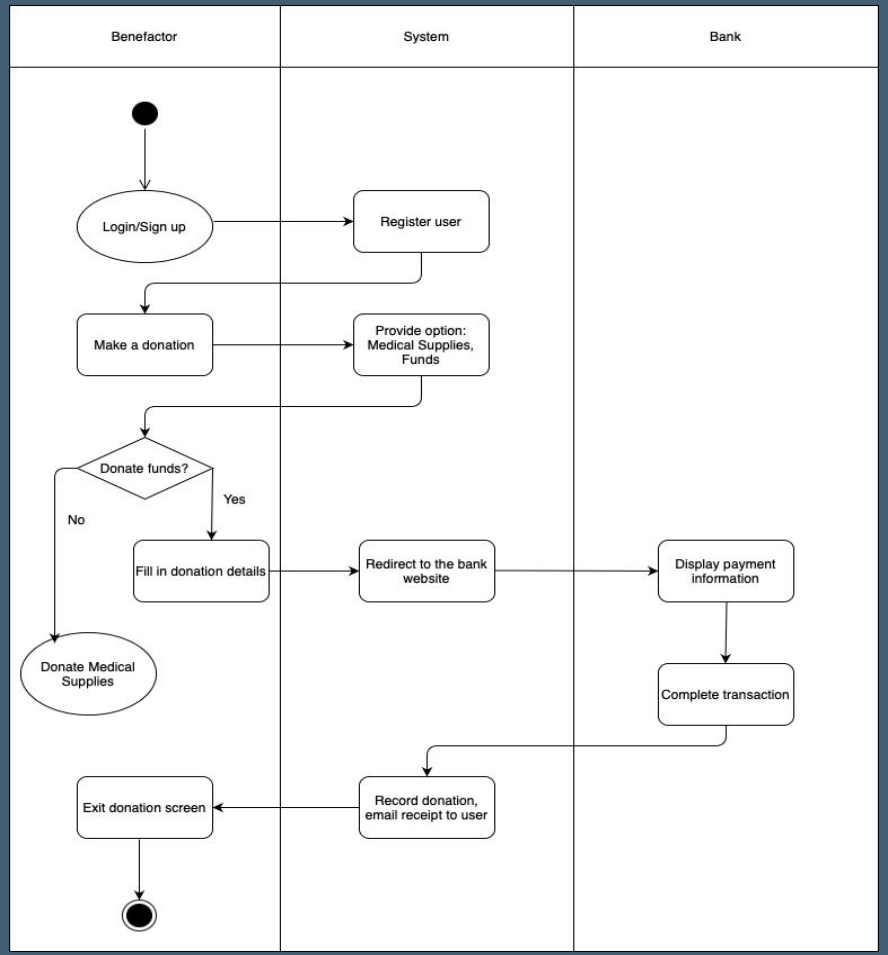
- **Providers/Doctors**
- **Hospitals**
- **People in rural areas**
- **Community workers**
- **NGO orgs**

Use Case Diagram

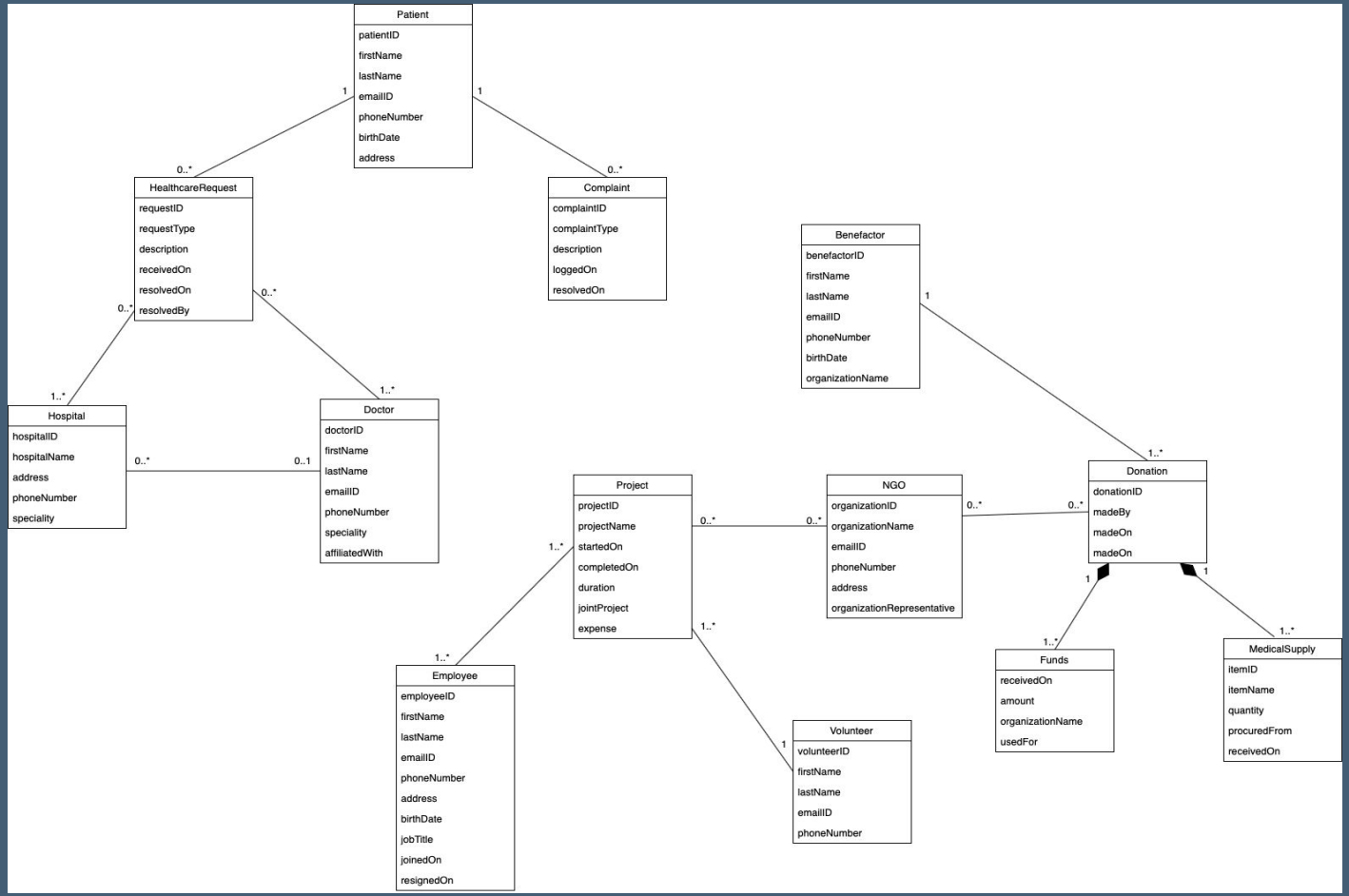


Activity Diagrams

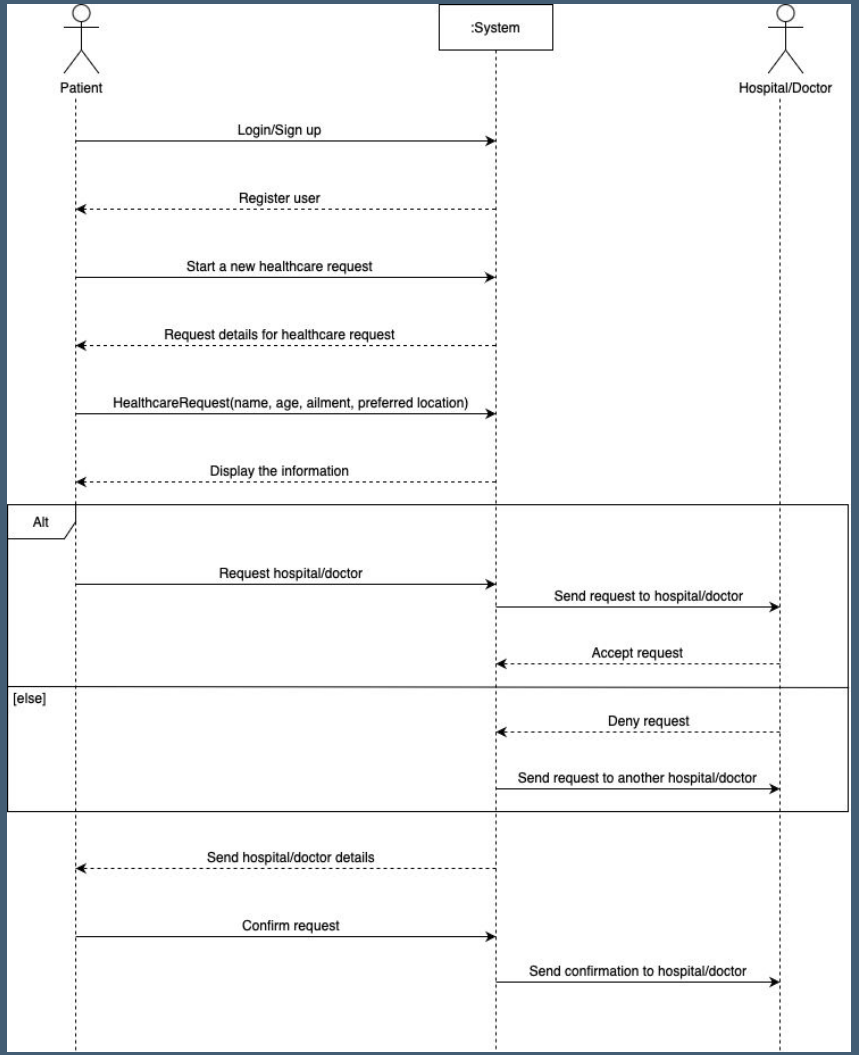




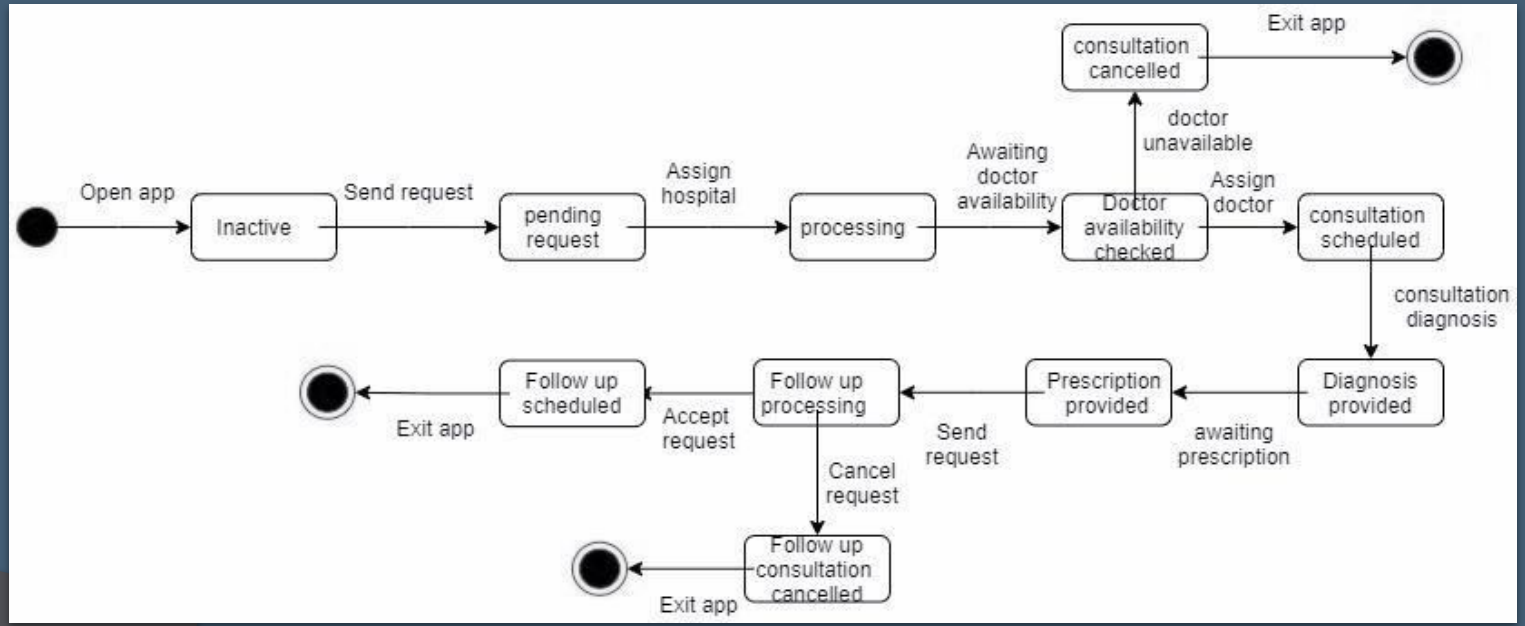
Class Diagram



System Sequence Diagram



State Machine Diagram



Cost Benefit Analysis

1. **Payback period = 3 years**
2. **IRR** = about 61%,
   Annual IRR = 61%/5 years = 12.2%
3. **NPV** > 0, feasible project
4. **Profitability index** > 1 , profitable

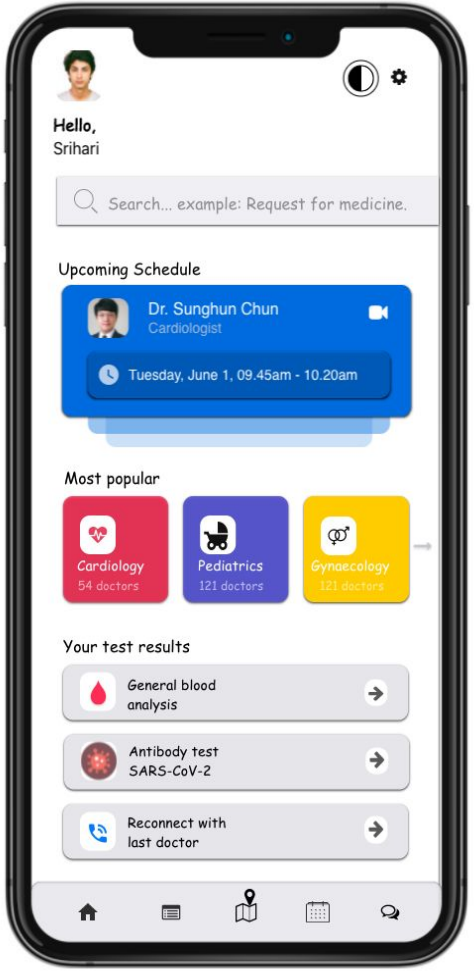
Year	0	1	2	3	4	5
Cost						
Analysis, design, implementation	$1,200,000					
Operation and maintenance	-	$(240,000)	$(240,000)	$(240,000)	$(240,000)	$(240,000)
Total Costs	**$1,200,000**	**$(240,000)**	**$(240,000)**	**$(240,000)**	**$(240,000)**	**$(240,000)**
Discount Factor(15%)	1.00	0.87	0.76	0.66	0.57	0.50
Present Value of Costs	$1,200,000	$208,800	$182,400	$158,400	$136,800	$120,000
Cumulative PV of Costs	$1,200,000	$1,408,800	$1,591,200	$1,749,600	$1,886,400	$2,006,400
Benefit						
Tangible Benefits from system	-	$220,000	$510,000	$610,000	$610,000	$610,000
Intangible Benefits from new systems	-	$200,000	$540,000	$690,000	$690,000	$690,000
Total Benefits	**-**	**$220,000**	**$1,050,000**	**$1,300,000**	**$1,300,000**	**$1,300,000**
Discount Factor(15%)	1.00	0.87	0.76	0.66	0.57	0.50
Present Value of Costs	-	$191,400	$798,000	$858,000	$741,000	$650,000
Cumulative PV of Costs	-	$191,400	$989,400	$1,847,400	$2,588,400	$3,238,400
Cumulative PV of Benefits+Cost	**-$1,200,000**	**-$1,217,400**	**-$601,800**	**$97,800**	**$702,000**	**$1,232,000**

User Interface

Landing Page

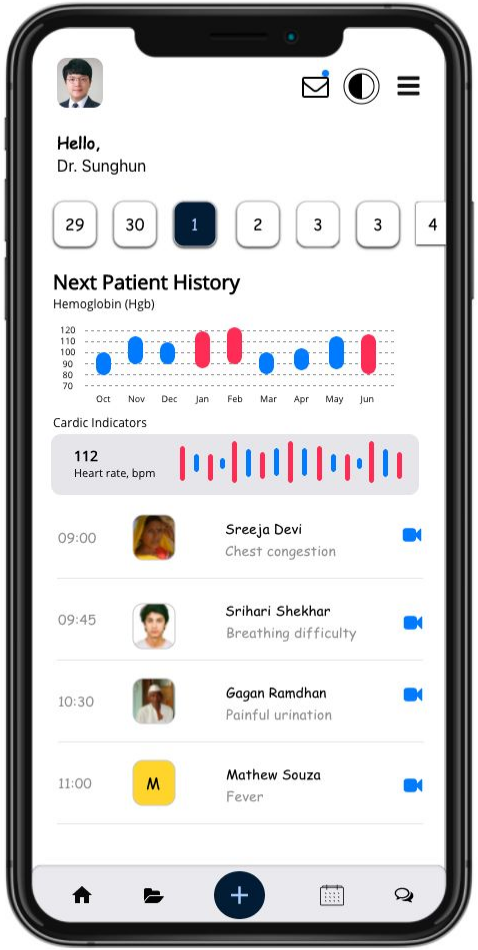
Login Page

Patient's Page

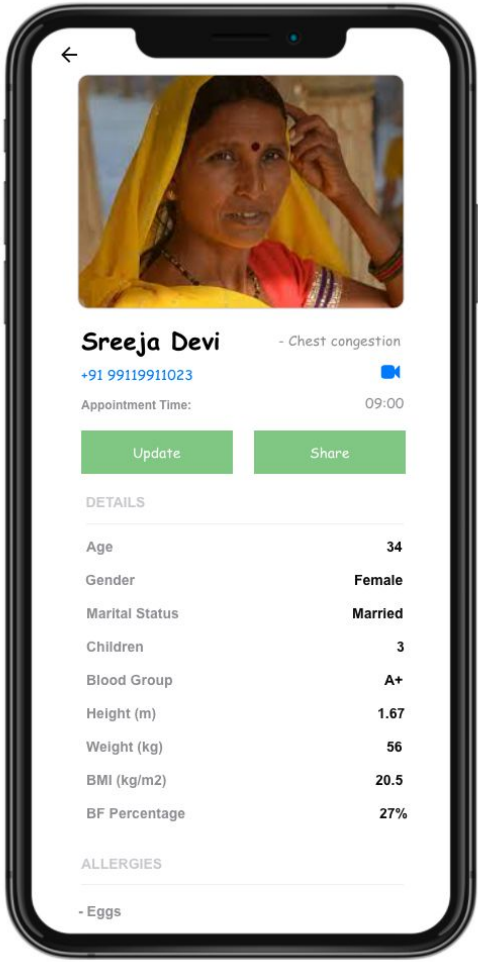


User Interface

Doctor's Page



Patient's Detail Page



Admin Page

Prototype Demo

Our goal

Bangladesh

We plan to expand our services to the rural areas in Bangladesh

India

Initially we plan to provide healthcare services pan India focusing on rural areas

Africa

Future plans for expansion will also include reaching out to those in need in Africa

Our Team

Rekha Leelaraman

She is an aspiring graduate who want to help people and changing lives by working in the healthcare industry

Nivedita Thapa

She is a driven engineer seeking a career that allows her to evolve.

Bhawana Mohta

She is an aspiring data analyst.seeking a career in the very same field.

Srihari Shekhar

He is an engineer with a passion to build software to solve real-world challenges.

Any Questions?