

Indian Oil Corporation Limited



IndianOil

Impact Assessment of 6 CSR
Projects Across IndianOil



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List of Abbreviations

BPL	Below Poverty Line
CSRL	Centre for Social Responsibility and Leadership
CSR	Corporate Social Responsibility
DID	Difference-in-differences
FQ	Field Questionnaires
HMB	Human Milk Bank
IP	Implementing Partner
IOCL	Indian Oil Corporation
JEE	Joint Entrance Examination
KII	Key Informant Interview
MMU	Mobile Medical Units
O&M	Operation & Maintenance
OECD	Organization for Economic Co-operation and Development
PSM	Propensity score matching
QRM	Quality and Risk Management
QA	Quality assurance
QC	Quality control
RDD	Regression Discontinuity Designs
SOP	Standard Operating Procedures
SJHS	Swarn Jayanti Samudayik Hospital
EMO	Emergency Medical Officer
NEP	Non-Entitled Patients
IPD	In-Patient Department
NEP	Non-employee Patients
ZPHS	Zila Parishad High School

Executive Summary

The Indian Oil Corporation Limited (IOCL) has been working with communities in which its geographies where it operates by supporting numerous initiatives connected with health, family welfare, education, environment protection, potable water, sanitation, empowerment of women and other marginalized groups. Six CSR projects implemented by IOCL were picked for an impact evaluation report, to understand and evaluate the direct and indirect impacts created across beneficiary and stakeholder groups. The objective of the exercise is to reflect the benefit reaped by the beneficiaries over the period of implementation.

The implementation areas of the six projects by IOCL covered seven states across India and justified as the study area for the project. The nature of each project was distinct due to different implementation area hence the type of beneficiary was also varying. To ensure a holistic approach to the study, the OECD’s DAC framework was implemented to assess the outcomes of the CSR efforts.

Study Methodology

The study was conducted in four phases that included desk review, data collection, analysis, and reporting. Each phase was delivered with a deliverable and a directed actionable to begin the follow-on phase. The study included interaction with beneficiaries that were selected using random sampling strategy with a probability proportionate to size method. The process of sampling ensured a sizable sample for each project is recorded to derive the output of the efforts.

The data collection process was executed by physical visits to the relevant project sites to interact with relevant stakeholders and beneficiaries based on the nature of the project. The insights were shared by the stakeholders in the form of qualitative and quantitative information during the interactions.

Data Analysis

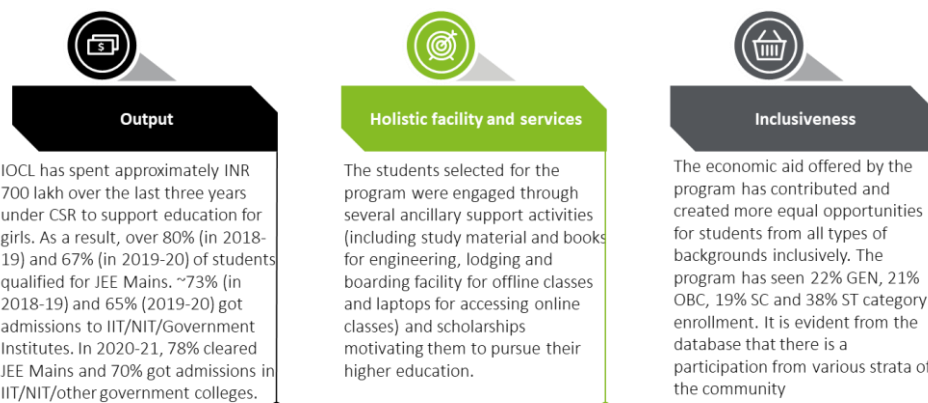
Primary and secondary data collected were analyzed to derive key insights and the analysis was based on the outcomes and variables previously identified. Understanding which beneficiary has benefited the most and which the least has helped in informing IOCL of the impact created by their interventions and necessary course corrections that may be required to enhance efficiency. The data and program analysis were based on selective parameters that were standardized for six programs as per their relevance for each. The areas of analysis were – Selection criteria to understand accessibility to the programs, engagement with beneficiaries to empathize with continuous engagement to the commitment, methods to ensure inclusivity to involve more beneficiaries, social impact on the families of the beneficiaries to assess the extent of the program beyond the objectives, and thematic benefit to add to a larger cause (such as accessibility to healthcare or education).

Key Findings

IndianOil Vidushi Super 30 Girls' Scheme

Indian Oil Vidushi Super 30 girls’ scheme has encouraged higher education among girl children by providing them free of cost coaching and mentoring for State and National level Engineering Examinations.

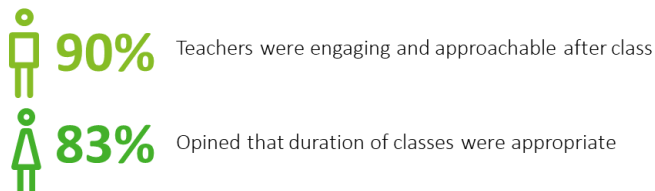
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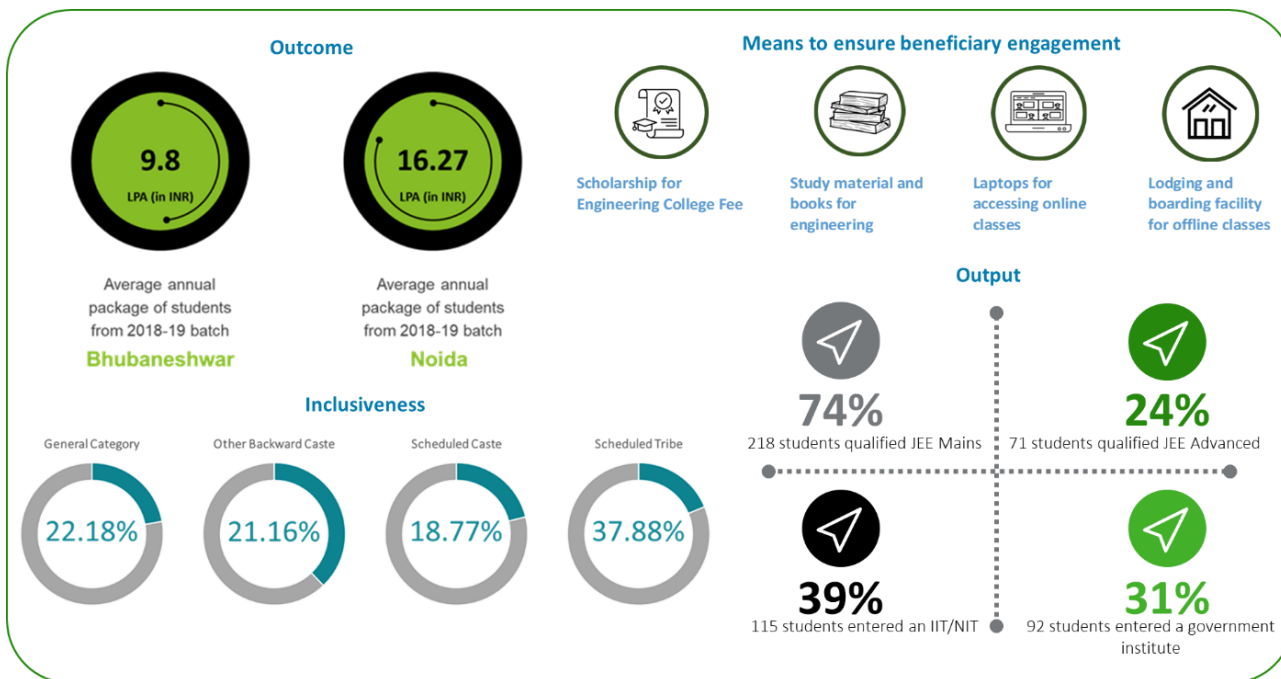
The evaluation has brought forth a positive economic and cognitive impact on the beneficiary’s life and on their families. A lack of financial resources to access good quality education was a barrier to the beneficiaries of Vidushi Super 30. The gap between the annual income of the beneficiaries and the fee for a coaching class is observed due to fact that the gap funding offered by Vidushi Super 30 is much greater. The beneficiary families had an average annual income that was less than INR 1.5 lakhs whereas leading coaching institutes cost up to INR 3 lakhs for admission. The access to private coaching centers could potentially push families into a debt trap and sell or mortgage their assets such as land; families without any assets would have to forgo the dream of accessing quality education. It is pertinent that the Vidushi Super 30 intervention, therefore, identified these students for providing fully sponsored coaching to them.

Quality of Education

Along with hands-on coaching, the students are also provided with books and stationery, food, and accommodation (in offline mode) hostels) to ensure a holistic enabling environment is provided. The quality of education allows an individual to connect with the program and realize the benefits.



The study reflects that the support offered by Vidushi Super 30 had enabled the beneficiaries’ access to quality education and enhance income opportunities. The beneficiaries bagged opportunities offering remuneration as high as INR 47 lakhs per annum. The average annual package offered to beneficiaries is approximately INR 13 lakhs per annum. An increment in annual income of the beneficiaries was observed which enabled and created new opportunities. As a result, the families of the beneficiaries were able to increase their annual family income and create opportunities for coming generations.



Sustainability: The Vidushi Super 30 program was operating as a physical coaching center in its initial days. Whereas, after the pandemic, the classes were converted to a virtual mode wherein the operations and sustainability of the program were ensured to continue the delivery of quality education to underserved communities. The virtual mode of the program can be availed from any location and eliminates the geographical barriers. Whereas the scholarship offered by IOCL, is an assurance of the last-mile delivery of the program. The sustainability of the initiative will be decided by the continuous support from the donors like IOCL so that students get benefitted or it can be emulated by the Governments.

Way forward: The program may continue in a hybrid mode based on feedback from stakeholders and beneficiaries to reinitiate the physical classes. The program could also be institutionalized to generate revenue by extending the accessibility of the program to other group of students on a quota-basis.

Assam Oil Division Hospital, Digboi, Assam

Assam Oil Division Hospital established in 1906. The 200-bedded hospital is well equipped and capacitated with general physicians, dentists, orthopedics, gynecologists, pathologists, ENTs, and surgeons. The hospital is offering accessibility to healthcare for beneficiaries in the surrounding areas of Digboi in Assam. During the assessment period more than 12,000 patients were treated at the hospital.
Impact:



More than **16,000** outside patients were treated in 2018-19 and 2019-20 whereas **~4100** outside patients were treated at the hospital in 2020-21



Approximately **91%** respondents expressed satisfaction with the medical services received and only **9%** felt the need to visit another hospital due to lack of availability of beds, staff, or specialized treatment.



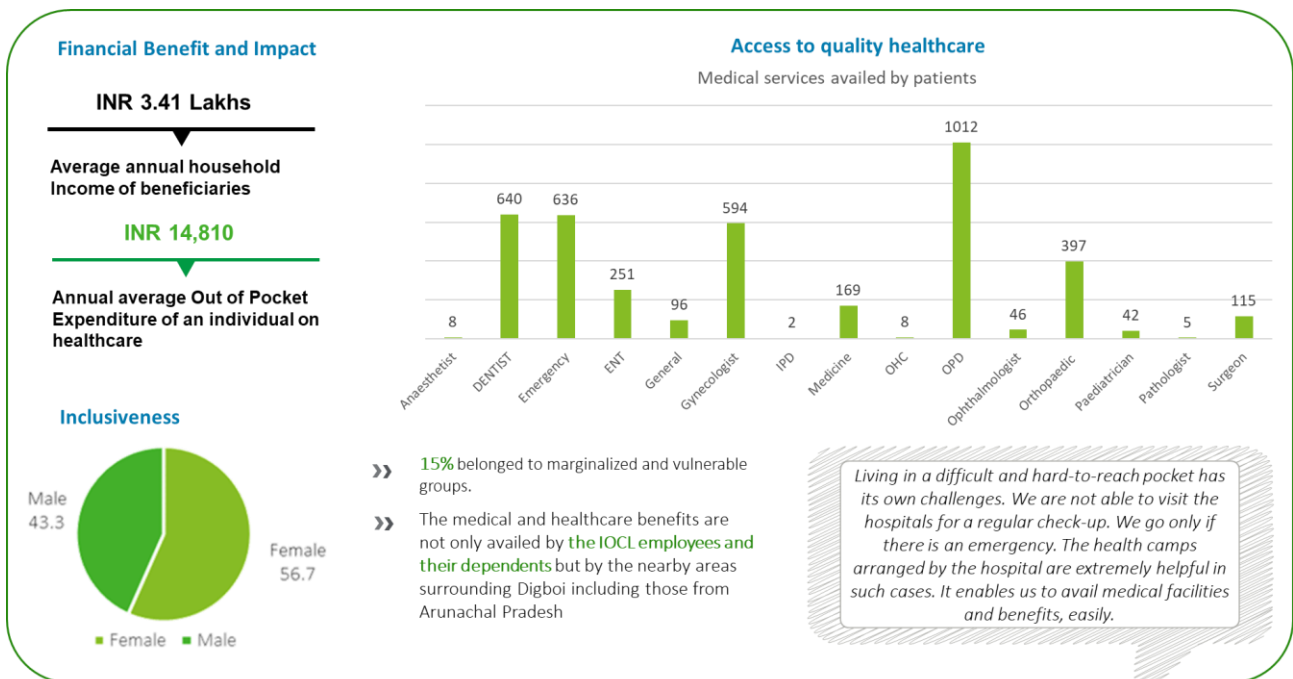
41% percent of respondents informed that they could obtain the prescribed medicines in the hospital itself.



The hospital remains the most preferred choice for the communities including the **marginalized and vulnerable** other than the IOCL employees and their dependents.

The hospital has been providing healthcare services to the villages / communities in and around Digboi and been found impactful as expressed by the respondents during the study.

The average household income across the beneficiaries was INR 3.41 lakhs and the study found that a majority of the respondents were extremely satisfied with the treatment they were receiving either free of cost, or at a reduced cost. The facilities were especially helpful given that the total average Out of Pocket (OOP) expenditure for healthcare for beneficiaries visiting AOD Hospital is INR 14,810.

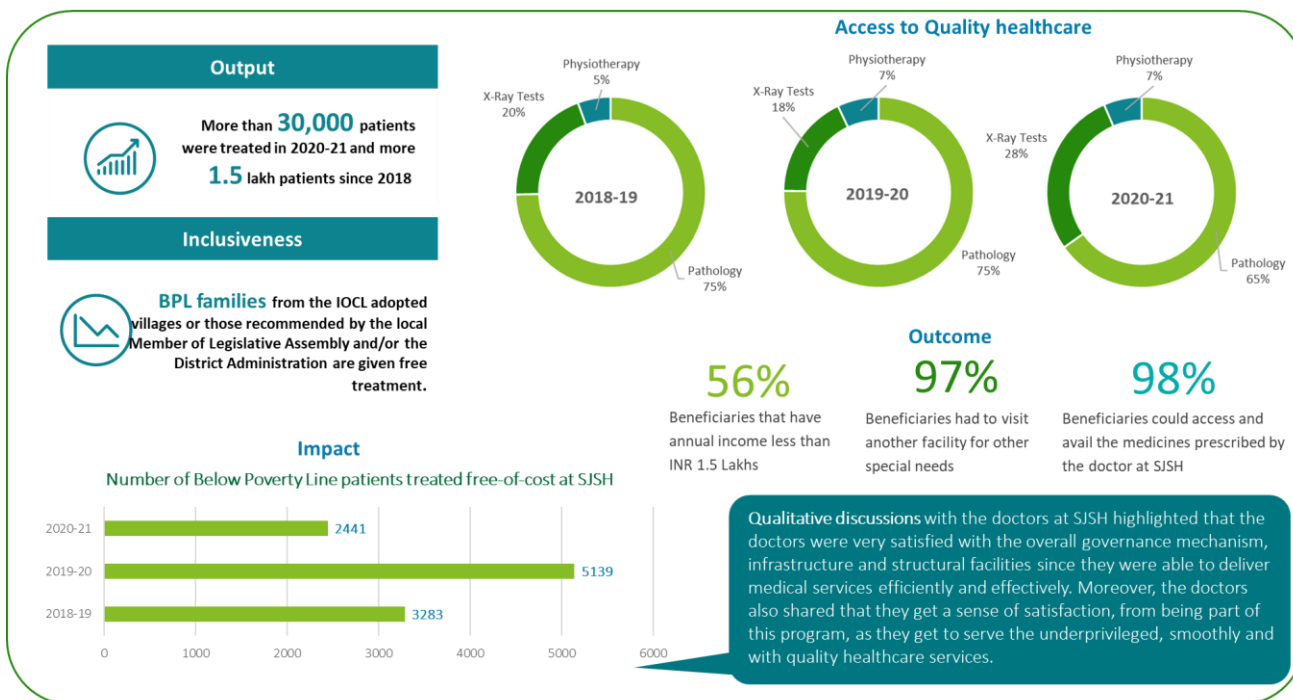


Sustainability: The hospital is managed by a well-trained staff and falls under the CSR funding of IOCL. The sustainability of the hospital administration depends largely on the CSR funds especially from IOCL.

Way forward: The hospital is currently run by the IOCL CSR funds. However, given the quality medical care and timely services, the hospital can consider garnering CSR funds from other agencies to benefit the existing functioning and infrastructure. With added funds, the hospital can leverage its existing monitoring mechanism to provide a wide range of services such as neurology and urology.

Swarna Jayanti Samudayik Hospital, Mathura in Uttar Pradesh

A state-of-the-art medical facility ‘Swarn Jayanti Samudaik Hospital (SJHS)’ was set up in 1999 to cater to the medical needs for Mathura District of Uttar Pradesh. SJHS is a 50 bedded facility with 10 beds reserved exclusively for patients Below Poverty Line (BPL). Additionally, 54 beds were added in the year 2021, in view of the surge in COVID cases across the nation, SJHS was temporarily converted into a COVID Hospital. The hospital offers treatment facility for public at a very nominal rate compared to any other private hospital in the region. Approximately, 50,000 non-employee patients are treated at this hospital every year. The image below highlights the high-level impact:



The qualitative findings highlighted that the beneficiaries travelled long distances to reach hospital, given the absence of an alternative hospital with such reliable and quality facilities. Availability of five specialized medical treatment along that is supported by thirteen doctors and consultants is accessible for all patients. As a result, a high percentage of patients received good medical care in comparison to other private facilities. Pathology (65-75%) followed by orthopedic and general medicine were most consumed medical services in the hospital, apart from pediatric and respiratory services. The hospital has served as a COVID-19 facility with an addition of 54 makeshift beds for preparedness of the outbreak during the second wave (2021).

Sustainability: The hospital is managed by an NGO hired by IOCL. The NGO is offering access to affordable and quality healthcare for the beneficiaries. In the absence of IOCL funding, sustainability of its operations would be a challenge.

Way forward: Conversion of the establishment ‘Swarn Jayanti Samudaik Hospital’ into a Trust will give more independent institutional operations and outcomes to the hospital. Moreover, this can give additional headroom for CSR donation from IOCL (Mathura Refinery) and lower the operational overheads. The initiative can be scaled up by convergence with several schemes implemented by the State and Central Government such as Pradhan Mantri Jan Aushadhi Pariyojna. Integration with PMJAP will allow access to low-cost generic medicines to the beneficiaries of the hospital.

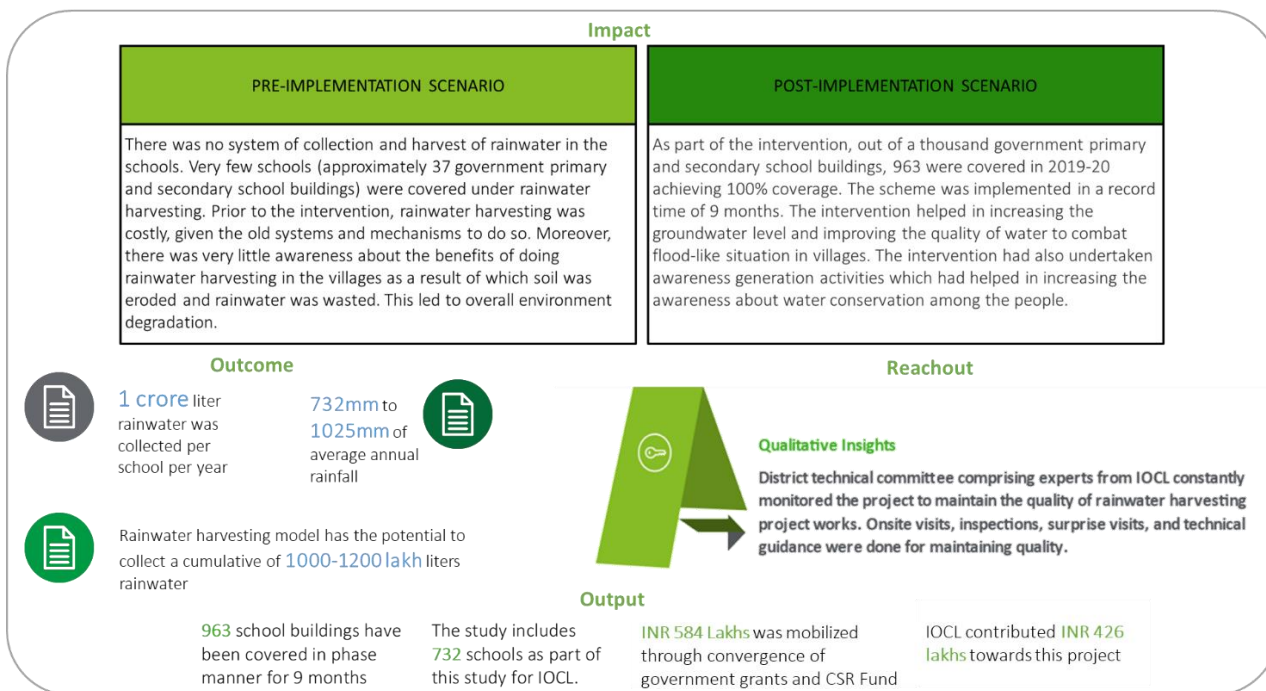
Installation of rainwater harvesting systems in Government primary schools in Vadodara, Gujarat

Installation of rooftop rainwater harvesting units in government schools has enabled groundwater recharge with limited efforts of only maintenance of the units. The solutions are installed with a cost-saving model wherein the product is customized as per the need to ensure groundwater recharge in a frugal manner. The cost of installation was lower than conventional models.

The District Administration of Vadodara initiated ‘Varsha Jal Nidhi’ rainwater harvesting project to conserve rainwater in all government primary and secondary schools of rural areas in the district. A three-tier committee was formed to implement, monitor, and supervise the project – district, taluka, and village level. While the program was

being supervised and monitored at the district and taluka level, respectively, 100% grant was allotted to SMC by district committee to implement the program at the village level.

Impact: Vadodara became the first district in the country to harvest rainwater in all government primary and secondary schools including the rural areas of the district. Mobilization of financial resources to cover all 732 government schools with rainwater harvesting in one year was one of the biggest challenges for the district administration. Discussions with the stakeholders unveiled that a fund of INR 584 Lakhs was mobilized through convergence of government grants and CSR funds from various industries (wherein IOCL contributed INR 426 lakhs).



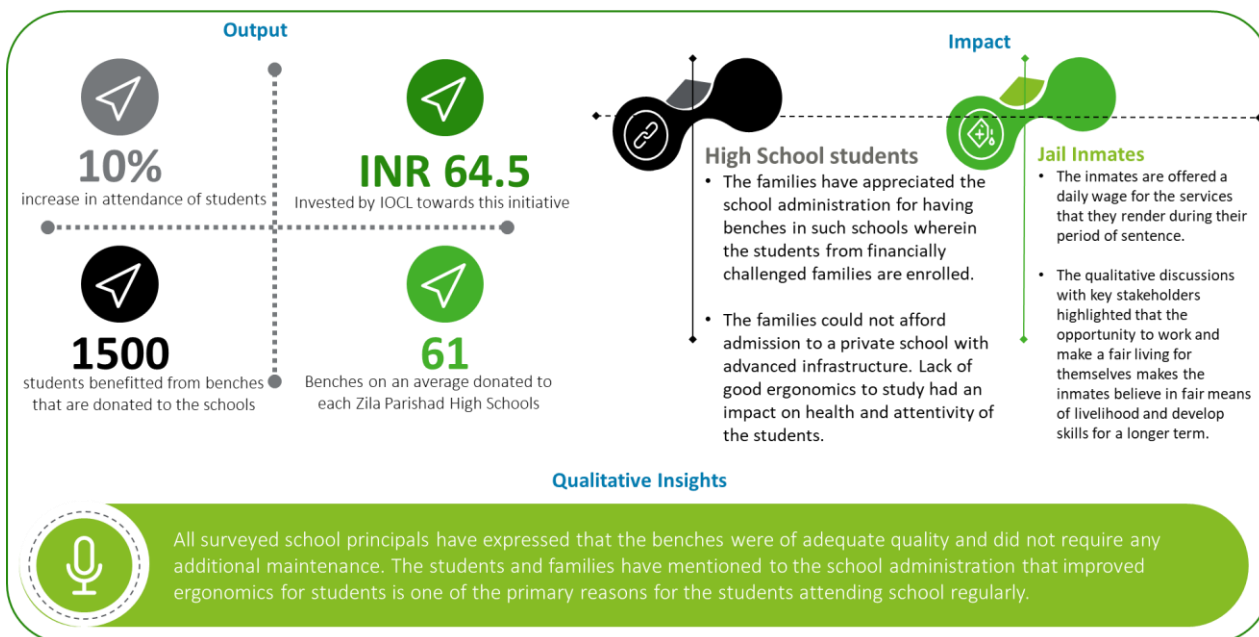
The impact not only helped in recharging the groundwater level but has also improved the quality of water by reducing hardness.

Sustainability: The project was implemented with a cost effective solution that is a cost-saver compared to a traditional rainwater harvesting solution. The solution is sustainable provided the government takes the initiative up and includes it in its other similar schemes such as MGNREGA.

Way forward: The rainwater harvesting units may be integrated with the school’s internal water for utility and save water utilization and cost on utilities. The technology can be coupled with a stormwater management solution.

Nai Disha: Provision of dual desk benches in 24 Govt. schools at Ranga Reddy district of Telangana

Nai Disha is an initiative supported by IOCL for provision of 1500 Dual desk Benches to 24 Govt High Schools in four Mandals – Chowderguda, Kothur, Farooqnagar & Keshampet in Ranga Reddy district of Telangana. These benches were made by the inmate of Chanchalguda Jail in Hyderabad. It is a win-win situation for all stakeholders involved benefiting economically & socially deprived school children in one of the most backward areas of Telangana. Impact: The donated benches to the schools that have limited infrastructure for students added value by making schools more attractive for students in the local region, as a result of IOCL’s contribution of over INR 64 Lakhs (2018-19). Parents begun to have faith in the schools for offering fundamental infrastructure. Meanwhile, developed confidence in Central Jail inmates that they can acquire skills to maintain a stable livelihood.



The initiative of IOCL provided benefits to the schools in Ranga Reddy District that are owned and operated by the Zila Parishad. The high school students (8th standard to 10th standard mostly) are the beneficiaries. The program exhibited limited outreach and measures to reflect inclusivity of several other strata of the society since the beneficiary base is limited.

Sustainability: The furniture supplied to the schools is an easily replicable model and the quality of the supply requires low maintenance.

Way forward: The intervention may go beyond offering benches to other infrastructure in the school that can be utilizable for the students. The school administration expressed the need for more infrastructure such as furniture in staff rooms, science laboratories, access to clean water, clean and separate washrooms, among other similar efforts that can be linked with the effort.

Support to Mother’s milk bank in Dharmapuri, Tamil Nadu

The accessibility to paediatric and maternal care is not common in smaller cities and towns in India where the need is higher due to lack of literacy and care facilities for infants. The project, as a result of IOCL’s support, has offered the access to pediatric care and mother’s milk to the unwell or premature newborn babies in Dharmapuri in Tamil Nadu.


Impact: The Mother Milk Bank has helped in reducing the infant mortality amongst pre-term babies. Additionally, babies with sick mothers also receive the donated milk. The healthcare offered to the infants is appreciated by the families and the donors of mother’s milk. The technology products supplied under the CSR initiative of IOCL are having direct and indirect impact on the lives that are saved in the facility. The increase in shelf life of the donated milk helped the facility management team to offer the benefits on a longer term to the beneficiaries.

Access to Quality healthcare

1:3


Benefit ratio

More than 3 donors needed to serve each beneficiary since 2020




Consumption

More than 253 ml mother's milk consumed by each beneficiary over the time



Future Prevention

Awareness on maternal care and importance of mother's milk for the beneficiaries



Root Cause

Root causes identified by the administrative staff for lack of mother's milk are **poor literacy, poor maternal health, and teenage pregnancy**

Outcome

More than **12,300** donors since March 2020 participated in the initiative

More than **3900** infants benefitted by the donated milk

1 million milliliter milk collected at the mother's milk bank

0.98 million milliliters of milk consumed by the beneficiaries

Supply inputs from IOCL to support beneficiary engagement

01 Two phase Expression Electrical breast pump, Breast milk pump accessories, Deep freezers, Refrigerator, Autoclave Machine, Human milk Pasteurizer, Sterilizer, and other medical essentials


02 Steel tables, Steel bureaus, Plastic Chairs, Steel Chairs, Music System, Desktop Computer with Printer and Network facility, 43-inch led TV, Pressure Cooker, Induction Stove, and other support.

03 Civil works and electric works including Split Air Condition Units


Impact

"This program is extremely beneficial for the quality of life of our child. The doctors emphasize the importance of mother's milk but unfortunately, it was difficult for us to provide it. Thanks to this bank, we are able to avail of the benefit at no cost."

-MBB beneficiary



- Donation of nearly a million milliliters of mother's milk is a testament to awareness and sense of responsibility among the donors to help the strata that requires help.



- The facility is efficient enough to assist one beneficiary against three donors with an average consumption of 253 ml mother's milk since 2020.

The program has witnessed an increasing number of donors annually. The equipment is sufficient to ensure a surplus of milk availability with cold storages.

The healthcare offered to the infants is highly appreciated by the families and the donors of mother's milk. The technology products supplied under the CSR initiative of IOCL are having direct and indirect impact on the lives that are saved in the facility. The increase in shelf life of the donated milk helped the facility management team to offer the benefits on a longer term to the beneficiaries. The evaluation, evidently, found out that The Mother Milk Bank has tremendously helped in reducing the infant mortality amongst pre-term babies. Additionally, babies with sick mothers also receive donated milk.

Efficiency

The facility is efficient enough to assist one beneficiary against three donors with an average consumption of 253 ml mother's milk since 2020. The efforts are witnessed with an increasing number of donors annually. The equipment is sufficient to ensure a surplus of milk availability with cold storages.

Effectiveness

Donation of nearly a million milliliters of mother's milk is a testament to awareness and sense of responsibility among the donors to help the strata that requires help. Effectiveness of the intervention improved by the medical equipment offered under CSR initiative.

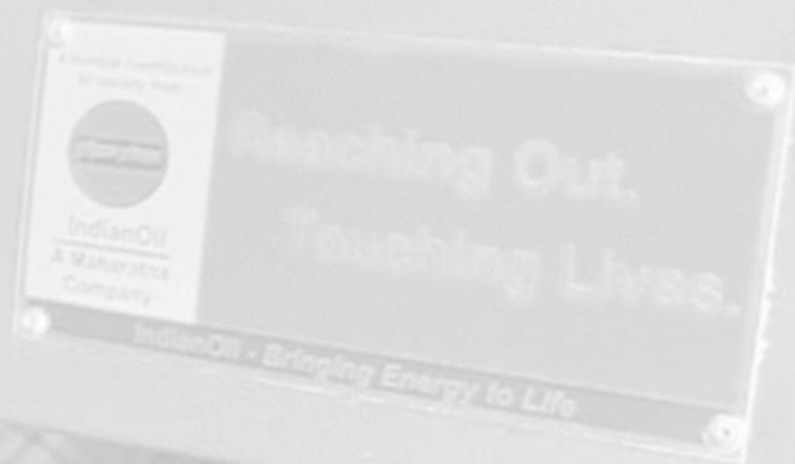
Impact

More than 12,300 donors have accessed the facility to donate their milk benefitting around 3900 infants admitted to the hospital. The initiative has educated the mothers and family members about the importance of maternal care and social upliftment.

Sustainability: It was noted that the process is sustainable and there is scope to replicate and scale up similar models. The process of collection, processing and storage of human milk has been taken care with the highest level of attention. The replicability of the project is an added benefit for sustainability of such initiative.

Way forward: The initiative is focused on a novel cause of assisting newborns that belong to an underprivileged family. The initiative has a huge potential for growth and scale up in other smaller towns and cities of India wherein the maternal and neonatal care is a challenge. This will help in reducing the infant mortality at the state / national level in the longer run.

I. Overview



I. Overview

1. About IndianOil CSR initiatives

The Indian Oil Corporation Limited (IOCL) has been partnering with communities in which it operates by supporting numerous initiatives connected with health, family welfare, education, environment protection, potable water, sanitation, empowerment of women and other marginalized groups.

IndianOil has been actively engaged in a gamut of social welfare/upliftment activities across the nation, in addition to reaching essential fuels viz. Kerosene, LPG, Petrol, Diesel, etc. to the nook and corner of the country. Indian Oil's key Corporate Social Responsibility (CSR) thrust areas include 'Safe drinking water and protection of water resources', 'Healthcare and sanitation', 'Education and employment-enhancing vocational skills', 'Empowerment of women and socially/economically backward groups', etc. The primary areas of CSR intervention from IndianOil are illustrated in the Figure 1. IndianOil has a long-standing CSR legacy, which started much before the CSR legislation (Companies Act, 2013) came into force in 2014-15. The CSR projects of IndianOil are undertaken mostly for improving the quality of life in various communities, which invariably include marginalized / underprivileged sections of the society, viz. schedule caste, schedule tribe, other backward caste, physically handicapped. etc. With the Pan-India presence, IndianOil undertakes CSR activities across the country, from Leh in J&K in the North to the North-Eastern States, to the aspirational/ backward districts/ Naxal affected areas, to Gujarat in the West and Tamil Nadu/Kerala in the South.



Figure 1: IndianOil Areas of Intervention

2. Overview of the six CSR Projects across IndianOil that were reviewed under this engagement

The projects are assessed looking for achievements and outreach within a limited period ranging from 2017 to 2021. Table 1 below is an illustration of six CSR projects and the time period for each.

Table 1: List of CSR projects assessed

#	Projects	Sectors	Project Cost (In INR Lakh)	Location	Year
1	Indian Oil Vidushi Super 30 Girls Scheme	Education	700	12 States	2018-2021
2	Assam Oil Division Hospital, Digboi	Healthcare	4027.42	Digboi, Assam	2018-2021
3	Swarna Jayanti Samudayik Hospital, Mathura	Healthcare	3045	Mathura, UP	2017-2021 & continuing
4	Installation of rainwater harvesting systems in (151+581) Govt. primary schools in Vadodara district of Gujarat	Environmental sustainability	426.05	Vadodara, Gujarat	2019-2020

#	Projects	Sectors	Project Cost (In INR Lakh)	Location	Year
5	Nai Disha: provision of dual desk benches in 24 Govt. schools manufactured by Chanchalguda jail prisoners at Ranga Reddy district of Telangana	Education	64.50	Ranga Reddy district, Telangana	2018-2019
6	Installation of human / mother's milk bank	Healthcare	17.57	Dharmapuri, Tamil Nadu	2019-2020

2.1 IndianOil Vidushi Super 30 Girls Scheme

IndianOil Vidushi Super30 was conceived in 2018 in association with the Centre for Social Responsibility and Leadership (CSRL), an educational NGO, to help girls from financially weaker sections gain admission into prestigious engineering institutes such as IITs, NITs, CETs, IIITs, etc. Young girl aspirants from different States are provided specialized hands-on coaching and mentoring after Class XII to succeed in Central and State engineering entrance examinations. IndianOil bears the complete cost of 11-months of intensive coaching, study material, food and accommodation for the girl students, besides various consumables. Additionally, each student is provided with health insurance of INR 1 lakh for one year to cover any exigencies for the beneficiaries.



IndianOil Vidushi is being implemented initially for a period of five years, during which 600 students are expected to be directly benefitted. The girls belong to poorer background from 10 States and 2 UTs namely – Odisha, Chhattisgarh, Jharkhand, Bihar, Uttar Pradesh, West Bengal, Gujarat, Rajasthan, Madhya Pradesh, J&K, Punjab, Haryana, Ladakh. The project was implemented with physical centers in Noida and Bhubaneswar in 2018-2019 where girl students were provided residential coaching for 1 year free of cost. In 2019-2020, two more centers in Patna and Jaipur were added. Since 2020-21, the project is being run in online mode wherein studios have been set up in Bhubaneswar and Jaipur centres.



Figure 2: Online class in Jaipur campus for Vidushi Super 30

2.2 Assam Oil Division Hospital, Digboi, Assam

Assam Oil Division Hospital, Digboi, established in 1906, is a 200-bed hospital with modern facilities. It caters to the population residing near Digboi and other nearby areas of the North-East region. Every year, about one lakh patients are treated at this hospital out of which about 15% are non-employee

patients. This hospital registers about 4,000 patients for indoor admissions and conducts operative procedures on about 2,000 patients every year. Health camps of general and specialized nature are also organized regularly by the hospital to reach out to the poor villagers in the vicinity, who have no access to medical consultations or treatment. During 2018-21, more than 12,000 patients were treated at the hospital.

Table 2: CSR Fund Flow to AOD Hospital, Digboi, Assam

Year	Overall cost of the project (INR in lakh)	Expenditure under CSR towards Non-Entitled Patients (NEP) (INR in lakhs) ¹
2018-19	4027.42	385.93
2019-20	5230.07	516.52
2020-21	3682.06	303.71



Figure 3: Assam Oil Division Hospital, Digboi, Assam

2.3 Swarna Jayanti Samudayik Hospital, Mathura in Uttar Pradesh

A state-of-the-art medical facility 'Swarna Jayanti Samudayik Hospital (SJHS)' was set up in 1999 to cater to the medical needs for Mathura District of Uttar Pradesh. SJHS is a 50 bedded facility with 10 beds reserved exclusively for patients Below Poverty Line (BPL). Additionally, 54 beds were added in the year 2021, in view of the surge in COVID cases across the nation, SJHS was temporarily converted into a COVID Hospital. In addition to medical treatment and consultation, SJHS provides facilities like In-Patient Department (IPD) for general medicine and surgery, emergency services, physiotherapy, trauma ICU, burns department etc. The hospital also has a pathology and X-Ray facility at minimal cost. In addition, medical camps including sterilization camps, general check-up camps, eye camps etc. are also organized by the hospital. Around 50,000 non-employee patients are treated at this hospital every year.

In total, INR 1,830.23 lakhs were spent by SJSH under CSR, between the financial year 2018 to 2021².

¹ Tender Document - Tender No. PLCC/CSR-Impact Assessment/HR/22062 dated 22-06-2022

² Tender Document - Tender No. PLCC/CSR-Impact Assessment/HR/22062 dated 22-06-2022



Figure 4: Swarn Jayanti Samudayik Hospital, Mathura (IOCL)

2.4 Installation of rainwater harvesting systems (RWHS) in Government primary schools in Vadodara, Gujarat³

The Collectorate of Vadodara District planned and shared a robust water conservation infrastructure, starting with 732 schools in the district with the team of Gujarat Refinery. Subsequently, construction of roof-top rainwater harvesting infrastructure in 732 Government Primary Schools across 567 villages in 7 talukas of Vadodara district was taken up under Rainwater Harvesting Project for all government primary schools of rural areas in the district with IndianOil as a partner. This has benefited around 1,46,200 school students by providing regular water supply in the school even during lean water months. The project 'Varsha Jal Nidhi' was steered by the District Administration, Vadodara along with the unstinted support of Gujarat Refinery at every step. The Gujarat Refinery officials also lent their expertise in drawing up the detailed Operation & Maintenance (O&M) procedures for the project and developed a white paper on the Standard Operating Procedures (SOPs) on the pre monsoon and maintenance activities.

Table 3: CSR Fund expenditure for installation of rainwater harvesting setup in Vadodara, Gujarat

Year	Expenditure under CSR towards NEP (INR in lakhs) ⁴
2019-20	338.34
2020-21	87.71
Total	426.05

As a result of RWH structures, each school is contributing one lakh litre of harvested water during monsoons every year on an average. Thus, more than 8 crore litre of water gets added to groundwater annually. In addition, the project also mitigates the ill-effects of soil erosion and floods caused due to non-channelization of rainwater.

³ Tender Document - Tender No. PLCC/CSR-Impact Assessment/HR/22062 dated 22-06-2022

⁴ Tender Document - Tender No. PLCC/CSR-Impact Assessment/HR/22062 dated 22-06-2022



Figure 5: Rainwater Harvesting setup installed in a school in Vadodara

2.5 Nai Disha: Provision of dual desk benches in 24 Govt. schools at Ranga Reddy district of Telangana

Provision of 1500 Dual desk Benches to 24 Govt High Schools in 4 mandals – Chowderguda, Kothur, Farooqnagar, and Keshampet in Ranga Reddy district of Telangana. These benches were prepared by inmates of Chanchalguda Jail in Hyderabad.

The program has a robust program design benefitting economically and socially deprived school children in one of the most backward areas of Telangana as well as the prisoners/inmates by engaging them in useful vocational trade, thereby helping their families through livelihood enhancement and also facilitating a path towards rehabilitation upon release.

The outcome of the project is to fulfil a few core CSR objectives of IOCL promoting education, reduce inequalities faced by socially and economically backward groups, providing employment enhancing vocational skills and livelihood enhancement at one go.



Figure 6: A beneficiary school in Ranga Reddy district

2.6 Installation of mother's milk bank

Mother's Milk Bank (MMB) ensures availability of safe donor human milk at NICU/SNCU. This is critical to ensure that every sick and preterm baby receives human milk within the first hour. Donor Human

Milk (DHM) plays a lifesaving role by helping these babies receive the benefits of early initiation and exclusive feeding of mother's milk. Therefore, a mechanism to collect, pasteurize, test, and store safe DHM from lactating mothers and provide it to infants in need, will ensure that even if babies cannot be breastfed, they still receive mother's milk in continuously even if their mother is unable to produce milk. IOCL has entered in a MoA with Government Medical College Hospital, Dharmapuri under CSR provision of a Human Milk Bank in the Govt. Medical College Hospital, Dharmapuri. In doing so, IOCL has contributed towards providing assets for setting up Mother's Milk Bank including, but not limited to, mother's milk pasteurizer, deep freezer, refrigerator for storage, autoclave machine, and breast milk bottle sterilizer. This initiative has successfully contributed towards decrease in deathrate amongst pre-term babies and increase in awareness about importance of mother's milk for new-born. On an average, Mother's Milk Bank provided by IndianOil benefits 4,500 to 5,000 babies annually⁵.



Figure 7: Milk Bank in Government Medical College in Dharmapuri, Tamil Nadu

⁵ <https://iocl.com/download/IndianOil-Annual-Report-2019-20.pdf>

II. Study Approach and Methodology



II. Study Approach and Methodology

1. Reflexive Approach

The aim of most CSR initiatives is to maximise impact and creating a sustainable model that brings about a lasting and positive change in the lives of the end beneficiaries. Reflexive methods focus on both a collective learning process as well as on the results in terms of learning and institutional change. The reflexive approach has a constructivist basis but goes further. This means that the participants not only exchange their personal viewpoints and motives, but they also debate their presumptions and underlying values and norms and the institutional context in which they operate⁶.

As part of this approach, the evaluation not only leveraged inputs from various stakeholders to learn about their viewpoints, but also engaged in qualitative discussions to understand the effectiveness and efficiency of the current institutional context. The strength of this approach is that it is based on thinking in terms of systems as a whole and current practices are questioned with the aim is to provide real world solutions to improve on the existing effort to bring about sustainable improvement.

2. Evaluation Framework

The overall approach for all the stages of the impact assessment has been devised based on the OECD DAC Framework⁷ for evaluation. This included the questionnaire drafting phase, data sanitization and analysis phase and lastly the reporting phase.

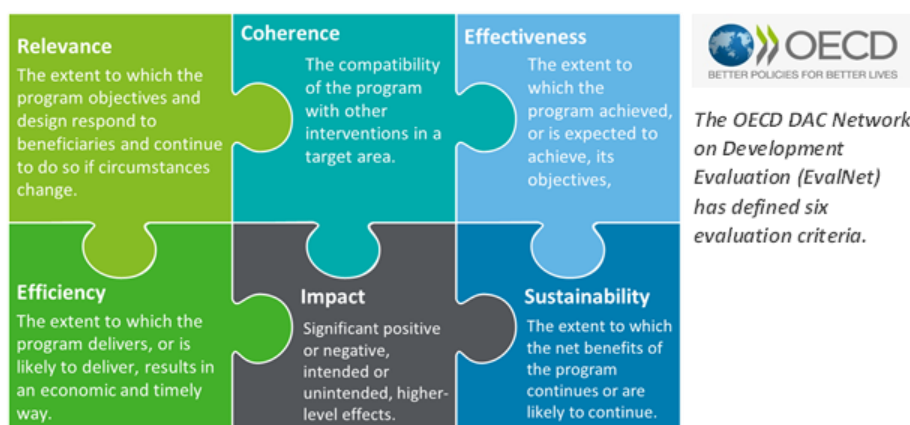


Figure 8: Implementation of OECD DAC Framework to analyze and assess Six CSR projects implemented by IOCL

The broad parameter utilized to empathize with each of the program is based on the process as illustrated in Figure 9.

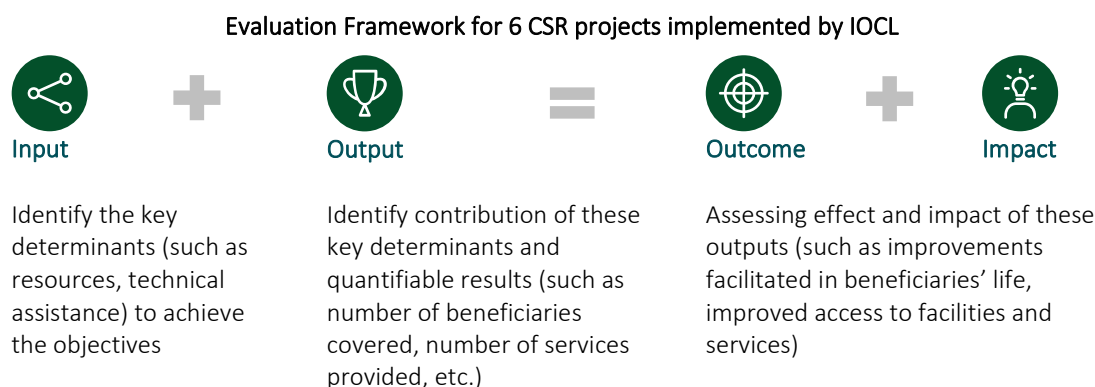


Figure 9: Fundamentals of understanding the core concept of the CSR projects implemented by IndianOil

⁶[https://edepot.wur.nl/185027#:~:text=In%20the%20world%20of%20monitoring,contribute%20to%20\(system\)%20innovation](https://edepot.wur.nl/185027#:~:text=In%20the%20world%20of%20monitoring,contribute%20to%20(system)%20innovation)

⁷ <https://www.oecd.org/dac/evaluation/daccriteriaforevaluatingdevelopmentassistance.htm>

3. Impact Assessment Methodology

An evaluation framework is defined by robust indicators and our data collection techniques along all levels of the results chain in order to track implementation and results.

The engagement was executed in phased manner in line with the deliverables/outputs expected by Indian Oil across the 12-weeks. To present the best possible output, impact assessment team divided the assessment into four main phases. The Figure 10 is an illustration of the methodology followed to execute the various stages of the assignment.

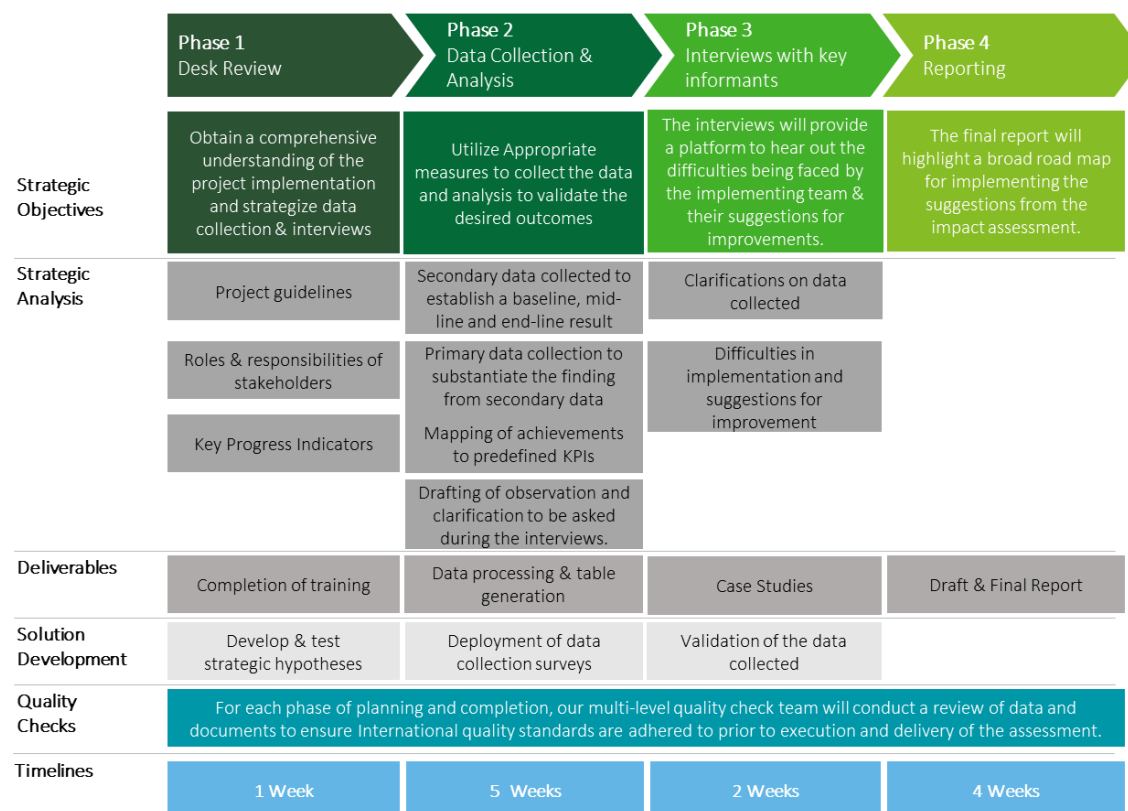


Figure 10: Impact Assessment Methodology

4. Sampling Strategy

A stratified sampling technique was deployed for this assessment with concurrence and inputs from IOCL.

#	Project Name	Sample Frame	Sample Size	Rationale for the sample design and stratification if involved
1	Indian Oil Vidushi Super 30 Girls Scheme	300 students	30 students randomly selected from the beneficiary database	Students were selected from all 12 project states and the sample also included those who did not clear exams. Sampling size included candidates who were selected from a particular group of institutions and have maintained their status post-placement.
2	Swarna Jayanti Samudayik Hospital, Mathura	20,641 patients	92 OPD patients and admitted patients (based on the frequency of visitors)	To obtain qualitative information, our focus was to focus on the observations noted from our interaction with doctors and management staff of the hospitals. Furthermore, if there are assets procured specifically for CSR purposes, our team ensured that those assets are verified in terms of its existence and condition. The interview with doctors, management staff and verification of assets (if any), were

#	Project Name	Sample Frame	Sample Size	Rationale for the sample design and stratification if involved
				obtained by our execution team members. Our first preference was to obtain the view of those patients that visited the hospital during the period under the evaluation. Since historic data was not available, we relied on primary data collected from patients during our field visits.
3	Assam Oil Division Hospital, Digboi	1,55,214 patients	55 OPD patients (based on the frequency of visitors)	Similar strategy as adopted for Swarna Jayanti Samudayik Hospital, Mathura
4	Installation of rainwater harvesting systems in (151+581) Govt. primary schools in Vadodara district of Gujarat	732 schools	35 schools visited in Vadodara	To obtain qualitative information, our focus was predominately on the school management staff, principal. The assets were verified in terms of their existence and condition. Schools covering all blocks of Vadodara district were selected for the evaluation. We also took into consideration the number of students attending the schools, to understand the feasibility and rationale of installing the assets.
5	Provision of dual desk benches in 24 Govt. schools manufactured by Chanchalguda jail prisoners at Ranga Reddy district of Telangana	24 schools	8 schools and Prison Administration	To obtain qualitative information, our focus was predominately on the school management staff, principal and students who use the tables. Schools covering all four mandals of Rangareddy District was selected in consultation with the local refinery. Furthermore, our team also interviewed the prison administration to understand the suitability and impact of the projects on other stakeholders (other than students)
6	Installation of mother's milk bank	13,500 babies	10 beneficiary mothers and 10 donors	To obtain qualitative information, our focus was predominately on the hospital management staff. Our first preference was to obtain the view of those mothers and donors that visited the hospital during the period under evaluation. However, as it was not feasible, then we obtained the view of mothers and donors who were present during our field visits.

5. Data Collection, Data Analysis and Reporting

The data was collected in by direct interactions with the beneficiaries and the said data collected was later transposed by the surveyor/interviewer into an excel/word document.

Data Triangulation: All data and information collected from any source, in any form, at any time and by any stakeholder was captured in the evaluation phase itself to create synergy between various stakeholders. Triangulation refers to the application and combination of several research methods in the study, the same will be applied in the process of evaluation. Both quantitative and qualitative analysis results were vetted, and findings were presented to the IOCL CSR team. Methodological triangulation involves using more than one method to gather data, such as interviews, observations, questionnaires, and documents altogether that created the base for the evaluation career guidance portal study. The needs and capacities are assessed on the framework as illustrated in this report.

Primary and secondary data collected were analyzed to derive key insights based on the context of the individual projects. The analysis was based on the outcomes and variables previously identified and, on the understanding, which beneficiary has benefited the most and which the least has helped in informing IOCL of the impact.

The data analysis or program analysis was based on selective parameters that were standardized for six programs as per their relevance for each. The Figure 11 is an illustration of the evaluation parameters that were adopted during the data analysis.

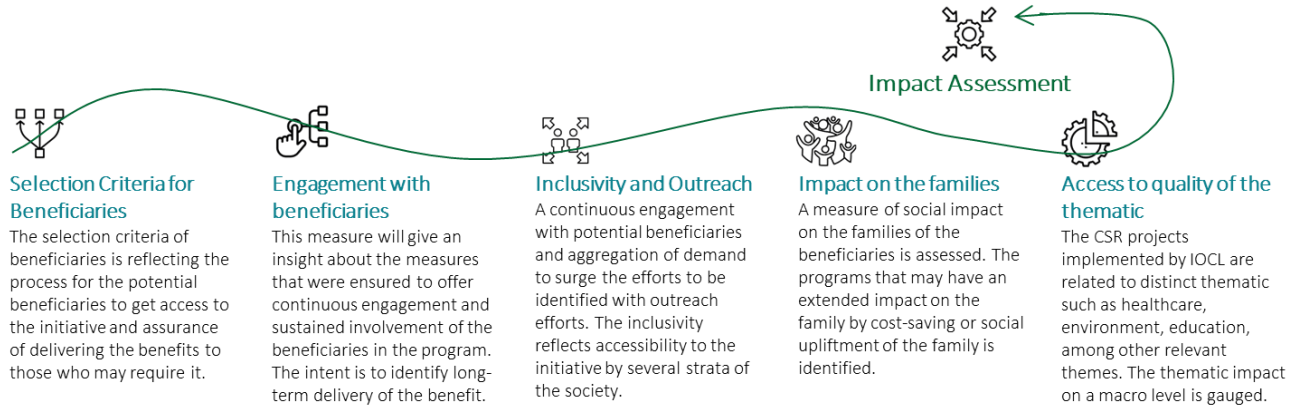


Figure 11: Impact Evaluation Parameters for the data and information collection for each program

III. Key Findings



III. Key Findings

1. IndianOil Vidushi Super 30 Girls' Scheme

IndianOil Vidushi Super 30 girls' scheme is aimed at helping girls from financially weaker sections gain admission into prestigious engineering institutes such as IITs, NITs, CETs, IIITs, etc. Young girl aspirants from different States are provided specialized hands-on coaching and mentoring after Class XII to succeed in Central and State engineering entrance examinations. The program promotes access to education and women empowerment.



Figure 12: A multi-faculty doubt clarification session as a value addition to coaching classes



Objective

To provide specialized coaching to the girls from poorer backgrounds from twelve states to succeed in IIT-JEE mains and Advanced and join prestigious institutions like NITs, IITs and other government engineering colleges



Project Cost

~INR 700 Lakh over the last 3 years (2018-2021) under CSR



Input

- Educational centers being set up to provide girl students residential coaching for a year
- Progress monitoring through academic officers and center manager



Output

The project encouraged higher education among girl child by providing them free of cost coaching and mentoring for State and National level Engineering Examinations. Achievement of overarching objectives of women empowerment, access to education, poverty alleviation, skill development, and seizing the demographic dividend.



Outcome

Over 80% (in 2018-19) and 67% (in 2019-20) students qualified JEE Mains. Approximately 73% (in 2018-19) and 65% (2019-20) got admissions in IIT/NIT/Government Institutes for JEE Advanced. More recently (2020-21), 78% cleared JEE Mains and 70% got admissions in IIT/NIT/other government colleges.

1.1 Impact Evaluation

a. Selection Criteria of the Beneficiaries

The objective of the program is to assist students representing economically weaker sections to perform well in entrance examination for engineering courses with premier institutions in India. Hence, the eligibility criteria are based on fundamental requirements that student must have opted for science with mathematics in high school and have cleared the entrance examination set out by the implementing partner.

The entrance examination conducted by Vidushi Super 30 is coupled with a general interview of the student. The students are selected based on their academic performance and accessibility to the program. The study reflected an average time of 95 days to enrolment from the date of application for the students. Prior to the pandemic, there were in-person batches and interactions whereas the post-pandemic, the students were virtually inducted to the program.

Qualitative Insights

The qualitative discussions with the beneficiaries highlighted a fair and unbiased process of selection. Many respondents opined that the process was transparent and merit-based, giving an equal opportunity with no scope for personal or institutional biases tainting the process

b. Engagement with the Beneficiaries (after enrolment)

The students selected for the program were engaged through several ancillary support activities and scholarships motivates them to pursue their higher education. The benefits are illustrated in the figure below based on the interaction with beneficiaries. The qualitative discussions brought forth that sustenance of the program post-pandemic scenario was challenging to ensure attendance and involvement in the program. The study reflected that all the students were offered a laptop and access to the internet to attend the classes virtually. Moreover, all the students were offered with study materials to ensure an overall engagement to the program to achieve the outcomes.



Scholarship for Engineering College Fee

As an extensive support to the program, all eligible students were offered with scholarship to pursue their higher education (all those students that were admitted to IITs, NITs, and other government colleges)



Study material and books for engineering

Vidushi Super 30 offered study materials and books to all the students to support the efforts in coaching classes



Laptops for accessing online classes

The post-pandemic batches were offered laptops and internet facilities to access the classes to all the students



Lodging and boarding facility for offline classes

Students from various locations in India were offered lodging and boarding facilities to easy get access to the classes for physical classes only

Figure 13: Ancillary support offered to the students to ensure association with the program

c. Inclusivity and Outreach

It is evident from the database that there is a participation from various strata of the community and outreach across several locations in India. The assessment noted that IOCL Vidushi Super 30 intervention has brought about a transformational shift in the lives of students who otherwise would have lacked the opportunity and resources to obtain such quality higher education and subsequent opportunities. The economic aid offered by the program has contributed and created more equal opportunities for students from all types of backgrounds inclusively.

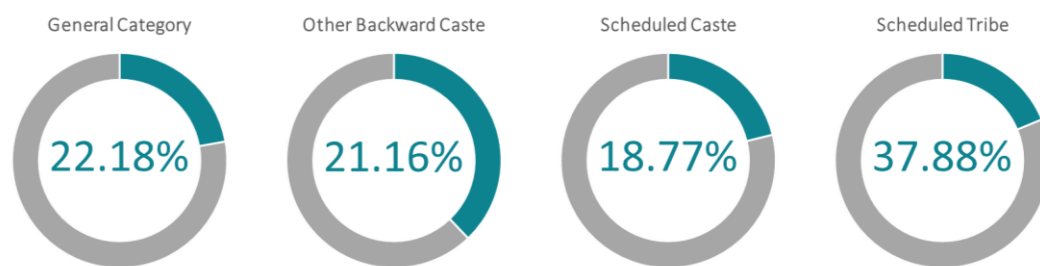


Figure 14: Social category of students enrolled in IndianOil Vidushi Super 30
 Source: IOCL database

The data in Figure 14 reflects the inclusivity of the program wherein the level of income was the most critical factor for selection of students. The impact was seen across all deserving students that are unable to continue without financial support. Field interactions highlighted that the average household income of the families of these students was INR 1.32 Lakh wherein sixty-five percent of the students represented a family income below INR one Lakh.

The information on the source of outreach of the program was gathered from the students as part of the assessment. The outcome of the study suggested that more than sixty-six percent of the students were informed about the program by the implementing agency (CSRL) whereas others received the information from family, relatives, friends, and other closely known sources.

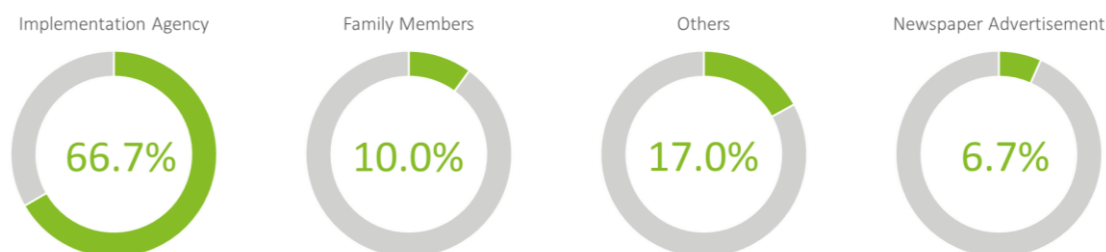


Figure 15: Source of knowledge about the program for the beneficiaries
 Source: primary data collection n=30

d. *Impact on the family*

Lack of financial resources devoted to education can act as a barrier to any child seeking higher education⁸. Based on secondary research, on an average, enrollment to coaching classes for higher education especially Engineering costs between INR 2.8 to 3.1 Lakhs⁹. This is a threat to many aspiring students to receive good quality coaching to prepare for the exams. Ironically, the study highlighted that the annual household income for more than ninety percent of the girls was lesser than the average annual coaching fees of the JEE Mains examination. Hence, it would have been impossible for the students that have received the access to coaching for competitive examinations for engineering would have never been able to get access. The families didn't have to borrow a sum of money that could possibly be higher than their annual income to appear for competitive engineering examination.

The gap between annual income of the beneficiaries and the fee for a coaching class is reflective of the fact that the gap funding offered by IOCL through Vidushi Super 30 is much greater than that assuming that the families may require more than 50% of the disposable income for their basic survival.

The access to quality education would not have been possible for several families as expressed by Vidushi Super 30 beneficiaries. IN the absence of this beneficiaries may have opted for private coaching centers which would increase financial burden on all families.

⁸ <https://educateachild.org/explore/barriers-to-education/resources/financial-resources>

⁹ <https://engineering.careers360.com/articles/best-jee-main-coaching-institutes-in-delhi-with-fees-structure>

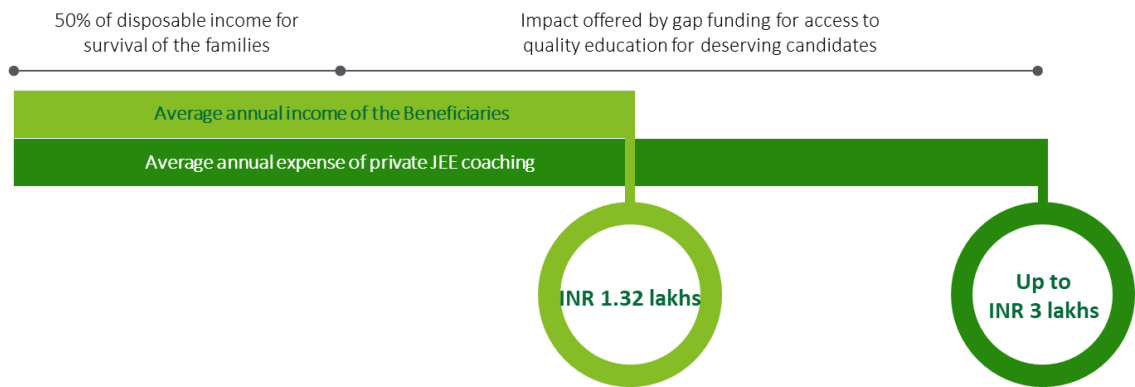
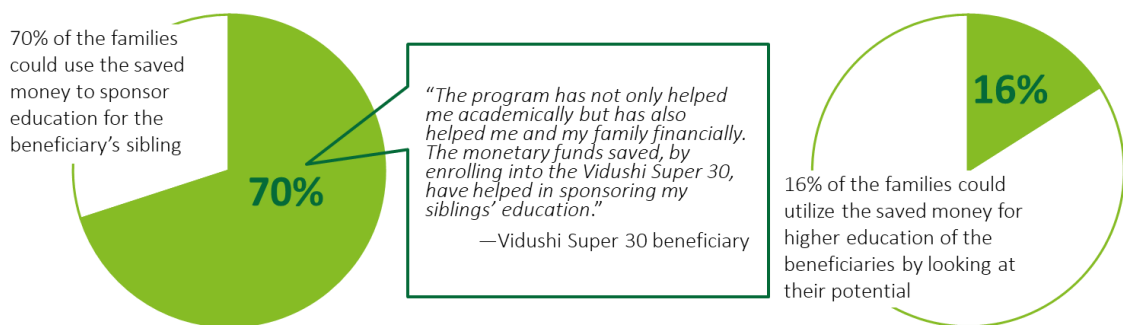


Figure 16: Impact of Vidushi on underserved families

Source: IOCL Database

It is pertinent that the Vidushi Super 30 intervention therefore identified these students for providing fully sponsored coaching to them. Along with hands-on coaching, the students are also provided with books and stationery, food, accommodation (in offline mode, hostels) to ensure holistic enabling environment is provided.

The field interactions with beneficiaries also revealed that the money saved by associating with the Vidushi Super 30 intervention, approximately seventy percent (70%) informed that this money was used to sponsor their sibling’s education while sixteen percent (16%) used this for higher education.



The study reflected that all beneficiaries recommended the program to their siblings and friends after having experienced a tangible transformation in their lives.

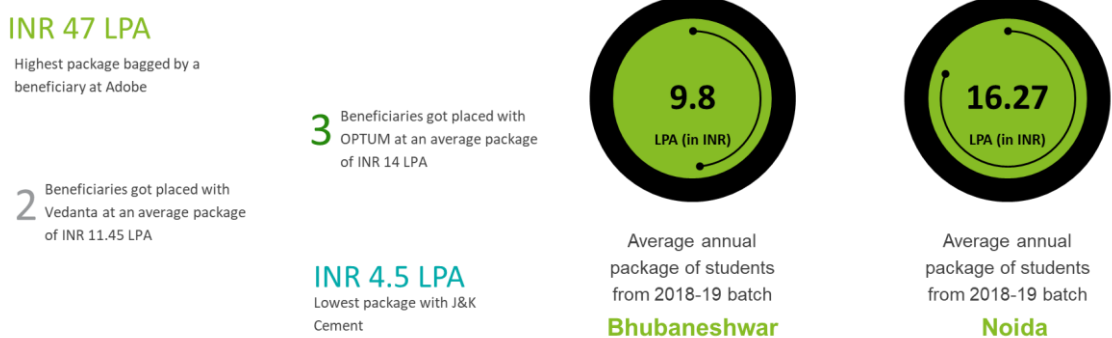


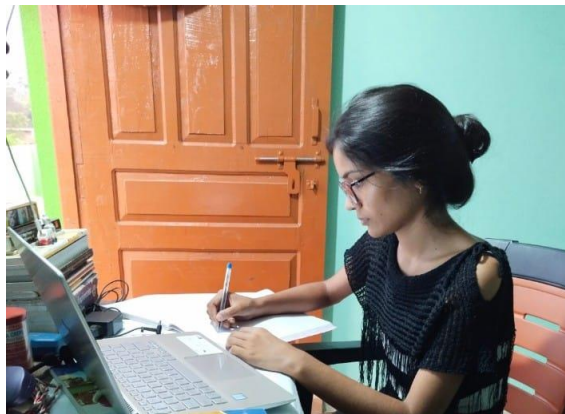
Figure 17: Placement information showcasing impact of the Vidushi Program

The evaluation found that the support provided by IOCL had resulted in enabling the beneficiaries’ seeking placements during campus selections. The beneficiaries bagged the annual package as high as INR 47 lakhs per annum. On an average, beneficiaries were able to score annual package of approximately INR 13 lakhs per annum. The beneficiaries were placed in companies from varied thematic backgrounds such as adobe, PhonePe, L&T, J&K Cement, Vedanta, etc. A total of 7 beneficiary students from Bhubaneshwar and 7 from Vidushi’s Noida centre achieved these outstanding placements from the 2018-19 batch. This clearly shows the Vidushi program had not only developed knowledge and skill of these students but had also helped them in leveraging their skillset to hit such high-income jobs which would change their and their families lives, financially.



Karishma Dahariya, a resident of Block Malkha Roda in Chattisgarh is a daughter of a farmer whose annual income is under INR one lakh. She is a beneficiary of Vidushi Super 30 and studying in NIT Raipur. Her experience with Vidushi Super30 was life transforming as it had helped in reducing the financial burden on her family.

She has been one of the top performers in her batch with an aggregated Cumulative Performance Index (CPI) of eight and also secured a placement with Optum Healthcare Group with an annual package of INR 14 lakhs. This opportunity has enabled her to be independent and support her family with a leap of financial stability.



Karishma expressed that her father is proud of her achievements and thankful to Vidushi Super 30 initiative due to which he didn't need to worry or sell his farmland to support his daughter's education.

Vidushi Super 30 is enabling students to achieve success and have a multiplicative impact on the lives of their family members. Students like Karishma are a testament to the impact created by the program. Karishma had never imagined moving to a big city outside Chattisgarh whereas now she has been placed in an international agglomerate based in Hyderabad.



“Vidushi 30 has entirely transformed my and my family’s life to achieve the unimaginable. My father could not afford the expense of private coaching which was higher than our annual family income. With all the savings on my education, my father could afford to sponsor my younger sister’s education and her dream to qualify UPSC examination and serve the country. My primary target after my placement will be to support my sister’s education and help her realize her dream.

The long-lasting support offered by IOCL is still with us. They have connected us with a network of students that are like me and motivated to transform lives.”

- Karishma Dahariya, NIT Raipur

e. *Access to Quality Education*

Vidushi Super 30 has attained a success rate of seventy-four percent in JEE Mains between 2018 and 2021¹⁰. The selection rate reflects an impact on access to quality education as illustrated in Figure 18. The value for this expense is a resultant of provision of free of cost coaching and mentoring for competitive Engineering Examinations. A majority of the respondents informed that the access was further succored with provision of internet connectivity, by IOCL, for attending online classes during the pandemic.

¹⁰ As per the data IOCL's data

293 100%	218 74%	71 24%	48 16%	67 23%	92 31%
Total number of students joined Vidushi Super 30	Total number of students qualified JEE Mains	Number of students qualified JEE Advanced	Number of students that entered an IIT	Number of students that entered an NIT	Number of students that entered any other Government College

Figure 18: Outcomes of Vidushi Super 30 from 2018 to 2021

Source: IOCL’s database

The coaching offered under Vidushi Super 30 to the students was assessed to understand the level of their engagement with them. The quality of education allows an individual to connect with the program and realize the benefits.

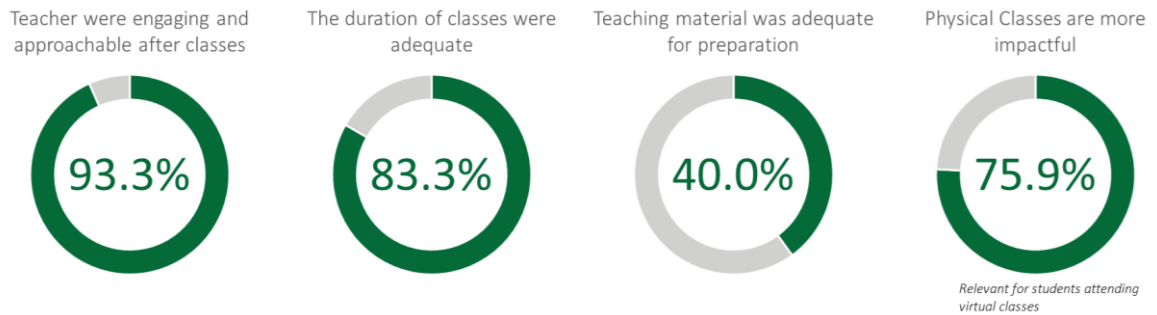


Figure 19: Response from the beneficiaries on the quality of education offered by Vidushi Super 30

Source: primary data collection n=30

Figure 19 is an illustration of opinions of the beneficiaries about the quality of education received by them. The study suggests that teachers are fairly engaging and allowing time for students to connect and interact whereas the study material offered to the students could be improved. Only improvement area could be the training materials wherein sixty percent of the beneficiaries felt the need to refer to more study material to ensure a comprehensive understanding of the concepts.

The qualitative discussions with the Vidushi Super30 beneficiaries brought forth integrated benefits of the program. It was found that the program was inclusive in its selection criteria as well as providing access to quality education. An understanding of the insights is illustrated in the 20.

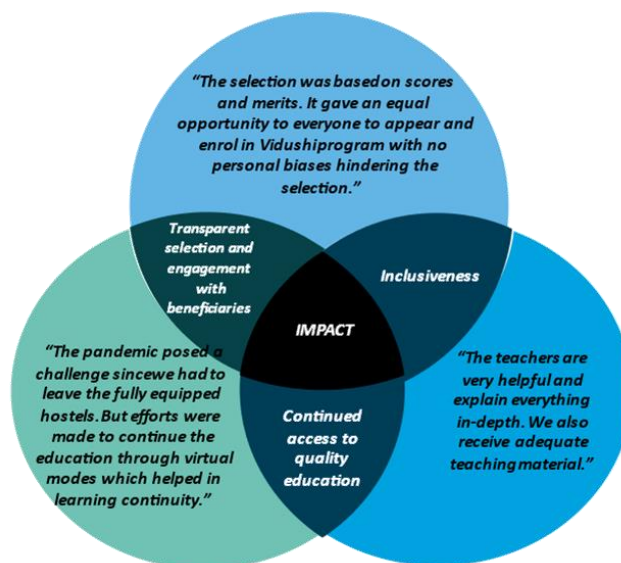


Figure 20: Qualitative insights on the impact offered to groups of beneficiaries from Vidushi Super 30

1.2 Outcomes of the Evaluation

Relevance	Accessibility to education for under privileged families in India is a challenge due to lack of affordability. Getting admission in a premier engineering college of India is a matter of proud for not only students but for the entire family. The operations of the program are relevant in comparison to its stated objectives. The students are able to get an admission in a government engineering college without adding financial burden to their families.
Coherence	The program is offering greater value by skilling the youth from the underprivileged section of the society. The access to higher education is certainly adding value to younger generation in achieving their aspirations.
Effectiveness	The study revealed that more than 93% of the beneficiaries are highly satisfied with the quality of knowledge that is offered by the teachers. The quality of education provided at the coaching centres is found effective which can be evident from the fact that 74% of them entered into the JEE Mains.
Efficiency	Admission of more than 70% of the students that enrolled to Vidushi Super 30 is a an indicator of the efficiency of the program that also provides an all-inclusive package to ensure holistic learning for the beneficiaries. Students are not only provided with free-of-cost skilled pedagogy but also residential facilities. The institutions efficiently leveraged virtual modes of teaching during the pandemic, to ensure quality hand-on coaching is provided to students in a timely manner.
Impact	<p>A multi-level impact is visible on the beneficiaries of the program. The most evident and pertinent is increased access to a good quality higher education for students from underprivileged communities. The program has shown an astounding impact in term of providing affordable quality education to beneficiaries allowing their families to invest the savings in other areas of social well-being (such as healthcare, younger children's education, etc.). As a result, the program had displayed a potential for poverty alleviation and improved lifestyle.</p> <p>Primarily, the program had promoted knowledge and skill development of the beneficiaries, allowing them to achieve work opportunities which pay as high as INR 47 lakhs per annum. This has not only positively impacted on self-confidence and cognitive factors of the beneficiaries but has changed the lifestyles and standard of living of their families. The program was seen promoting women empowerment by offering them independence to make an everlasting impact in their lives and the generations to come.</p>
Sustainability	<p>The Vidushi Super 30 program was operating as a physical coaching center in its initial days. Whereas, after the pandemic, the classes were converted to a virtual mode wherein the operations and sustainability of the program was ensured to continue the delivery of quality education to the underserved communities.</p> <p>Moreover, 83.3% of the beneficiaries that were interacting during the study expressed that they are offered scholarship to pursue their engineering. Scholarship is an assurance of last-mile delivery of the program. Sustainability of such novel initiatives will be decided by the continuous support from the donors like IOCL so that students get benefitted or it can be emulated by the Governments.</p>

1.3 Way Forward

A suggestive way forward to continue the intervention is illustrated in this sub-section. The suggestions are based on the interactions with the beneficiaries and implementation agencies.

Technical	Vidushi Super 30 may offer more exclusive study material to the students with in-depth concepts. Accordingly, the study material could be sourced from other existing programs and coaching institutes under CSR donations.
Operational	Currently, Vidushi Super 30 is running in an online mode wherein the classes are taking place virtually. Qualitative discussions indicated a need to shift back to the in-person mode of learning which ensured better interactive mode with monitoring mechanisms in place.
Institutional	The financial resources of Vidushi Super 30 are dependent on CSR donors like IOCL. Other alternate sources of funds may be explored to scale up the program to ensure a minimum revenue for running additional batches.
Scale-up	<p>The project clearly indicates success in terms of improving access to quality higher education, equitable opportunity to economically weaker candidates, and inclusivity in its outreach. This can be replicated across other cities and institutions, subject to availability of funding to sustain the model.</p> <p>The program may continue to operate as a virtual + hybrid mode to allow students attend the classes physically as well and increase the enrolment to the program by offering remote access to the classes for students in the remote areas of India.</p>

2. Assam Oil Division Hospital, Digboi, Assam

The IOCL (AoD) Hospital in Digboi, Assam hospital is a well- equipped, modern, and multi-specialty Hospital providing OPD services, in-patient services, 24 hours emergency, well equipped operation room, diagnostic services, dispensary & medical stores, physiotherapy room etc. The Hospital is providing health care services to all communities in Digboi and its surrounding areas (towns & villages and nearby areas of Arunachal Pradesh), apart from the IOCL employees and their dependents. The CSR expenditure is booked based on apportioned amount of NEP i.e., non-employees (IOCL) vis-à-vis the total number of patients.



Figure 21: Access to the AOD Hospital in Digboi, Assam



Objective

To provide health care to IndianOil family and the Community; to prevent communicable and non-communicable diseases and to promote health.



Project Cost

2018-19: INR 386 lakhs
 2019-20: INR 516 lakhs
 2020-21: INR 303 lakhs



Input

IOCL (AoD) Hospital is a well- equipped, modern, and multi-specialty Hospital. The Hospital is providing health care services to the entire society of Digboi and its surrounding areas (towns & villages and nearby areas of Arunachal Pradesh), apart from the IOCL employees and their dependents. The Hospital is being run by IOCL's CSR expenditure.



Output

The CSR expenditure is booked based on apportioned amount of NEP i.e., others vis-à-vis the total number of patients.



Outcome

AOD hospital is the first private hospital in Northeast region to be recognized by Medical Council of India. Under CSR activities the hospital organizes various health camps to improve the health of the community. Overall, the AOD Hospital extends quality infrastructure and services in the region and aids the state machinery by providing quality healthcare services in region surrounding Digboi.

2.1 Impact of the Program

a. Selection Criteria of the Beneficiaries

The Assam Oil Division Hospital expends an average of INR 4,313 lakhs every year on its CSR out of which, approximately less than 9.3 percent is spent towards NEP. Health camps of general and specialized nature are also organized regularly by the hospital to reach out to the poor villagers in the vicinity, who have no access to medical consultations or treatment.

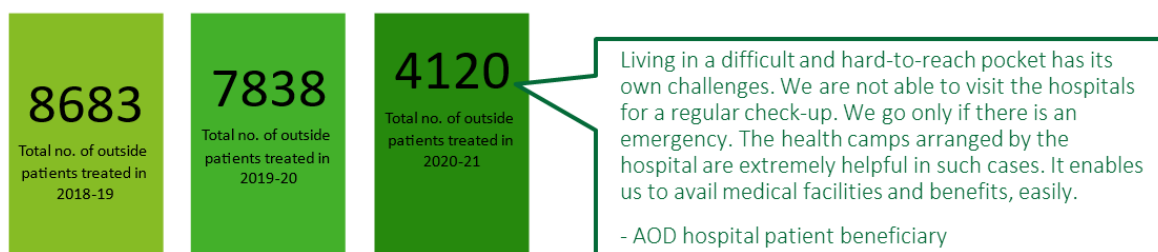


Figure 22: Total number of outside patients treated during 2018-21

During the 2018-19 period, approximately 8683 non-employee patients were treated at the hospital (Figure 20)¹¹. It is noted that the hospital registered 4021 NEP in 2021-22.

¹¹ See <https://iocl.com/pages/csr-overview>



Figure 23: Image of AOD Hospital reception and registration center for OPD

b. *Engagement with the Beneficiaries (after enrolment)*

The hospital is well equipped and well staffed with general physicians, dentists, orthopedics, gynecologists, pathologists, ENTs as well as surgeons. Patients have availed various services ranging from dental care, ENT, lab tests, and maternal care. Figure 24 represents the distribution of services availed by patients in 2021.

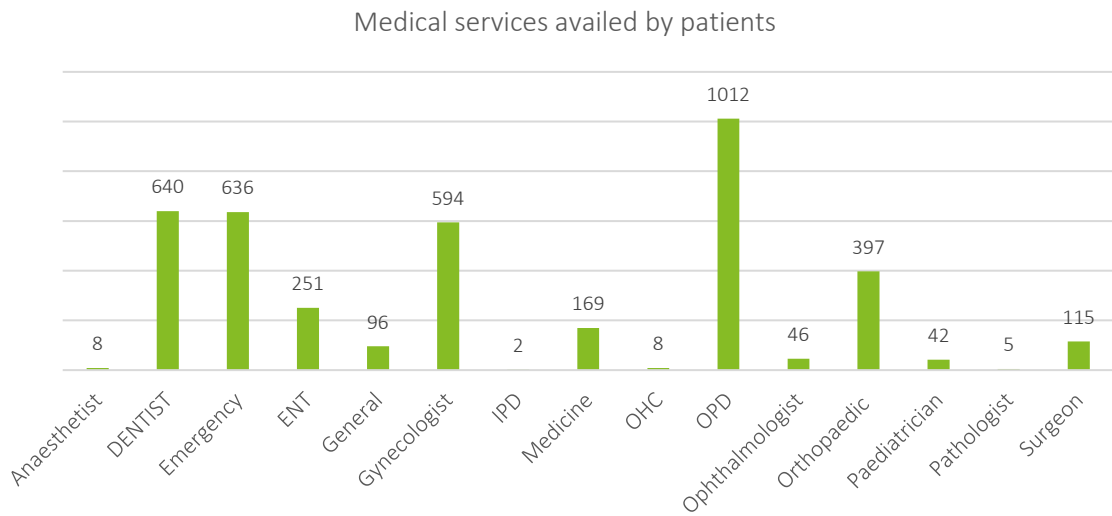


Figure 24: Distribution of medical services availed by NEP patients in 2021-2022

Out of the fifty-five respondents surveyed during this study, approximately ninety-one percent expressed satisfaction with the medical services received and only nine percent felt the need to visit another hospital due to lack of availability of beds, staff, or specialized treatment. However, only forty-one percent of respondents informed that they could obtain the prescribed medicines in the hospital pharmacy.



Figure 25: Access to AOD Hospital in Digboi

c. *Inclusivity and Outreach*

The medical and healthcare benefits are not only availed by the IOCL employees and their dependents but by the nearby areas surrounding Digboi including those from Arunachal Pradesh. Qualitative discussions with the patients informed that the hospital provides medical services to marginalized and vulnerable. Out of those surveyed, approximately fifteen percent belonged to marginalized and vulnerable groups. It is noted that majority (57%) of the total 4,021 NEP inbound patients in 2021-22 were women.

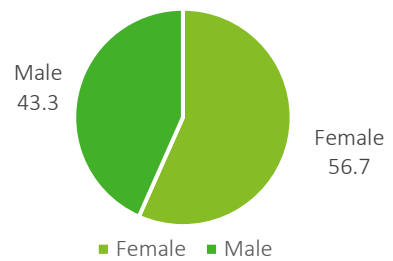


Figure 26: Proportion of male and female patients in 2020-21 (in %)



Figure 27: An admitted patient at Assam Oil Division Hospital in Digboi

The illustration above showcases a patient seeking healthcare service in OPD, a commonly accessed facility. The beneficiaries, during qualitative discussions, expressed their satisfaction with the medical services being provided at the hospital.

d. *Impact on the family*

The beneficiaries of AOD Hospital were from the villages in and around Digboi.

Qualitative Insights

The marginalized and vulnerable families apart from IOCL employees and their dependents conveyed that they benefitted at the hospital. Given the extremely reliable services and preference to return to AOD Hospital to seek medical care, the beneficiaries travelled from 25 km to reach the hospital. On inquiring further, the beneficiaries expressed that although alternative hospitals are nearby, (for some and up to 10 kilometres for others) they still preferred to visit AOD Hospital.

10 km is the average distance travelled by the beneficiaries to reach the hospital

Average Annual Income of **INR 3.41 Lakhs** of the beneficiaries visiting AOD Hospital in Assam

Approximately **14%** of the beneficiaries interacted during the study were holders of BPL Card

Out of the surveyed beneficiaries, 45 beneficiaries paid an average amount of, **INR 12,000** for their treatment/availing medical services



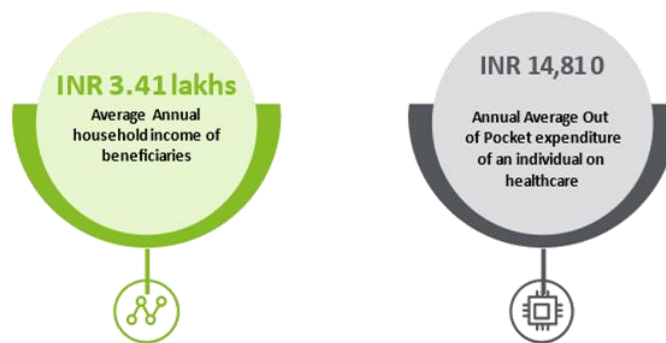
Figure 28: Pathology facility at Assam Oil Division Hospital in Digboi

e. *Access to Quality Healthcare*

The qualitative interactions with the beneficiaries revealed that the hospital services were easily accessible for all, with few respondents (14%) indicating that a slight delay in seeking approvals for availing the benefits. Average delay stated was 3 to 4 days due to the absence of BPL certificates. More than 35 percent patients received medical treatment free of cost. Out of these, more than forty percent were aware of the exact medical expense being born by the hospital.

Having an average household salary of INR 3.41 lakhs, majority of the respondents were extremely satisfied with the treatment they were receiving either free of cost, or at reduced cost. This is especially

helpful given that the total average Out of Pocket (OOP) expenditure for healthcare in Assam is INR 14,810¹².



2.2 Outcomes of the Evaluation

Relevance	IOCLs CSR support is providing quality healthcare access to the underprivileged in Digboi. The entire hospital is dedicated to offering healthcare under CSR for the neighboring villages of Digboi. The hospital caters to more than 4120 NEP during the assessment period.
Coherence	The hospital remains the most preferred choice for access to quality healthcare for the communities including the marginalized and vulnerable other than the IOCL employees and their dependents. At an average, more than fourteen percent, out of the total surveyed patients, belonged to the BPL families who received timely and quality medical care at no-cost.
Effectiveness	Almost all beneficiaries expressed satisfaction with the treatment offered at the hospital and availability of specialized doctors. Moreover, many also reported the ease in accessing and availing the medicines prescribed by the doctors from local pharmacies and medical stores
Efficiency	More than forty-one percent patients were able to access OPD and emergency services, followed by sixteen percent receiving dental care services. Approximately fifteen percent women approached AOD Hospital and received satisfactory genealogical services. In a nutshell, the hospital has been providing services efficiently as stated by the respondents.
Impact	The hospital has been providing healthcare services to the villages / communities in and around Digboi and been found impactful as expressed by the respondents during the study. Majority of the respondents were extremely satisfied with the treatment they were receiving either free of cost, or at reduced cost.
Sustainability	The hospital is managed by well capacitated staff and falls under the CSR funds of the IOCL for over the years. The sustainability of the hospital administration depends largely on the CSR funds especially from IOCL.

2.3 Way Forward

Technical	The hospital would benefit with increased number of specialized doctors to efficiently balance the doctor to patient ratio in the area.
Operational	<ul style="list-style-type: none"> Few recommendations from the surveyed respondents highlighted a need for minor improvements in the existing infrastructure, such as signboards directing towards different departments within the hospital.

¹² See <https://www.iosrjournals.org/iosr-jhss/papers/Vol.%2022%20Issue6/Version-8/I2206087682.pdf>

- With more machines, such as MRI and Echo, the hospital can be further furnished to cater to larger medical needs.
- Consider increasing stocks and varied medication in the pharmacy to move towards an efficient and effective one stop shop for affordable and quality healthcare.

Institutional The hospital is currently run largely on the IOCL CSR funds. However, given the quality medical care and timely services, the hospital can consider raising CSR funds from other agencies to benefit the existing functioning and infrastructure. With added funds, the hospital can leverage its existing monitoring mechanism to provide vast services such as neurology and urology.

Scale-up The hospital has the potential to be scaled up its facilities internally catering to the needs of NEP.

3. Swarna Jayanti Samudayik Hospital, Mathura in Uttar Pradesh

Mathura Refinery, since inception has always worked towards social upliftment of the surrounding community through its various CSR initiatives for providing quality education, women empowerment, skill development, infrastructure development, and medical facilities. A state-of-the-art medical facility Swarn Jayanti Samudaik Hospital (SJHS) was set up in 1999 to cater to the medical needs of people of Mathura District. SJHS is a 50 bedded facility with 10 beds reserved exclusively for patients Below Poverty Line (BPL). Additionally in the year 2021, 54 beds were added in view of the surge in COVID cases across the nation, and temporarily SJHS was converted into COVID Hospital. In addition to medical treatment & consultation, SJHS provides facilities like In-Patient Department (IPD) for general medicine and surgery, emergency services, physiotherapy, trauma ICU, burns department etc. The hospital also has a pathology and X-Ray facility at minimal cost. In addition, medical camps including sterilization camps, general check-up camps, eye camps etc. are also organized by the hospital. Around 50,000 non- employee patients are treated at this hospital every year.



Figure 29: OPD patient waiting area at SJSH



Objective

To provide health care services with latest medical equipment and seven trained specialized doctors to deal with respiratory problem particularly to residents of surrounding villages/areas



Project Cost

2018-19: INR 600.54 lakhs
 2019-20: INR 695.59 lakhs
 2020-21: INR 534.10 lakhs



Input

SJSH, being flagship project, has a dedicated fund every year that is spent as running cost of the hospital including salaries of staff, medicines, and other medical facilities. The infrastructural cost is borne by Mathura Refinery. An NGO is selected through public procurement process to maintain and manage the administration of the Hospital.



Output

SJSH has been fulfilling the medical needs of people dwelling in the Mathura region since inception and due to its repute, the hospital has been looked upon as one of the key healthcare providers in the region. The initiative of transitioning the Hospital into COVID facility at the peak of the pandemic has received huge appreciation from the patients as well as their family members.



Outcome

More than 30,000 patients were treated in 2020-21 and more than 1.5 lakh patients since 2018.

3.1 Impact of the Program

a. Selection Criteria of the Beneficiaries

The hospital offers treatment facility for public at a very nominal rate compared to any other private hospital in the region. The treatment for below poverty line (BPL) families is given free of any cost at SJSH when they belong to either of the nine surrounding villages by IOCL or referred by the district administration or the local member of the legislative assembly. For paid services (at a subsidized rate) is accessible to anyone without any eligibility criteria. The number of BPL patients treated in illustrated in Figure 31.

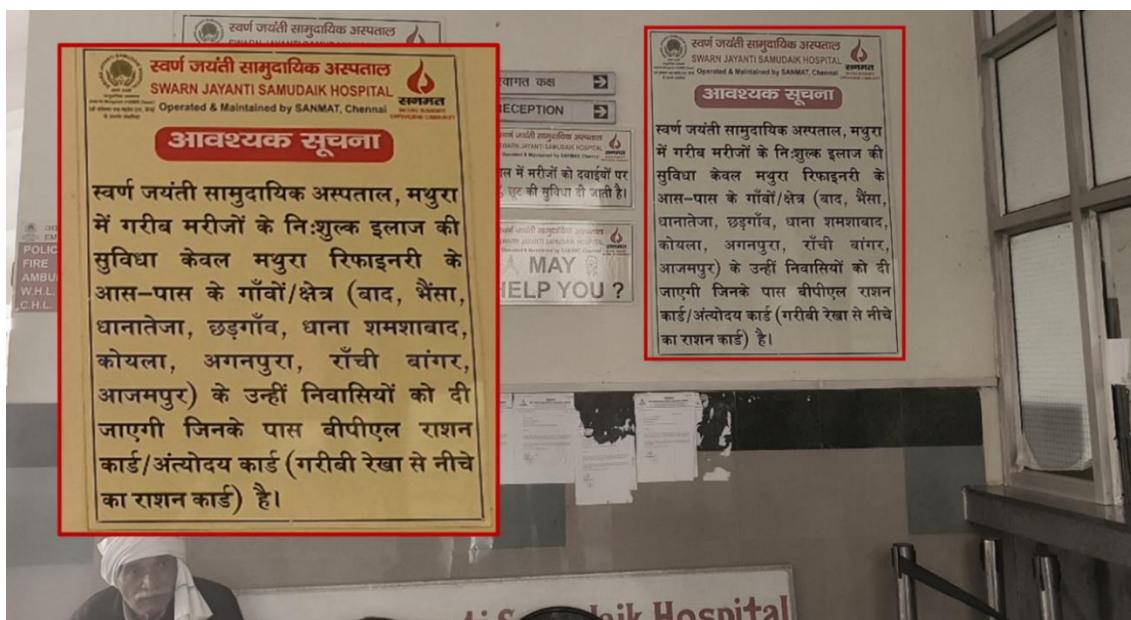


Figure 30: General Information Board in the Hospital for beneficiaries representing the nine villages

“MY FAMILY AND I, WE ALWAYS COME TO THE SWARN JAYANTI SAMUDAİK HOSPITAL (SJHS) FOR TREATMENT. THE DOCTORS HERE GIVE GOOD OPINIONS AND THE TREATMENT IS QUITE SATISFACTORY. WE AVAIL THE SERVICES WITHOUT ANY HASSLE OR DELAYS. KNOWING THAT WE CAN’T AFFORD EXPENSIVE HEALTHCARE, SJHS IS OUR SAVIOR”

- SJHS patient beneficiary

Number of Below Poverty Line patients treated free-of-cost at SJSH

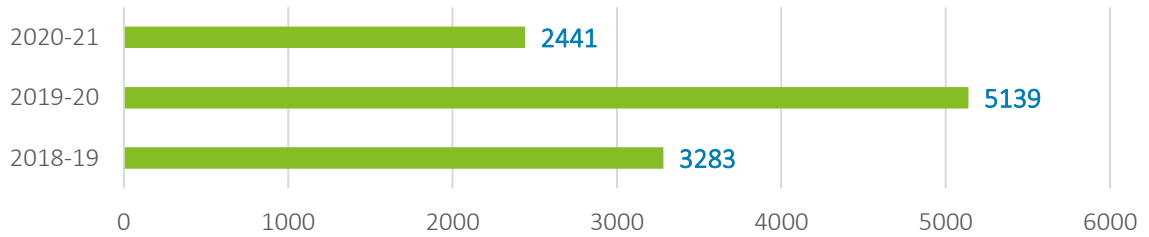


Figure 31: Number of Below Poverty Line Patients treated free-of-cost at SJSH

Source: IOCL Database

b. Engagement with the Beneficiaries (after enrolment)

There's been repetitive visits from several beneficiaries for good quality healthcare facilities at a very affordable price. Several testing facilities and pathology services are available at more than fifty percent discounted rates. The hospital is offering access to seven specialist doctors (Orthopedic, Pediatric, General Physician, Pathologist, Respiratory, General Surgeon, and Anesthetic) and four Emergency Medical Officer (EMO).

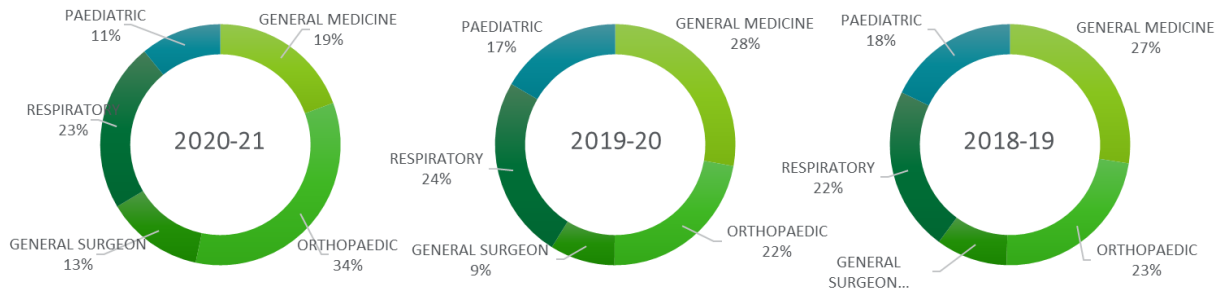


Figure 32: Distribution of OPD cases at SJSH from 2018 to 2021

Source: IOCL database

The above Figure 32 is an illustration of OPD cases at SJSH from 2018 to 2021. Most beneficiaries were attended for cases related to Orthopedic, General Medicine, and Respiratory issues.

Over the years the overall CSR expenditure on SJSH has reduced due to the unprecedented circumstances created due to the pandemic.



Figure 33: Pathology Laboratory at SJSH

The qualitative interviews informed that the support services at SJSH were easily accessed by the beneficiaries at affordable rates compared to other private facilities.

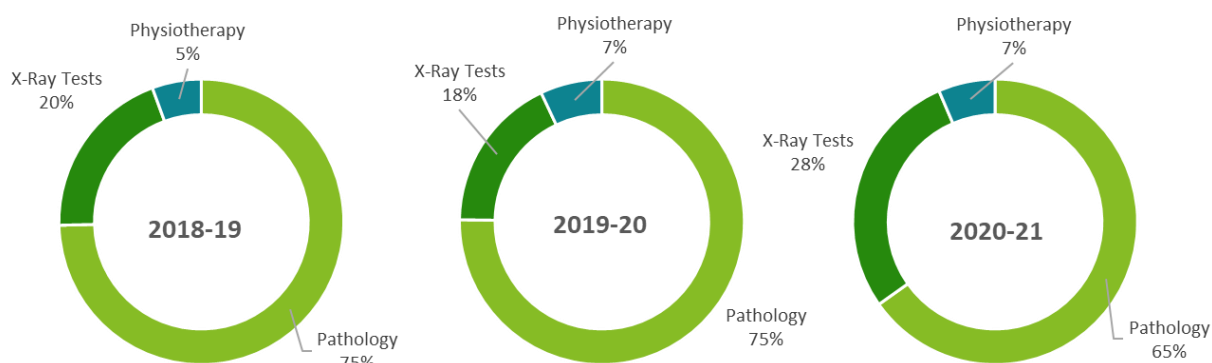


Figure 34: Annual Utilization of facilities and resources at SJSH from 2018 to 2021

Source: IOCL database

Figure 34 reflects commonly utilized facilities at the hospital wherein it is evident that pathology services are the most utilized service over the years. The beneficiaries have expressed during the study that the testing facilities provided at SJSH are reliable and easily accessible.



Figure 35: A beneficiary accessing physiotherapy facility at SJSH

c. Inclusivity and Outreach

The hospital is open to the public regardless of their background or any eligibility at an affordable rate. Whereas BPL families from the IOCL adopted villages or those recommended by the local Member of Legislative Assembly and/or the District Administration are given free treatment. The outreach activity did not include interactions and awareness campaign during the assessment period of 2018 to 2021. An interaction with hospital staff revealed that several health camps were organized by the hospital in the past.

d. Impact on the locality

The beneficiaries of SJSH (NEP) mainly belonged to the adopted villages of IOCL and other villages in and around Mathura. It is evident from the study that the underserved and economically deprived families dwelling in the vicinity of the hospital benefited a lot.

Qualitative Insights

The study revealed that the beneficiaries travelled an average of fourteen kilometers to reach the hospital. On inquiring further, the beneficiaries expressed that although they travelled a long distance to reach the hospital, they were unaware of any other alternative to SJSH which is close by.

Doctors Perspective

Qualitative discussions with the doctors at SJSH highlighted that the doctors were very satisfied with the overall governance mechanism, infrastructure and structural facilities since they were able to deliver medical services efficiently and effectively. Moreover, the doctors also shared that they get a sense of satisfaction, from being part of this program, as they get to serve the underprivileged, smoothly and with quality healthcare services.

14.5 km is the average distance travelled by the beneficiaries to reach the hospital

Average Annual Income of **INR 1.70 Lakhs** of the beneficiaries visiting SJSH in Mathura

More than **40%** of the beneficiaries interacted during the study were holders of BPL or Antyodya Card

Out of the surveyed beneficiaries, at an average, **INR 4,616** were spent by the families since their first visit to the Hospital*

*Includes multiple visits, admission, and excludes outlying expenses (external or major surgical expenses in the past)

Source: primary data collection n=92

The COVID-19 pandemic was a difficult phase for the entire world. In locations like Mathura, a reliable healthcare facility was not easily accessible during such difficult times. The hospital was converted into a hundred bedded COVID-19 facility to cater to Mathura and other surrounding areas during the second wave (2021). The hospital received local and national appreciation for its efforts during that period. The efforts were supported and partly managed by the local district administration during the outbreak of the second wave of COVID-19.



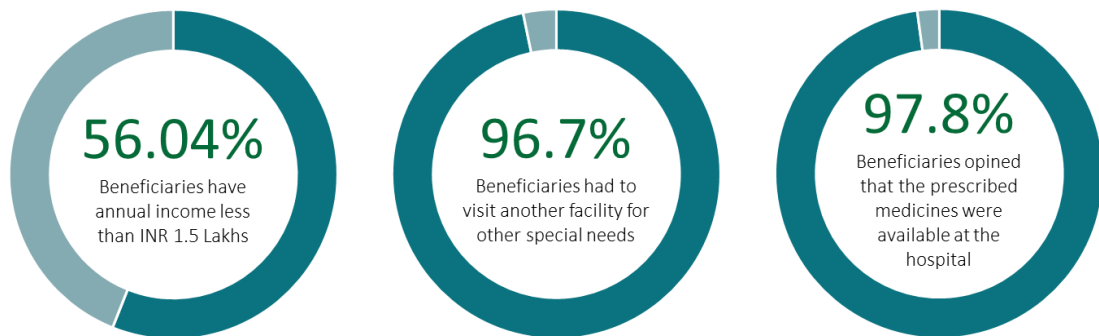
Figure 36: Mention in the local newspaper of the efforts of SJSH during the pandemic



Figure 37: A special mention of the 104-bedded combination of makeshift and permanent hospital during the outbreak of COVID-19

e. Access to Quality Healthcare

The hospital has provided healthcare to more than 1.5 lakh cases including OPD and admissions since 2018 at a very affordable price of nearly more than fifty percent lower than other private healthcare facilities.



Source: primary data collection n=92

Figure 38: Accessibility to quality healthcare for beneficiaries at SJSH



Figure 39: Pharmacy at SJSH at a discounted rate for beneficiaries

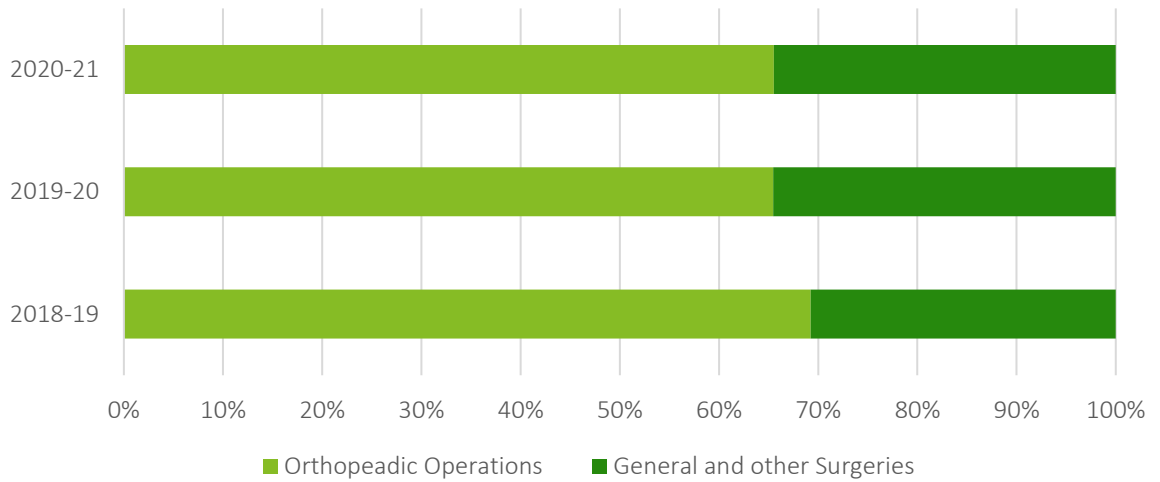


Figure 40: Major and Minor Surgeries at SJSH between 2018 and 2021

Source: IOCL Data

The hospital has adequate facilities for conducting operations and surgeries over the period of assessment. However, during the impact assessment study, the facility to perform operations was not fully functional. The hospital has an operation burn ward as well.

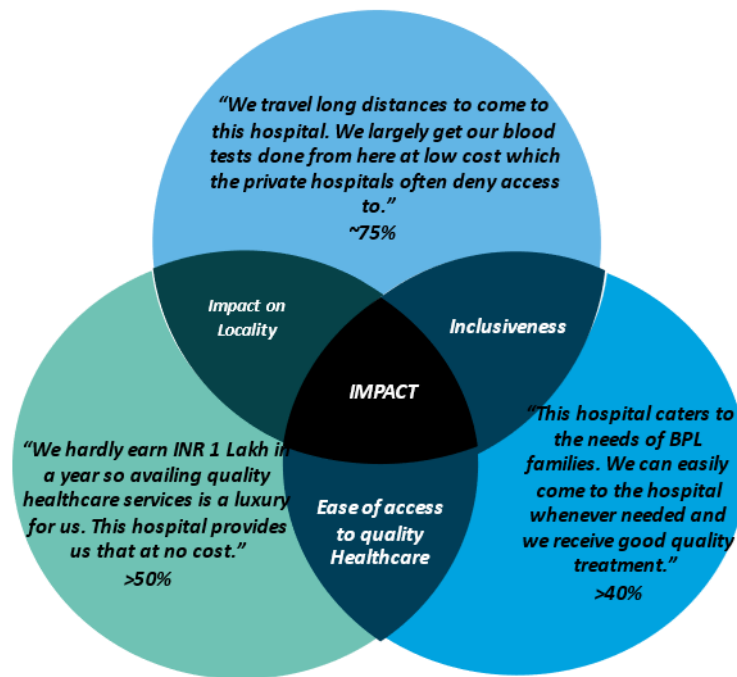


Figure 41: Qualitative insights from the beneficiaries based on their experience with the hospital

The qualitative discussions with the beneficiaries highlighted dual-benefits of the program (Figure 40). It was noted that the intervention had a positive impact on the locality since there was no well-

established alternative to the healthcare problems of the people in the vicinity which inclusively provided benefits to all. Moreover, the ease of access to quality healthcare



Mr Shivalal a resident of Chandanvan (Mathura) is more than eighty years old and retired with a limited income source. He has been visiting the hospital for last fifteen years for several chronic illness. Due to old age and illnesses, he gets hospitalized at least twice a year at SJSH. His medical expenses are affordable at SJSH with his limited income. The ease of accessibility to healthcare facility in the neighborhood, senior citizens like him are benefitted. SJSH has an everlasting impact on his family's life by offering healthcare facility to him at hour of need.

"In the absence of SJSH, access to healthcare would have been an unimaginable challenge for me and my family."

3.2 Outcomes of the Evaluation

Relevance

The hospital is meeting the objectives outlined to serve the underprivileged in the locality of Mathura region. The entire establishment is dedicated to offering affordable healthcare for the neighborhood of Mathura and adopted villages by the Mathura Refinery.

Coherence

The hospital had served as a COVID-19 facility during the pandemic and catered to BPL families from the adopted villages or those recommended by MLAs who were treated free-of-cost.

Effectiveness

All the beneficiaries expressed unilateral satisfaction with the treatment offered at the hospital and availability of medicine at discounted price was communicated as another value addition.

Efficiency

Availability of five specialized medical treatments is supported by thirteen doctors and consultants, accessible to all patients that are in need. Moreover, the hospital has an emergency facility that operates 24x7 fully staffed with doctors. As a result, a very high percentage of patients received good medical care in comparison to other private hospitals. Pathology (65-75%) followed by orthopedic and general medicine were most consumed medical services in the hospital, apart from pediatric and respiratory services. Consequently, more than 30,000 patients have benefitted in 2020-21 from these specialized services.

Impact

The hospital treats more than fifty thousand patients on average annually and treated more than 1.5 lakh patients during the assessment period. The hospital has served as COVID-19 facility with an addition of 54 makeshift beds for preparedness of the outbreak of second wave. This includes 3,600 BPL patients who were given free-of cost treatment cost during the evaluation period.

Sustainability

The hospital is managed by an NGO hired by IOCL. The NGO is offering access to affordable and quality healthcare for the beneficiaries. The hospital is sustaining its operations by offering a variety of treatment and necessary health facilities in the same place (such as medicine, testing labs, operation theatre, etc.). In the absence of IOCL funding, sustainability of its operations would be a challenge.

3.3 Way Forward

Technical	The hospital establishment is large and can be transformed into a well-equipped multi-specialty hospital.
Operational	<ul style="list-style-type: none"> Facilities such as digital data storage of patients and online booking will add more value to the operations. Several non-operational and existing infrastructure can be operationalized again. The facility is entirely owned by IOCL that can be transferred to a trust. By operating as a trust, the hospital can attract greater CSR donations from other corporates and operate more independently. The hospital is lacking several capital-intensive articles from IOCL since the ownership of the article will remain with IOCL and not be counted as CSR expenditure and rather counted as an expenditure from the capital revenue.
Institutional	Conversion of the establishment “Swarn Jayanti Samudaik Hospital” into a Trust will give more independent institutional operations and outcomes to the hospital. Moreover, this can give additional headroom for CSR donation from IOCL (Mathura Refinery) and lower the operational overheads.
Scale-up	The initiative can be scaled up by convergence with several schemes implemented by the State and Central Government such as Pradhan Mantri Jan Aushadhi Pariyojna. Integration with PMJAP will allow access to low-cost generic medicines to the beneficiaries of the hospital.

4. Installation of rainwater harvesting systems in Government primary schools in Vadodara, Gujarat

The District Collectorate of Vadodara planned for robust water conservation infrastructure, starting with 732 schools in the district to the team of Gujarat Refinery. This led to the construction of roof-top rainwater harvesting infrastructures in 732 Government Primary Schools across 567 villages in 7 talukas of Vadodara district with IndianOil as a partner. This has benefited around 1,46,200 school students and all villages surrounding the schools.



Figure 42: Rainwater Harvesting system installed in Vadodara



Recharging Water Table, Saving of Rainwater & Clean Environment

Objective



Project Cost

INR 338.34 Lakhs FY 2019-20

INR 87.71 Lakhs FY 2020-21

INR 426.05 Lakhs



Input

- Constitution of a three-tier committee to implement, monitor and supervise the project
- Development of a low-cost economically effective rainwater harvesting model based on geographical conditions
- Mobilization of financial resources
- Conduct of IEC campaigns for awareness generation



Output

732 schools are covered under the project in the year 2019-20. The scheme was completed in a record span of 9 months.



Outcome

- Substantial increase in ground water level.
- Improvement in quality of water to combat flood-like situation in villages.
- Increased awareness of water conservation among villagers

4.1 Impact of the Program

a. Implementation Details

The project 'Varsha Jal Nidhi' was steered by the District Administration, Vadodara along with the unstinted support of Gujarat Refinery at every step. The Gujarat Refinery officials also lent their expertise in drawing up the detailed Operation & Maintenance (O&M) procedures for the project and developed a white paper on the Standard Operating Procedures (SOPs) on the pre monsoon & maintenance activities.



Figure 43: A rainwater harvesting unit installed in a primary school in Vadodara



Figure 44: SMC meeting to discuss implementation

the district.

A three-tier committee was formed to implement, monitor, and supervise the project – district, taluka, and village level. While the program was being supervised and monitored at the district and taluka level, respectively, 100% grant was allotted to SMC by district committee to implement the program at the village level.

732 Schools

567 Villages

Around 1,46,200 school students



Qualitative Insights

District technical committee comprising experts from IOCL constantly monitored the project to maintain the quality of rainwater harvesting project works. Onsite visits, inspections, surprise visits, and technical guidance were done for maintaining quality.

Mobilization of financial resources to cover all 732 government schools with rainwater harvesting in one year was the biggest challenge for the district administration. Qualitative discussions with the stakeholders highlighted that funds amounting to INR 584 Lakh was mobilized through convergence of government grants and CSR funds from various industries (IOCL contributed INR 426 lakhs).



Figure 45: Water Assessment and Water Security Workshop

b. Inclusivity and Outreach

District Administration Vadodara initiated “Varsha Jal Nidhi” rainwater harvesting project to conserve rainwater in all government primary and secondary schools of rural areas in the district. 963 school buildings were covered in a phased manner for 9 months; this study covered 732 for IOCL.

Vadodara is the first district in the country to harvest rainwater in all government primary and secondary schools in rural areas of

The program also received media coverage in the regional newspapers appreciating the measures to recharge the groundwater levels and improve the water quality. The use of frugal technology to serve the purpose in a cost-effective manner was a catalyst in achieving higher savings per rupee spent.



Figure 46: Mention of the project in the local newspaper



Figure 47: Local campaigns to save water in the schools and the neighborhood for awareness

c. Environmental Impact and water saving

Pre-Implementation Scenario	Post-Implementation Scenario
<ul style="list-style-type: none"> • There was no system of collection and harvest of rainwater in schools. • Very few schools, about 37 government primary and secondary school buildings were covered under Rainwater Harvesting. • The model of rainwater harvesting was too costly • Less awareness about rainwater harvesting in villages • Erosion of soil of school ground and huge wastage of rainwater • Environmental degradation 	<ul style="list-style-type: none"> • Out of 1000 government primary and secondary school buildings, remaining 963 schools are covered under the project in the year 2019-20 achieving 100% Coverage • The scheme is implemented in record time of 9 months • Increase in ground water level • Harvesting good quality rainwater that otherwise gets wasted • Improvement in quality of water to combat flood-like situation in villages • Huge awareness of water conservation among people

Figure 48: The environment impact and outcomes of the project

Impact assessment team observed on the basis of data collected that approximately one crore liter rainwater was collected per school per year¹³ whereas the average annual rainfall in the talukas where the rainwater harvesting units are installed varies from 732mm to 1025mm. Thus, the rainwater harvesting model has the potential to collect a cumulative of 1000-1200 lakh liters rainwater because of

¹³ As per IOCL database

the project. This has not only led to increasing the groundwater level but has also improved the quality of water



Figure 49: An exhibit of the water harvesting pipes directing the rainwater to underground

4.2 Outcomes of the Evaluation

Relevance	Installation of rooftop rainwater harvesting units in Government schools has enabled groundwater recharge with limited efforts of only maintenance of the units. The solutions are installed with a cost-saving model wherein the product is customized as per the need to ensure groundwater recharge in a frugal manner. The cost of installation was lower than conventional models.
Coherence	The initiative combines educational and environmental benefits along with water conservation. The installed rainwater harvesting units are recharging the groundwater level and are expected to improve the quality of drinking water.
Effectiveness	The catchment area of the rainwater harvesting system is dependent on the area of the school's rooftop that increases the potential for groundwater recharge. It is estimated that one crore liter rainwater can be collected per school per year. Hence the RWHS are found effective in improving the groundwater recharge in the areas surrounding the schools.
Efficiency	The scheme achieved its target in a record-time of nine months. Detailed O&M and SoPs contributed to achieving this target well in time. A robust and decentralized implementing and monitoring mechanism helped in achieving the intended outputs, seeing participation and engagement of 1,46,200 school students. The effort has an annual water saving potential of more than one crore liters of rainwater based on the local rainfall records.
Impact	The impact is three-fold wherein the ground water table has a potential to improve, the possibility of soil erosion is thinner, and possibility of water logging /flooding is lower after harvesting the rainwater.
Sustainability	The project was implemented with a frugal solution that is potentially a cost-saver compared to a traditional rainwater harvesting solution. The solution is sustainable provided the government takes the initiative up and includes it in its other similar schemes such as MGNREGA, etc.

4.3 Way Forward

Technical	<ul style="list-style-type: none"> The rainwater harvesting units may be integrated with the school’s internal water for utility and save water utilization and cost on utilities. The technology can be coupled with a stormwater management solution
Operational	The operations were managed by the Department of primary education under the supervision of District Administration
Institutional	Since the solution is implemented by the District Administration, institutional solutions are not in the purview of IOCL as a donor.
Scale-up	There is a potential for the Government, or its establishments could consider the innovation and adopt them widening the impact on the groundwater levels by scaling it up across the state pf Gujarat.

5. Nai Disha: Provision of dual desk benches in 24 Govt. schools at Ranga Reddy district of Telangana

Nai Disha is an initiative supported by IOCL for provision of 1500 Dual desk Benches to 24 Govt High Schools in four Mandals – Chowderguda, Kothur, Farooqnagar & Keshampet in Ranga Reddy district of Telangana. These benches were made by the inmate of Chanchalguda Jail in Hyderabad. It is a win-win situation for all stakeholders involved benefiting economically and socially deprived school children in one of the most backward areas of Telangana. It also benefited the prisoners/inmates by engaging them in useful vocational trade, thereby helping their families through livelihood enhancement and facilitating skills and potential livelihood opportunities upon their release.



Figure 50: Dual desk benches donated by IOCL to Zila Parishad Schools in Rangareddy District of Telangana



Objective

Provision of 1500 Dual desk Benches to twenty-four Govt High Schools in four Mandals – Chowderguda, Kothur, Farooqnagar & Keshampet in Ranga Reddy district, Telangana



Project Cost

INR 64.5 Lakhs (July 2018 to March 2019)



1500 Steel dual desks manufactured at Chanchalguda Jail were supplied to twenty-four Government schools in Ranga Reddy district of Telangana.



The project has benefitted economically & socially deprived school children in one of the most backward areas of Telangana as well as benefiting the prisoners/inmates by engaging them in useful vocational trade.



- The students are found more attentive due to the comfort of studying on benches with improved ergonomics.
- The prison inmates started gaining an alternate means of livelihood that gives them the much-needed trust.

5.1 Impact of the Program

a. Selection Criteria of the Beneficiaries

The initiative supports jail inmates in generating a meaningful livelihood and provides basic infrastructure to the schools in rural areas. The schools were selected based on non-availability of infrastructure and accessible by underprivileged families. The benches provided to the schools gave comfort to the students while they were at school and helped them access quality education and also motivated them to come to the school. Meanwhile, products manufactured by the Jail inmates were selected to offer resilience to inmates of the prison to trust fair means of livelihood.



Figure 51: Beneficiary students from underprivileged families in a Zila Parishad High School in Ranga Reddy District in Telangana

b. Engagement with the Beneficiaries (after enrolment)

School Administration and Students: During the study, the school administration expressed a reduced enrolment of students (annually) due to lack of basic infrastructure in the school before the intervention and it has improved once the benches were laid in the classrooms.

All surveyed school principals have expressed that the benches were of adequate quality and did not require any additional maintenance. The students and families have mentioned to the school administration that improved ergonomics for students is one of the primary reasons for the students to attend the school regularly.

Qualitative Insights

The enrollment rate improved due to presence of the benches in the school but later it was again impacted adversely due to the pandemic.

Up to **10%** increase in attendance of students
(Average of surveyed schools since 2018)

1500 students benefited from benches that are donated to the schools

Average **61** benches donated to each Zila Parishad High Schools

Source: IOCL database and primary interaction with schools

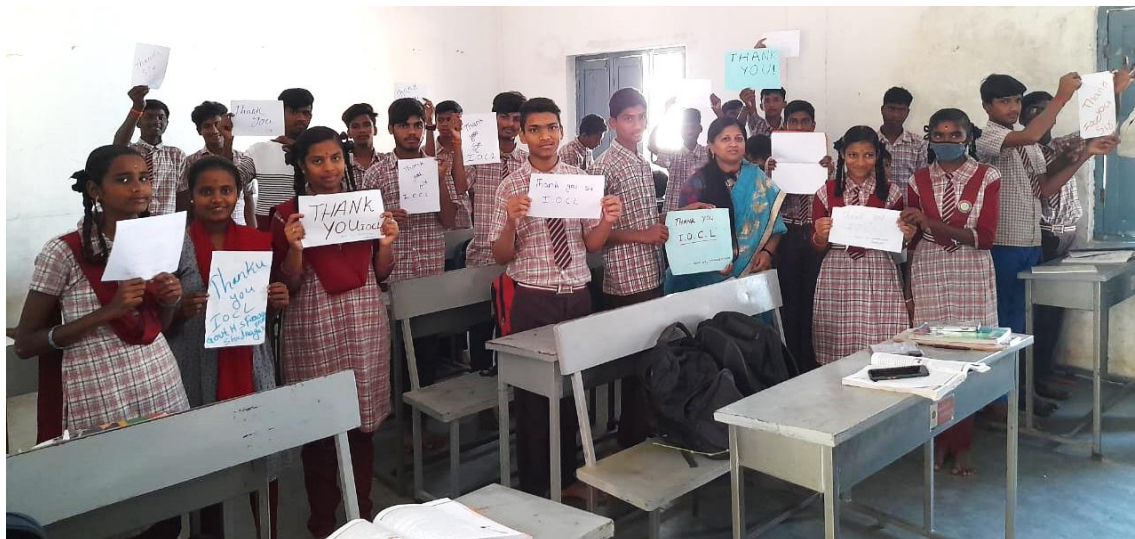


Figure 52: Benches donated by IOCL in a Zila Parishad School in Ranga Reddy District

Jail administration and inmates: The qualitative discussion with the key stakeholders informed that the inmates were motivated for making the benches as it provided them an alternate livelihood option which is fair means and reliable to give them a consistent income. The Central Prison in Chanchalguda Hyderabad, has a workshop wherein products like benches are made. The jail inmates working in the workshop are offered a daily wage to continue to earn a source of income and the profits earned by the Jail Administration are reinvested in development of the Jail and other facilities.



Figure 53: Inmate workshop in Chanchalguda Central Prison, Hyderabad

c. Inclusivity and Outreach

The initiative of IOCL provided benefits to the schools in Ranga Reddy District that are owned and operated by the Zila Parishad. The high school students (8th standard to 10th standard mostly) are the beneficiaries. Whereas the inmates that are involved in the workshop do not have a bar on selection. The program exhibited limited outreach and measures to reflect inclusivity of several other strata of the society since the beneficiary base is limited.

d. *Impact on the family and access to education /livelihood*

High School Students: The families have appreciated the school administration for having benches in such schools wherein the students from financially challenged families are enrolled. The families could not afford admission to a private school with advanced infrastructure. Lack of good ergonomics to study had an impact on health and attentivity of the students. The presence of benches in the school gave a reason for motivation to the students.

➤ "The school has improved its infrastructure with new tables and chairs. An improved infrastructure motivates students to be regular in the classes as they feel comfortable and feel that the school is responding to their needs."
- One of the Beneficiaries



Zila Parishad High Schools in Ranga Reddy district in Telangana expressed that the students came from poorest of poor families wherein they are scarce of several benefits and motivation to attend the school. The availability of benches in the school offered them a reason to be in comfort to receive education. In fact, the presence of benches was found to be one of the reasons for increased enrollment in the next year. Parents could not afford to offer access to private schools for their children, but the presence of benches reflected assurance to them on availability of comfortable infrastructure that the parents were scarce of but offered to their children.

Jail Inmates: The inmates are offered work in a manufacturing workshop in the Central Prison in Chanchalguda. The inmates are offered a daily wage for the services that they render during their period of sentence. The qualitative discussions with key stakeholders highlighted that the opportunity to work and make a fair living for themselves makes the inmates believe in fair means of livelihood and develop skills for a longer term.



In a one-to-one interaction with prison inmates who were involved with the project to understand the impact the project has made in their lives.

Mr. Hanumant Lal, Mr. Mukesh Yadav, Mr. Razzaq Mohammad, Mr. Jahangir Mohammad, Mr. Syed Mehmud expressed their experience over the time and being a beneficiary of the initiative. The inmates were daily waged laborers before imprisonment. Whereas a few of them were semi-skilled. The prison administration provided training and skill enhancement to the inmates through a full-term course on hardware, sheet metal and carpentry and a five-day workshop on immediate assignments. Now the inmates are earning at least INR 350 per bench hence the Nai Disha project resulted in revenue of more than INR 5 lakhs by one intervention employing fifty inmates. The initiative offered them a livelihood security, carpentry and other skills, and faith in a fair livelihood source.

5.2 Outcomes of the Evaluation

Relevance	The donated benches to the schools that have limited infrastructure for students added value by making schools more attractive for students in the local region. Parents begun to have faith in the schools for offering fundamental infrastructure. Meanwhile, developed confidence in Central Jail inmates that they can acquire skills to maintain a stable livelihood.
Coherence	The project promoted livelihood generation and enabling education for students.
Effectiveness	All the surveyed schools showed an increase in attendance with the new benches for students; this of course went down drastically during the pandemic. A large order for the products manufactured in the prison acted as a confidence booster to inmates on their work.
Efficiency	The project, with dual objectives, showcased a very high efficiency in terms of resource utilization, by benefitting 1,500 socially and economically weaker students on one hand and providing excellent livelihood opportunities to the jail inmates, on the other. This improved access to education by 10% in more than 60 schools in Zila Parishad. During the survey, the schools mentioned that fine quality benches are installed in the schools by IOCL that didn't require maintenance or replacement.
Impact	The benches motivated students and their parents that the school is offering all the fundamental necessities and comfort. The students also tend to offer more focus and concentration in education with ergonomic comfort. Whereas the prison inmates get better opportunity for livelihood generation through such high quantity orders.
Sustainability	The furniture supplied to the schools is an easily replicable model and the quality of the supply requires low maintenance.

5.3 Way Forward

Technical	The school furniture could be manufactured with the use of recycled material that will have lower impact on the environment and be a live testament for students to understand how recycling can be adopted.
Operational	The effort does not involve any operational control from IOCL. However, going forward similar interventions can be considered by IOCL for other locations.
Institutional	Current mode of implementation does not involve any institutional setup.

Scale-up The intervention may go beyond offering benches to other infrastructure in the school that can be utilizable for the students. The school administration expressed the need for more infrastructure such as furniture in staff rooms, science laboratories, access to clean water, clean and separate washrooms, among other similar efforts that can be linked with the effort.

6. Support to Mother’s milk bank in Dharmapuri, Tamil Nadu

Mother’s Milk Bank (MMB) ensures availability of safe donor human milk at Neonatal intensive care unit (NICU)/ Special Newborn Care Units (SNCU). This is critical to ensure that every sick and preterm baby receives human milk within the first hour. Donor Human Milk (DHM) plays a lifesaving role by helping these babies receive the benefits of early initiation and exclusive feeding of mother’s milk. Therefore, a mechanism is needed to collect, pasteurize, test, and store safe DHM from lactating mothers and provide it to infants when in need. This process will ensure that even if babies cannot be breastfed, they still receive mother’s milk when needed.



Figure 54: The team at Human Milk Bank at Dharmapuri Government Medical College



Objective

A mechanism to collect, pasteurize, test, and store safe DHM from lactating mothers and provide it to infants in need, will ensure that even if babies cannot be breastfed, they still receive human milk as soon as possible.



Project Cost

INR 17.57 Lakhs



Input

The project provides fund towards developing and sustaining a mechanism to collect, pasteurize, test, and store safe DHM from lactating mothers and provide it to infants in need.



Output

To provide human breast milk to target population via supporting the mechanisms to collect, pasteurize, test and store safe DHM from lactating women.



Outcome

- Decreased mortality amongst pre-term babies after introduction of Human milk Bank
- Increased awareness amongst the young mothers about importance of mother’s milk for new-born.

6.1 Impact of the Program

a. Selection Criteria of the Beneficiaries

The beneficiaries comprise of orphan infants /newborn babies whose mothers are unable to lactate who are from the locality. The primary purpose of the mother's milk bank is to offer access to breast milk for the newborn babies that are orphaned, or the mother is unwell or unable to feed. The unique initiative has assisted more than 3900 babies (beneficiaries) during the assessment period wherein the dispensed milk is nearly one million milliliters.

Screening of Donors: The hospital follows a strict protocol for screening its donors. A donor screening cum registration form is shared with the interested mothers. Apart from capturing general information, the form also captures information on donor's medical history, present illness (if any), thorough medical and lifestyle history, as well as blood tests for infections like HIV, VDRL, and hepatitis B and C etc. in both English and Tamil. The form is attached in the below Figure 55.



Figure 55: Guidelines for Milk Donation and Milk Banking Procedures

b. Engagement with the Beneficiaries (after enrolment)

The efforts by IOCL involves supply of essential products to the Government Medical College and Hospital in Dharmapuri that included

- Two phase Expression Electrical breast pump, Breast milk pump accessories, Deep freezers, Refrigerator, Autoclave Machine, Human milk Pasteurizer, Sterilizer, and other medical essentials
- Steel tables, Steel bureaus, Plastic Chairs, Steel Chairs, Music System, Desktop Computer with Printer and Network facility, 43-inch led TV, Pressure Cooker, Induction Stove, and other support.
- Civil works and electric works including Split Air Condition Units

The supplied equipment and products by IOCL to the mother's milk bank was crucial in ensuring sustenance of the milk bank and preservation of the donated milk.

The shelf life of the donated mother's milk has been increased with the technological support offered by the equipment under the CSR funds of IOCL.

More than **12,300** donors since March 2020 participated in the initiative

1 million milliliter milk collected at the mother's milk bank

More than **3900** infants benefitted by the donated milk

0.98 million milliliters of milk consumed by the beneficiaries

Source: Primary interaction with the mother's milk bank administration at Government Medical College in Dharmapuri.



Figure 56: Treatment of a newborn at Government Medical College and Hospital at Dharmapuri

c. *Impact on the families*

The infants impacted by the initiative are mostly pre-mature or unwell that require consistent care along with access to mother's milk in the incubator. The families that got benefited under the intervention mostly come from an underprivileged community with limited access to financial wellbeing. The project is allowing the families to take care of the infant with good healthcare facilities within the limited affordability.

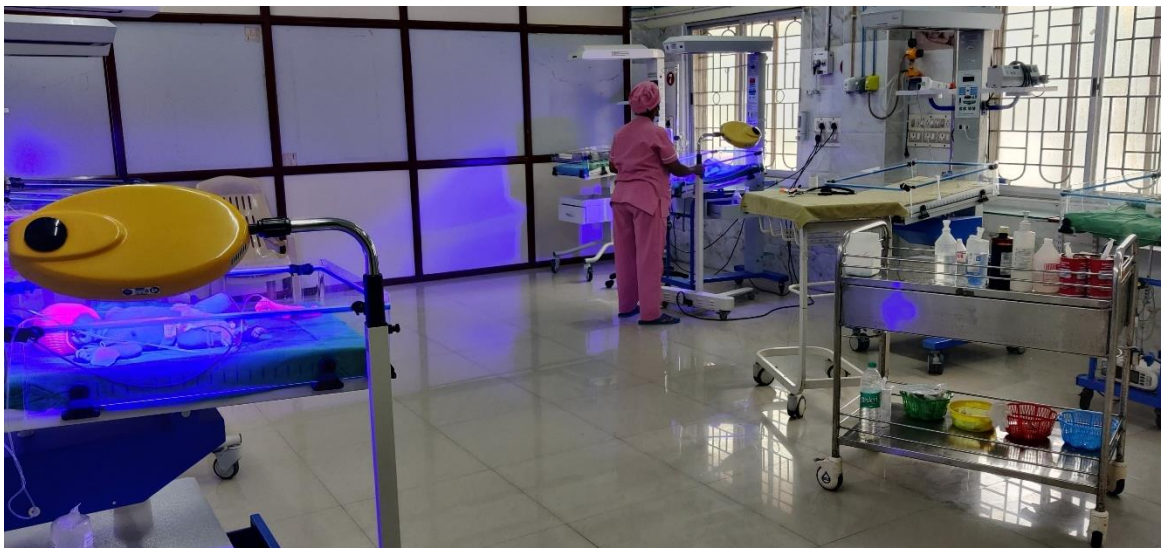


Figure 57: Incubation and pediatric care facility at Government Medical College and Hospital in Dharmapuri

Importance of neo-natal child health and nutrition amongst mothers and societies: The Mother Milk Bank has helped in reducing the infant mortality amongst pre-term babies. Additionally, babies with sick mothers also receive donated milk. The figure below shows a baby receiving milk from the milk bank.

d. Access to Quality Healthcare

1:3

Benefit ratio

More than **3 donors needed to serve each beneficiary** since 2020



Consumption

More than **253 ml mother's milk consumed by each beneficiary** over the time



Future Prevention

Awareness on maternal care and importance of mother's milk for the beneficiaries



Root Cause

Root causes identified by the administrative staff for lack of mother's milk are **poor literacy, poor maternal health, and teenage pregnancy**

The healthcare offered to the infants is highly appreciated by the families and the donors of mother's milk. The technology products supplied under the CSR initiative of IOCL are having direct and indirect impact on the lives that are saved in the facility. The increase in shelf life of the donated milk helped the facility management team to offer the benefits on a longer term to the beneficiaries.

"This program is extremely beneficial for the quality of life of our child. The doctors emphasize the importance of mother's milk but unfortunately, it was difficult for us to provide it. Thanks to this bank, we are able to avail of the benefit at no cost."

- MBB beneficiary



Figure 58: Acknowledgement of the CSR intervention by IOCL at the Government Medical College and Hospital for paediatric care

6.2 Outcomes of the Evaluation

Relevance

The accessibility to paediatric care is not common in smaller cities and towns in India where the need is higher due to lack of literacy and care facilities for infants. The project has offered the access to paediatric care and mother's milk to the unwell or premature newborn babies.

Coherence

The initiative is promoting access to healthcare for newborn and young mothers. Beneficiaries of the program are the underprivileged families that may not have access to advanced healthcare facilities or the affordability to visit a private facility.

Effectiveness

Donation of nearly a million milliliters of mother's milk is a testament to awareness and sense of responsibility among the donors to help the strata that requires help.

	Effectiveness of the intervention improved by the medical equipment offered under CSR initiative.
Efficiency	The facility is efficient enough to assist one beneficiary against three donors with an average consumption of 253 ml mother’s milk since 2020. The efforts are witnessed with an increasing number of donors annually. The equipment is sufficient to ensure a surplus of milk availability with cold storages.
Impact	More than 12,300 donors have accessed the facility to donate their milk benefitting around 3900 infants admitted to the hospital. The initiative has educated the mothers and family members about the importance of maternal care and social upliftment.
Sustainability	<p>It was noted that the process is sustainable and there is scope to replicate and scale up similar models. The process of collection, processing and storage of human milk has been taken care with the highest level of attention.</p> <p>The hospital is further taking Information-Education-Communication (IEC) initiatives like awareness campaigns, spreading message through videos on social platforms for program promotion. This has proven to be highly effective.</p>

6.3 Way Forward

Technical	The hospital administrative staff has communicated the need for additional equipment that may include a thawing machine, human capital, electric pumps, and other automation techniques.
Operational	IOCL does not have an operational participation in the Mother’s Milk Bank hence, no way forward may be required. Within the limited scope, IOCL may assist the Hospital with awareness workshops, campaigns, and outdoor initiatives that be help with greater awareness and outreach of the cause.
Institutional	The institutional setup of the medical college and hospital is beyond the scope for IOCL. An internal institutional transformation may be set up to assist only pediatric efforts since the scope of assisting newborns is huge. A focused initiative may be proposed to scale the initiative in other government hospitals.
Scale-up	The initiative is focused on a novel cause of assisting newborns that belong to an underprivileged family. The initiative has a huge potential for growth and scale up in other smaller towns and cities of India wherein the maternal and neonatal care is a challenge. This will help in reducing the infant mortality at the state / national level in the longer run.

Annexures



Annexure: Project Questionnaires

Vidushi Super 30 Girls Project

Questionnaire for students

Table 4: Form FQ1 - Questionnaire for Students of Vidushi Project

FORM FQ1 - Questionnaire for student of Vidushi Super 30 Girls Project		
Part 1 – Beneficiary Details		
#	Question	Response
1.	Name of the Beneficiary	
2.	Address during intervention period	State, district and block
3.	Month & year of birth	MM/YYYY
4.	Do you belong to any vulnerable group?	Yes or No (If yes, SC, ST or PWD)
5.	Number of family members having a graduate degree	
6.	What is the primary source of income for your family	
7.	What was the annual income of your family during the intervention period?	In INR
Part 2 – Beneficiary Exam Results		
#	Question	Response
8.	What was your score in 10 th Board exam?	CGPA % & Name of Board
9.	What was your score in 12 th Board exam?	CGPA % & Name of Board
10.	What was your score in JEE-Main and the JEE-Advanced?	
11.	Were there any other exams that you appeared for? (If yes, please specify the names and score)	Yes/No
12.	Name of the university and course selected by you after completion of secondary higher education	
Part 3 – Vidushi Center Details		
#	Question	Response
13	Which center did you attend during the intervention period?	Bhubaneswar/ Jaipur/ Noida/ Patna
14	Date of joining the center	(DD/MM/YYYY)

15	Date of completion of course	(DD/MM/YYYY)
16	Total number of teachers involved during the intervention period	
17	What were the subject taught to you during the intervention period?	Name of subjects
18	Average hours taught during a class	In hours
19	Number of classes during the week	(Number per week)
20	Were there any books & stationery provided by the center? (If yes, specify details)	Yes/No
21	Were there any other benefits provided by the center, such as accommodation and food? (If yes, specify details)	Yes/No
Part 3 – Project Outreach		
#	Question	Response
22	How did you come to know about the project?	
23	Do you think that there could have been a better way to improve the outreach of the project? If yes, how?	
24	What process of selection did you go through for getting selected into the project?	
25	How long was the selection process? (In number of days)	
Part 4– Involvement of Family Members		
#	Question	Response
26	What was the frequency of the parent teacher meets?	Monthly/ quarterly/ half-yearly
27	How were your parents informed of your academic progress?	Calls/ PTMs/ Report Cards/Others
28	Were your other siblings also willing to join the project, if given the chance? (If no, why)	Yes/ No
Part 5– Quality of education & alternatives available		
#	Question	Response
29	How would rate the quality of the study material provided to you?	<ol style="list-style-type: none"> 1. The material was structured and explained in an intuitive manner and no additional resource was required. 2. Adequate for preparing for exam 3. 3- Had to refer to additional sources

30	How would you rate the teachers?	<ol style="list-style-type: none"> 1. Engaging teaching session and approachable after classes 2. Not approachable after classes 3. Classes were not engaging, and the doubts were not cleared
31	Where the number of classes and length of the classes sufficient?	Yes/ No (if no, please specify reason)
32	If you were not selected for the project, what other alternatives did you have for appearing for the exam?	<ol style="list-style-type: none"> 1. Other paid coaching 2. Self-studies 3. Never would have appeared for the exams
Part 6 – Quality of other facilities provided		
#	Question	Response
33	How would you rate quality of the accommodation and food?	<ol style="list-style-type: none"> 1. In addition to (2), the staff were understanding and helpful. 2. The accommodation and food were better than the means available with the family and there were no delays in housekeeping activities. 3. The accommodation and food were adequate 4. There were delays in resolving housekeeping activities. 5. 5-The bedrooms and washrooms were not clean, the food was not hygienic.
34	Safety and security of students	<ol style="list-style-type: none"> 1. Adequate checks and safeguards were in place to ensure safety 2. A security guard was always available 3. 3-The accommodation had minimal security and was not considered safe.
35	Did you appear for virtual classes?	Yes/No
36	Whether laptops and internet connectivity for attending online classes were provided by IndianOil?	<ol style="list-style-type: none"> 1. Yes 2. No
37	If Q36 is answered “no”, how did you attend the online classes.	<ol style="list-style-type: none"> 1. Already had a device to attend the classes 2. Had to buy a device for coaching only 3. 3- Others (describe)

38	Were the virtual coaching classes beneficial?	<ol style="list-style-type: none"> 1. Equally beneficial to physical classes 2. Virtual classes were more beneficial because of the ease of location 3. Physical classes could have been more impactful
Part 7 – Scholarships for higher education		
#	Question	Response
39	Whether are you receiving the scholarship from IOCL?	<ol style="list-style-type: none"> 1. Yes 2. No 3. Received earlier but not now
40	How was the saved money useful for your family?	<ol style="list-style-type: none"> 1. Sibling's Education 2. Health 3. Income related purpose 4. Could not afford 5. Others_____
Part 8 – Suggestions		
#	Question	Response
41	Any suggestion to better improve the quality of the project as a whole	

1.1 Outline for interview with other stakeholders

Table 5: Form KII1 - Outline for interview with IP of Vidushi Project

FORM KII1 – Questionnaire outline for Implementation Partner of Vidushi Super 30 Girls Project		
#	Parameters	Topics
1	Outreach and efficacy of Interventions taken up	<ol style="list-style-type: none"> a) Mobilization methods for max outreach b) Criteria of selection for girl students c) Application process d) Eligibility criteria e) Nature of student contribution f) Process of Coaching g) Selection of faculties and day to day coordination

		<ul style="list-style-type: none"> h) Management of classes, tests and doubt sessions i) Management of students' conduct, attention, focus, stress and health j) Performance management and monitoring k) Preparation of academic calendar and test planner and their implementation
2	Addition of social value in the lives of the girls	<ul style="list-style-type: none"> a) Wellbeing - Resilience, coping strategies, bouncing back, adaptability b) Performance - Competency development, leadership, people management and development, team working, self-confidence c) Learning - Understanding strengths and development areas; peer reciprocal learning
3	Accrual of project impact on the children & families	<ul style="list-style-type: none"> a) Financial Effect on families- Pre and Post b) Potential financial savings c) Effect on Siblings and relatives- Encouraging education
4	Sustainability & replicability aspects of the project	<ul style="list-style-type: none"> a) Creation and maintenance of infrastructure at the Centre b) Documentation, report preparation, presentation c) Roles and responsibilities of stakeholders d) Expense covered by the donor versus cost of the project
5	Recommendation	<ul style="list-style-type: none"> a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.

Installation of rainwater harvesting systems

Questionnaire for School Management

Table 6: Form KII1 - Outline for interview with school management for Rainwater Harvesting

FORM KII1 – Questionnaire outline for school management of rainwater harvesting project		
#	Parameters	Topics
0	Informant	a) Name of the School b) Name of the Employee c) Year of installation d) Block and Village Name
1	Outreach and efficacy of Interventions taken up	a) Quantum of rainwater harvested annually b) Change in Water supply costs c) Water availability per student- Pre and post d) Cases of water shortage after installation e) Water savings (quantity or monetary value) f) Energy savings g) Effect on absenteeism/enrollment h) Alternative expenditure of the saved money
2	Impact on Environment and Water resources	a) Yield in wells nearby (Quantity and duration) b) DWL pre and post monsoon c) Water Availability period for water at school d) Increase in pumping hours e) Effect on natural water flows ex Nala f) Change In water quality
3	Recommendation	a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.

Questionnaire for Implementing Partner

Table 7: Form KII2 - Outline for interview with IP of Rainwater Harvesting Project

FORM KII2 – Questionnaire outline for Implementing Partner of rainwater harvesting project		
#	Parameters	Topics

1	Outreach and efficacy of Interventions taken up	<ul style="list-style-type: none"> a) Coverage of school vs eligible/available/interested/selection criteria b) Total number of schools covered vs planned c) Percentage of school coverage against eligible d) Participation of School management and Dist. Admin e) Cost of collection and use f) Design efficiency for harvesting
2	Sustainability & replicability aspects of the project	<ul style="list-style-type: none"> a) Role of Dist. admin and schools during implementation b) Environmental benefits to nearby wells/areas c) Financial contributions by stakeholders d) Asset maintenance plan e) Parallel, induced adoption evidence f) Problems and challenges g) Efficiency of O&M
3	Recommendation	Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.

Nai Disha Project, Telangana

Questionnaire for School Management

Table 8: Form KII1 - Outline for school management under the Nai Disha Project

FORM KII1 – Questionnaire outline for school management for Nai Disha Project		
#	Parameters	Topics
0	Informant	a) Name of the School b) Name of the Employee c) Year of installation d) Block and Village Name
1	Outreach and efficacy of Interventions taken up	a) Total student benefited vs planned b) Current status of benches- working/not working % c) Extent of ease of teaching and learning, changes in learning outcomes- scope and effectiveness of learning- capacity building d) Increase in the student intake e) Alternative expenditure source f) Improvement in attendance of students
2	The impact on students and families	a) Financial support obtained b) Enrollment and dropout figures c) Sense of responsible citizenship- ethics and social inclusion understanding
3	Recommendation	a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.

Questionnaire for Jail administrative staff

Table 9: Form KII2 - Outline for prison inmates and staff

FORM KII1 – Questionnaire outline for school management for Nai Disha Project		
#	Parameters	Topics
1	Reach-out and efficacy of Interventions taken up	a) Coverage of inmates- Social background/Financial Support obtained/Skills gained b) Selection of schools- Need assessment/Contributions from school

<p>2</p>	<p>The impact on life & livelihood of prison inmates Accrual of project impact on families</p>	<p>a) Skills gained by inmates - livelihood opportunity b) Number of inmates impacted c) Revenue per inmate d) Connect with outside world- mental wellbeing e) Impact on life of inmates- physical/mental/environmental</p>
<p>3</p>	<p>Recommendation</p>	<p>a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.</p>

Assam Oil Division Hospital, Digboi & Swarna Jayanti Samudayik Hospital, Mathura

Questionnaire for beneficiaries/ patients

Table 10: Form FQ1 - Questionnaire for patients

FORM FQ1 - Questionnaire for patients		
Part 1 – Beneficiary Details		
#	Question	Response
1	Name of the Hospital	
2	Name of the patient	
3	Do you belong to any vulnerable group?	Yes or No (If yes, SC, ST or PWD)
4	No. of family members	
5	Average annual household income	In INR
Part 2 – Eligibility		
#	Question	Response
6	What was the eligibility criteria for availing benefits from the hospital?	
7	How long did it take to get approvals for availing the benefits of the hospital?	In days
8	What were the difficulties faced while obtaining the above approvals?	
Part 3 – Location of Hospital & remote camps		
#	Question	Response
9	How far is the hospital from your house?	In Kilometers & minutes to reach the hospital
10	How far is the next hospital that provides similar facilities, from your house?	In Kilometers & minutes to reach the hospital
11	Were there remote camps set up by the hospital near your house for regular check-ups, vaccinations or health educational campaigns	Yes/ No

12	If the above answer is yes, specify the nature of the camp	1- Regular check-ups 2- Vaccination drive 3- Educational Campaigns 4- Others (specify)
13	If the above answer is yes, how would you rate the remote camp.	1- Well maintained & adequate staff and medicines 2- Satisfactory 3- Poorly managed and not effective
Part 4 – Medical treatments		
#	Question	Response
14	Mention the major illnesses for which you or your family members have visited the hospital	
15	What is the approximate amount spent by you or your family members, in total since the first visit?	In INR
16	Are you aware of the total cost borne by the hospital for service provided to you and your family, since the first visit?	In INR
17	Have you ever needed to visit another hospital due to lack of availability of beds, staff or specialized treatment?	Yes/No (if yes, please explain)
18	Are you able to obtain the medicine prescribed by the doctors, in the hospital itself?	Yes/No
19	What is the average cost of medicine borne by you or your family member for medicines?	In INR
20	Are you aware of the average cost of medicine borne by the hospital?	In INR
21	Were there any difficulties in availing medical treatment at the hospital?	Yes/No (If yes, please explain)
Part 5 – Experience during Covid -19		
#	Question	Response
22	Did you visit the hospital during Covid-19 outbreak?	Perception Yes/No

23	If the above answer is yes, how would you rate your experience?	<p>1- In addition to (1), the hospital was well managed, organized and sanitized</p> <p>2- There was ample availability of beds, doctors and medicine.</p> <p>3- Support provided by the hospital was adequate for the outbreak</p> <p>4- We were able to get an appointment with the doctor and a bed but there was lack of medicines and oxygen.</p> <p>5- We faced major difficulties in getting information about the availability of doctors and beds.</p>
24	Number of family members admitted during Covid-19	
25	What is the average cost of treatment borne by you or your family member for medicines?	
26	Are you aware of the average cost of treatment borne by the hospital?	
Part 6 – Perception of patients		
#	Question	Response
27	Do you feel that the hospital is well maintained and managed?	<p>Perception</p> <p>Yes/No (if no, reason)</p>
28	How would you rate the doctors associated with the hospital?	<p>1- In addition to (1), the doctors/ hospital staff are proactive in obtaining follow-ups on the improvement of the medical conditions.</p> <p>2-The Doctors are always available, easy to book an appointment and easy to obtain the medicines prescribed.</p> <p>3- Doctors have adequate knowledge and provide adequate time</p> <p>4- The doctors are available but there are usually long waiting hours or difficult to find medicines prescribed by the doctors</p> <p>5- The doctors are rarely available and do not address all medical issues.</p>

Part 3 – Suggestions & Recommendations		
#	Question	Response
29	Any suggestion to better improve the quality of the project as a whole	

Questionnaire for hospital management and doctors

Table 11: Form KII1 - Outline for hospital management and doctors

FORM KII1 – Questionnaire outline for hospital management & doctors		
#	Parameters	Topics
1	Outreach and efficacy of Interventions taken up	<ul style="list-style-type: none"> a) Awareness campaign initiated by the hospitals b) mobile medical vans for report areas c) Eligibility criteria & documentations d) Funding received Vs actual CSR expenditure e) Availability of doctors, equipment and medicine f) Appointment booking process g) Follow-ups h) Specialization of hospital/ major medical facilities
2	The impact on health of the people surrounding the hospital	<ul style="list-style-type: none"> a) Reduction in easily curable diseases b) Frequency and availability of vaccinations for children and adults c) Availability of doctors in emergency room d) Availability of ambulances e) Reduction in travel time to hospital f) Testing facilities
3	Sustainability & replicability aspects of the project	<ul style="list-style-type: none"> a) Funding received vs required b) Number of doctors available vs required c) Hospital expansion requirements and roadblocks d) Training facilities and regular capacity building exercise
4	Recommendation	<ul style="list-style-type: none"> a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.

Installation of human / mother's milk bank

Questionnaire for beneficiaries

Table 12: Form FQ1 - Questionnaire for beneficiary of Human milk bank

FORM FQ1 - Questionnaire for beneficiary of Human milk bank		
Part 1 – Beneficiary Details		
#	Question	Response
1	Name of donor	
2	Age	
3	Do you belong to any vulnerable group?	Yes or No (If yes, SC, ST or PWD)
4	Basis for eligibility	
5	Number of infants benefited	
Part 2 – Beneficiary requirement		
#	Question	Response
6	How much milk was required for the infant(s)	In liters/day
7	How much milk was provided	In liters/day
8	If the answer for question 7 is less than answer for question 6, specify the reason for the shortage	1. Not eligible 2. Shortage at milk bank 3. Others
9	How was the deficiency in the supply of milk met?	
Part 2 – Beneficiary's awareness & perception		
#	Question	Response
4	How did you get to know about the project?	
5	What is the average wait time before receiving the donation?	In days from date of request
6	Did you observe an improvement in the health of the infant to whom the milk was provided?	Yes/No (If no, did you follow up with a doctor for the same)

7	How would you rate the administrative process?	<ol style="list-style-type: none"> 1. In addition to 2, they were very proactive and respectful. 2. 2-Adequately supportive 3. 3- The staff were not equipped to manage the center properly and there was a long waiting process
8	Do you feel that the medical staff were knowledgeable and taking proper precaution during the entire process of storage and delivery?	Yes/No (If no, why)
9	Are you aware about any other similar project nearby?	Yes/No (If yes, please share details)
Part 3 – Suggestions & Recommendations		
#	Question	Response
10	Any suggestion to better improve the quality of the project as a whole	
11	Would you recommend another potential beneficiary about the milk bank?	Yes/No (If no, why)

Questionnaire for donors

Table 13: Form FQ2 - Questionnaire for human milk bank donors

FORM FQ2 - Questionnaire for donor of Human milk bank		
Part 1 – Beneficiary Details		
#	Question	Response
1	Name of donor	
2	Age	
3	Do you belong to any vulnerable group?	Yes or No (If yes, SC, ST or PWD)
Part 2 – Beneficiary’s awareness, perception, and experience		
#	Question	Response
4	How did you get to know about the project?	
5	What convinced you to donate?	

6	What were the screening process you had to go through before donating?	
7	What is the average waiting time?	In minutes
8	How long does it take to donate?	In minutes
9	Do you feel that the medical staff were knowledgeable and taking proper precaution during the entire process of donation and storage?	Yes/No (If no, why)
10	Are you aware about any other similar project nearby?	Yes/No (If yes, please share details)
11	Is the electrical breast pump beneficial for you?	Yes/no/neutral
12	Is there any infrastructure missing in the facility?	
13	Your primary reason to select this facility?	
Part 3 – Suggestions & Recommendations		
#	Question	Response
14	Any suggestion to better improve the quality of the project as a whole	

Questionnaire for hospital management

Table 14: Form KII1 - Outline for hospital management

FORM KII1 – Questionnaire outline for hospital management		
#	Parameters	Topics
1	Outreach and efficacy of Interventions taken up	<ul style="list-style-type: none"> a) The details of mobilization process, both for doners and receivers, for the milk bank b) Details of screening milk doners-health wise c) Incentives of milk donation d) Details of screening receivers of milk- health status, economic status and societal status e) Details of quality control for keeping milk safe- Safety processes f) Mobilization of women for breastfeeding and breast-feeding techniques g) Access to Human milk bank- Distance/Finance/coverage etc. for bottom strata of society h) Cost of equipment and low-cost initiatives i) Alternative expenditure for the donated products

2	Impact on Health of children and Mothers	<ul style="list-style-type: none"> a) Nutrition status of newly born (weight ratio/ height etc. parameters) b) Impact on mothers' health- Positive/negatives c) Malnutrition and other wellbeing parameters for disadvantaged section
3	Accrual of project impact w.r.t. social values on families	<ul style="list-style-type: none"> a) Increased awareness about breastfeeding b) Importance of neo-natal child health and nutrition amongst mothers and societies c) Social norms of about donation of milk- Purity/societal duty/charity etc.
4	Sustainability & replicability aspects of the project	<ul style="list-style-type: none"> a) Process of collection, processing and storage of human milk- Technological and financial aspects b) Roles of Donors and hospital admin - in terms of beneficiary selection and supply c) Nature of Information-Education-Communication (IEC) initiatives conducted for program promotion- Effectiveness d) Investments of governments in IEC and Infra
5	Recommendation	<ul style="list-style-type: none"> a) Recommendations and suggestions to improve the overall efficiency and effectiveness of the project.



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