



Saranam India: March 2026

Enabling Access to Palliative and End of Life Care In Public Health Spaces

A Brief Overview of March

Executive Summary

March 2026 marked a quiet yet powerful turning point for Saranam. Having spent February building our team and grounding ourselves in clarity of mission and process, this month was our first full operational partnership with **Kidwai Memorial Institute of Oncology**, to deliver palliative home care services. It was the moment our intention began translating into tangible care — with our multidisciplinary clinical and program team now reaching into patients' homes to deliver palliative and end-of-life care. Each day has been a learning curve, as we refine our scheduling systems, balance our limited resources, and strengthen our coordination to reach more patients with greater efficiency and compassion. The data and our own lived experience underscores what we are witnessing firsthand — that the need for palliative care in our community is vast, urgent, and already exceeding our current capacity. Yet, in these formative weeks, we have also found affirmation: that even within constraints, the quiet work of easing suffering can transform homes, families, and the meaning of care itself.

Earlier this month, we also signed a definitive Memorandum of Understanding (MoU) with the **Department of Health and Family Welfare, Government of Karnataka** to establish a Palliative Care Department at the **KC General Govt. Hospital** in Malleshwaram, Bangalore. KC General is a large, busy 550-Bed multi-speciality government hospital. This partnership with the Department of Health furthers the Government's commitment to strengthen palliative care access in the State of Karnataka.

Key Statistics and Insights

Metric	Last Month	Cumulative (Year-to-Date)	Insight
Total Home-Care Enrolments	51	142	Steady increase in enrolments, highlighting growing need, as understanding of palliative home-care grows
Home Visits Conducted (Mean Time spent at a visit is approx. 70min.):	NA	26	Operational efficiency in scheduling and clustering patients by zone will improve coverage over time.
Patient Consultations & Engagements	NA	93	These include regular phone follows up, and video consultations to monitor patient health and prognosis.
Clinical bed-side Procedures	NA	33	These include Nursing, and Physical and Occupational therapy procedures.
Distance Covered	NA	706 KM	
Deaths	NA	07	This includes 2 children aged 14 and 7, and 3 Adults, and 2 Older Adults (as per WHO definitions)

Saranam's Team: On The Ground



Patient and Family Voices



"The support we received from your team was invaluable during the most difficult time. They didn't just care for my mother; they cared for all of us." - Family Member

"Knowing I was not alone made all the difference. The regular visits and gentle guidance helped me find peace." – Family Member

Two caselets: The Value of a Multi-Disciplinary Palliative Care Approach

Mrs. *Rose's Journey with Us (* Name Changed for Patient Confidentiality)

Imagine being 40, a widow raising two young adults in Bengaluru, and the family's sole breadwinner—until advanced gastric cancer changed everything. Mrs. Rose arrived at our palliative ward in agony, her body wracked with severe pain from tumors and radiation damage, unable to even pass stool for weeks, while her heart ached over burdening her son and daughter, who were juggling college amid dwindling savings.

Our palliative care team at Saranam listened deeply, easing her physical suffering with tailored pain relief and other clinical palliation approaches, while gently holding space for her fears of abandonment, stigma, and leaving her kids behind. Through counseling and family coaching, we made some progress, helping her shift from blaming God to acceptance, empowering her children to care for her at home as she wished, blending medical precision with empathetic, allround support.

Her story is a reminder that palliative care isn't just about the body—it's about honoring the full human spirit, so families like Rose's can face the complex life decisions with dignity and hope.

Two mornings ago, my phone buzzed with a message from Sania, whose elderly mother was on end-of-life care at home. "I wanted you to hear what amma's breathing sounds like right now," she wrote, sending a short audio clip. On the recording was a sound medicine calls the "death rattle" – frightening for families to hear, but usually not distressing for the person who is dying.

For Sania, it was the sound of a long vigil, of sleepless nights on a mattress pulled next to her mother's bed, of fear, guilt, and love all tangled together. For our home-care team, it was a reminder that palliative care is as much about holding a family's anxiety as it is about managing a patient's symptoms. Their work is often quiet: sitting by a bedside, explaining what is happening, reassuring a daughter that what she is hearing, as unbearable as it feels, is a natural part of dying – and that she does not have to face it alone.

Later that morning, another message arrived: "Amma passed away. I am deeply thankful." In those four words was relief that her mother's suffering had eased, and gratitude that there were people standing with her in that small room, through the worst of the waiting. This is the unseen side of palliative care at Saranam: teams who not only care for patients, but also quietly carry the emotional weight with families, so that in the hardest moments, someone is there to say, "Yes, this hurts – and we are here with you."

Plan for the Month Ahead

Our focus for the next month will be on strengthening our operational systems, increasing over coverage, and starting our Out Patient Department at the KC General Hospital. We

also hope to launch a second home-care vehicle at Kidwai Institute – thereby increasing our patient coverage. Apart from this, we are also launching the first of the workshops on creating awareness and drafting ‘Advanced Medical Directives’ aka ‘A Living Will’. This is on the 18th of April, 2026 at MyBoTree, Koramangala, Bangalore.



My Living Will

Understanding how your medical wishes can be honoured

Join us for an introductory session and workshop on Advanced Medical Directives - what they mean, why they matter, and how documenting your choices can bring clarity and dignity to future care decisions!

With

Dr. Rajani Surendar Bhat
MBBS, MD Interventional Pulmonology,
Critical Care, and Palliative Medicine

Dr. Vanshika Gupta
MBBS, DNB, Nuclear Medicine,
Fellowship in Palliative Medicine

Alok Prasanna Kumar
Co-Founder, Vidhi Centre for Legal Policy

April 18, Saturday
4 pm - 6.30 pm
MyBoTree, Koramangala

Session is free!
Limited to 20 participants.

To confirm participation, message 9845119023/9845071197



It is part of Saranam’s Mission to enable and design platforms that further the understanding and scope of Palliative Care, and to curate events that bring various experts on topics related to this area. We hope to make this a regular feature of our work.

We are deeply grateful for your continued support and commitment to this vital program. Many of you have reached out, expressed your support, your solidarity and of course, your generosity allows us to continue in our journey of ensuring that access to Palliative and End of Life Care is a fundamental human right.