





Streamlining the ASHA Incentive System in Uttar Pradesh **THE ASHA INCENTIVE APP**



BACKGROUND

The Accredited Social Health Activists' (ASHA) programme was initiated in 2005 under the National Rural Health Mission (Ministry of Health and Family Welfare, Government of India (Gol)), with an aim to improve maternal and child health outcomes particularly among women and children in the community. Under the programme, Community Health Workers (CHWs), termed as Accredited Social Health Activists (ASHAs), were recruited from within the community, trained to create awareness on health and its social determinants and mobilize the community towards local health planning and increased utilization of health services. ASHAs are provided with 'honoraria' under different national health programmes for the tasks that they undertake. The Gol has introduced a performance-based incentive system that links the amount of remuneration to the activities completed by the ASHAs.

Financial remuneration is one of the key motivational factors impacting the performance of CHWs in low and middle income countries¹. Hence, a system that ensures timely payment of the incentives to ASHAs can play a key role in enhancing motivation to deliver the necessary services to the community.

Incentive Payment to ASHAs



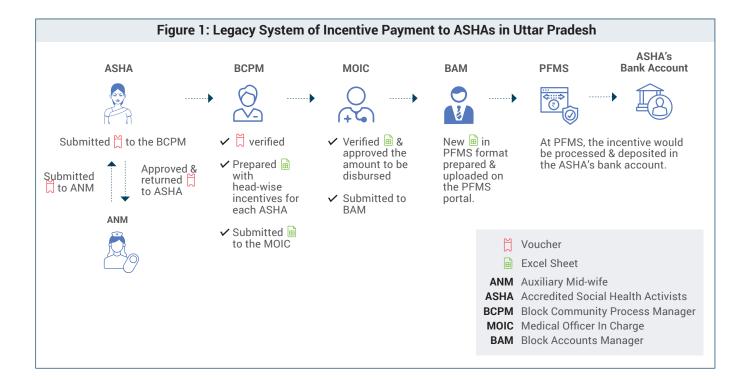
Uttar Pradesh (UP) has approximately **150,000 ASHAs who cater to the vast 220 million population** of the state. As per the Gol norms, one ASHA is deployed per 1000 population.

The incentive system for ASHAs that was in place in UP is described in Figure 1 (Pg 3).

At the end of every month, ASHAs filled an incentive voucher in a prescribed format as per the tasks completed by them and submitted the same to their respective Auxiliary Nurse Midwives (ANMs) for verification. The ANMs validated and approved the vouchers submitted by their respective ASHAs. After receiving approval, ASHAs submitted the vouchers to their Block Community Process Managers (BCPMs). The BCPMs developed a list comprising head-wise² (National Health Program wise) incentives for each ASHA in an MS Excel sheet (Microsoft Office Suite) format. BCPMs added the incentive amount after verifying and cross-checking the information in the vouchers. This MS Excel sheet was submitted to Medical-Officer In-Charge (MOIC), who further verified the information through random check (every month) and approved the amount to be disbursed. The MS Excel sheet was then submitted to the Block Accounts Manager (BAM). The BAM prepared another MS Excel sheet in a format prescribed by the Public Financial Management System (PFMS) and uploaded the same to the PFMS³ office. At PFMS, the incentive would be processed and deposited in the ASHA's bank account. During discussions with ASHAs, it was found that it took about one-six months' time for the incentives to get processed.

¹Singh D., The effect of payment and incentives on motivation and focus of community health workers: five case studies from low- and middle-income countries, Human Resource for Health, DOI: https://doi.org/10.1186/s12960-015-0051-1

²Incentive Heads: AAA meeting, Child Health, Cluster Meeting, Covid-19, Encephalitis, Family Planning, High Risk Pregnancy, Janani Suraksha Yojana, Kalaazar, Leprosy, Malaria, National Iodine Deficiency Disorders Control Programme NIDDCP, Pradhan Mantri Matru Vandana Yojana, Revised National TB Control Programme, Routine activity, Routine Immunizaiton, Sangini Incentive. ³The Public Financial Management System (PFMS) is a web-based online software application developed and implemented by the Controller General of Accounts (CGA), Department of Expenditure, Ministry of Finance, Government of India.



Challenges

- This incentive payment system had many limitations: The system was operated manually and was dependent on paper based and computer based entries by multiple people.
- There was no tracking mechanism to monitor who or when a voucher had or had not been submitted.
- Payments were delayed, and at times partial payments were made, which adversely affected the motivation of ASHAs.
- The status of payments remained unknown to all the stakeholders in the system. The MOIC was not updated on the status of payments processed under different heads. The ASHAs too were not aware if they had received the incentive against the submitted vouchers.
- There was duplication of efforts at the BCPM and the BAM level as BCPM had to prepare a separate MS Excel sheet in the PFMS format with the same data prepared by the BCPM.
- Paper-based processes restricted detailed analysis and provision of actionable insights for the reporting and incentive calculations.
 For example: If there were 20 pregnant women estimated to be resident in a particular area, and the incentive head related to this showed a low incentive claimed, it could imply that the ASHA had not sufficiently mobilized all pregnant women for the services.



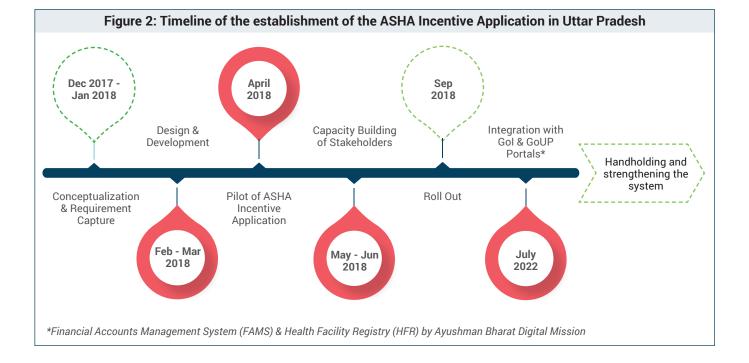
Rationale for Redesigning the Incentive System

An IT-enabled application was designed as an apt solution to bring transparency and efficacy to the incentive system. In consultation with the Government of Uttar Pradesh (GoUP), this IT-enabled application was envisioned and conceptualized with the following objectives:



ROLL OUT OF ASHA INCENTIVE APPLICATION

The Government of Uttar Pradesh, with support from the Uttar Pradesh Technical Support Unit (UP TSU), a unit led by the India Health Action Trust (IHAT) in partnership with the Institute for Global Public Health, University of Manitoba, Canada, rolled out an IT-enabled real-time ASHA Incentive application in UP in September 2018. This is an integrated android and web-based application developed to track and monitor ASHA incentive payment and performance. This application also includes Incentive Payment to ASHA Sanginis – a new cadre introduced by the Government to oversee, support and supervise ASHAs.



Role of UP TSU

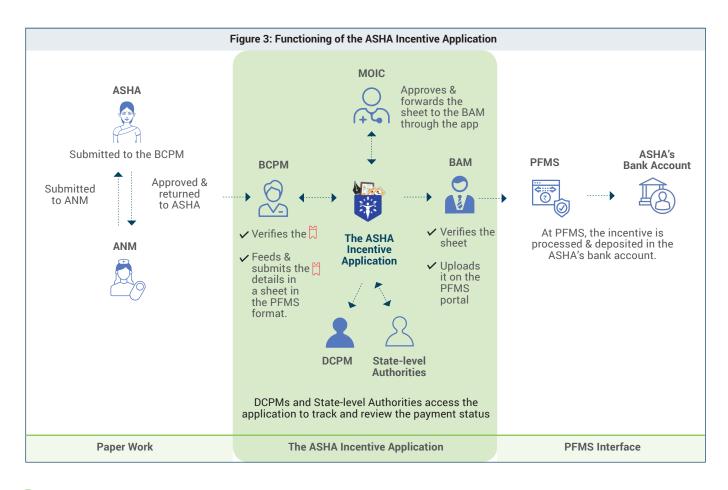
The UP TSU provided technical support to GoUP in establishing and streamlining the IT-enabled ASHA Incentive System, including



Prior to the application going live, the BCPMs mapped the number and location of the existing ASHAs at the Sub-centre level. The database on ASHA was updated and synchronised on the mapping portal of the Incentive Application.

Workflow of the ASHA Incentive Application

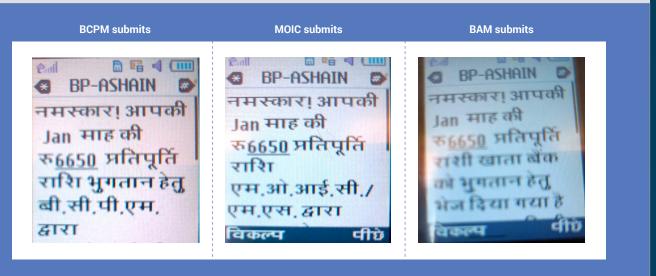
Figure 3 depicts the workflow of the ASHA Incentive Application. ASHA fills the incentive voucher and submits it to the ANM for verification. ANM verifies. approves and sends the voucher back to ASHA. After receiving approval from ANM, ASHA submits the voucher to the BCPM. The BCPM feeds the voucher details in the ASHA Incentive App in a format in line with the PFMS system. After verifying the details, the BCPM submits the payment sheet through this online portal. This payment sheet contains Headwise and ASHA-wise information on the incentive to be paid. The MOIC receives the payment sheet in the Head-wise format, which the MOIC approves and forwards to the BAM. After verifying the details, BAM uploads the approved payment sheet on the PFMS portal. In this way, the payment is processed to the ASHA's bank account. In case of any discrepancy observed, the MOIC can reject the payment sheet. In that case, the payment sheet goes back to the BCPM with remarks from the MOIC. Generally, the duration from the time the ASHAs submitted their voucher to the time they receive their incentive was reduced to about 15 days.



A guideline for timelines for the incentive process was fixed as follows:



Figure 4: ASHA/Sangini Payment Status SMS



Benefits of the ASHA Incentive Application

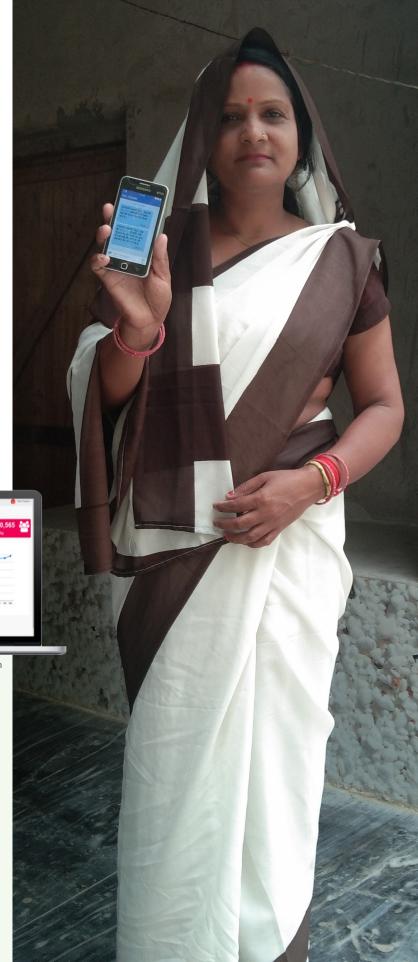
The ASHA incentive application reduced the time period and increased the transparency for the ASHA to receive her incentive.

The user-friendly online dashboard of the ASHA Incentive application helps identify the real-time disbursement status under different heads at the state-division-district -block- ASHA level. This helps in tracking the delay in payments.

The District Community Process Managers and the NHM community process team at the State level also access the ASHA Incentive Application portal. They can monitor and track the delay in the process and can accordingly follow up with the respective block/district level authorities.



Online dashboard of the ASHA Incentive Application

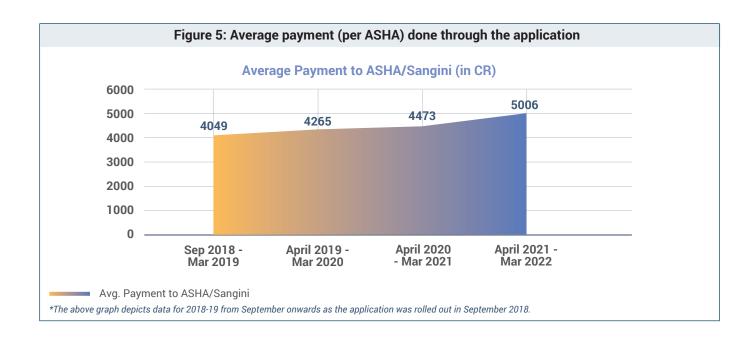


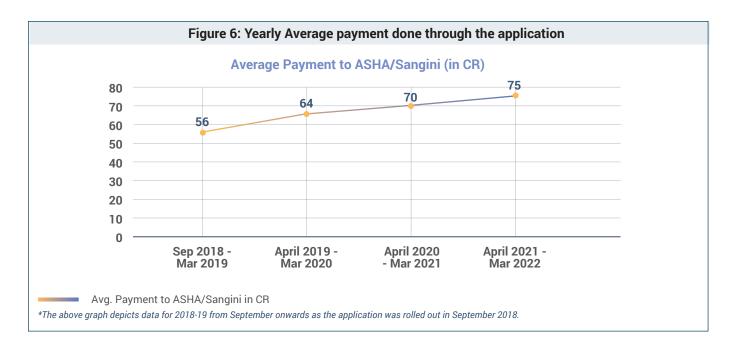
FROM PILOT TO SCALE

- Around 1.5 lakh ASHAs are paid their monthly incentives through the software application. A total of INR 2887 crores have been disbursed from September 2018 - March 2022.
- Approximately 193 lakh SMSes have been sent to the ASHAs (from September 2018 – March 2022).
- The system's sustainability is demonstrated because 64 lakh transactions have been made till March 2022 and all transactions have been online without any manual transaction.
- The application was rolled out in September

2018, wherein 75% of ASHAs were being paid. This has risen and is consistently above 90% since the application was scaled up.

- Figure 5 demonstrates an increase in average yearly incentive payment to ASHA from approximately INR 4049 to INR 5006.
- Figure 6 shows the yearly average payment done through the application. There is an increase in the total payment from INR 56 crores to INR 75 crores.





PROGRESS

Earlier the BCPM/MOIC dashboards allowed one-time single approval; so they had to wait for vouchers to be submitted by ALL the ASHAs. Now, flexibility has been given to BCPM/MOIC/ BAM for ASHA based entry, approval and payment processing; wherein, they can enter or approve the vouchers at any given time.

The ASHA Incentive Application has been integrated with the GoUP Financial System – FAMS (Financial Accounts Management System); which in turn has been integrated with the PFMS. Through this integration, the data seamlessly flows from ASHA incentive app to FAMS, which further connects to PFMS for payment release. The transaction gets automatically captured which helps in tracking the payment status and keeping the ASHAs informed about the same.

The Application has also been integrated with the Health Facility Registry (HFR) Application⁴ of Ayushman Bharat Digital Mission. Due to this integration, the facility level codes are mapped across the ASHA Incentive Application making it capable of integrating with any other GoI portals in future.

A Budget Module has been added to the Application; wherein the District Community Process Manager (DCPM) adds a notional budget Block wise and FMR wise. The District Account Manager (DAM) approves the allocated budget; which gets reflected to the BCPM and BAM at block level to further help in incentive release as per funds availability.

After the successful rollout of the ASHA Incentive App under the National Rural Health Mission, GoI has decided to initiate and set up the application for the ASHAs and ASHA Sanginis serving the urban population of Uttar Pradesh. A pilot of the Urban ASHA Incentive Application was done in Lucknow district in October 2020 and has been successfully rolled out across all the 75 districts of UP.



RECOGNITION

The Government of India recognized the ASHA Payment App at the 6th National Summit on "Good and Replicable Practices and Innovations in Public Healthcare System in India" at Gandhinagar, Gujarat, in 2019.

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⁴HFR is a comprehensive repository of health facilities of the country across modern and traditional systems of medicine. It includes both public and private health facilities including hospitals, clinics, diagnostic laboratories and imaging centers, pharmacies, etc.

WAY FORWARD

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Currently, the data entry, review and approval at BCPM stage has been digitised, while the ASHAs still submit paper-based vouchers. Digitization is now planned at the ASHA level itself. Through this, ASHAs will be able to enter the voucher details on the app in their mobiles/tabs which will get reflected in the BCPM dashboard.

TESTIMONIALS

Dr Rajesh Jha

General Manager-Community Process, NHM, Uttar Pradesh

"The application was developed to address the delay in payments to ASHAs. Earlier payments were disbursed manually; hence, it was challenging to gauge at which stage of processing the delay occurred and whether the ASHAs had received the full amount due against the submitted vouchers. The user-friendly online dashboard of the application helps in identifying the real-time disbursement status under different sub-heads, even at the lowest level."

> **Shashi Prabha** ASHA, Jasda Village, Ranipur Block, Mau District, Uttar Pradesh

"I have been working as ASHA for my village since 2007. Before the ASHA Incentive Application was initiated, payment was made through cheque, and we were not clear on how the payment was calculated. Many times we experienced partial payments and delays in payments. After the application came into existence, things have changed for the better. We are notified through a message about the payment being released task-wise. It is very satisfying to receive our hard-earned money on time."

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