

User Manual
For
Additional Rs 1,000 incentives to ASHAs under
State Govt. Budget
In
ASHA Payment and Performance Monitoring System
Under
Swasthya Sewa Dapoon

(Date of Publication: 9th Feb 2019)



National Health Mission
Department of Health & Family Welfare
Govt. of Assam

ASHA Payment and Performance Monitoring System

About the additional Rs 1,000 incentives to ASHAs under state govt. budget:

Govt. of Assam has decided to pay an additional monthly incentive of Rs 1,000/- (Rupee One Thousand) only per month to ASHAs w.e.f from 1st April 2018 until further order based on fulfillment of a set of activities.

How to pay the additional Rs 1,000 incentives:

In the ASHA Payment and Performance Monitoring System, go to the "Receipt Entry" form.

ASHA PAYMENT RECEIPT ENTRY FORM	
ID : NHM/ASHA/REC/09022019/KAM/BOK/1375/5c5ea6a4cdc	Special Receipt Entry Form
Date of Receipt : 09-02-2019	Receipt By : bam.kam.boko
District : Kamrup Rural	Health Block : Boko BPHC
Health Facility : Select	Sub Center : Select
Name of ASHA * : Select	ASHA ID :
Bank Account No :	Bank Name :
Branch Name :	IFSC Code :
ASHA Name in Bank :	Code :
Claims Detail Entry	
Component * : Select	Activity* : Select
Rate of Incentive(Rs) :	No of claims* : 0
Total Amount(Rs) :	Date from* : <input type="text"/>
	Date to* : <input type="text"/>
Supporting documents submitted* : <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Partial	

ASHA Payment and Performance Monitoring System

In the receipt entry form, select the component as **“Additional Rs 1000 incentives to ASHAs under State Govt. Budget”**.



ASHA PAYMENT	
ID	: NHM/ASHA/REC/09022019/KAM/BOK/1375/5c5ea6a4cdc
Date of Receipt	: 09-02-2019
District	: Select
Health Facility	: Assured 1000 Rupees Child Health Family Planning Maternal Health NCD
Name of ASHA *	: Family Planning Maternal Health NCD
Bank Account No	: NIDDCP NLEP NPCB
Branch Name	: NUHM NVBDCP
ASHA Name in Bank	: Other Other Incentives RKSK RNTCP Wage Compensation Scheme for Pregnant Women of Tea Garden Areas
Component *	: Select
Rate of Incentive(Rs)	:
Total Amount(Rs)	:
Supporting documents submitted*	: <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Partial
Sub Center	: Baramungata SD N SC
ASHA ID	: 43409
Bank Name	: ALLAHABAD BANK
IFSC Code	: ALLA0211662
Code	: BASKR00003868
Detail Entry	
Activity*	: Select
No of claims*	: 0
Date from*	: <input type="text"/> <input type="text"/>
Date to*	: <input type="text"/> <input type="text"/>

Select component
“Additional Rs 1000
incentives to ASHAs under
State Govt. Budget”

Then a check box will be shown to select activities for additional Rs 1,000 incentives to ASHAs under State Govt. Budget. Click on the check box.

ASHA Payment and Performance Monitoring System

Health Facility	: BHALUKGHATA SD	Sub Center	: Bhalukghata SD N SC
Name of ASHA *	: Amal Prava Bora	ASHA ID	: 43409
Bank Account No	: 22177959585	Bank Name	: ALLAH
Branch Name	: GAMERIMURA BRANCH	IFSC Code	: /
ASHA Name in Bank	: MS. AMALPRABHA BORAH	Code	: /
Claims Detail Entry			
Component *	: Additional Rs 1000 incentives to ASHA/	Activity*	: <input type="checkbox"/> Select all additional Rs 1,000 activities under State Govt. Budget
Rate of Incentive(Rs)	: /	No of claims*	: /
Total Amount(Rs)	: /	Date from*	: /
		Date to*	: /
Supporting documents submitted*	: <input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Partial		
Remarks	: /		
Add			



Then fill up the “date from”, “date to” and “Supporting document submitted” fields. Then click on the “Add” button. No need to enter “Rate of Incentive (Rs)” and “No. of Claims”.

Then the 13 activities belongs to “Additional Rs 1000 incentives to ASHAs under State Govt. Budget” will be loaded.

ASHA Payment and Performance Monitoring System

Claims Detail Entered									
Sl	Activity	Rate of Incentive (Rs)	No of Claims	Total Amount (Rs)	From Date	To Date	Supporting Documents	Remarks	
1	Ensuring supplement of IFA to under 5 children and line listing	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
2	Facilitation of High Risk Pregnancy identification and line listing	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
3	Follow up of Full ANC with complete routine examination of each pregnant woman	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
4	Follow up of full immunization with JE,MR,Rota Virus, Vitamin A etc and line listing	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
5	Identification of Malaria/Dengue/JE cases and line listing	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
6	Identification of number of under 5 children with diarrhea traced and distributed ORS during the month and line listing	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
7	Identification of SAM Children using MUAC Tape	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
8	Identification of TB cases and line listing	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
9	Line Listing of Adolescent and linkage with WIFS	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
10	Line listing of Screened children under RBSK by Mobile Health Team in her area	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
11	Mobilization for screening of HIV of all pregnant women	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
12	Participation in NCD screening in her area	100.00	1	100.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
13	Updating of MCP card and ensuring opening of bank A/c of beneficiary registred in her area	50.00	1	50.00	01-01-2019	31-01-2019	partia ▼	<input type="text"/>	Delete
Total				Rs 1000.00/-					
Save									

Then click “Save” button to generate the claim receipt for the ASHA.

The End