

(c) The Government of India is implementing National Programme for Prevention and Control of Cancer, Diabetes, Cardiovascular Diseases and Stroke (NPCDCS) for interventions up to District level under the National Health Mission (NHM).

Under NPCDCS, testing, diagnosis and treatment facilities for diabetes are provided through different levels of healthcare by setting up NCD Clinics in District Hospitals and Community Health Centres (CHCs).

Endocrinology is one of the focus area of the new All India Institute of Medical Sciences (AIIMS) and many other institutions upgraded under the Pradhan Mantri Swasthya Suraksha Yojana (PMSSY).

Further, for early diagnosis, population level initiative for prevention, control, screening and management of common Non-Communicable Diseases (diabetes, hypertension and common cancers viz. oral, breast and cervical cancer) has been rolled out in over 200 districts of the country under NHM. Under this initiative, services of frontline health workers and Accredited Social Health Activists (ASHAs) are being used for risk profiling and screening of population. Services for prevention and control of NCDs are also included under Health and Wellness Centres under Ayushman Bharat, Comprehensive Primary Health Care.

Increasing the remuneration of ASHA workers

2968. SHRIMATI ROOPA GANGULY:

SHRI DHARMAPURI SRINIVAS:

Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number of ASHA workers operating in West Bengal;
- (b) whether Government has taken any steps to increase the remuneration of ASHA workers for their supervisory visit charges and other duties that they perform;
- (c) if so, the details thereof; and
- (d) the estimated budget allocation for the said increase?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) As per Management Information System (MIS) of National Health Mission (NHM), as on June, 2018, there are total 60008 ASHAs in the State of West Bengal.

(b) to (d) Under the National Health Mission, ASHAs are envisaged to be community health volunteers and are entitled only to task/activity based incentives. The incentives to ASHAs finalized at the national level are regularly reviewed by the Government and activities for which ASHAs would get incentives are expanded from time to time. The Government of India has recently approved increase in the amount of routine and recurring incentives under National Health Mission for ASHAs that will enable ASHAs to get at least ₹ 2000/- per month subject to ASHAs carrying out the activities. The activities for which incentives have been increased are given in the Statement (*See below*). The total estimated cost of the scheme is ₹ 1905.46 crore of which Central share is ₹ 1224.97 crore for two years *i.e* 2018-19 and 2019-20.

The Government has also approved enhancement of supervisory visit charges for ASHA facilitators from ₹ 250/- per visit to ₹ 300/- per visit. The estimated additional expenditure to be incurred is ₹ 74.53 crore for 2018-19 and 2019-20 with Central share of ₹ 46.95 crore.

Statement

Activities for which incentives have been increased

	Routine and Recurring Activity	Existing Monthly incentives (in ₹)	Revised Monthly incentives (in ₹)
1.	Mobilizing and attending VHND	200	200
2.	Convening and guiding VHSNC meeting	150	150
3.	Attending the PHC Review meeting	150	150
4.	Line listing of households done at beginning of the year and updated after six months	100	300
5.	Maintaining village health register and supporting universal registration of births and deaths to be updated on monthly basis	100	300
6.	Preparation of due list of children to be immunized to be updated on monthly basis	100	300
7.	Preparation of list of ANC beneficiaries to be updated on monthly basis	100	300
8.	Preparation of list of eligible couples to be updated on monthly basis	100	300
	TOTAL	1000	2000