

**Conversation between Nick Gordon (eDOTS Development Manager) and Wendy Knight (GiveWell) regarding Operation ASHA's Biometrics system (eDOTs)
October 27, 2011**

Overview:

As of October 3rd everything [is available] in the online system. In the first year that South Delhi was operating [Counselors] were doing finger printing, but [Operation ASHA] was not relying on the data.

The excel sheet that we were sent [prior to our visit with Operation ASHA] was a combination of data from Biometrics and patient cards (Nick can send us the dates they were using information from patient cards).

Neupur, a staff member that was paid for through the Innovators for Health team (she left a few months ago), was doing manual data input. She put the Biometrics data in first and then found all missed doses on the [patient] cards and added any missed doses that weren't seen in the Biometrics data. She was planning to do a comparison of when there was missing Biometrics data, to see what kinds of discrepancies there were. Neupur wanted to do a full check on the Biometrics data as compared to patient cards [but she was unable to complete this].

Process of Biometrics data collection/entry:

To keep it simple, the Counselors enter patient's names in the system and that's pretty much it. The Biometrics team enters the other patient information (i.e., case type, etc.).

At some point Operation ASHA will start doing reports based on gender, age, etc. Someone is now fulltime on data entry, but he is now prioritizing new patients rather than going back to make changes to old data (which he was doing previously). For example, the current Biometrics system would record a patient picking up a dose for a family member as missed [so this needs to be changed manually].

Under the current [non-Biometrics] system, the data collection process includes taking information from [patient] cards and entering them into the missed dose report in excel. There are a few issues with this, such as that Program Managers might not send [the missed dose report] in and it also takes a lot of time for Program Mangers to fill out, which is why [Operation ASHA] wants it automated.

Use of Biometrics data in Counselor/PM Management:

Program Managers get missed dose text messages daily. If a patient is given a dose within 48 hours it's not a missed dose, but Biometrics will have to be used with [a patient] fingerprint to record the late dose. With eDOTS [they are] separating missed doses from follow up and [Operation ASHA] can receive that information without making it apparent to the Counselor.

Under the incentives based performance system, Biometrics allows [Operation ASHA] not to worry that incentives are causing corruption of the system.

[In addition], there is currently no system to verify that Counselors are doing patient education. With Biometrics, Counselors will be incentivized to get patients to come to the center.

eDOTS [is also used] to track Counselor attendance and timeliness. In the first month [they implemented this, Operation ASHA had] no consequences for missed days/tardiness. In the 2nd month, they took leave away as a consequence and in the 3rd month they will begin deducting from Counselor salaries.

Biometrics Rollout:

Biometrics devices are currently installed in all South Delhi centers, and will be in all Jaipur centers (9) by mid-October. That will be 16 terminals total (there is more than one Counselor at a few centers there). It will be in the next month or so that [Operation ASHA] does the [full] rollout of eDOTS in Jaipur. In Rajasthan [Biometrics] will be [in] all centers.

The front end/client side of Biometrics has been well tested through the South Delhi sites and now [Operation AHSA] is moving on to the backend system. That should pretty much be ready in a month.

The USAID [grant] will be the next level – with a stage-by-stage implementation of eDOTS. With this [Operation ASHA] will look to get tighter control of the process, [while] turning the data [entry] over to the Program Managers rather than the Biometrics staff.