Integrated e-Diagnostic Approach (LeDA)
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**Context**

Despite all seasonal and weekly desk reviews in urban and rural maternal and neonatal care units due to lack of quality and affordable healthcare. The deprivation of healthcare causing delayed treatment and health recognition is a big challenge. More and more women have been delivering in health centers, but the availability of health facilities has been very poor in the state. The community is completely unaware of the existing health centers and the facilities provided there. The target is to increase the attendance of ANMs at the health center.

• ANMs are the only health workers involved in maternal and child health.
• The ANMs need to be educated on the importance of wellchild surveillance.
• ANMs need to be educated on the use of the digital tool.

**Activity Description**

- The project is currently being implemented in Ranchi district of Jharkhand. The current institutional arrangement is at the District Level where the nodal officer is the Medical Officer -in-charge.
- Meetings are organized at the Block level in the chairmanship of the Medical Officer In-Charge on a monthly basis. During these meetings ANMs are oriented on the case management of skill of ANM significantly improved, as the process was guided by the algorithm of application, step by step suggestion on how to use the application.

**Activity Impact**

- **Development and acceptance of digital job aid in health system**
  - Participatory approach has been helpful for development of application. Test Acceptance Testing (TAT) was helpful in development being reviewed in the beginning stages of project and all the suggestions from ANMs were incorporated in the final product. The ANMs were also provided with clear instructions on how to use the application.
  - The last line is a ‘thank you card’ that can be generated in the application.
  - The application was tested in the pilot phase of the project and the feedback from ANM’s was incorporated in the final product.

- **Lesson learned and program modification**
  - The counselling component has been strengthened in the application, which first-time young mothers have reported as being very useful.
  - The project team at Jharkhand is in regular touch with agencies working for the same target group such as UNICEF, USAID funded project ‘Samveg’, IPE Global and ASHAs which are also being trained in the application.

**Facilitators**

In 2019, with the aim to improve access and quality of care for newborns and children in primary healthcare centers, WHO and GAVI initiated Integrated Management of Childhood Illness (IMNCI) curriculum. The project was implemented in Rajkot, Gujarat in 2017 and scaled-up in 2018. The approach was to use mobile-based notification and reminder system to make sure the health facilities were delivering services to the children. In Jharkhand, the project was implemented from 2019 with the support of UNICEF. The state government decided to train its health workers according to the IMNCI training curriculum. The project envisages that the state will soon have a policy on maintenance and upkeep of the Anmol devices.

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**Challenges**

The lessons learned from the pilot include lack of funds beyond the application usage and while it facilitated making some enhancements in the application, the core operation of the application has also been improved to focus on community, user engagement and engaging with government health workers.

**Lessons Learned**

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- The project is currently being funded by the Goldsmith Foundation, in addition the NHM, Jharkhand has proposed funding within the state PIP for scaling up the project across all districts in the state in two years (2022 to 2023).
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