GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA
UNSTARRED QUESTION NO. 272
TO BE ANSWERED ON 19TH NOVEMBER, 2019

CIRCUIT FACULTY SYSTEM IN NEWLY ESTABLISHED AIIMS

272. SHRI RAM NATH THAKUR:

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

(a) whether Government would consider adopting 'circuit faculty system' to make AIIMS established in different parts of the country fully functional;

(b) whether it is a fact that inspite of establishment of various AIIMS, there is no reduction in the burden on AIIMS, Delhi because the infrastructure similar to AIIMS,
Delhi is not available in the rest of the AIIMS; and

(c) if so, whether Government would consider sending faculty of AIIMS, Delhi to various other AIIMS for some time by adopting 'circuit faculty scheme' to provide credibility to other AIIMS, excluding AIIMS, Delhi?

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE
(SHRI ASHWINI KUMAR CHOUBEY)

(a) to (c): At present, there is no provision of circuit faculty system in new AIIMS.

Six new AIIMS are functional with a total strength of 1018 Faculty posts, 1266 Senior Residents and 1378 Junior Residents against the sanctioned strength of 1830 Faculty posts, 1962 Senior Residents and 1806 Junior Residents respectively.

Further, recruitment to various positions is done on need basis in phased manner keeping in view the additional services and facilities planned to be added in the hospitals.

Besides above, AIIMS, Delhi is also providing mentorship role to all the new AIIMS. As per requirement, the Faculty and other staff visit these institutes as needed to support setting up of new facilities.

New AIIMS are providing proper patient healthcare to all patients coming to Institutes for treatment with the existing Faculty and Medical staff. Services of Senior Residents and Junior Residents are also utilized for patient care in various departments.

The first six AIIMS, for the month of October, 2019, experienced a total OPD footfall and IPD admissions of around 3,91,900 patients and 18,400 patients respectively.

As the number of patients in OPD and IPD in new AIIMS has increased, it indicates that the unmet need of patients is now being catered to, earlier which were receiving treatment at local hospital or not taking any treatment. Creation of new AIIMS has given such population better accessibility to specialised treatment.