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

RAJYA SABHA
UNSTARRED QUESTION NO. 282
TO BE ANSWERED ON 19th JULY, 2022

CHCs AND PHCs IN THE COUNTRY

282 # SHRI NEERAJ DANGI:

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

(a) the number of Community Health Centres (CHCs) and Primary Health Centres (PHCs) currently being proposed in the country, State-wise;
(b) whether Government has reviewed the performance of such PHCs and CHCs;
(c) if so, the details thereof and efforts that have been made to improve them; and
(d) whether Government has taken notice of acute shortage of doctors in such Centres in the country, if so, the details thereof?

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE
(DR. BHARATI PRAVIN PAWAR)

(a): Rural Health Statistics (RHS) is an annual publication, based on Health care administrative data reported by States/UTs. As per RHS 2020-21, the number of Primary Health Centres (PHCs) in place in the country is 30,579 and number of Community Health Centres (CHCs) in the country, is 5,951. The State-wise number of PHCs and CHCs functioning in rural & urban areas is at **Annexure-I.**

(b) and (c): Under National Health Mission, Progress on the key deliverables is captured through the Health Management Information System (HMIS) and through quarterly financial and physical progress reports. Review meetings are held with states for monitoring of progress on the key deliverables for the year, besides regular monitoring visits from National Program Management Unit and Ministry officials.

Several other mechanisms such as, the Annual Common Review Missions (CRM); data from the external surveys such as Sample Registration Survey (SRS) and National Family Health Survey (NFHS) also provide information for course correction in implementation strategies. In addition, mechanisms of third-party monitoring of infrastructure related works is also envisaged, including geo-tagging of assets created under NHM.

At the District Level, the DISHA Committees, under the Chairmanship of Member of Parliament, monitor the progress of implementation of NHM. Rogi Kalyan Samitis (RKS) are set up at Public Health Facilities from Primary Health Centre (PHC) upwards, as an accountability measure to ensure high quality patient care. Village Health, Sanitation and Nutrition Committee (VHSNC) constituted with representation of the Panchayati Raj Institutions and Mahila Arogya Samitis for rural and urban areas, to facilitate an active

role for communities in action for addressing social and environmental determinants of health.

(d): Public health and hospitals is a State subject, the primary responsibility to ensure availability of human healthcare professionals - doctors in the public health facilities lies with the respective State/UT Governments. Under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their health care systems including augmenting health human resource on contractual basis including support for in-sourcing or engagement of doctors, specialist doctors and other health professionals for provision of equitable, affordable healthcare based on requirements posed by the States in their Programme Implementation Plans (PIPs) and within their overall resource envelope.

Government has taken various steps to optimize the number of doctors and specialists in the country - such as increasing the number of seats in UG/PG level at various medical educational institutes/medical colleges across the country, an increase of more than 70 % in last 7 years; encouraging doctors to work in remote and difficult areas; encouraging States to adopt flexible norms for engaging specialists for public health facilities by various mechanisms like ‘contracting in’ and ‘contracting out’ of specialist services under National Health Mission. Further, NHM provides incentives and honorarium to staff for ensuring service delivery in rural and remote areas in the country.

States/UTs have been urged to fill-up the vacancies in sanctioned positions. As per Rural Health Statistics (RHS) – 2020-21, the State/UT wise status of availability of doctors and shortfall thereof in public health facilities both rural and urban areas is given at **Annexure II**.

Annexure-I

STATE WISE NUMBER OF PHCs, CHCs FUNCTIONING IN RURAL & URBAN AREAS

NUMBER OF PHCs, CHCs FUNCTIONING IN RURAL & URBAN AREAS							
S. No.	State/UT	PHCs			CHCs		
		Rural	Urban	Total	Rural	Urban	Total
1	Andhra Pradesh	1142	259	1401	141	57	198
2	Arunachal Pradesh	122	5	127	57	0	57
3	Assam	948	53	1001	197	2	199
4	Bihar	1932	102	2034	306	0	306
5	Chhattisgarh	769	52	821	166	3	169
6	Goa	23	4	27	6	0	6
7	Gujarat	1477	322	1799	333	27	360
8	Haryana	384	100	484	124	13	137
9	Himachal Pradesh	553	19	572	98	0	98
10	Jharkhand	291	59	350	171	5	176
11	Karnataka	2141	390	2531	182	30	212
12	Kerala	782	158	940	213	16	229
13	Madhya Pradesh	1234	284	1518	295	25	320
14	Maharashtra	1839	651	2490	270	131	401
15	Manipur	86	9	95	17	0	17
16	Meghalaya	121	24	145	28	0	28
17	Mizoram	62	6	68	9	0	9
18	Nagaland	131	7	138	21	0	21
19	Odisha	1288	91	1379	377	7	384
20	Punjab	422	100	522	150	10	160
21	Rajasthan	2130	264	2394	589	68	657
22	Sikkim	24	2	26	2	0	2
23	Tamil Nadu	1422	464	1886	385	15	400
24	Telangana	636	227	863	85	10	95
25	Tripura	108	8	116	22	0	22
26	Uttarakhand	245	42	287	53	19	72
27	Uttar Pradesh	2923	593	3516	753	12	765
28	West Bengal	915	454	1369	348	0	348
29	Andaman & Nicobar Islands	22	5	27	4	0	4
30	Chandigarh	0	42	42	0	2	2
31	Dadra & Nagar Haveli and Daman & Diu	12	2	14	3	1	4
32	Delhi	5	544	549	0	0	0
33	Jammu & Kashmir	891	82	973	63	16	79
34	Ladakh	32	0	32	7	0	7
35	Lakshadweep	4	0	4	3	0	3
36	Puducherry	24	15	39	3	1	4

Note:
Chandigarh has no Rural area

Delhi has no CHCs

Annexure-II

DOCTORS+ AT PRIMARY HEALTH CENTRES in Rural Areas						
S. No.	State/UT	(As on 31st March 2021)				
		Required[1]	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1142	2146	2001	145	*
2	Arunachal Pradesh	122	114	135	*	*
3	Assam	948	1677	1383	294	*
4	Bihar	1932	4317	2902	1415	*
5	Chhattisgarh	769	874	498	376	271
6	Goa	23	96	87	9	*
7	Gujarat	1477	1903	1679	224	*
8	Haryana	384	812	655	157	*
9	Himachal Pradesh	553	618	517	101	36
10	Jharkhand	291	291	278	13	13
11	Karnataka	2141	2406	1801	605	340
12	Kerala	782	1500	1431	69	*
13	Madhya Pradesh	1234	1887	1307	580	*
14	Maharashtra	1839	4021	3252	769	*
15	Manipur	86	337	308	29	*
16	Meghalaya	121	175	162	13	*
17	Mizoram	62	0	58	*	4
18	Nagaland	131	97	123	*	8
19	Odisha	1288	1331	926	405	362
20	Punjab	422	610	401	209	21
21	Rajasthan	2130	2463	2101	362	29
22	Sikkim	24	39	38	1	*
23	Tamil Nadu	1422	2991	2725	266	*
24	Telangana	636	1254	1213	41	*
25	Tripura	108	NA	230	NA	*
26	Uttarakhand	245	416	301	115	*
27	Uttar Pradesh	2923	4448	3093	1355	*
28	West Bengal	915	1533	955	578	*
29	Andaman & Nicobar Islands	22	53	50	3	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	12	22	22	0	*
32	Delhi	5	19	16	3	*
33	Jammu & Kashmir	891	1542	965	577	*
34	Ladakh	32	93	45	48	*
35	Lakshadweep	4	13	13	0	*
36	Puducherry	24	45	45	0	*

NA: Not Available. *N App - Not Applicable*

Notes:

+: *Allopathic Doctors*

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

*: *Surplus.*

[1] *One per Primary Health Centre as per IPHS norms*

[2] *For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded*

DOCTORS[+] AT PRIMARY HEALTH CENTRES in Urban Areas						
S. No.	State/UT	(As on 31st March 2021)				
		Required[1]	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	259	312	305	7	*
2	Arunachal Pradesh	5	1	25	*	*
3	Assam	53	84	64	20	*
4	Bihar	102	220	30	190	72
5	Chhattisgarh	52	112	187	*	*
6	Goa	4	7	6	1	*
7	Gujarat	322	427	186	241	136
8	Haryana	100	100	85	15	15
9	Himachal Pradesh	19	22	20	2	*
10	Jharkhand	59	77	48	29	11
11	Karnataka	390	414	364	50	26
12	Kerala	158	274	258	16	*
13	Madhya Pradesh	284	250	153	97	131
14	Maharashtra	651	1164	1014	150	*
15	Manipur	9	19	18	1	*
16	Meghalaya	24	10	25	*	*
17	Mizoram	6	0	6	*	0
18	Nagaland	7	2	7	*	0
19	Odisha	91	115	94	21	*
20	Punjab	100	177	145	32	*
21	Rajasthan	264	375	349	26	*
22	Sikkim	2	1	1	0	1
23	Tamil Nadu	464	647	579	68	*
24	Telangana	227	498	470	*	*
25	Tripura	8	NA	9	NA	*
26	Uttarakhand	42	44	37	7	5
27	Uttar Pradesh	593	608	453	155	140
28	West Bengal	454	914	616	298	*
29	Andaman & Nicobar Islands	5	10	10	0	*
30	Chandigarh	42	71	75	*	*
31	Dadra & Nagar Haveli and Daman & Diu	2	2	2	0	0
32	Delhi	544	1136	1059	77	*
33	Jammu & Kashmir	82	111	84	27	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	25	25	0	*

Notes: *NA: Not Available.* *N App - Not Applicable*

+: *Allopathic Doctors*

**:* *Surplus.*

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

[1] *One per Primary Health Centre as per IPHS norms*

[2] *For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded*

General Duty Medical Officers (GDMOs) - Allopathic at CHCs in Urban Areas						
S. No.	State/UT	(As on 31st March 2021)				
		Required[1]	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	114	129	76	*	38
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	4	4	4	0	0
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	6	24	27	*	*
6	Goa	0	N App	N App	N App	N App
7	Gujarat	54	130	105	25	*
8	Haryana	26	28	19	9	7
9	Himachal Pradesh	0	N App	N App	N App	N App
10	Jharkhand	10	5	1	4	9
11	Karnataka	60	24	16	8	44
12	Kerala	32	45	45	0	*
13	Madhya Pradesh	50	150	48	102	2
14	Maharashtra	262	445	340	105	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	14	45	38	7	*
20	Punjab	20	45	21	24	*
21	Rajasthan	136	249	201	48	*
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	30	57	32	25	*
24	Telangana	20	15	15	0	5
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	38	78	76	2	*
27	Uttar Pradesh	24	10	10	0	14
28	West Bengal	0	N App	N App	N App	N App
29	A& N Islands	0	N App	N App	N App	N App
30	Chandigarh	4	10	24	*	*
31	D & N Haveli and Daman & Diu	2	3	3	0	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	32	136	119	17	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	2	6	7	*	*

Notes:

NA: Not Available. *N App: Not Applicable*

**: Surplus.*

[1] *Two per Community Health Centre as per IPHS norms*

[2] *For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded*