

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

**RAJYA SABHA
UNSTARRED QUESTION NO. 3157
TO BE ANSWERED ON 28th MARCH, 2023**

PRESENT STATUS OF MEDICAL INFRASTRUCTURE IN RURAL INDIA

3157. SHRI HARNATH SINGH YADAV:

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

- (a) whether Government has formulated any action plan to cater to the requirement of medical services, doctors and paramedics in rural and remote areas;
- (b) if so, the availability of doctors and paramedical staff at present vis-a-vis the requirement and shortage thereof State-wise;
- (c) whether Government has formulated any action plan to set up generic drug centers near each medical center in rural areas; and
- (d) if so, the details thereof

ANSWER

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

(a) to (b): All the administrative and personnel matters related to medical services and health human resource lies with the respective State/UT Governments. Under National Health Mission (NHM), Ministry of Health & Family Welfare, Government of India provides financial and technical support to States/UTs to strengthen their healthcare systems based on the requirements posed by them in their Programme Implementation Plans (PIPs) within their overall resource envelope.

The National Health Mission (NHM) is a Centrally Sponsored Scheme which envisages achievement of universal access to equitable, affordable & quality health care services that are accountable and responsive to people's needs across the country. NHM encompasses its two

Sub-Missions, the National Rural Health Mission (NRHM) and the National Urban Health Mission (NUHM). The main programmatic components include Health System Strengthening in rural and urban areas, Reproductive-Maternal- Neonatal-Child and Adolescent Health (RMNCH+A), and Communicable and Non-Communicable Diseases.

The Government of India has taken several steps to provide healthcare facility which inter-alia includes Free Drugs and Free Diagnostics initiative to provide essential drugs and diagnostics free of cost in public health facilities.

Under NHM, the States are supported for augmenting the referral network in the country by Advanced Life Support (ALS), Basic Life Support (BLS) and Patient Transport Vehicle (PTV) ambulance system in both rural and urban areas.

Support is also provided for Mobile Medical Units (MMUs) and Telemedicine under NHM to improve healthcare affordability. MMUs conduct outreach activities to offer range of services in remote, difficult and hard to reach areas.

Under Ayushman Bharat Health & Wellness Centres (AB-HWCs), the existing Sub-health Centres (SHCs) and Primary Health Centres (PHCs) are transformed into AB-HWCs to deliver twelve packages of Comprehensive Primary Health Care (CPHC) that includes preventive, promotive, curative, palliative and rehabilitative services which is universal, free and close to the community.

Another essential component of Ayushman Bharat Health & Wellness Centres (AB-HWCs) is the roll out of tele-consultation services through 'eSanjeevani'. This platform provides telemedicine services for the communities through a hub and spoke model which connects AB-HWCs (spokes) to District Hospitals/Medical Colleges (Hubs) for specialist consultation services. Teleconsultation services are aimed at improving access of specialist services to the communities, especially in the rural areas.

Under NHM, following types of incentives and honorarium are provided for encouraging doctors and paramedics to practice in rural and remote areas of the country:

- Hard area allowance to specialist doctors for serving in rural and remote areas and for their residential quarters so that they find it attractive to serve in public health facilities in such areas.

- Honorarium to Gynecologists/ Emergency Obstetric Care (EmoC) trained, Pediatricians & Anesthetist/ Life Saving Anaesthesia Skills (LSAS) trained doctors is also provided to increase availability of specialists for conducting Cesarean Sections in rural & remote area.
- Incentives like special incentives for doctors, incentive for ANM for ensuring timely ANC checkup and recording, incentives for conducting Adolescent Reproductive and Sexual Health activities.
- States are also allowed to offer negotiable salary to attract specialist including flexibility in strategies such as “You Quote We Pay”.
- Non-Monetary incentives such as preferential admission in post graduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.
- Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists. Skill upgradation of existing HR is another major strategy under NRHM for achieving improvement in health outcomes.

The details of the doctors and paramedical in health sector, State-wise, are available at website of Ministry of Health and Family Welfare at the Uniform Resources Locator (URL) as under: <https://main.mohfw.gov.in/sites/default/files/RHS%202021%2022.pdf> .

In addition to NHM, the Ministry of Health & Family Welfare administers a Centrally Sponsored Scheme (CSS) for ‘Establishment of new Medical Colleges attached with existing district/referral hospitals’ with preference to underserved areas and aspirational districts, where there is no existing Government or private medical college. Under the Scheme, a total of 157 medical colleges have been sanctioned in three phases.

The Pradhan Mantri Swasthya Suraksha Yojana (PMSSY) aims at correcting regional imbalances in the availability of affordable tertiary healthcare services and to augment facilities for quality medical education in the country. The Scheme has two components, namely, (i) Setting up of All India Institute of Medical Sciences (AIIMS); and (ii) Upgradation of existing Government Medical Colleges/Institutions (GMCIs). So far, setting up of 22 new AIIMS and 75 projects of upgradation of GMCIs have been approved under the Scheme in various phases.

(c) to (d): As per the information received from Department of Pharmaceuticals, Ministry of Chemicals and Fertilizers, action plan to set up generic drug centers is given below:

“With an objective of making quality generic medicines available at affordable prices to all, Pradhan Mantri Bhartiya Janaushadhi Pariyojana (PMBJP) was launched by the Department of Pharmaceuticals, Ministry of Chemicals & Fertilizers, Government of India. Under this scheme, dedicated outlets known as Janaushadhi Kendras are opened to provide generic medicines. Till 28.02.2023, 9182 Pradhan Mantri Bhartiya Janaushadhi Kendras (PMBJKs) have been opened across the country. Out of these, about 651 Kendras have been opened in the aspirational districts of the country.

Government has fixed a target for opening of 10,000 PMBJKs by March, 2024. Presently, 744 districts have been covered out of the total 763 districts of the country. While opening these Kendras at district level, the formula of one Kendra at 1.5 lakh population was taken into consideration. Pharmaceuticals & Medical Devices Bureau of India (PMBI) had planned to extend the reach of these Kendras at block level by inviting applications from 3579 blocks in the entire country. Online applications have been invited from 651 different districts of the country where the coverage of Kendras is low.

Further, Department of Pharmaceuticals and Pharmaceuticals & Medical Devices Bureau of India (PMBI), the implementing agency of the scheme, periodically requests the State Governments to allot space in Primary Healthcare Centers (PHCs), Community Health Centers (CHCs), Hospitals, including Super Specialty Hospitals for opening PMBJKs in rural and remote areas by providing rent -free space within their premises”
