

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

**RAJYA SABHA
UNSTARRED QUESTION NO. 441
TO BE ANSWERED ON 03.02.2026**

**SHORTAGE OF DOCTORS AND HEALTHCARE RESOURCES IN GOVERNMENT
HOSPITALS**

441 DR. SANDEEP KUMAR PATHAK:

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

- (a) the details of the number of vacant posts of doctors, nurses, and paramedical staff against their sanctioned posts in central and State Government hospitals across the country, State-wise;
- (b) whether Government has implemented measures like financial incentives, mandatory service provisions or special recruitment schemes to ensure availability of specialist doctors in rural, tribal and remote areas, if so, the details thereof; and
- (c) the number of projects sanctioned for the establishment of new medical colleges, upgradation of district hospitals, and the establishment of trauma care centers in the country during the last three years, along with the details of funds allocated and the progress made therein?

ANSWER

**MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE
(SHRI PRATAPRAO JADHAV)**

(a) 'Public Health' & 'Hospitals' are State subjects. Accordingly, respective State Governments make efforts for ensuring availability of doctors and healthcare resources in government hospitals across the country. Information related to vacant posts of doctors, nurses, and paramedical staff in State Government Hospitals is not maintained centrally.

So far as Central Government hospitals i.e. Vardhman Mahavir Medical College & Safdarjung Hospital (VMMC & SJH), Atal Bihari Vajpayee Institute of Medical Sciences & Dr. Ram Manohar Lohia Hospital (ABVIMS & Dr. RMLH), Lady Hardinge Medical College & Associated Hospitals (LHMC & Associated Hospitals), and Rural Health Training Centre (RHTC) are concerned, details of vacant posts of doctors, nurses, and paramedical staff, as informed by these

hospitals, are as under:

Sl. No .	Name of Hospital	Doctors			Nursing Personnel			Paramedical Staff		
		S	F	V	S	F	V	S	F	V
1.	VMMC & SJH	632	513	119	2759	2342	417	162	122	40
2.	ABVIM S & Dr. RMLH	453	351	102	1559	1459	100	498	344	154
3.	LHMC & Asso. Hospitals	386	298	88	1181	959	222	631	384	247
4.	RHTC	46	30	16	41	05	36	90	48	42

*S- Sanctioned, F- Filled, V- Vacant

(b) & (c) 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. The fund sharing mechanism between the Centre and State Governments is in the ratio of 90:10 for North Eastern and Special Category States, and 60:40 for others. Under the Scheme, 157 Government medical colleges have already been approved. Out of which, 137 medical colleges have become functional.

Under the National Programme for Prevention & Management of Trauma and Burn Injuries, total 196 Trauma Care Facilities (TCFs) were sanctioned in Government Hospitals/ Medical Colleges across the country.

Further, the Government has initiated several measures to strengthen healthcare services in rural, remote, and underserved areas. These initiatives include the Family Adoption Programme, which aims to provide continuous medical support to families in such regions, and the District Residency Programme, designed to ensure the availability of trained medical professionals in district-level healthcare facilities.

Also, under National Health Mission (NHM), financial and technical support is provided to the States/UTs to strengthen their healthcare systems based on the Programme Implementation Plans submitted by the States/UTs within their overall resource envelope. In order to address shortage of human resources, under NHM, the types of incentives and honorarium provided for encouraging healthcare service providers are at **Annexure**.

Annexure

Types of incentives and honorarium provided for encouraging doctors and other staff to address shortage of human resources under National Health Mission (NHM)

- (i) Hard area allowance to specialist doctors for serving in rural and remote areas.
- (ii) 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 in rural & remote areas.
- (iii) Incentives for doctors and Auxiliary Nurse Midwife(ANM) for ensuring timely Antenatal Care checkup and recording, for conducting Adolescent Reproductive and Sexual Health activities.
- (iv) States are also allowed to offer negotiable salary to attract specialists including flexibility in strategies such as “You Quote We Pay”.
- (v) 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.
- (vi) Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists. Skill upgradation of existing human resources is another major strategy under NHM for achieving improvement in health outcomes.