

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

**LOK SABHA  
UNSTARRED QUESTION NO. 6598  
TO BE ANSWERED ON 6<sup>TH</sup> APRIL, 2018**

**SETTING UP OF PHCs/CHCs**

**6598. SHRI PONGULETI SRINIVASA REDDY:  
SHRI GOPAL SHETTY:  
SHRI VINAYAK BHAURAO RAUT:  
DR. SHRIKANT EKNATH SHINDE:  
DR. HEENA VIJAYKUMAR GAVIT:  
SHRI P.R. SUNDARAM:  
SHRIMATI SUPRIYA SULE:  
SHRI SATAV RAJEEV:  
DR. J. JAYAVARDHAN:  
SHRI DHANANJAY MAHADIK:  
SHRI SHRIRANG APPA BARNE:  
ADV. NARENDRA KESHAV SAWAIKAR:  
SHRI DHARMENDRA YADAV:  
SHRI ADHALRAO PATIL SHIVAJIRAO:  
SHRI SANJAY HARIBHAU JADHAV:**

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

- (a) the present status of Community Health Centres (CHCs) and Primary Health Centres (PHCs), State/UT-wise including Maharashtra, Bihar and Madhya Pradesh;
- (b) whether the Government has any proposal to release funds for setting up of PHCs/CHCs in the country and if so, the details thereof, State-wise including Maharashtra;
- (c) whether most of the said centres lack basic infrastructure facilities including shortage of doctors, nurses and if so, the details thereof;
- (d) whether the Government proposes to make all the CHCs/PHCs ISO certified wellness centres and if so, the details thereof along with the number of ISO certified CHCs/PHCs, State-wise; and
- (e) the steps taken/being taken by the Government to improve the quality of service in the PHCs/CHCs and fill the vacancies in these centres?

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

- (a): As per Rural Health Statistics 2017, details of Community Health Centres (CHCs) and Primary Health Centres (PHCs) functioning in the country including in Maharashtra, Bihar and Madhya Pradesh, are given at Annexure-I.

(b): Funds released during FY 2017-18 for infrastructure facilities for the PHCs/CHCs including for new constructions/ renovation and setting up of these health facilities in the country, State-wise, including Maharashtra are given at Annexure-II.

(c): The shortage of Doctors in public health sector varies from State to State depending upon their policies and context. There is some shortage of basic amenities in PHCs and CHCs in the country. The details of PHCs and CHCs functioning as per IPHS norms are given at Annexure-I. The details of doctors, nurses as per Rural Health Statistics 2017, are given at Annexure-III to Annexure-VI.

(d): There is no proposal to get PHCs and CHCs, ISO certified.

(e): Public Health being a State subject, the primary responsibility to improve the quality of services in CHCs and PHCs, lies with the State Governments. However, under NHM, financial and technical assistance is provided to the States/UTs to strengthen the health systems including improving quality of services in CHCs and PHCs. Various steps taken to improve the quality of services in CHCs and PHCs are as under: -

- i. National Quality Assurance Programme (NQAP) has been rolled out, under which, quality standards for different health facilities have been defined and these health facilities are assessed against them and certified.
- ii. Quality Assurance Committees have been constituted at National, State and District level. Under National Health Mission, dedicated Human Resource has been provided to operationalize these committees and carry out related tasks such as quality assessment, preparing action plan and assisting healthcare facilities for quality certification under NQAP.
- iii. The central government has launched 'Kayakalp' award scheme for transforming public hospitals by improving Sanitation, Hygiene, Upkeep, Infection Control Practices and waste management practices. All facilities from PHCs, CHCs, District Hospitals and central government institutions are assessed against a set of defined criteria. Best performing facilities are given annual awards.
- iv. Support is provided to States to implement NHM Free Diagnostics Services Initiative and NHM Free Drugs Initiative in Public Health facilities.
- v. In order to improve functionality of Medical Equipments, Operational Guidelines for Biomedical Equipment Management and Maintenance Program (BMMP) have been shared with States.

Public health and hospitals being a State subject, the primary responsibility to fill the vacancies in PHCs and CHCs lies with the respective State/UT Governments. Under the National Health Mission, support is being provided to State UTs to strengthen their healthcare system including provision of health human resource. To increase the availability of doctors, several initiatives have been taken such as:

- I. 50% reservation in Post Graduate Diploma Courses for Medical Officers in the Government service who have served for at least three years in remote and difficult areas.

- II. Incentive at the rate of 10% of the marks obtained for each year in service in remote or difficult areas up to the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.
- III. Various financial and non-financial incentives are provided by States to encourage health professionals to join and remain within the public health system. These include innovations such as walk-in interviews to reduce delays in engaging service providers; providing an extra hardship allowance for serving in remote, rural and under-served areas; accommodation arrangements or a housing allowance; facilitating jobs for spouses and children's education; insurance facilities, e.g. medical cover and support for continuing medical education, e.g. attendance at conferences and workshops. In many states, doctors serving in rural areas are given extra weightage for post-graduate entrance exams and/or a specific number of post-graduate seats are reserved for doctors serving in rural areas.
- IV. The States are encouraged to adopt flexible norms for engaging specialists at public health facilities. These include various mechanisms for 'contracting in' and 'contracting out' of specialist services, methods of engaging specialists outside the government system for service delivery at public facilities and the mechanism to include requests for these in the state Program Implementation Plans (PIP) under the National Health Mission.
- V. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats,
- VI. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country.
- VII. Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS seats.
- VIII. The States are also advised from time to time to fill up the vacant posts and formulate rational HR policies.
- IX. The National Health Mission (NHM) provides financial flexibility for states to offer negotiable and competitive salaries in the recruitment of doctors, mainly for specialists.

**Status of Community Health Centres (CHCs) and Primary Health Centres (PHCs) functioning in the country as on 31.03.2017 ( Rural Health Statistics, 2017)**

Sl. No.	State/UT	Number of CHCs functioning	CHCs Functioning as per IPHS norms	Number of PHCs functioning	PHCs Functioning as per IPHS norms
		(1)	(2)	(3)	(4)
1	Andhra Pradesh	193	0	1147	514
2	Arunachal Pradesh	63	0	143	0
3	Assam	158	0	1014	0
4	Bihar	150	NA	1899	NA
5	Chhattisgarh	169	0	785	0
6	Goa	4	4	24	24
7	Gujarat	363	0	1392	0
8	Haryana	112	8	366	3
9	Himachal Pradesh	89	0	538	0
10	Jammu & Kashmir	84	NA	637	NA
11	Jharkhand	188	0	297	0
12	Karnataka	206	0	2359	0
13	Kerala	232	7	849	0
14	Madhya Pradesh	309	6	1171	0
15	Maharashtra	360	156	1814	770
16	Manipur	17	0	85	0
17	Meghalaya	27	0	109	0
18	Mizoram	9	0	57	0
19	Nagaland	21	0	126	0
20	Odisha	370	0	1280	0
21	Punjab	151	NA	432	NA
22	Rajasthan	579	NA	2079	0
23	Sikkim	2	0	24	24
24	Tamil Nadu	385	349	1362	1271
25	Telangana	114	0	689	0
26	Tripura	21	19	93	66
27	Uttarakhand	60	31	257	69
28	Uttar Pradesh	822	134	3621	170
29	West Bengal	349	189	914	308
30	A& N Islands	4	4	22	21
31	Chandigarh	2	2	3	3
32	D & N Haveli	2	2	9	7
33	Daman & Diu	2	2	4	4
34	Delhi	0	0	5	5
35	Lakshadweep	3	3	4	4
36	Puducherry	4	4	40	40
	<b>All India/Total</b>	<b>5624</b>	<b>920</b>	<b>25650</b>	<b>3303</b>

## Statement showing State-wise SPIP Approval for the activity Infrastructure Facilities for the CHCs/PHCs

Rs. In lakhs

S. No.	Name of the State / UT	2017-18
<b>A. High Focus States</b>		
1	Bihar	8970.50
2	Chattisgarh	3078.14
3	Himachal Pradesh	2055.80
4	Jammu & Kashmir	2101.38
5	Jharkhand	1934.73
6	Madhya Pradesh	11325.89
7	Orissa	7544.59
8	Rajasthan	24927.52
9	Uttar Pradesh	10092.21
10	Uttarakhand	650.13
	<b>Sub Total</b>	<b>72680.89</b>
<b>B. NE States</b>		
11	Arunachal Pradesh	1181.67
12	Assam	6473.91
13	Manipur	154.19
14	Meghalaya	390.10
15	Mizoram	255.75
16	Nagaland	276.02
17	Sikkim	320.24
18	Tripura	4530.50
	<b>Sub Total</b>	<b>13582.38</b>
<b>C. Non-High Focus States</b>		
19	Andhra Pradesh	2846.25
20	Goa	41.25
21	Gujarat	5326.75
22	Haryana	802.12
23	Karnataka	12288.00
24	Kerala	703.08
25	Maharashtra	16161.81
26	Punjab	581.60
27	Tamil Nadu	8202.35
28	Telangana	1393.80
29	West Bengal	2955.13
	<b>Sub Total</b>	<b>51302.14</b>
<b>D. Small States/UTs</b>		
30	Andaman & Nicobar Islands	50.05
31	Chandigarh	15.52
32	Dadra & Nagar Haveli	1.92
33	Daman & Diu	4.00
34	Delhi	255.50
35	Lakshadweep	9.12
36	Puducherry	77.13
	<b>Sub Total</b>	<b>413.24</b>
	<b>Grand Total</b>	<b>137978.65</b>

Note:

- SPIP stands for State Program Implementation Plan.
- The above data comprises **1. Hospital Strengthening** - (i) Up-gradation of CHCs, PHCs, **2. New Constructions/ Renovation and Setting up** - (i) CHCs (ii) PHCs **3. Untied Funds/Annual Maintenance Grants /Corpus Grants to HMS/RKS** (i) CHCs (ii) PHCs **4. Major civil works for operationalization of 24 hour services at PHCs** **5. Infrastructure Strengthening** (i) New constructions of UPSC, UCHC (ii) Renovation/Upgradation of UPHC, UCHC **6. Untied Grants** (i) Untied grants to UPHCs (ii) Untied grants to UCHCs.

DOCTORS <sup>+</sup> AT PRIMARY HEALTH CENTRES						
S. No.	State/UT	(As on 31st March, 2017)				
		Required <sup>1</sup>	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1147	1952	1644	308	*
2	Arunachal Pradesh	143	NA	122	NA	21
3	Assam	1014	NA	1048	NA	*
4	Bihar #	1899	2078	1786	292	113
5	Chhattisgarh	785	798	341	457	444
6	Goa	24	48	56	*	*
7	Gujarat	1392	1769	1229	540	163
8	Haryana	366	687	429	258	*
9	Himachal Pradesh	538	636	492	144	46
10	Jammu & Kashmir	637	1347	704	643	*
11	Jharkhand	297	569	331	238	*
12	Karnataka	2359	2359	2136	223	223
13	Kerala	849	1120	1169	*	*
14	Madhya Pradesh	1171	1771	954	817	217
15	Maharashtra	1814	3009	2929	80	*
16	Manipur	85	238	194	44	*
17	Meghalaya ##	109	128	112	16	*
18	Mizoram ###	57	152	56	96	1
19	Nagaland	126	108	122	*	4
20	Odisha	1280	1285	940	345	340
21	Punjab	432	593	568	25	*
22	Rajasthan	2079	2664	2382	282	*
23	Sikkim	24	NA	30	NA	*
24	Tamil Nadu	1362	2927	2759	168	*
25	Telangana	689	1318	966	352	*
26	Tripura	93	0	156	*	*
27	Uttarakhand	257	386	215	171	42
28	Uttar Pradesh	3621	4509	2209	2300	1412
29	West Bengal	914	1390	918	472	*
30	A& N Islands	22	42	34	8	*
31	Chandigarh	3	0	3	*	0
32	D & N Haveli	9	15	8	7	1
33	Daman & Diu	4	3	7	*	*
34	Delhi	5	21	21	0	*
35	Lakshadweep	4	8	8	0	*
36	Puducherry	40	38	46	*	*
	<b>All India<sup>2</sup>/ Total</b>	<b>25650</b>	<b>33968</b>	<b>27124</b>	<b>8286</b>	<b>3027</b>

Notes: # Sanctioned data for year 2011 used

# Sanctioned data for year 2015 used

###

Sanctioned  
data for year  
2013-14 used

NA: Not  
Available.

+: Allopathic Doctors

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

<sup>1</sup> For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

<sup>2</sup> One per Primary Health Centre

<b>PHYSICIANS at CHCs</b>						
<b>S. No.</b>	<b>State/UT</b>	<b>(As on 31st March, 2017)</b>				
		<b>Require<sup>d</sup></b>	<b>Sanctioned</b>	<b>In Position</b>	<b>Vacant</b>	<b>Shortfall</b>
		<b>[R]</b>	<b>[S]</b>	<b>[P]</b>	<b>[S-P]</b>	<b>[R-P]</b>
1	Andhra Pradesh	193	65	56	9	137
2	Arunachal Pradesh	63	NA	1	NA	62
3	Assam ###	158	NA	31	NA	127
4	Bihar	150	NA	8	NA	142
5	Chhattisgarh	169	155	9	146	160
6	Goa	4	1	1	0	3
7	Gujarat	363	62	9	53	354
8	Haryana	112	12	4	8	108
9	Himachal Pradesh	89	NA	5	NA	84
10	Jammu & Kashmir	84	107	45	62	39
11	Jharkhand	188	190	8	182	180
12	Karnataka	206	206	106	100	100
13	Kerala	232	2	2	0	230
14	Madhya Pradesh	309	309	41	268	268
15	Maharashtra	360	153	45	108	315
16	Manipur	17	1	1	0	16
17	Meghalaya #	27	0	12	*	15
18	Mizoram ##	9	5	0	5	9
19	Nagaland	21	NA	0	NA	21
20	Odisha	370	128	58	70	312
21	Punjab	151	140	48	92	103
22	Rajasthan	579	665	189	476	390
23	Sikkim	2	NA	1	NA	1
24	Tamil Nadu	385	NA	11	NA	374
25	Telangana	114	71	21	50	93
26	Tripura	21	0	0	0	21
27	Uttarakhand	60	49	11	38	49
28	Uttar Pradesh	822	523	103	420	719
29	West Bengal	349	95	36	59	313
30	A & N Islands	4	3	0		4
31	Chandigarh #	2	2	1		1
32	D & N Haveli	2	0	0		2
33	Daman & Diu	2	0	0		2

Notes:

# Sanctioned data for year 2015 used

## Total 5 Physicians sanctioned in the State

### Data for year 2016 used

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

TOTAL SPECIALISTS AT CHCs					Annexure-V
Total Specialists [Surgeons, OB&GY, Physicians & Paediatricians]					
S. No.	State/UT	(As on 31st March, 2017)			
		Required <sup>4</sup>	Sanctioned	In Position	Vacant
		[R]	[S]	[P]	[S-P]
1	Andhra Pradesh	772	533	348	185
2	Arunachal Pradesh	252	NA	4	NA
3	Assam	632	NA	139	NA
4	Bihar	600	NA	82	NA
5	Chhattisgarh	676	620	59	561
6	Goa	16	5	4	1
7	Gujarat	1452	611	92	519
8	Haryana	448	74	16	58
9	Himachal Pradesh	356	NA	12	NA
10	Jammu & Kashmir	336	344	191	153
11	Jharkhand	752	424	75	349
12	Karnataka	824	824	498	326
13	Kerala	928	30	40	*
14	Madhya Pradesh	1236	1236	180	1056
15	Maharashtra	1440	823	508	315
16	Manipur	68	4	3	1
17	Meghalaya	108	3	13	*
18	Mizoram	36	33	0	33
19	Nagaland	84	NA	8	NA
20	Odisha	1480	884	318	566
21	Punjab	604	593	203	390
22	Rajasthan	2316	1593	497	1096
23	Sikkim	8	NA	1	NA
24	Tamil Nadu	1540	NA	78	NA
25	Telangana	456	284	125	159
26	Tripura	84	0	0	0
27	Uttarakhand	240	200	41	159
28	Uttar Pradesh	3288	2099	484	1615
29	West Bengal	1396	669	117	552
30	A & N Islands	16	9	0	9
31	Chandigarh	8	9	15	*
32	D & N Haveli	8	0	0	0
33	Daman & Diu	8	2	0	2
34	Delhi	0	0	0	0
35	Lakshadweep	12	0	0	0
36	Puducherry	16	4	5	*
	<b>All India<sup>5</sup>/ Total</b>	<b>22496</b>	<b>11910</b>	<b>4156</b>	<b>8105</b>

Notes:

NA: Not Available.

<sup>4</sup> Four per Community Health Centre

<sup>4</sup> Four per Community Health Centre

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

<sup>5</sup> For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, are excluded



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

<sup>1</sup> For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, are excluded

<b>NURSING STAFF at PHCs &amp; CHCs</b>						
<b>S. No.</b>	<b>State/UT</b>	<b>(As on 31st March, 2017)</b>				
		<b>Required<sup>1</sup></b>	<b>Sanctioned</b>	<b>In Position</b>	<b>Vacant</b>	<b>Shortfall<sup>1</sup></b>
		<b>[R1]</b>	<b>[S]</b>	<b>[P]</b>	<b>[S-P]</b>	<b>[R1-P]</b>
1	Andhra Pradesh	2498	4307	3541	766	*
2	Arunachal Pradesh	584	NA	498	NA	86
3	Assam <sup>#</sup>	2120	2798	2793	5	*
4	Bihar <sup>##</sup>	2949	1662	1142	520	1807
5	Chhattisgarh	1968	2685	1918	767	50
6	Goa	52	132	129	3	*
7	Gujarat	3933	3994	3529	465	404
8	Haryana	1150	1929	1675	254	*
9	Himachal Pradesh	1161	837	542	295	619
10	Jammu & Kashmir	1225	1710	1480	230	*
11	Jharkhand <sup>###</sup>	1613	703	1136	*	477
12	Karnataka	3801	2667	3339	*	462
13	Kerala	2473	3610	3969	*	*
14	Madhya Pradesh	3334	4624	3211	1413	123
15	Maharashtra	4334	3218	2519	699	1815
16	Manipur	204	484	397	87	*
17	Meghalaya <sup>^</sup>	298	413	610	*	*
18	Mizoram <sup>\$</sup>	120	570	212	358	*
19	Nagaland	273	175	387	*	*
20	Odisha	3870	866	1817	*	2053
21	Punjab	1489	2189	2019	170	*
22	Rajasthan	6132	12472	9311	3161	*
23	Sikkim	38	NA	33	NA	5
24	Tamil Nadu	4057	8133	7487	646	*
25	Telangana	1487	2130	1904	226	*
26	Tripura	240	0	597	*	*
27	Uttarakhand	677	307	349	*	328
28	Uttar Pradesh	9375	4497	4412	85	4963
29	West Bengal	3357	10380	9248	1132	*
30	A & N Islands	50	199	193	6	*
31	Chandigarh <sup>^^</sup>	17	47	80	*	*
32	D & N Haveli	23	14	45	*	*
33	Daman & Diu	18	14	16	*	2
34	Delhi	5	5	7	*	*
35	Lakshadweep	25	54	54	0	*
36	Puducherry	68	131	139	*	*
	<b>All India/Total</b>	<b>65018</b>	<b>77956</b>	<b>70738</b>	<b>11288</b>	<b>13194</b>

Notes: # Sanctioned data for year 2013 used ## Sanctioned data for year 2011 used ### Sanctioned data for year 2016 used ^ Sanctioned data for year 2015 used

\$ Total 570 Staff Nurses sanctioned in the State ^^Sanctioned data for year 2013-14 used

1

One per Primary Health Centre and seven per Community Health Centre

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

\*: Surplus.

NA: Not Available