

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

**LOK SABHA
UNSTARRED QUESTION NO. 2004
TO BE ANSWERED ON 21ST DECEMBER, 2018**

SHORTAGE OF DOCTORS IN HEALTH CENTRES

2004. SHRI UDAY PRATAP SINGH:

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

- (a) whether the Government contemplates/is contemplating to take any remedial steps to meet the huge shortage of doctors in Government health centres in the country particularly to improve the doctor-patient ratio in rural areas;
- (b) if so, the details thereof;
- (c) whether the Government has conducted any survey/assessment of rural health centres during the last two years and the current year; and
- (d) if so, the details thereof and the reaction of the Government thereto?

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

(a) & (b): Public health and hospitals being a State subject, the primary responsibility to ensure availability of doctors in public health facilities lies with the State/UT Governments. However, under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for engagement of doctors on contractual basis, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs) within their overall resource envelope.

Shortage of doctors varies from State to State depending upon their policies and context. However, the Government has taken various remedial steps to meet the huge shortage of doctors in Government health centres in the country particularly to improve the doctor-patient ratio in rural areas. These steps include:

- I. The ratio of teachers to students has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in subjects of Anaesthesiology, Forensic Medicine, Radiotherapy, Medical Oncology, Surgical Oncology and Psychiatry in all medical colleges across the country. Further, teacher: student ratio in public funded Government Medical Colleges for Professor has been increased from 1:2 to 1:3 in all clinical subjects and for Associate Prof. from 1:1 to 1:2 if the Associate Prof. is a unit head. This would result in increase in number of specialists in the country.

- II. Diplomate of National Board (DNB) qualification has been recognized for appointment as faculty to take care of shortage of faculty.
- III. Enhancement of maximum intake capacity at MBBS level from 150 to 250.
- IV. Enhancement of age limit for appointment/ extension/ re-employment against posts of teachers/dean/principal/ director in medical colleges from 65-70 years.
- V. Relaxation in the norms of setting up of Medical College in terms of requirement for land, faculty, staff, bed/bed strength and other infrastructure.
- VI. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats.
- VII. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country.
- VIII. Strengthening of districts hospitals to run DNB/CPS courses.

Further in order to encourage doctors to work in remote and difficult areas, the Medical Council of India, with the previous approval of Central Government, has amended the Post Graduate Medical Education Regulations, 2000 to provide:

- À 50% of the seats in Post Graduate Diploma Courses shall be reserved for Medical Officers in the Government service, who have served for at least three years in remote and difficult areas. After acquiring the PG Diploma, the Medical Officers shall serve for two more years in remote and/or difficult areas; and
- À Incentive at the rate of 10% the marks obtained for each year in service in remote or difficult areas upto the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.

(c) & (d) : No. However, working of National Health Mission (NHM) is reviewed/assessed inter-alia through external surveys such as, National Family Health Survey (NFHS) and Sample Registration System (SRS). Further, Common Review Missions (CRMs) also undertake a review of NHM every year. The report of 11th CRM is available in public domain as under:

http://nhm.gov.in/New_Updates_2018/In_Focus/11th_CRM_Report_Web.pdf