

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

**LOK SABHA  
UNSTARRED QUESTION NO. 2803  
TO BE ANSWERED ON THE 17<sup>TH</sup> MARCH, 2023**

**HUMAN RESOURCE AND INFRASTRUCTURE DEVELOPMENT IN  
HEALTHCARE**

**2803: SHRI K. NAVASKANI**

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

(a) whether the Government agrees with the view that capacities have to be built both in terms of human resource and infrastructure not just to respond to the pandemic but also for handling cutting edge newer technologies which make us future ready for tackling many other diseases and health care challenges.;

(b) if so, the details of the initiatives that are proposed to be taken by the Government in this regard; and

(c) if not, the reasons therefor?

**ANSWER**

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

(a) to (c) : Under National Health Mission, Ministry of Health & Family Welfare provides financial and technical support to States/UTs to strengthen their healthcare systems which includes health infrastructure and recruitment, training and capacity building of HRH based on the requirements posed by them in their Programme Implementation Plans (PIPs) within their overall resource envelope.

Support for incentives and honorarium for health systems strengthening and enhancement of capacity of Human Recourses for Health are also provided under NHM, which are as under:

- Hard area allowance to specialist doctors for serving in rural and remote 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
- 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.

With the objective of strengthening the public health infrastructure by leveraging existing reforms undertaken over the last fifteen years, PM-Ayushman Bharat Health Infrastructure Mission (PM-ABHIM) was launched on 25th October, 2021 with an outlay of Rs. 64,180 Crores for the period from FY 2021-22 to 2025-26. The scheme envisages a new generation of reforms to integrate and strengthen health service delivery and public health action including health research so that the communities are Atmanirbhar in managing such pandemics or health crisis.

PM-AB-HIM is a Centrally Sponsored Scheme with Central Sector Components. The measures under the scheme are aimed at strengthening health systems and institutions in order to provide a continuum of care at all levels, namely primary, secondary, and tertiary, as well as preparing health systems to respond effectively to current and future pandemics and disasters.

The components of the PM-ABHIM scheme are:

#### **Centrally Sponsored Components:**

1. Support for 17,788 rural Health and Wellness Centres in 10 High Focus States.
2. Establishing 11,024 urban Health and Wellness Centres in all the States.
3. 3382 Block Public Health Units in 11 High Focus states.
4. Setting up of 730 Integrated Public Health Labs in all districts.
5. Establishing 602 Critical Care Hospital Blocks in all districts with population more than 5 lakhs.

#### **Central Sector Components**

1. 12 Central Institutions as training and mentoring sites with 150 bedded Critical Care Hospital Blocks;
2. Strengthening of the National Centre for Disease Control (NCDC), 5 New Regional NCDCs and 20 metropolitan health surveillance units;
3. Expansion of the Integrated Health Information Portal to all States/UTs to connect all public health labs;
4. Operationalisation of 17 new Public Health Units and strengthening of 33 existing Public Health Units at Points of Entry, that is at 32 Airports, 11 Seaports and 7 land crossings;

5. Setting up of 15 Health Emergency Operation Centres and 2 container based mobile hospitals; and Setting up of a national institution for One Health, 4 New National Institutes for Virology, a Regional Research Platform for WHO South East Asia Region and 9 Bio-Safety Level III laboratories.

In addition to the above, technology is also leveraged through various interventions such as:

- Integrated Health Information Platform (IHIP) - which is an electronic information system for managing disease outbreaks and related resources.
- Health Management Information System (HMIS) - which is a web-based Monitoring Information System of MOHFW to monitor the National Health Mission, and other various other National Health Programmes of the Ministry.

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