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

LOK SABHA STARRED QUESTION NO. 90 TO BE ANSWERED ON THE 7TH FEBRUARY, 2020 SHORTAGE OF MBBS DOCTORS

†*90. SHRI VIJAY BAGHEL:

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

- (a) whether there is a shortage of MBBS doctors in the country;
- (b) if so, the details thereof, State/UT-wise including in Chhattisgarh;
- (c) whether any steps have been taken or being taken to increase the number of seats in various medical institutes or colleges throughout the country; and
- (d) if so, the details thereof during the last three years and the current year?

ANSWER THE MINISTER OF HEALTH AND FAMILY WELFARE (DR. HARSH VARDHAN)

(a) to (d): A statement is laid on the Table of the House

STATEMENT REFERRED TO IN REPLY TO LOK SABHA STARRED QUESTION NO. 90 FOR 7TH FEBRUARY, 2020

- (a) & (b) Medical Council of India (MCI) informed that there are a total 12,01,354 allopathic doctors registered with the State Medical Councils/Medical Council of India as on 30th September, 2019. Assuming 80% availability, it is estimated that around 9.61 lakh doctors may be actually available for active service. It gives a doctor-population ratio of 1:1404 as per current population estimate of 1.35 billion against the WHO prescribed ratio of 1:1000. The details of number of doctors registered with the concerned State Medical Council State/UT-wise including Chhattisgarh are at Annexure.
- (c) & (d) The Central Government has taken several steps to increase the number of medical seats in the country. 29185 MBBS seats increased during the last five years. The measures adopted include:
 - i. Establishment of New Medical Colleges attached with district/referral hospitals in underserved districts of the country.
 - ii. Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS and PG seats.
 - iii. Relaxation in the norms for setting up of Medical College in terms of requirement for faculty, staff, bed strength and other infrastructure.
 - iv. Minimum requirement of land for establishment of medical college in metropolitan cities as notified under Article 243P(c) of the Constitution of India has been dispensed with.
 - v. Enhancement of maximum intake capacity at MBBS level from 150 to 250.
 - vi. DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.
 - vii. Enhancement of age limit for appointment/ extension/ re-employment against posts of teachers/dean/principal/ director in medical colleges upto 70 years.
 - viii. The ratio of teachers to students for Professor has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in all clinical subjects in Government funded medical colleges and in Private medical colleges with 15 years standing. Further, for Associate Professor, the said ratio has been revised from 1:1 to 1:2 and 1:3 if he/she is a unit head in all clinical subjects in Government medical colleges and in Private medical colleges

with 15 years standing. This would result in increase in number of PG seats in the country.

- ix. By amending the regulations, it has been made mandatory for all medical colleges to start PG courses within 3 years from the date of their MBBS recognition /continuation of recognition.
- x. Colleges are allowed to apply for PG courses in clinical subjects at the time of 4th renewal. It will serve to advance the process for starting PG courses by more than 1 year.
- xi. Provision has been made in the regulations to offer less number of seats to the applicant medical college, in case, it falls short of minimum prescribed requirements of applied intake to avoid wastage of human resources.
- xii. A Consortium (a group of 2 or upto 4 private organizations) has been allowed to establish a medical college.

Shortage of doctors varies in different States. The shortage is more due to uneven rural-urban distribution. 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 and no data with regard to shortage of doctors in the States is maintained centrally. 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). States are encouraged to adopt flexible norms for engaging specialist doctors for public health facilities. Financial support is also provided to States for providing performance-based incentives, hard area allowance, providing accommodation and transport facilities in rural and remote areas, sponsoring training programmes, etc for engaged human resources to address the issue of shortage in the public health facilities.

Annexure

Number of Doctors Registered with State Medical Councils / Medical Council of India as on $30^{\rm th}$ September, 2019

S.	Name of the State	Number of Registered Doctors
1.	Andhra Pradesh	100587
2.	Arunachal Pradesh	1021
3.	Assam	23902
4.	Bihar	44642
5.	Chattisgarh	9355
6.	Delhi	24999
7.	Goa	3890
8.	Gujarat	69746
9.	Haryana	12345
10.	Himachal	3054
11.	Jammu & Kashmir	15422
12.	Jharkhand	6468
13.	Karnataka	124663
14.	Madhya Pradesh	39044
15.	Maharashtra	179783
16.	Kerala	60565
17.	Mizoram	74
18.	Nagaland	134
19.	Orissa	22521
20.	Punjab	48351
21.	Rajasthan	43992
22.	Sikkim	1414
23.	Tamil Nadu	138821
24.	Uttar Pradesh	81348
25.	Uttarakhand	8617
26.	West Bengal	74054
27.	Tripura	1945
28.	Telangana	7931
29.	Medical Council of India*	52666
	Total	12,01,354

Note - The other State / UTs do not have their own Medical Registration Council. Hence, their workers get registration with the Councils of other neighboring States.

^{* 52666} doctors were registered only with MCI. They are presumably working in States / UTs which do not have a medical register or anywhere in the country.