

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

**LOK SABHA
UNSTARRED QUESTION NO. 1103
TO BE ANSWERED ON 7th FEBRUARY, 2020**

AVAILABILITY OF DOCTORS IN RURAL AREAS

1103. SHRI CHANDRA PRAKASH CHOUDHARY:

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

- (a) whether the Ministry has devised any plan for providing meaningful incentives to encourage the availability of doctors in rural areas of the country;
- (b) if so, details thereof;
- (c) whether the Ministry has any implementing and monitoring agency to make sure doctors are available in all health centres in rural areas of the country; and
- (d) if so, details thereof?

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

(a) to (b): Public health and Hospitals, being a State subject, the primary responsibility to ensure availability of medical doctors in rural areas, lies with the State Governments. However, in order to encourage the availability of medical doctors in rural areas of the country, several steps have been undertaken under National Health Mission (NHM), which inter-alia includes:

- Á States are encouraged to adopt flexible norms to enable engagement of specialists in public health facilities. These include various mechanisms of 'contracting in' and 'contracting out' of specialist services and methods of engaging specialists outside the government system for service delivery at public facilities.
- Á States have also been allowed to offer negotiable salaries to attract Specialists including flexibility in strategies such as 'You quote, we pay'. Financial support is also provided to States for providing performance-based incentives, providing accommodation and transport facilities in rural and remote areas, sponsoring training programmes etc. to be able to engage doctors and specialists in the public health facilities in rural areas.

- Á Support is also provided to States/UTs in term of hard area allowance for doctors and specialists who serve in difficult and remote areas.
- Á States are also advised to put in place transparent policies of posting and transfer, and ensure rational deployment of doctors. As the posts required for health facilities are filled up by respective State/UT Governments, they are impressed upon from time to time to fill up the vacant posts.

(c) &(d): Public health being State subject, the primary responsibility of filling the vacant posts and monitoring lies with the States. However, under NHM, financial and technical support is provided to the States for employing doctors under NHM. NHM monitors the vacancies through Rural Health Statistics (RHS), Health Management Information System (HMIS), Management Information System (MIS) and Common Review Mission (CRM). It also review and impresses upon the States to fill the vacancies and have transparent HR policies in place to enable fast recruitment, retention, transparent transfer and posting and performance review through forums like Central Council of Health and Family Welfare (CCH&FW), Quality Management System(QMS), Quarterly Review Meetings, National Programme Coordination Committee (*NPCC*) and *HR Bootcamps*.