

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

**LOK SABHA  
UNSTARRED QUESTION NO. 1028  
TO BE ANSWERED ON THE 03<sup>rd</sup> DECEMBER, 2021**

**PRIMARY HEALTH CENTRES AND COMMUNITY HEALTH CENTRES**

**1028. SHRI KARTI P. CHIDAMBARAM:  
SHRI SADASHIV KISAN LOKHANDE:  
DR. SANJAY JAISWAL:  
SHRI VIJAY BAGHEL:**

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

- a) the number of present and proposed Community Health Centre(CHC) and Primary Health Centre (PHC)in the country, State/UT-wise;
- b) whether the Government has reviewed the output/performance of PHCs & CHCs and if so, the details thereof and the measures taken to improve their output;
- c) whether the Government has taken note of acute shortage of doctors including female doctors in such centres in the country and if so, the details thereof along with necessary steps taken by the Government in this regard, State/UT-wise;
- d) whether the Government has formulated or proposes to formulate any scheme to increase the percentage of female doctors in rural areas of the country and if so, the details thereof;
- e) whether the Government has taken note of the fact that the doctors and paramedical staff on duty are not present/available in such centres and if so the details thereof along with the necessary steps taken in this regard; and
- f) the details of current system of recording attendance of staff at PHCs and CHCs in each State/UT and whether the Government proposes to make biometric attendance mandatory at all such centres to check unauthorized absence of doctors and staff at such centres?

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

(a): Rural Health Statistics (RHS) is an annual publication, based on Health care administrative data reported by States/UTs. As per RHS 2019-20, the number of Primary Health Centres (PHCs) in place in the country is 30,813 and number of Community Health Centres (CHCs) in the country, is 5649. The State-wise number of PHCs and CHCs functioning in rural & urban areas is at **Annexure-I**.

(b): Key Deliverables are identified for each of the programme, intervention and important activities at the time of finalization of the Program Implementation Plans (PIPs) under National Health Mission. Progress on the key deliverables is captured through the Health Management Information System (HMIS) and through quarterly financial and physical progress reports. Regular review meetings are held with states for monitoring of progress on the key deliverables for the year, besides regular monitoring visits from National Program Management Unit and Ministry officials.

Several other mechanisms such as, the Annual Common Review Missions (CRM) which comprise of teams of government officials from different Ministries, NITI Aayog, public health experts and representatives of civil society and development partners; data from the external surveys such as Sample Registration Survey (SRS) and National Family Health Survey (NFHS) also provide information for course correction in implementation strategies. In addition, mechanisms of third-party monitoring of infrastructure related works is also envisaged, including geo-tagging of assets created under NHM.

At the District Level, the DISHA Committees, under the Chairmanship of Member of Parliament, monitor the progress of implementation of NHM. RogiKalyanSamitis (RKS) are set up at Public Health Facilities from Primary Health Centre (PHC) upwards, as an accountability measure to ensure high quality patient care. Village Health, Sanitation and Nutrition Committee (VHSNC) constituted with representation of the Panchayati Raj Institutions and MahilaArogyaSamitis for rural and urban areas, to facilitate an active role for communities in action for addressing social and environmental determinants of health.

(c) to (f) : Public health and hospitals is a State subject, the primary responsibility to ensure availability of human healthcare professionals- doctors including female doctors and paramedical staff and to check unauthorized absence of doctors and staff in the public health facilities lies with the respective State/UT Governments. Under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their health care systems including augmenting health human resource on contractual basis including support for in-sourcing or engagement of doctors, specialist doctors and other health professionals for provision of equitable, affordable healthcare based on requirements posed by the States in their Programme Implementation Plans (PIPs) and within their overall resource envelope.

Shortage of health professionals including female doctors and other paramedical staff in public health facilities varies from State to State depending upon their policies and context. States/UTs are 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. States formulate scheme for reservation / quota in medical admission for women candidates as per their admission policy and gives reservations in their recruitment policy to maintain the parity.

However, Government has taken various steps to optimize the number of doctors and specialists in the country - such as increasing the number of seats in UG/PG level at various medical educational institutes/medical colleges across the country, an increase of more than 70 % in last 7 years; encouraging doctors to work in remote and difficult areas; encouraging States to adopt flexible norms for engaging specialists for public health facilities by various mechanisms like 'contracting in' and 'contracting out' of specialist services under National Health Mission.

NHM provides for following types of incentives and honorarium to staff for ensuring service delivery in rural and remote areas in the country

- Honorarium to Gynecologists/ Emergency Obstetric Care (EmoC) trained, Pediatricians&Anesthetist/ Life Saving Anaesthesia Skills (LSAS) trained doctors for conducting C Sections.
- Incentives for staff for serving in rural and remote areas: Hard area allowances and special packages are provided to attract health HR, especially medical officers and specialists, to remote and difficult areas.
- Other incentives for service delivery: Incentives like special incentives for doctors, incentive for ANM for ensuring timely ANC checkup and recording, incentives for conducting Adolescent Reproductive and Sexual Health (ARSH) activities etc
- States have also been allowed to offer negotiable salaries to attract Specialists including flexibility in strategies such as "You quote, we pay".

In addition, non-Monetary incentives such as preferential admission in post graduate courses for staff serving in difficult areas and improving accommodation arrangement in rural areas have also been introduced under NHM.

Multi-skilling of doctors is supported under NHM to overcome the shortage of specialists. Skill upgradation of existing HR is another major strategy under NHM for achieving improvement in health outcomes. Government of India has requested the States to formulate HR policies so that availability of health HR is improved. Formulation of State HRH policy is an agreed support under NHM.

States/UTs have been urged to fill-up the vacancies in sanctioned positions. As per Rural Health Statistics (RHS) – 2019-20, the State/UT wise status of availability of doctors and shortfall thereof in public health facilities both rural and urban areas is given at **Annexure II**.

**Annexure-I****STATE WISE NUMBER OF PHCs, CHCs FUNCTIONING IN RURAL & URBAN AREAS**

<b>STATE WISE NUMBER OF PHCs, CHCs FUNCTIONING IN RURAL &amp; URBAN AREAS</b>							
<b>S. No.</b>	<b>State/UT</b>	<b>PHCs</b>			<b>CHCs</b>		
		Rural	Urban	Total	Rural	Urban	Total
1	Andhra Pradesh	1142	243	1385	141	57	198
2	Arunachal Pradesh	119	5	124	60	0	60
3	Assam	946	56	1002	190	2	192
4	Bihar	1702	325	2027	57	7	64
5	Chhattisgarh	792	45	837	170	4	174
6	Goa	55	4	59	6	0	6
7	Gujarat	1477	318	1795	348	14	362
8	Haryana	385	100	485	118	13	131
9	Himachal Pradesh	564	24	588	85	7	92
10	Jharkhand	291	60	351	171	6	177
11	Karnataka	2176	358	2534	189	19	208
12	Kerala	784	148	932	211	16	227
13	Madhya Pradesh	1199	277	1476	309	21	330
14	Maharashtra	1829	846	2675	278	140	418
15	Manipur	85	8	93	17	0	17
16	Meghalaya	119	24	143	28	0	28
17	Mizoram	57	8	65	9	0	9
18	Nagaland	130	7	137	21	0	21
19	Odisha	1288	89	1377	377	7	384
20	Punjab	427	100	527	143	12	155
21	Rajasthan	2094	383	2477	548	66	614
22	Sikkim	24	1	25	2	0	2
23	Tamil Nadu	1420	464	1884	385	15	400
24	Telangana	636	249	885	85	10	95
25	Tripura	107	5	112	22	0	22
26	Uttarakhand	257	38	295	56	12	68
27	Uttar Pradesh	2880	593	3473	711	12	723
28	West Bengal	913	456	1369	348	0	348
29	Andaman & Nicobar Islands	22	5	27	4	0	4
30	Chandigarh	0	48	48	0	2	2
31	Dadra & Nagar Haveli and Daman & Diu	10	3	13	4	0	4
32	Delhi	5	541	546	0	23	23
33	Jammu & Kashmir	923	49	972	77	0	77
34	Ladakh	32	0	32	7	0	7
35	Lakshadweep	4	0	4	3	0	3
36	Puducherry	24	15	39	3	1	4
	<b>All India</b>	<b>24918</b>	<b>5895</b>	<b>30813</b>	<b>5183</b>	<b>466</b>	<b>5649</b>

Source: Rural Health Statistics, 2019-20

## Annexure-II

DOCTORS <sup>+</sup> AT PRIMARY HEALTH CENTRES in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required <sup>1</sup>	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1142	1861	1798	63	*
2	Arunachal Pradesh	119	NA	194	NA	*
3	Assam	946	906	1424	*	*
4	Bihar	1702	4129	1745	2384	*
5	Chhattisgarh	792	811	388	423	404
6	Goa	55	72	75	*	*
7	Gujarat	1477	1869	1490	379	*
8	Haryana	385	766	491	275	*
9	Himachal Pradesh	564	722	471	251	93
10	Jharkhand	291	330	222	108	69
11	Karnataka	2176	2323	2071	252	105
12	Kerala	784	1237	1028	209	*
13	Madhya Pradesh	1199	1525	1065	460	134
14	Maharashtra	1829	3587	2848	739	*
15	Manipur	85	170	311	*	*
16	Meghalaya	119	91	190	*	*
17	Mizoram	57	NA	58	NA	*
18	Nagaland	130	113	120	*	10
19	Odisha	1288	1288	827	461	461
20	Punjab	427	585	391	194	36
21	Rajasthan	2094	2170	1845	325	249
22	Sikkim	24	48	34	14	*
23	Tamil Nadu	1420	2976	2708	268	*
24	Telangana	636	1254	1213	41	*
25	Tripura	107	N App	222	N App	*
26	Uttarakhand	257	476	346	130	*
27	Uttar Pradesh	2880	3578	2759	819	121
28	West Bengal	913	1390	1098	292	*
29	Andaman & Nicobar Islands	22	30	48	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	9	13	*	*
32	Delhi	5	19	18	1	*
33	Jammu & Kashmir	923	1477	940	537	*
34	Ladakh	32	23	10	13	22
35	Lakshadweep	4	10	10	0	*
36	Puducherry	24	45	45	0	*
	All India <sup>2</sup> / Total	24918	35890	28516	8638	1704

Notes: NA: Not Available. N App - Not Applicable

+: Allopathic Doctors

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> One per Primary Health Centre as per IPHS norms

<sup>2</sup> For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

General Duty Medical Officers (GDMOs) - Allopathic at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required <sup>1</sup>	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	282	192	174	18	108
2	Arunachal Pradesh	120	NA	135	NA	*
3	Assam	380	230	626	*	*
4	Bihar	114	935	152	783	*
5	Chhattisgarh	340	478	565	*	*
6	Goa	12	28	32	*	*
7	Gujarat	696	1103	1071	32	*
8	Haryana	236	698	366	332	*
9	Himachal Pradesh	170	344	170	174	0
10	Jharkhand	342	752	648	104	*
11	Karnataka	378	190	181	9	197
12	Kerala	422	533	516	17	*
13	Madhya Pradesh	618	713	609	104	9
14	Maharashtra	556	660	525	135	31
15	Manipur	34	102	110	*	*
16	Meghalaya	56	29	89	*	*
17	Mizoram	18	NA	23	NA	*
18	Nagaland	42	39	39	0	3
19	Odisha	754	405	1063	*	*
20	Punjab	286	381	387	*	*
21	Rajasthan	1096	1696	1343	353	*
22	Sikkim	4	4	4	0	0
23	Tamil Nadu	770	2053	1874	179	*
24	Telangana	170	353	231	122	*
25	Tripura	44	N App	80	N App	*
26	Uttarakhand	112	115	179	*	*
27	Uttar Pradesh	1422	1793	1793	0	*
28	West Bengal	696	2361	1716	645	*
29	Andaman & Nicobar Islands	8	16	16	0	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	8	5	13	*	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	154	729	571	158	*
34	Ladakh	14	10	7	3	7
35	Lakshadweep	6	14	14	0	*
36	Puducherry	6	20	20	0	*
	All India <sup>2</sup> /Total	10366	16981	15342	3168	355
Notes:	<i>N App - Not Applicable</i> <i>*: Surplus.</i> <sup>1</sup> Two per Community Health Centre as per IPHS norms <sup>2</sup> For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded					

DOCTORS <sup>+</sup> AT PRIMARY HEALTH CENTRES in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required <sup>1</sup>	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	243	243	243	0	0
2	Arunachal Pradesh	5	NA	20	NA	*
3	Assam	56	60	74	*	*
4	Bihar	325	437	166	271	159
5	Chhattisgarh	45	82	65	17	*
6	Goa	4	6	6	0	*
7	Gujarat	318	317	116	201	202
8	Haryana	100	101	93	8	7
9	Himachal Pradesh	24	20	22	*	2
10	Jharkhand	60	46	23	23	37
11	Karnataka	358	350	356	*	2
12	Kerala	148	207	184	23	*
13	Madhya Pradesh	277	173	141	32	136
14	Maharashtra	846	944	914	30	*
15	Manipur	8	12	16	*	*
16	Meghalaya	24	10	24	*	0
17	Mizoram	8	NA	8	NA	0
18	Nagaland	7	8	8	0	*
19	Odisha	89	89	87	2	2
20	Punjab	100	186	154	32	*
21	Rajasthan	383	375	396	*	*
22	Sikkim	1	1	1	0	0
23	Tamil Nadu	464	628	592	36	*
24	Telangana	249	498	470	28	*
25	Tripura	5	N App	5	N App	0
26	Uttarakhand	38	38	31	7	7
27	Uttar Pradesh	593	623	494	129	99
28	West Bengal	456	924	543	381	*
29	Andaman & Nicobar Islands	5	2	7	*	*
30	Chandigarh	48	34	70	*	*
31	Dadra & Nagar Haveli and Daman & Diu	3	2	3	*	0
32	Delhi	541	843	955	*	*
33	Jammu & Kashmir	49	99	87	12	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	25	25	0	*
	All India <sup>2</sup> / Total	5895	7383	6399	1232	653

**Notes:**

NA: Not Available.

N App - Not Applicable

+ : Allopathic Doctors

\*: Surplus.

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> One per Primary Health Centre as per IPHS norms

<sup>2</sup> For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

General Duty Medical Officers (GDMOs) - Allopathic at CHCs in Urban Areas						
S. No.	State/UT	Required <sup>1</sup>	(As on 31st March, 2020)			
			Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	114	81	84	*	30
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	4	0	1	*	3
4	Bihar	14	27	24	3	*
5	Chhattisgarh	8	5	4	1	4
6	Goa	0	N App	N App	N App	N App
7	Gujarat	28	0	0	0	28
8	Haryana	26	29	25	4	1
9	Himachal Pradesh	14	18	12	6	2
10	Jharkhand	12	6	1	5	11
11	Karnataka	38	21	15	6	23
12	Kerala	32	50	50	0	*
13	Madhya Pradesh	42	126	48	78	*
14	Maharashtra	280	474	416	58	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	14	14	19	*	*
20	Punjab	24	33	32	1	*
21	Rajasthan	132	187	138	49	*
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	30	15	21	*	9
24	Telangana	20	15	15	0	5
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	24	23	25	*	*
27	Uttar Pradesh	24	35	14	21	10
28	West Bengal	0	0	0	0	0
29	A & N Islands	0	N App	N App	N App	N App
30	Chandigarh	4	NA	22	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	46	52	55	*	*
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	2	6	7	*	*
	<b>All India<sup>2</sup>/Total</b>	<b>932</b>	<b>1217</b>	<b>1028</b>	<b>232</b>	<b>126</b>

Notes: NA: Not Available.

N App: Not Applicable

\*: Surplus.

<sup>1</sup> Two per Community Health Centre as per IPHS norms

<sup>2</sup> For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded