HEALTH AND WELLNESS CENTRES

554. SHRI CHANDRA SEKHAR BELLANA:
SHRI SRIDHAR KOTAGIRI:
SHRI KURUVA GORANTLA MADHAV:
SHRI P.V. MIDHUN REDDY:
SHRIMATI CHINTA ANURADHA:
DR. SANJEEV KUMAR SINGARI:

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

a) the status of Health and Wellness Centres (HWCs) in Andhra Pradesh, including the number of approved and actually functional HWCs in the State;
b) whether there exists a big gap between the number of HWCs made functional and the HWCs initially approved in 2019-20;
c) whether the Government has assessed the reasons for delay in operationalisation of HWCs and if so, the details thereof; and
d) the steps undertaken by the Government to make the approved centres functional?

ANSWER

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

(a): As per the budget announcement 2017-18, 1.5 lakh Sub-Health Centres (SHCs) and Primary Health Centres (PHCs) are to be transformed into Health and Wellness Centres (HWCs) by December, 2022. Out of this, 7827 facilities are approved to be upgraded as Ayushman Bharat - Health and Wellness Centres (AB-HWC) in the state of Andhra Pradesh. As per the Ayushman Bharat - Health and Wellness Centre Portal, 6876 facilities are functional in Andhra Pradesh as on 31st January 2022.

(b) and (c): A total of 38,595 AB-HWCs have been updated in AB-HWC Portal by the States/UTs as made functional till 31.3.2020 across the country. This achievement by the States/UTs against the target of 40,000 fell short of setting up of around 1400 such Centres.

However, against the cumulative target of operationalization of 70,000 AB-HWCs in the year 2020-21, States/UTs were able to operationalize 74,947 AB-HWCs.
“Public Health and Hospitals” is a State subject, hence, the primary responsibility of strengthening public healthcare system lies with the respective State Governments. However, the Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system, based on the proposals received from them in their Annual Programme Implementation Plans (PIPs), within their resource envelope. The States/UTs are being supported for various components under AB-HWCs namely engagement of Community Health Officer (CHO) and capacity building of primary health care team, performance based incentives for the team at AB-HWC, infrastructure strengthening, availability of medicines and diagnostics, provision of expanded range of services etc.