

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

**LOK SABHA
UNSTARRED QUESTION NO. 4269
TO BE ANSWERED ON 20.12.2024**

SHORTAGE OF MEDICAL PERSONNEL IN RURAL AREAS

4269. SHRI ABHISHEK BANERJEE:

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

- (a) whether any steps are being taken by the Government to address the alarming shortage of medical personnel and infrastructure in rural areas of the country; and
(b) if so, the details thereof?

**ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND
FAMILY WELFARE
(SHRI PRATAPRAO JADHAV)**

(a) & (b) : The details of Medical personnel and infrastructure in country are available in public domain at the following URL:

https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastructure%20%26%20Human%20Resources%29%202022-23_RE%20%281%29.pdf

The Ministry of Health and Family Welfare provides technical and financial support to the States/UTs to strengthen the public healthcare system including setting up of health facilities and recruitment of medical personnel based on the proposals received in the form of Programme Implementation Plans (PIPs) under National Health Mission. Government of India provides approval for the proposal in the form of Record of Proceedings (RoPs) as per norms & available resources. The details are available in public domain at:

<https://nhm.gov.in/index1.php?lang=1&level=1&sublinkid=1377&lid=744>

In addition to the National Health Mission, Government of India has allocated the following funds for developing public healthcare infrastructure and services:

- **Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM)** envisages increased investments in public health and other health reforms to provide better access to health in rural areas by i) Strengthening of Health and Wellness Centres in villages and cities for early detection of diseases; ii) Addition of new critical care-related beds at district level hospitals; iii) Support for Block Public Health Units (BPHU) in 11 high focus States; and iv) Integrated district public health laboratories in all districts.
- **The Fifteenth Finance Commission (FC-XV)** has recommended grants through local governments for specific components of the health sector and spread over the five-year period from FY 2021-22 to FY 2025-26 to facilitate strengthening of health system at the grass-root level.
- **The Pradhan Mantri Swasthya Suraksha Yojana (PMSSY)** aims at correcting regional imbalances in the availability of affordable tertiary healthcare services and to augment facilities for quality medical education in the country. The Scheme has two components, namely, (i) setting up of all India Institute of Medical Sciences (AIIMS); and (ii) Upgradation of existing Government Medical Collages/ Institution (GMCIs). So far setting up of 22 new AIIMS and 75 projects of upgradation of GMCIs have been approved under the Scheme in various phases. The setting up of AIIMS contains Medical College, Nursing College, Hospital, Trauma Centre, Emergency, Blood Bank, ICU, Diagnostic & Pathology, Research etc. Upgradation of GMCIs under PMSSY broadly involves construction of Super Specialty Block (SSB) and/ or Trauma Centre/ or other facilities and/ or procurement of medical equipment.
- Under Centrally Sponsored Scheme (CSS), '**Establishment of new medical colleges attached with existing district/referral hospitals**', with preference to underserved areas and aspirational districts, where there is no existing Government or private medical college.

Under NHM, following types of incentives and honorarium are provided for encouraging doctors to practice in rural and remote areas of the country:

- Hard area allowance to specialist doctors for serving in rural and remote areas and for their residential quarters so that they find it attractive to serve in public health facilities in such 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 Auxiliary Nurse and Midwife (ANM) for ensuring timely Antenatal Checkup (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 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 NRHM for achieving improvement in health outcomes.
