

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

**LOK SABHA  
UNSTARRED QUESTION NO. 734  
TO BE ANSWERED ON 29<sup>th</sup> NOVEMBER, 2024**

**VACANCIES IN MEDICAL COLLEGES**

**734: SHRI RADHESHYAM RATHIYA:  
SHRI DEVESH SHAKYA:**

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

- (a) whether the Government has taken any steps/proposes to take steps to fill up the large number of vacant post of doctors in district hospitals and medical colleges across the country;
- (b) if so, the details thereof, State/UT-wise, particularly in Saifai, Etah, Kasganj, Etawah, Auraiya, Kannauj and other districts of Uttar Pradesh and Chhattisgarh;
- (c) the time by which the vacant posts are likely to be filled;
- (d) the steps taken or proposed to be taken by the Government to address the issue of lack of equipments, infrastructure and basic facilities in medical colleges across the country including Chhattisgarh and Uttar Pradesh;
- (e) whether the medicines being given to patients are available in sufficient quantities in these districts and if so, the details thereof;
- (f) whether the schemes being implemented for prevention of communicable diseases are adequate, if so, the details thereof; and
- (g) whether the benefits of these schemes are reaching to people, if so, the details thereof and if not, the reasons therefor?

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

(a): All the administrative and personnel matters related to health human resource lies with the respective State/UT Governments. Under National Health Mission, Ministry of Health & Family Welfare provides financial and technical support to States/UTs to strengthen their healthcare systems based on the requirements posed by them in their Programme Implementation Plans (PIPs) within their overall resource envelope.

Under NHM, following types of incentives and honorarium are provided for encouraging specialist 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 ANM for ensuring timely 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.

The Medical Colleges mainly come under administrative control of State Governments and vacant positions in these colleges are filled up by state governments.

(b) & (c): The State/UT-wise details of Doctors in district hospitals including States of Uttar Pradesh and Chhattisgarh are available at website of Ministry of Health and Family Welfare at the Uniform Resources Locator (URL) as under:

[https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastucture%20%26%20Human%20Resources%29%202022-23\\_RE%20%281%29.pdf](https://mohfw.gov.in/sites/default/files/Health%20Dynamics%20of%20India%20%28Infrastucture%20%26%20Human%20Resources%29%202022-23_RE%20%281%29.pdf)

(d) : The Ministry of Health & Family Welfare administers Centrally Sponsored Schemes (CSS) for Up-gradation of existing State Government/Central Government medical colleges to increase MBBS seats & PG seats in the country. Under these Schemes, support is provided for civil works, equipment and furniture for increasing UG/PG seats in Government Medical Colleges with a cost ceiling of Rs.1.20 Crore per seat, to be shared between the Centre and State Governments in the ratio of 90:10 for North Eastern and Special Category States and 60:40 for others.

Under the CSS for ‘Up gradation of existing State Government/Central Government medical colleges to increase MBBS seats in the country’, 83 Government Medical Colleges (including 7 in UP & and 3 in Chhattisgarh) in 17 States have been approved to increase 4977 MBBS seats, including 432 MBBS seats in UP and 150 MBBS seats in Chhattisgarh.

Also, under the CSS for *'Strengthening and upgradation of State Government medical colleges for starting new PG disciplines and increasing PG seats'*, 8058 seats, including 556 PG seats in Uttar Pradesh and 79 PG seats in Chhattisgarh, have been approved in 2 Phases."

(e): To ensure availability of essential drugs Government has rolled out the Free Drugs Service Initiative (FDSI) under National Health Mission (NHM). Under this, financial support is provided to States / UTs for provision of free essential medicines in public health facilities based on the requirements posted by them in their Programme Implementation Plans (PIPs) within their overall resource envelope.

Support under the scheme is available for Procurement of drugs and strengthening /setting up robust systems of procurement, Quality Assurance, Supply chain management and warehousing, Prescription audit, grievance redressal, dissemination of Standard Treatment Guidelines and Establishment of IT enabled platform DVDMS (Drugs & Vaccine Distribution Management System) for monitoring the real status of procurement and availability of essential medicines.

(f) & (g) : Health is a state subject. Ministry of Health & Family Welfare provides technical and financial supports to States/UTs through various schemes including National Vector Borne Diseases Control Programme (NVBDCP), National TB Elimination Programme (NTEP), National Leprosy Eradication Programme (NLEP) and National Viral Hepatitis Control Programme (NVHCP) under the aegis of National Health Mission (NHM) to prevent and control various communicable diseases.

Some key outcomes of the programmes are as under:

- There is a 79.35% and 85.07% reduction in malaria cases and deaths respectively in the year 2023 as compared to 2014.
- The percentage of Kala Azar endemic blocks, achieving the elimination target of < 1 KA case per 10,000 population is 100% at the end of 2023.
- The National target of sustaining case fatality rate (CFR) to less than 1 percent for Dengue was achieved.
- The incidence of Tuberculosis per 1,00,000 population has reduced from 237 in 2015 to 195 in 2023 and mortality rate declined from 28 in 2015 to 23 in 2023 as per the Global TB report.
- The number of districts with a prevalence of Leprosy less than 1 per 10,000 population has increased from 542 in 2014-15 to 634 districts in 2023-24.

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