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

LOK SABHA UNSTARRED QUESTION NO. 2156 TO BE ANSWERED ON 6TH MAY, 2016

NHM

2156. SHRI GODSE HEMANT TUKARAM: MOHAMMED FAIZAL:

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

(a) the details of projects undertaken under National Health Mission (NHM), State/UT-wise including Maharashtra;

(b) whether the Government is aware of shortage of doctors and paramedical staff in various District Health Centres in the country;

(c) if so, the number of vacant posts in such health centres, State/UT-wise;

(d) the steps to be taken by the Government in this regard; and

(e) whether Government proposes to utilise the service under NHM of the nurses returned from United Kingdom and other countries, if so, the details thereof and the steps taken in this regard?

ANSWER THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA)

(a): National Health Mission (NHM) aims to improve the health status of the population. For this purpose, funds are allocated to States/UTs on the basis of approvals accorded to proposals contained in their State Programme Implementation Plans (PIPs). The approvals issued under NHM, State/UT wise including Maharashtra, are available at URL: <u>http://nhm.gov.in/nrhm-in-state.html</u>.

(b) & (c): As per Rural Health Statistics (RHS) 2014-15, State/UT-wise details of doctors and paramedical staff in District Health Centres, sanctioned and in position, is at Annexure.

(d): Public health being a State subject, the primary responsibility to ensure availability of healthcare facilities including adequate number of doctors and paramedical staff in public health facilities lies with the State Governments. However, under the NHM, financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for engaging of doctors and paramedical staff on contractual basis, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs).

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Support under NHM is also provided for multi-skilling of doctors, for giving hard area allowance to medical professionals 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. Also, States are advised to put in place transparent policies of posting and transfer, and ensure rational deployment of medical professionals. 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.

Further, in order to encourage the doctors to work in remote and difficult areas, the Medical Council of India with the previous approval of Central Government, has amended the Post Graduate Medical Education Regulations, 2000 to provide:

(i) 50% reservation in Post Graduate Diploma Courses for Medical Officers in the Government service, who have served for at least three years in remote and difficult areas; and

(ii) Incentive at the rate of 10% the marks obtained for each year in service in remote or difficult areas as upto the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.

The Government has taken the following steps to further augment the availability of doctors in the country:

I. The ratio of teachers to students has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in subjects of Anaesthesiology, Forensic Medicine, Radiotherapy, Medical Oncology, Surgical Oncology and Psychiatry.

II. DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.

III. Enhancement of maximum intake capacity at MBBS level from 150 to 250.

IV. Enhancement of age limit for appointment/extension/re-employment against posts of teachers/dean/ principal/director in medical colleges from 65-70 years.

V. Relaxation in the norms for setting up of a medical college in terms of requirement for land, faculty, staff, bed/ bed strength and other infrastructure.

VI. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats with fund sharing between the Central and State Government.

VII. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country with fund sharing between the Central Government and States.

VIII. Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS seats with fund sharing between the Central Government and States.

(e): As stated above, public health is a State subject. States/UTs may engage nurses on contractual basis under the NHM as per the extant regulations.

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<u>Annexure</u>

		(As on 31st March, 2015)						
S.No.		DISTRI	CT HOSPI	TAL	SUB DISTRICT/ SUB DIVISIONAL HOSPITAL			
	State/UT	Sanctioned	In Position	Vacant	Sanctioned	In Position	Vacant	
1 Andhra Pradesh		395	241	154	405	316	89	
2	Arunachal Pradesh	NA	333	NA	0	0	0	
3	Assam	NA	683	NA	NA	155	NA	
4	Bihar	NA	1088	NA	NA	92	NA	
5	Chhattisgarh	822	463	359	157	38	119	
6	Goa	73	63	10	NA	NA	NA	
7	Gujarat	NA	NA	NA	NA	NA	NA	
8	Haryana	563	741	-178	225	167	58	
9	Himachal Pradesh	NA	408	NA	NA	299	NA	
10	Jammu & Kashmir	1007	748	259	NA	NA	NA	
10	Jharkhand	292	324	-32	83	80	3	
12	Karnataka	1703	1254	449	1940	1329	611	
13	Kerala	NA	498	NA	487	623	-	
13	Madhya Pradesh	2143	1422	721	646	505	141	
15	Maharashtra	1292	983	309	1362	1144	218	
16	Manipur#	261	199	62	17	6	11	
17	Meghalaya	266	265	1	11	10	1	
18	Mizoram	NA	196	NA	NA	35	NA	
19	Nagaland	NA	181	NA	0	0	0	
20	Odisha	1598	858	740	363	244	119	
21	Punjab	684	565	119	708	481	227	
22	Rajasthan	1716	1110	606	498	376	122	
23	Sikkim	NA	86	NA	0	0	0	
24	Tamil Nadu	1639	1339	300	2630	2298	332	
25	Telangana	297	184	113	309	236	73	
26	Tripura	84	60	24	64	82	-	
27	Uttarakhand	427	327	100	219	187	32	
28	Uttar Pradesh	2551	2108	443	0	0	0	
29	West Bengal	1065	882	183	1935	1307	628	
30	A& N Islands	30	23	7	0	0	0	
31	Chandigarh	167	202	-	0	0	0	
32	D & N Haveli	NA	68	NA	0	0	0	
33	Daman & Diu	39	24	15	0	0	0	
34	Delhi	NA	NA	NA	NA	NA	NA	
35	Lakshadweep	34	19	15	8	8	0	
36	Puducherry	498	491	7	0	0	0	
	All India	19646	18436	1210	12067	10018	2049	

Data for 2013- 14 repeated

PARA MEDICAL STAFF AT DISTRICT HOSPITAL AND SUB DISTRICT/ SUB DIVISIONAL HOSPITAL										
		(As on 31st March, 2015)								
S.No.	State/UT	DISTRICT HOSPITAL								
					SUB DIVISIONAL HOSPITAL					
		Sanctioned	In Position	Vacant	Sanctioned	In Position	Vacant			
1	Andhra Pradesh	1019	922	97	1002	873	129			
2	Arunachal Pradesh	NA	503	NA	0	0	0			
3	Assam	NA	2810	NA	NA	435	NA			
4	Bihar	NA	278	NA	NA	120	NA			
5	Chhattisgarh	1720	1442	278	284	139	145			
6	Goa	164	170	-	NA	NA	NA			
7	Gujarat	NA	NA	NA	NA	NA	NA			
8	Haryana	2534	2135	399	665	557	108			
9	Himachal Pradesh	NA	694	NA	557	454	103			
10	Jammu & Kashmir	1478	1182	296	NA	NA	NA			
11	Jharkhand	374	773	_	108	125	_			
12	Karnataka	6402	4554	1848	6956	4761	2195			
13	Kerala	NA	1097	NA	NA	1377	NA			
14	Madhya Pradesh	8382	5313	3069	1092	866	226			
15	Maharashtra	4721	4376	345	2529	2130	399			
15	Manipur#	705	290	415	47	2130	24			
10	Mampul# Meghalaya	646	630	16	11	11	0			
18	Mizoram	NA	565	NA	NA	55	NA			
19	Nagaland	372	441	-	0	0	0			
20	Odisha	1645	1918	-	601	709	-			
21	Punjab	2182	1765	417	2412	2132	280			
22	Rajasthan	4960	3957	1003	2155	1161	994			
23	Sikkim	NA	295	NA	0	0	0			
24	Tamil Nadu	4977	4092	885	6864	5775	1089			
25	Telangana	743	684	59	726	632	94			
26	Tripura	276	221	55	231	238	-			
27	Uttarakhand	908	873	35	476	452	24			
28	Uttar Pradesh	6768	5696	1072	0	0	0			
29	West Bengal	5204	5131	73	5197	3674	1523			
30	A& N Islands	57	60	-	0	0	0			
31	Chandigarh	NA	367	NA	0	0	0			
32	D & N Haveli	NA	155	NA	0	0	0			
33	Daman & Diu	95	82	13	0	0	0			
34	Delhi	NA	NA	NA	NA	NA	NA			
35	Lakshadweep	45	45	0	18	18	0			
36	Puducherry	2186	2126	60	0	0	0			
	All India	58563	55642	2921	31931	26717	5214			

Data for 2013-14 repeated