

**GOVERNMENT OF INDIA
HEALTH AND FAMILY WELFARE
LOK SABHA**

UNSTARRED QUESTION NO:1065

ANSWERED ON:28.11.2014

SHORTAGE OF DOCTORS AND PARA MEDICAL STAFF

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

- (a) whether there is a shortage of doctors, nurses, para-medical staffs, health workers and a number of these posts are lying vacant in the district hospitals and health centres particularly in remote and rural areas in the country;
- (b) if so, the details thereof and the reasons therefor along with the adverse impact on the various health and family welfare programmes running in the country, staff and State/UT-wise; and
- (c) the corrective measures taken/being taken by the Government to fill up the vacant posts at the earliest?

Answer

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

(a) & (b): The State /UT- wise vacancy position of doctors at Primary Health Centre (PHC), specialist at Community Health Centre (CHC); nurses at PHC and CHC, Health Worker (Male and female) at Sub Centre; pharmacists, Radiographers and Lab Technicians at CHCs as per the Rural Health Statistics (RHS), 2014 is placed at Annexure-I to Annexure-III respectively. Shortage of health human resource has an adverse impact on health care delivery and programme implementation.

(c): Public Health is a state subject. Under the National Health Mission, financial support is provided to States / UTs to strengthen their health system, including for engagement of doctors, specialists and other health human resource on contractual basis based on the requirements proposed by the States / UTs in their Programme Implementation Plans. Support is also provided for multi-skilling of doctors to overcome the shortage of specialists, mainstreaming of AYUSH etc. Other steps taken by the Central Government to encourage doctors to work in rural areas include:

(i) provision of financial support to state/UTs for providing additional incentives and higher remuneration to doctors/specialists to serve in such areas and improved accommodation arrangements so that they find it attractive to join public health facilities in such areas.

(ii) To improve supply of doctors,

a) norms have been relaxed for setting up of a medical college in terms of requirement for land, faculty, staff, bed/ bed strength and other infrastructure.

b) maximum intake capacity at MBBS level has been increased from 150 to 250.

(iii) To encourage doctors to serve in rural areas, Post Graduate Medical Education Regulations, 2000 have been amended to provide-

a) 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

b) incentive at the rate of 10% of the marks obtained for each year in service in remote or difficult areas up to the maximum of 30% of the marks obtained in the entrance test for admissions in Post Graduate Medical Courses.

(iv) To improve the availability of ANMs/GNMs and paramedical staff, Government has also approved setting up of ANM/GNM school in different States besides setting up Institutes of Paramedical Sciences at National and Regional levels.