

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

**LOK SABHA  
UNSTARRED QUESTION NO. 989  
TO BE ANSWERED ON 08<sup>TH</sup> FEBRUARY, 2019**

**WORKING CONDITION OF DOCTORS**

**989. SHRI J.C. DIVAKAR REDDY:**

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

- (a) whether the Government has taken note of the tremendous stress on the doctors in Andhra Pradesh at Government hospitals due to the poor infrastructure and misbehaviour of patient's kin during emergency situations;
- (b) if so, the details thereof and reaction of the Government thereon; and
- (c) whether there is need for overhauling of healthcare system to restore faith in the medical profession, if so, the details thereof and the steps being taken by the Government in this regard?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND  
FAMILY WELFARE  
(SHRI ASHWINI KUMAR CHOUBEY)**

(a) & (c): Public health and hospitals being a State subject, the primary responsibility to make healthcare facilities a safe working environment for healthcare professionals lies with the respective State Governments. However, under the National Health Mission (NHM), technical and financial support is provided to States/UTs to strengthen their healthcare systems including support for improving health infrastructure and engagement of home guards/security staff on contractual basis, based on the proposals made by the States/UTs in their Programme Implementation Plans (PIPs) within their overall resource envelope.

As per the analysis of Patients Satisfaction Score for the State of Andhra Pradesh under the Mera Aspataal initiative based on the Patients feedback, it found that approximately 70% of the patients are either very satisfied or satisfied.

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However, the excessive case load in some facilities result in, doctors not being able to handle the crowd of patients adequately. Government has taken following steps to strengthen healthcare system by attracting healthcare professionals and thereby maintaining the faith in the medical profession.

(i) Hard area allowance for specialist doctors who serve in rural and remote areas as well as for residential quarters for them.

(ii) The States are encouraged to adopt flexible norms for engaging specialists on even contractual basis at public health facilities. These include various mechanisms for 'contracting in' and 'contracting out' of specialist services, methods of engaging specialists outside the government system for service delivery at public facilities and the mechanism to include requests for these in the state Program Implementation Plans (PIP) under the National Health Mission.

(iii) States have also been allowed to offer negotiable salaries to attract Specialists including flexibility to strategies such as 'You quote, we pay". Financial support is also provided to States, inter-alia performance-based incentives, providing accommodation and transport facilities in rural and remote areas, sponsoring training programmes etc to all human resource to address the issue of shortage of doctors and other personnel in the public health facilities.

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