

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

STARRED QUESTION NO:79  
ANSWERED ON:29.02.2000  
HEALTH FACILITIES IN RURAL AREAS  
DHARMRAJ SINGH PATEL;MANSINH PATEL

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

- (a) whether the Government have conducted any survey regarding the Health care requirement facilities in rural areas of the country;
- (b) if so, the details thereof;
- (c) whether the Government have formulated any action plan to provide better health facility in these areas;
- (d) if so, the details thereof; and
- (e) if not, the steps being taken by the Government in this regard?

**Answer**

THE MINISTER OF STATE FOR HEALTH & FAMILY WELFARE: (INDEPENDENT CHARGE) (SHRI N.T.SHANMUGAM)

(a) & (b): A Facility Survey is being conducted at district level to assess the availability of trained staff, equipments and supplies and their utilization at Primary Health Centres, Community Health Centres, First Referral Units, District Hospitals, Post Partum Centres etc. Under this survey, one district from each large State, one sub-division of a district from each medium State and one block of a district from each small State/Union Territory is covered every month.

(c) Yes, Sir.

(d) & (e) Detailed operational strategies and action plan for improving health services in rural areas have been enunciated in the 9th Five Year Plan documents and the National Population Policy 2000. Salient features of both are laid on the table of the House.

STATEMENT-I IN RESPECT OF PARTS (d) & (e) OF THE REPLY LOK SABHA STARRED QUESTION No.79 FOR ANSWER ON 29.2.2000 ON HEALTH FACILITIES IN RURAL AREAS

EXTRACT - 9TH Plan document: ACTION PLAN TO PROVIDE BETTER HEALTH FACILITIES

RURAL PRIMARY HEALTH CARE:

1. Ensure that geographically delineated rural areas are covered by the three tier primary health care institutions as per norms through integration of the existing hospitals/dispensaries in rural areas into the appropriate tier of the rural primary health care infrastructure.
2. Accord high priority to filling the reported large gap in the vital CHC/FRU by redesignating and appropriately strengthening the existing block level PHCs, Subdistrict/subdivisional hospitals, rural hospitals and subdistrict post partum centres.
3. In all FRUs:
  - a) ensure that there are specialist/trained doctors in the following specialities: Medicine, surgery, obstetrics, paediatrics and anaesthesia;
  - b) ensure that there are no vacancies (if necessary by providing for part time appointments) and that referred patients and those requiring emergency care do receive the treatment they need until such time that there are qualified PSM personnel to monitor progress in ongoing national programmes, the specialist available in the CHC may be given the additional responsibility of monitoring these programmes (eg., paediatrician will monitor the immunization programme); enable the staff to stay and provide good quality services to the population by improving the service conditions and providing a conducive work environment to doctors (including specialist) and paramedical personnel.
4. Ensure that there are no vacancies in the critical para professional posts by skill development and redeployment of already available manpower; where absolutely necessary manpower gaps may be filled through part time appointments.
5. Available funds to be utilised on priority basis for purchase of equipment, consumables, drugs required for improving quality of services; funds may be provided for construction only when absolutely necessary.
6. Strengthen the referral services.

STATEMENT-II IN RESPECT OF PARTS (d) & (e) OF THE REPLY LOK SABHA STARRED QUESTION No.79 FOR ANSWER ON 29.2.2000 ON HEALTH FACILITIES IN RURAL AREAS

NATIONAL POPULATION POLICY 2000

Action Plan and operational strategy enunciated in National Population Policy 2000 - Salient points:

1. Converge service delivery at village level.

2. Empowering women for improved health and nutrition.
3. Strengthen the referral network between the district Health Office, district hospital, the Community Health Centre, the Primary Health Centre and Sub-centres in the management of obstetric and neonatal complications.
4. Strengthen community health centres to provide comprehensive emergency obstetric and neonatal care.
5. Strengthen the capacity of primary health centres to provide basic emergency and obstetric and neonatal care; 6. Improve technical skills of maternal and child health providers.
- 7 Expand and improve facilities for safe abortion care.
8. Develop maternity hospitals at sub-district level and at Community Health Centres to function as First Referral Units.
9. Ensure 100% routine immunization for all vaccine preventable diseases. 10. Pursue Pulse Polio Campaign to eradicate polio. 11. Collaborate with and commitments from the Non-governmental sector and industry. 12. Provide for the older population. 13. Improve Information, Education and Communication.