

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

**LOK SABHA
UNSTARRED QUESTION NO. 1728
TO BE ANSWERED ON 27th JULY, 2018**

SHORTAGE OF DOCTORS

**1728. SHRIMATI RITI PATHAK:
SHRI R. DHRUVA NARAYANA:
SHRI RAJU SHETTY:
SHRI JANAK RAM:
SHRIMATI K. MARAGATHAM:
SHRI CHANDRAKANT KHAIRE:**

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

- (a) the details of requirement and availability of doctors in the country particularly in rural and remote areas, State/ UT-wise along with the existing doctor people ratio;
- (b) whether there is acute shortage of doctors including specialist doctors in the country particularly in rural and remote areas and if so, the details thereof, State/ UT-wise;
- (c) whether the Government has issued any instructions regarding the posting of doctors in rural areas and if so, the details thereof;
- (d) whether it is a fact that rural health statistics 2017 shows that of the 25,650 sanctioned posts of doctors 3,027 are vacant and if so, the reaction of the Government thereto; and
- (e) the corrective measures being taken by the Government to tackle the situation and improve the doctor-population ratio in the country?

ANSWER

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

(a) & (b): As per Rural Health Statistics (RHS) 2017, State/UT-wise status of doctors and specialists at various public health facilities and shortfall thereof is at Annexure I & II, respectively.

As per Medical Council of India, there are a total 10,62,398 allopathic doctors registered with the State Medical Councils/ Medical Council of India as on 31st December, 2017. Assuming 80% availability, it is estimated that around 8.50 lakh doctors may be actually available for active service. It gives a doctor-population ratio of 1:1565 as per current population estimate of 1.33 billion.

(c): Public health and hospitals being a state subject, the primary responsibility to ensure posting of doctors in public health facilities lies with the State Governments. However, under the National Health Mission (NHM), support is provided to States/UTs to strengthen their healthcare systems including for engaging of doctors on contractual basis based on the requirements posed by the States/UTs in their Programme Implementation Plans.

Also, States are advised to put in place transparent policies of posting and transfer, and ensure rational deployment of doctors. 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 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.

(d): As per RHS-2017, there are 33,698 posts of doctors at Primary Health Centres out of which 8,826 are vacant.

However, as stated above, Public health and hospitals' is a State subject. Shortage of Doctors in public health sector varies from State to State depending upon their policies and context.

(e): The Government has taken various steps to increase the number of doctors in the country. This includes:

- 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. Further, teacher: student ratio in public funded Government Medical Colleges for Professor has been increased from 1:2 to 1:3 in all clinical subjects and for Asso. Prof. from 1:1 to 1:2 if the Asso. Prof. is a unit head. The same has also been extended to the private medical colleges with the conditions that it should be a standing of 15 years, running PG courses since 10 years, should have completed at least 1 continuance of recognition assessment satisfactorily and applies u/s 10A of the IMC Act, 1956 for increase of seats. This would result in increase in number of PG seats in the country.
- 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. Relaxation in the norms of setting up of Medical College in terms of requirement for faculty, staff, bed/bed strength and other infrastructure.

- V. Requirement of land for establishment of medical college in metropolitan cities as notified under Article 243P(c) of the Constitution of India has been dispensed with.
- VI. Strengthening/upgradation of State Government Medical Colleges for starting new PG courses/Increase of PG seats.
- VII. Establishment of New Medical Colleges by upgrading district/referral hospitals preferably in underserved districts of the country.
- VIII. Strengthening/ upgradation of existing State Government/Central Government Medical Colleges to increase MBBS seats.
- IX.** Enhancement of age limit for appointment/ extension/ re-employment against posts of teachers/dean/principal/ director in medical colleges from 65-70 years.

DOCTORS ⁺ AT PRIMARY HEALTH CENTRES						
S. No.	State/UT	(As on 31st March, 2017)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1147	1952	1644	308	*
2	Arunachal Pradesh	143	NA	122	NA	21
3	Assam	1014	NA	1048	NA	*
4	Bihar #	1899	2078	1786	292	113
5	Chhattisgarh	785	798	341	457	444
6	Goa	24	48	56	*	*
7	Gujarat	1392	1769	1229	540	163
8	Haryana	366	687	429	258	*
9	Himachal Pradesh	538	636	492	144	46
10	Jammu & Kashmir	637	1347	704	643	*
11	Jharkhand	297	569	331	238	*
12	Karnataka	2359	2359	2136	223	223
13	Kerala	849	1120	1169	*	*
14	Madhya Pradesh	1171	1771	954	817	217
15	Maharashtra	1814	3009	2929	80	*
16	Manipur	85	238	194	44	*
17	Meghalaya ##	109	128	112	16	*
18	Mizoram ###	57	152	56	96	1
19	Nagaland	126	108	122	*	4
20	Odisha	1280	1285	940	345	340
21	Punjab	432	593	568	25	*
22	Rajasthan	2079	2664	2382	282	*
23	Sikkim	24	NA	30	NA	*
24	Tamil Nadu	1362	2927	2759	168	*
25	Telangana	689	1318	966	352	*
26	Tripura	93	0	156	*	*
27	Uttarakhand	257	386	215	171	42
28	Uttar Pradesh	3621	4509	2209	2300	1412
29	West Bengal	914	1390	918	472	*
30	A & N Islands	22	42	34	8	*
31	Chandigarh	3	0	3	*	0
32	D & N Haveli	9	15	8	7	1
33	Daman & Diu	4	3	7	*	*
34	Delhi	5	21	21	0	*
35	Lakshadweep	4	8	8	0	*
36	Puducherry	40	38	46	*	*
	All India²/ Total	25650	33968	27124	8286	3027

Notes: # Sanctioned data for year 2011 used

Sanctioned data for year 2015 used

Sanctioned data for year 2013-14 used

NA: Not Available.

+: Allopathic Doctors

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

*: Surplus.

¹ One per Primary Health Centre

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

TOTAL SPECIALISTS AT CHCs						
Total Specialists [Surgeons, OB&GY, Physicians & Paediatricians]						
S. No.	State/UT	(As on 31st March, 2017)				
		Required¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	772	533	348	185	424
2	Arunachal Pradesh	252	NA	4	NA	248
3	Assam	632	NA	139	NA	493
4	Bihar	600	NA	82	NA	518
5	Chhattisgarh	676	620	59	561	617
6	Goa	16	5	4	1	12
7	Gujarat	1452	611	92	519	1360
8	Haryana	448	74	16	58	432
9	Himachal Pradesh	356	NA	12	NA	344
10	Jammu & Kashmir	336	344	191	153	145
11	Jharkhand	752	424	75	349	677
12	Karnataka	824	824	498	326	326
13	Kerala	928	30	40	*	888
14	Madhya Pradesh	1236	1236	180	1056	1056
15	Maharashtra	1440	823	508	315	932
16	Manipur	68	4	3	1	65
17	Meghalaya	108	3	13	*	95
18	Mizoram	36	33	0	33	36
19	Nagaland	84	NA	8	NA	76
20	Odisha	1480	884	318	566	1162
21	Punjab	604	593	203	390	401
22	Rajasthan	2316	1593	497	1096	1819
23	Sikkim	8	NA	1	NA	7
24	Tamil Nadu	1540	NA	78	NA	1462
25	Telangana	456	284	125	159	331
26	Tripura	84	0	0	0	84
27	Uttarakhand	240	200	41	159	199
28	Uttar Pradesh	3288	2099	484	1615	2804
29	West Bengal	1396	669	117	552	1279
30	A& N Islands	16	9	0	9	16
31	Chandigarh	8	9	15	*	*
32	D & N Haveli	8	0	0	0	8
33	Daman & Diu	8	2	0	2	8
34	Delhi	0	0	0	0	0
35	Lakshadweep	12	0	0	0	12
36	Puducherry	16	4	5	*	11
	All India²/ Total	22496	11910	4156	8105	18347

Notes:

NA: Not Available.

¹ Four per Community Health Centre

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

*: Surplus.

² For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, are excluded