

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI GHULAM NABI AZAD): (a) to (c) "Health" being a State subject, such information State/UT wise is not maintained centrally.

However, in so far as the three Central Government hospitals in Delhi are concerned, the guidelines for working hours of resident doctors issued by Ministry of Health and Family Welfare are followed. As per the guidelines, continuous active duty for resident doctors will not normally exceed 12 hours. Subject to exigencies of work, the resident doctors will be allowed one weekly holiday by rotation. The resident doctors will also be required to be on call duty not exceeding 12 hours at a time. The Junior Residents should work ordinarily for 48 hours per week and not more than 12 hours at a stretch, subject to the condition that the working hours will be flexible as may be decided by the Medical Superintendents concerned keeping in view of the workload and availability of doctors for clinical work.

Shortage of paediatricians at CHCs in W.B.

3051. SHRI ANIL MADHAV DAVE: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that in West Bengal (WB) 25 paediatricians are working at Community Health Centres (CHCs) against the total requirement of 349 paediatricians;

(b) whether it is also a fact that CHCs need 1,396 specialists but only 186 are in position;

(c) if so, the details thereof; and

(d) the remedial measures taken by Government thereon?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY): (a) As per the Bulletin on Rural Health Statistics in India 2010, a total of 59 Paediatricians are in position at Community Health Centres (CHCs) against the requirement of 348 in the State of West Bengal.

(b) and (c) As per the Bulletin on Rural Health Statistics in India 2010, a total of 175 Specialists are in position at Community Health Centres (CHCs) against the requirement of 1392 posts of Specialists in the State of West Bengal.

(d) Augmentation of human resources is one of the thrust area under the National Rural Health Mission [NRHM]. Financial support is provided under NRHM for engagement of staff on contractual basis. Multi-skilling of doctors to overcome the shortage of specialists, provision of incentives to serve in rural areas, improved accommodation arrangements, measure to set up more medical colleges, GNM Schools, ANM Schools to produce more doctors and paramedics

are the other measures taken to bridge the gap in human resources. As per NRHM State- wise progress as on 30 the June, 2011, 38 specialists, 354 General Duty Medical Officers [GDMOs] and 19 AYUSH doctors have been appointed under NRHM on contractual basis in the State of West Bengal.

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 post.

Steps for checking sex determination tests

†3052. SHRI JAI PRAKASH: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that in the direction of establishing a monitoring mechanism and preparing a comprehensive management plan against sex determination with Central aid, desired success could not be achieved in many States of the country;

(b) if so, whether Government has proposed to take some concrete steps, which are in accordance with the suggestions/findings, put forth in this connection in the meeting of State Health Secretaries and Ministers organised in Delhi recently; and

(c) if so, the details thereof?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI SUDIP BANDYOPADHYAY): (a) to (c) No. In the meeting of State Health Ministers and Health Secretaries, held under the Chairmanship of Hon. Union Health Minister on the 28th September, 2011 at New Delhi, States have been exhorted to curb sex determination through effective implementation of the PC and PNDT Act as per key action points mentioned below:

- Appointment of District Collectors as District Appropriate Authority.
- Monitoring stand-alone diagnostic facilities and regulation of multiple registrations of radiologists at ultrasound clinics/facilities as well as portable ultrasound machines.
- Sustained advocacy and communication strategies for community awareness with focus on Information, Education, Communication; involvement of religious leaders, NGOs and public service messages for affirmative action to nurture the girl child.
- On line filing of F-Forms to capture real time data and swift action against violations of the Act.
- Surprise inspections of ultrasound diagnostic facilities by State Inspection and Monitoring Committees.

†Original notice of the question was received in Hindi.