

Financial Year	Fiscal Deficit (₹ in crore)	Fiscal Deficit (% of GDP)
2010-11	3,73,591	4.9
2011-12	5,16,269	5.8
2012-13	4,90,190	4.8
2013-14 (Provisional)	5,02,858	4.4
2014-15 (R.E.)	5,12,628	4.1
2015-16 (B.E.)	5,55,649	3.9

As seen from table above, fiscal deficit as percentage of GDP is showing declining trend after 2011-12.

(c) and (e) Government is firmly committed to the path of fiscal consolidation. Fiscal consolidation over medium term has been designed with the judicious mix of reduction in total expenditure as percentage of GDP and improvement in gross tax revenue as percentage of GDP. Government has taken measures for fiscal prudence and economy to rationalize expenditure and optimize available resources. Government has constituted Expenditure Management Commission (EMC) which has been mandated to review the major areas of Central Government expenditure and suggest ways for creating fiscal space to meet developmental expenditure needs, without compromising the commitment to fiscal discipline. Government is committed to progressively pursuing subsidy reforms. Both petroleum and diesel are now fully decontrolled. The Government has launched a new universal Direct Benefit Transfer Scheme for LPG subsidy from 1st January, 2015 onwards to avoid duplication and prevent leakages. Measures have also been taken by the Government to improve revenue collection.

(d) Estimates of fiscal deficit as percentage of GDP during the Twelfth Plan period are as below:

Financial Year	Fiscal Deficit (% of GDP)
2013-14 (Provisional)	4.4
2014-15 (R.E.)	4.1
2015-16 (B.E.)	3.9
2016-17 (projection)	3.5

Availability of doctors in rural areas

524. DR. T.N. SEEMA : Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

(a) whether it is a fact that availability of doctors in rural India is a big issue;

(b) if so, the reaction of Government thereto and the effective steps taken regarding the same;

(c) whether AYUSH doctors appointed under NRHM at PHCs and sub centres are found to be prescribing allopathic drugs to patients as they are not provided with AYUSH drugs and pharmacists;

(d) if so, the details thereof and the reaction of Government thereto; and

(e) the steps taken by Government to stop siphoning off the funds provided to the panchayats to transport patients to Primary Health Centres (PHCs) under the NRHM?

THE MINISTER OF HEALTH AND FAMILY WELFARE (SHRI JAGAT PRAKASH NADDA) : (a) and (b) As per Rural Health Statistics (RHS), 2014 State/ UT- wise vacancy position of Allopathic doctors at Primary Health Centres (PHCs), Community Health Centres (CHCs) and specialist at CHCs is given in the Statement (*See below*).

Public health being a state subject, the primary responsibility to ensure availability of doctors in rural areas is that of 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.

Support is also provided to States by giving hard area allowance to doctors for serving in rural and remote areas and for their residential quarters so that doctors find it attractive to serve in public health facilities in such areas.

In order to encourage the 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% 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.

(c) and (d) Public health being a state subject, under NHM support is provided for mainstreaming of AYUSH practitioners through co-location in public health facilities including PHCs and for AYUSH drugs and pharmacists. No such instance has been brought to our notice.

(e) Public Health is state subject. There is a system of statutory and concurrent audit under NHM. The states are required to release funds to Panchayats based on actual utilisation on eligible activities.

Statement

Details Regarding Sanctioned, In Position and Vacant position of Allopathic Doctors at PHCs & CHCs and Specialists at CHCs as per RHS 2014

Sl. No.	States/UTs	Allopathic Doctors at PHCs			Allopathic Doctors at CHCs			Specialists at CHCs		
		Sanctioned [S]	In Position [P]	Vacant [S-P]	Sanctioned [S]	In Position [P]	Vacant [S-P]	Sanctioned [S]	In Position [P]	Vacant [S-P]
1	Andhra Pradesh	3588	3118	470	538	469	69	668	275	393
2	Arunachal Pradesh	NA	92	NA	NA	105	NA	NA	1	NA
3	Assam	NA	1355	NA	NA	384	NA	NA	121	NA
4	Bihar	2078	2521	*	NA	285	NA	NA	69	NA
5	Chhattisgarh	752	383	369	628	302	326	628	80	548
6	Goa	48	56	*	12	10	2	5	5	0
7	Gujarat	1504	889	615	1060	747	313	NA	74	NA
8	Haryana	577	395	182	382	208	174	150	29	121
9	Himachal Pradesh	582	571	11	282	194	88	0	8	*
10	Jammu and Kashmir	1030	1224	*	539	465	74	315	176	139
11	Jharkhand	330	372	*	564	757	*	111	114	*
12	Karnataka	2233	2155	78	255	240	15	733	495	238
13	Kerala	1119	1168	*	779	1017	*	30	39	*
14	Madhya Pradesh	1658	999	659	1109	864	245	897	263	634
15	Maharashtra	3009	2506	503	512	478	34	823	462	361
16	Manipur	238	199	39	97	94	3	4	3	1
17	Meghalaya	128	114	14	91	74	17	3	3	0

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Written Answers to

[RAJYA SABHA]

Unstarred Questions

18	Mizoram	152	49	103	NA	11	NA	0	0	0
19	Nagaland	101	126	*	35	51	*	2	5	*
20	Odisha	1312	973	339	449	463	*	908	346	562
21	Punjab	490	441	49	174	380	*	563	202	361
22	Rajasthan	2562	2111	451	1405	1011	394	1511	651	860
23	Sikkim	NA	38	NA	NA	4	NA	NA	0	NA
24	Tamil Nadu	2612	2139	473	1919	1694	225	0	0	0
25	Tripura	NA	160	NA	NA	68	NA	NA	0	NA
26	Uttarakhand	325	160	165	61	54	7	197	49	148
27	Uttar Pradesh	4509	2209	2300	0	0	0	2099	484	1615
28	West Bengal	2600	711	1889	1800	902	898	1792	115	1677
29	Andaman and Nicobar Islands	52	42	10	13	13	0	9	0	9
30	Chandigarh	0	0	0	6	17	*	11	18	*
31	Dadra and Nagar Haveli	6	7	*	0	5	*	0	0	0
32	Daman and Diu	3	5	*	4	4	0	2	1	1
33	Delhi	21	20	1	0	0	0	0	0	0
34	Lakshadweep	9	9	0	11	11	0	0	0	0
35	Puducherry	38	38	0	18	18	0	2	3	*
ALL INDIA		33666	27355	8720	12743	11399	1344	11463	4091	7668

* Surplus.

Written Answers to

[28 April, 2015]

Unstarred Questions

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