

- Performance based payment to specialist.

The State Government has also taken steps towards appointment of specialist doctor on State Government post at regular intervals.

Statement

Details of specialist doctors at CHCs in Maharashtra

Cadre Name	Required	In Position		Total	Shortfall/ Vacancy
		Regular	Contractual		
Gynaecologist	364	124	56	180	184
Paediatrician	364	115	47	162	202
Anaesthetist	364	67	56	123	241
Surgeon	364	8	10	18	346
Physician	364	6	13	19	345
TOTAL	1820	320	182	502	1318

Source: As reported by State Government of Maharashtra.

Laxity in implementation of Family Planning Scheme

1374. SHRI RAJKUMAR DHOOT: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- whether it is a fact that the country's Family Planning Scheme has seen lax implementation despite the focus of Hon'ble Prime Minister on the scheme;
- if so, the details thereof and reasons for the laxity in implementation of the scheme; and
- the remedial measures Government proposes to take in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) to (c) The family planning programme is a key focus area of the Government embedded in the RMNCHA+ N approach which is based on provision of comprehensive care through the essential pillars of reproductive, maternal, neonatal, child, adolescent health and nutrition. It is

guided by the tenets of the National Population Policy (NPP-2000), and the National Health Policy (NHP) 2017, supported centrally all over the country, and is being implemented in right earnest.

As a result of initiatives taken by the Government,

- The Total Fertility Rate (TFR) has declined from 2.9 in 2005 to 2.2 in 2017 (SRS)
- 25 out of 37 States/UTs have already achieved the replacement level fertility of 2.1 or less.
- The Decadal growth rate has declined from 21.54% in 1990-2000 to 17.64% during 2001-11.
- The Crude Birth Rate (CBR) has declined from 23.8 to 20.2 from 2005 to 2017 (SRS)
- The teenage birth rate has halved from 16% in 2005-06 to 8% in 2015-16 (NFHS).

In order to further improve implementation of the program/ schemes, the Government undertakes reviews in all States, periodic monitoring, and supportive supervision visits. Annual Common Review Missions are undertaken in select states to find gaps in program implementation and address the issues.

AIIMS in Kerala

1375. SHRI BINOY VISWAM: Will the Minister of HEALTH AND FAMILY WELFARE be pleased to state:

- (a) the number and names of States in which AIIMS hospitals are being established and by when they will be functional;
- (b) whether there is any proposal to start AIIMS in Kerala; and
- (c) if so, by when AIIMS in Kerala will become functional?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) 22 new AIIMS have been approved/announced for establishment in various parts of the country by the Union Cabinet. Of these, six (6) new AIIMS in Patna (Bihar), Raipur (Chhattisgarh), Bhopal