

Oral health, Geriatric and palliative health care and Trauma care, besides strengthening the existing services of RCH and communicable diseases.

The Primary Health Centres (PHCs) and Community Health centres (CHCs) would continue to provide IPD and OPD services as per the existing Indian Public Health Standards, *e.g.* PHCs with an Operation Theatre facility would provide fixed day approach services for vasectomy, tubectomy etc. and CHCs would provide services for minor surgical procedures. CHCs which have been equipped as First Referral Units would provide services for C-section.

Under Ayushman Bharat Pradhan Mantri Jan Arogya Yojana (AB-PMJAY), all public hospitals (Community Health Centre and above) in the States implementing AB-PMJAY, are deemed empanelled for providing hospitalization care. Further, State Governments, through State Health Agencies, empanel private hospitals within their jurisdiction based on defined criteria and hospital empanelment guidelines. Accordingly, as on 11.03.2020, 20,820 hospitals have been empanelled across the Country.

Under AB-PMJAY, additional 10% or 15% incentive over and above the base package rates is provided to hospitals accredited with NABH, JCI and NQAS. Further, incentive of 10% is provided to hospitals having post graduate seats. Also, Additional incentive of 10% is provided to the hospitals situated in the aspirational districts to ensure that these districts also get health facilities under AB-PMJAY.

Uneven distribution of healthcare professionals

2641. LT. GEN. (DR.) D.P. VATS (RETD.):

SHRI P. BHATTACHARYA:

SHRI VIJAY PAL SINGH TOMAR:

SHRI HARNATH SINGH YADAV:

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

(a) whether uneven distribution of healthcare professionals has been an impediment for effective delivery of healthcare services in the rural areas of the country;

(b) if so, the details thereof;

(c) the availability of health professionals in the rural areas along with their requirements, State/UT-wise;

(d) whether Government has drawn any action plan to meet the required number of health professionals in the rural areas of the country; and

(e) if so, the steps taken/proposed to be taken by Government in this regard?

THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE (SHRI ASHWINI KUMAR CHOUBEY): (a) and (b) Public health and hospitals being a State subject, the primary responsibility to ensure availability of human healthcare professionals in public health facilities lies with the State/UT Governments. However, under the National Health Mission (NHM), financial and technical support is provided to States/UTs to strengthen their healthcare systems including support for engagement of doctors on contractual basis, based on the requirements posed by the States/UTs in their Programme Implementation Plans (PIPs) within their overall resource envelope.

(c) to (e) As per information provided by the respective regulatory bodies, 12,01,354 allopathic doctors, 885383 Auxiliary Nurses Midwives (ANM), 2129820 Registered Nurse and Registered Midwives (RN&RM), 56644 Lady Health Visitors (LHV) and 276701 Dentists are registered in the country. The details are given in Statement (*See below*).

The Government has taken various steps to further increase the availability of human resource in the country which include:

- (i) Establishment of New Medical Colleges attached with district/referral hospitals in underserved districts of the country.
- (ii) Strengthening/upgradation of existing State Government/Central Government Medical Colleges to increase MBBS and PG seats.
- (iii) Relaxation in the norms for setting up of Medical College in terms of requirement for faculty, staff, bed strength and other infrastructure.
- (iv) Minimum 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.
- (v) Enhancement of maximum intake capacity at MBBS level from 150 to 250.
- (vi) DNB qualification has been recognized for appointment as faculty to take care of shortage of faculty.

- (vii) Enhancement of age limit for appointment/extension/re-employment against posts of teachers/dean/principal/ director in medical colleges upto 70 years.
- (viii) The ratio of teachers to students for Professor has been revised from 1:1 to 1:2 for all MD/MS disciplines and 1:1 to 1:3 in all clinical subjects in Government funded medical colleges and in Private medical colleges with 15 years standing. Further, for Associate Professor, the said ratio has been revised from 1:1 to 1:2 and 1:3 if he/she is a unit head in all clinical subjects in Government medical colleges and in Private medical colleges with 15 years standing. This would result in increase in number of PG seats in the country.
- (ix) By amending the regulations, it has been made mandatory for all medical colleges to start PG courses within 3 years from the date of their MBBS recognition/continuation of recognition.
- (x) Colleges are allowed to apply for PG medical courses in clinical subjects at the time of 4th renewal. It will serve to advance the process for starting PG medical courses by more than 1 year.
- (xi) Provision has been made in the regulations to offer less number of seats to the applicant medical college, in case, it falls short of minimum prescribed requirements of applied intake to avoid wastage of human resources.
- (xii) A Consortium (a group of 2 or upto 4 private organizations) has been allowed to establish a medical college.
- (xiii) The requirement of land to construct building for School/College of Nursing and Hostel has been relaxed.
- (xiv) The requirement of a 100 bedded parent hospital has been relaxed for hilly and tribal areas for School/College of Nursing and Hostel.
- (xv) The student teacher ratio for M.Sc(N) programme has been relaxed from 1:5 to 1:10.
- (xvi) Student patient ratio for Nursing Institutions has been relaxed from 1:5 to 1:3.
- (xvii) Distance from Nursing School to hospital has been relaxed from 15 km to 30 km. However, for hilly and tribal areas the maximum distance is 50 km. Super speciality hospital can start M.Sc.(N) without having under graduate programme.

Statement

(A) Details of Number of Doctors Registered with State Medical Councils/
Medical Council of India as on 30th September, 2019

Sl. No.	Name of the State	Number of Registered Doctors
1	2	3
1.	Andhra Pradesh	100587
2.	Arunachal Pradesh	1021
3.	Assam	23902
4.	Bihar	44642
5.	Chhattisgarh	9355
6.	Delhi	24999
7.	Goa	3890
8.	Gujarat	69746
9.	Haryana	12345
10.	Himachal	3054
11.	Jammu and Kashmir	15422
12.	Jharkhand	6468
13.	Karnataka	124663
14.	Madhya Pradesh	39044
15.	Maharashtra	179783
16.	Kerala	60565
17.	Mizoram	74
18.	Nagaland	134
19.	Odisha	22521
20.	Punjab	48351
21.	Rajasthan	43992
22.	Sikkim	1414
23.	Tamil Nadu	138821
24.	Uttar Pradesh	81348

1	2	3
25.	Uttarakhand	8617
26.	West Bengal	74054
27.	Tripura	1945
28.	Telangana	7931
29.	Medical Council of India*	52666
TOTAL		12,01,354

Note - The other State/UTs do not have their own Medical Registration Council. Hence, their workers get registration with the Councils of other neighbouring States.

* 52666 doctors were registered only with MCI. They are presumably working in States/UTs which do not have a medical register or anywhere in the country.

(B) State-wise number of registered nurses in India

Sl. No.	State	Total No. of Registered Nurses and Auxiliary Nurses in India as on 31.12.2018		
		ANM	RN & RM	LHV
1	2	3	4	5
1.	Andhra Pradesh*	138435	232621	2480
2.	Arunachal Pradesh	2591	2437	77
3.	Assam*	27925	22388	353
4.	Bihar*	8624	9413	511
5.	Chhattisgarh	14491	16829	1352
6.	Delhi	4516	67416	0
7.	Goa	75	154	0
8.	Gujarat	48517	123170	0
9.	Haryana	26607	30430	694
10.	Himachal Pradesh	11823	23690	500
11.	Jharkhand	6479	4119	142
12.	Karnataka*	54039	231643	6840

1	2	3	4	5
13.	Kerala	30706	275544	8507
14.	Madhya Pradesh*	39563	118793	1731
15.	Maharashtra	71079	139247	671
16.	Meghalaya	1846	6637	206
17.	Manipur	3877	8798	0
18.	Mizoram	2255	4006	0
19.	Odisha	64258	78101	238
20.	Punjab*	23029	76680	2584
21.	Rajasthan*	108688	200171	2732
22.	Tamil Nadu	58411	293105	11247
23.	Tripura*	2232	4140	148
24.	Uttar Pradesh*	60258	74777	2763
25.	Uttarakhand	3066	4758	14
26.	West Bengal	68670	67395	12854
27.	Telangana	3107	12214	0
28.	Sikkim	216	1144	0
TOTAL		885383	2129820	56644

ANM: Auxiliary Nurse Midwives, RN & RM: Registered Nurses & Registered Midwives,

LHV: Lady Health Visitores, NA: Not Available

Source: Respective State Nurses Registration Council

(C) State-wise number of registered dentists in India

1	2	3
1.	Andhra Pradesh State Dental Council	21355
2.	Arunachal Pradesh State Dental Council	266
3.	Assam State Dental Council	2737
4.	Bihar State Dental Council	8595
5.	Chhattisgarh State Dental Council	3825

1	2	3
6.	Delhi State Dental Council	15322
7.	Dental Council of Chandigarh	1082
8.	Goa State Dental Council	1359
9.	Gujarat State Dental Council	15011
10.	Haryana State Dental Council	8836
11.	Himachal Pradesh State Dental Council	2462
12.	Jammu and Kashmir State Dental Council	4029
13.	Jharkhand State Dental Council	146
14.	Karnataka State Dental Council	43876
15.	Kerala State Dental Council	21226
16.	Madhya Pradesh State Dental Council	8015
17.	Maharashtra State Dental Council	40457
18.	Manipur State Dentists Registration Tribunal	520
19.	Meghalaya State Dentists Registration Tribunal	145
20.	Odisha State Dental Council	2027
21.	Punjab State Dental Council	15610
22.	Rajasthan State Dental Council	7197
23.	Sikkim Dental Registration Tribunal	46
24.	State Dental Council, Puducherry	723
25.	Tamil Nadu State Dental Council	25167
26.	Telangana State Dental Council	1001
27.	Tripura State Dental Council	185
28.	Uttar Pradesh State Dental Council	18488
29.	Uttarakhand Dentists Registration Tribunals	1325
30.	West Bengal State Dental Council	5668
TOTAL		276701