

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

**RAJYA SABHA  
UNSTARRED QUESTION NO. 1565  
TO BE ANSWERED ON 15<sup>th</sup> MARCH 2022**

**NEED TO STRENGTHEN HEALTH CARE INFRASTRUCTURE**

**1565. SHRI SANJAY RAUT:**

Will the Minister of Health and Family Welfare be pleased to state:

- (a) whether it is a fact that there is need for large number of medical colleges, Super Speciality hospitals and AIIMS-like institutions in various parts of the country;
- (b) if so, details thereof and Government's response thereto;
- (c) whether Government has received any observation report about the need to increase health care facilities in various parts of the country;
- (d) if so, the details thereof; and
- (e) the details of the steps taken or proposed to be taken by Government for the adequate health care facilities in the country?

**ANSWER  
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY  
WELFARE  
(DR. BHARATI PRAVIN PAWAR)**

(a) to (e) : As per information available, there are 13,01,319 allopathic doctors registered with the State Medical Councils and the National Medical Commission (NMC) as on November, 2021. The doctor-population ratio is 1:834 in the country assuming 80% availability of registered allopathic doctors and 5.65 lakh AYUSH doctors. Further, as per the information received from NMC, there are 596 Medical Colleges in the country and the MBBS intake capacity is 89,875.

To augment availability of doctors and health infrastructure in the country, Ministry of Health & Family Welfare administers a Centrally Sponsored Scheme (CSS) for 'Establishment of new Medical Colleges attached with existing district/referral hospitals' with preference to underserved areas and aspirational districts, where there is no existing Government or private medical college. Under the Scheme, 157 new medical colleges have been approved in three phases and 71 are already functional. Under Pradhan Mantri Swasthya Suraksha Yojana (PMSSY), which aims at correcting regional imbalances in the availability of affordable healthcare facilities and augmenting facilities for quality medical education, setting up of 22 new AIIMS and upgradation of 75 Government Medical Colleges / Institutions have been approved.

The norms for public health facilities are laid down in the Indian Public Health Standards (IPHS). As per IPHS 2012, the existing population norms for various levels of healthcare facilities are:

- i. Sub-centre - In rural areas, one Sub-centre for every 5000 population in plain areas and 3000 population in hilly/tribal/desert areas.
- ii. Urban - HWC (urban): one Urban-HWC per 15,000-20,000 population catering predominantly to poor and vulnerable populations, residing in slums or other such pockets of Urban areas.
- iii. PHC- One per 30000 population in plains and One per 20000 population in hilly/tribal/desert areas.
- iv. CHC- in rural areas population norm of 80,000 (in hilly and tribal areas) and 1,20,000 (in plains) and/or time to care approach
- v. DH - Two lakhs and above population

Public Health and Hospitals is a State Subject and the primary responsibility for strengthening of healthcare system lies with respective State/UT Governments. However, Ministry of Health and Family Welfare, Government of India provides financial and technical support to the States/UTs. Under National Health Mission (NHM), support is provided to States/UTs to strengthen their healthcare systems based on the Programme Implementation Plans (PIPs) submitted by the States/UTs within their overall resource envelope. NHM is aimed at achieving universal access to equitable, affordable & quality health care services. The main programmatic components of NHM include Health System Strengthening in rural and urban areas, Reproductive-Maternal- Neonatal-Child and Adolescent Health (RMNCH+A), and Communicable and Non-Communicable Diseases. Ayushman Bharat - Health and Wellness Centres (AB-HWC) deliver twelve packages of Comprehensive Primary Health Care (CPHC) that includes preventive, promotive, curative, palliative and rehabilitative services which is universal, free and close to the community. Another essential component of AB-HWC is the roll out of tele-consultation services through 'eSanjeevani'. Tele-consultation services are aimed at improving access of specialist services to the communities, especially in the rural areas. Besides this, funds have also been allocated to States, for strengthening their health infrastructure under Emergency Response of Health System Preparedness Package ( ECRP-II), XV- Finance Commission- Health Grants through local Governments and Pradhan Mantri – Ayushman Bharat Health Infrastructure Mission (PM-ABHIM).