



सत्यमेव जयते



राष्ट्रीय स्वास्थ्य मिशन

RURAL HEALTH STATISTICS

2019-20



Government of India
Ministry of Health and Family Welfare



Government of India
Ministry of Health and Family Welfare
Statistics Division

Rural Health Statistics



2019-20



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स्वास्थ्य एवं परिवार कल्याण, विज्ञान और प्रौद्योगिकी
व पृथ्वी विज्ञान मंत्री, भारत सरकार
Union Minister for Health & Family Welfare,
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Government of India

सबका साथ, सबका विकास, सबका विश्वास
Sabka Saath, Sabka Vikas, Sabka Vishwas



MESSAGE

It gives me immense pleasure to release latest edition of this important publication "Rural Health Statistics (RHS), 2019-20" which serves as a critical source of information on public health infrastructure and human resources of India and its States/UTs to aid decision making and policy intervention. It also provides data on human resources and health infrastructure in urban as well as tribal areas of the country.

Availability of data on Health Infrastructure and Human Resources helps provide an insight into the strengths and weakness of the healthcare delivery system, thereby providing an opportunity to improve the efficacy of the system using the available resources. It also facilitates identification of additional resources for better management of public health service delivery services. The significance of a strong and robust healthcare system has been amply reflected during India's fight against the COVID-19 pandemic. We have noted with awe, admiration and gratitude as to how our Health workers have been working tirelessly, proficiently and selflessly in carrying out their assigned tasks to protect our people.

I hope that the report would be useful for policymakers, academicians and programme managers in framing and implementing appropriate policies on health infrastructure and human resources in the country.

I compliment the entire team of Statistics Division for bringing out this comprehensive report.


(Dr. Harsh Vardhan)

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संदेश

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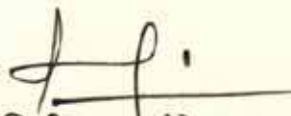


मुझे यह बताते हुए हर्ष हो रहा है कि स्वास्थ्य और परिवार कल्याण मंत्रालय काफी समय से प्रतीक्षित ग्रामीण स्वास्थ्य सांख्यिकी (आरएचएस), 2019-20 जारी कर रहा है। यह भारत और इसके राज्यों/संघ राज्य क्षेत्रों की स्वास्थ्य अवसंरचना और मानव संसाधनों पर जानकारी का अति महत्वपूर्ण स्रोत है। आरएचएस के आंकड़ों का उपयोग व्यापक तौर पर राज्यों/संघ राज्य क्षेत्रों के साथ-साथ राष्ट्रीय स्तर पर नीति निर्माताओं, अनुसंधानकर्ताओं, गैर-सरकारी संगठनों और स्वास्थ्य और परिवार कल्याण के क्षेत्र में कार्यरत अन्य हितधारकों द्वारा निर्णय लेने और नीतिगत उपाय करने में किया जाता है।

कोविड-19 महामारी के बावजूद, हमारे स्वास्थ्य कर्मियों ने सभी स्तरों पर अपने नियमित क्रियाकलापों को निष्पादित करने के लिए बड़ी दक्षता से और व्यापक स्तर पर कार्य किया है। इस महामारी ने हमें अपनी स्वास्थ्य प्रणाली के मौजूदा संसाधनों की क्षमता का मूल्यांकन करने, अपने कौशलों को अद्यतन करने तथा रोगों को समय पर नियंत्रित करने के लिए स्वयं को तैयार करने का अवसर प्रदान किया है। आरएचएस प्रकाशन डॉक्टरों, पैरा-मेडिकल स्टाफ आदि जैसे स्वप्रेरित मानव संसाधनों की गुणवत्ता, सामर्थ्य और उपलब्धता के बारे में जानकारी का एक महत्वपूर्ण स्रोत है।

मुझे यह आरएचएस 2019-20 प्रकाशन जारी करते हुए अत्यंत गर्व का अनुभव हो रहा है। मुझे आशा है कि यह प्रकाशन देश में हो रहे परिवर्तनों के संदर्भ में स्वास्थ्य और परिवार कल्याण कार्यक्रमों के प्रभावी प्रबंधन के लिए जानकारियां प्रदान करने में नीति निर्माताओं और कार्यक्रम प्रबंधकों के लिए उपयोगी सिद्ध होगा।

मैं सांख्यिकी प्रभाग की पूरी टीम को जन-स्वास्थ्य और मानव संसाधनों पर इतनी व्यापक रिपोर्ट प्रकाशित करने के लिए शुभकामनाएं देता हूँ।


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MESSAGE

Effective and efficient healthcare services are required by everyone. Providing such services becomes more challenging in India considering the vast diversity of the country. Due to this diversity, the need for healthcare services and their availability varies between States & Regions.

Despite of all the challenges, Ministry of Health & Family Welfare is committed to provide healthcare services in an optimal manner to the entire population. The National Health Mission has placed considerable emphasis on the needs of the population; addressed by fully utilizing the existing capacities in the most effective and efficient manner, in addition to creating new capacities through additional infrastructure, human resources and introducing new programmes. However, to access the quantum of future needs in this direction, availability of reliable and timely data is crucial.

'Rural Health Statistics' an annual publication is based on the Health Facility level data reported by the States/UTs. It is an effort towards providing reliable and updated information on rural, urban and tribal health infrastructure, human resources, distribution of facilities at SCs, PHCs, CHCs, HWCs etc., so as to provide the status of public health infrastructure available in the country. The data published in this publication is based on the information as on March 2020. In line with Ministry's flagship scheme "Ayushman Bharat", the data pertaining to number of functional Health & Wellness Centres has also been incorporated.

Recognising the need for comprehensive data on Health Infrastructure and Health Manpower, MoHFW, releases the RHS 2019-20, which includes additional components on urban health systems across the country. It is an essential tool to carry out comparative analyses and take evidence based policy decisions based on the reported data. Findings based on this data can be vital to policymakers in understanding how utilization patterns differ among population subgroups and pinpointing areas where problems are the most severe.

(Rajesh Bhushan)



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ACKNOWLEDGEMENT

The Ministry has been regularly compiling and disseminating information on rural health care delivery system through the annual publication titled "Rural Health Statistics". For the first time, the publication is based on data uploaded by the Health Facilities of the States and Union Territories in Health Management Information (HMIS) portal. The relevance of reliable and up-to-date statistics on rural health care system in formulation of appropriate schemes/programmes and in their effective implementation, particularly in the context of strengthening the rural health care infrastructure and human resources is well known. The present issue contains data upto March 2020.

In order to increase the scalability and optimum usability of this publication the data pertaining to Urban Health parameters and Health and Wellness Centres has also been captured in this publication. The support and cooperation received from the States / Union Territories in facilitating release of this publication is commendable. I place on record Ministry's appreciation for the efforts made by the concerned officials of all the States / Union Territories towards this. I also urge the States to use the Rural Health Statistics for effective planning and strengthening of Health Systems in all their districts.

Last but not the least, I would like to acknowledge the efforts made by the officers / officials of Statistics division whose varying contribution made this publication possible by compiling data and its critical analysis. I would like to thank them all.

(Vandana Gurnani)

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FOREWORD

The Rural Health Statistics (RHS) conducted under the aegis of the Ministry of Health & Family Welfare covers approximately over 1.9 lakhs public health facilities serving the entire population of the country. It plays a crucial role in providing the Government of India and the stakeholders with reliable inputs to monitor the progress of various flagship programmes as well as the vision of the National Health Mission by capturing the Health Infrastructure and Monthly Service Delivery data right from the facilities level to national level.

Over the years, Rural Health Statistics (RHS) has emerged as a nationally important data source on health infrastructure and monthly service delivery data for India and its States and UTs. The 2019-20 publication in this line will provide updated information upto March, 2020 on health infrastructure and human resources at different levels like Sub Centres, Primary Health Centres, Community Health Centres, Sub-district hospitals and District Hospital in the country. The coverage of the health facilities could be accomplished and conducted successfully because of the extensive support and involvement of the State teams.

In the current publication for the first time, data with respect to Jammu & Kashmir, Ladakh and Dadra and Nagar Haveli & Daman and Diu has been captured separately after their creation as Union Territories. It will help in monitoring and planning of the health services in the newly created UTs.

I believe the publication will benefit those who are involved in the health sector especially in the field of policy, administration, planning, management and research.

We shall be also happy to receive suggestions from all the stakeholders for improvement of this publication.


(Sandhya Krishnamurthy)

Healthy Village, Healthy Nation



एड्स - जानकारी ही बचाव है
Talking about AIDS is taking care of each other



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सत्यमेव जयते



PREFACE

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The Ministry has been bringing out annual publication titled "Rural Health Statistics (RHS)" in India. The present publication of RHS titled "Rural Health Statistics 2019-20" provides data on health infrastructure including health manpower upto 31st March, 2020. The publication is based on the data provided by the States/UTs. The data have been analysed & cross checked for consistency and also validated with the data available from other sources.

To increase the usage and scalability of the publication the data with respect to Urban Health components has been included. Health and Wellness Centres, the basic component of Ministry's flagship scheme 'Ayushman Bharat' has also been covered with respect to number of functional HWCs as on 31st March 2020 reported on Health & Wellness Centre portal.

Major Highlights of the publication are placed at the beginning of the publication, enabling user to have a quick glance on the important findings. Besides highlights, the publication is arranged in two Parts. The Part-1 gives an analysis about the Health Care system in India covering the Rural and Urban Health components. Part -2 provides detailed statistics/ tabulations in various sections.

The Part-1 provides the details about the composition and key elements of Rural Health and Urban Health Systems in India. The critical information has been made easy to understand by pictorial and graphical analysis, wherever possible.

Further, the Part-2 of the publication is divided into nine sections. Section I provides comparative statements of various health infrastructure like number of Facilities, the manpower employed etc. between 2005 (year launch of National Rural Health Mission) & 2020 as well as between 2019 & 2020. Section II provides the district wise health facilities (SCs, PHCs, CHCs, SDHs and DHs) available in India. Section III provides detailed statistics about a number of demographic indicators. Section IV deals with Health Infrastructure in India and building positions in rural areas while Section V is devoted to status of various Health Manpower available at SCs, PHCs, CHCs, SDH & DH in rural areas. Section VI provides statistics on Infrastructure in rural areas while Section VII gives detailed Statistics about Healthcare Manpower in urban areas. Section VIII classified States/UTs on the basis of few parameters of achievements pertaining to rural healthcare. Section IX provides information about health infrastructure and Manpower in the various tribal areas of the country.

This publication would cater the basic needs of effective planning, monitoring and management of health infrastructure to various stakeholders in the health sector and would

serve as a vision document in identifying the gaps in the existing Healthcare Infrastructure and Human Resources in Rural and Tribal areas of the country.

In compiling this publication, I greatly indebted to my colleagues from all the Health Facilities and nodal officers of all the States/UTs who have directly or indirectly involved in uploading the data on HMIS portal. I wish to thank the officers/ officials of Statistics Division of MOHFW, Ms. Anjali Rawat, Director (Statistics), Mr. Anindya Saha, Deputy Director (Statistics), Dr. Abhishek Kumar (Consultant) and Dr. Rakesh Sharma (Consultant) who has helped in giving shape to the publication.

The publication is also available on the Ministry's website. Detailed statistics of the publication in Microsoft Excel format have been incorporated on the website for ease of data analysis. Suggestions for further improvement of the publication will be welcomed on dk.ojha@gov.in.



(D.K. Ojha)

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LIST OF ABBREVIATIONS

List of Abbreviations

- ANM** : Auxiliary Nurse Midwife
- ASHA** : Accredited Social Health Activist
- AYUSH**: Ayurveda, Yoga & Naturopathy, Unani, Siddha and Homoeopathy
- BEE** : Block Extension Educator
- BMS** : Basic Minimum Services
- CBR** : Crude Birth Rate
- CHC** : Community Health Centre
- CPHC**: Comprehensive Primary Health Care
- DH** : District Hospital
- FRU** : First Referral Unit
- HFWTC** : Health and Family Welfare Training Centre
- GDMO**: General Duty Medical Officer
- HA (F)/LHV** : Health Assistant (Female)/Lady Health Visitor
- HA (M)** : Health Assistant (Male)
- HFWTC** : Health And Family Welfare Training Centre
- HWC** : Health and Wellness Centres
- HWC-SC**: Health & Wellness Centres-Sub Centres
- HWC-PHC**: Health & Wellness Centres- Primary Health Centres
- HW (F)/ANM** : Health Worker (Female)/ANM
- HW (M)** : Health Worker (Male)
- IMR** : Infant Mortality Rate
- IPHS**: Indian Public Health Standards
- ISM & H** : Indian System of Medicine and Homeopathy
- LHV**: Lady Health Visitor
- MCH** : Maternal and Child Health
- MMU**: Mobile Medical Unit
- MNP** : Minimum Needs Programme
- MAS**: Mahila Aarogya Samitis
- MO** : Medical Officer
- MOHFW** : Ministry of Health & Family Welfare (GOI)

NHM : National Health Mission
NRHM : National Rural Health Mission
NUHM : National Urban Health Mission
PHC : Primary Health Centre
QPR : Quarterly Progress Report
RCH : Reproductive and Child Health
RKS: Rogi Kalyan Samiti
SC: Sub Centre
SDH : Sub District/ Divisional Hospital
SRS: Sample Registration System
ULBs : Urban Local Bodies
UCHC: Urban Community Health Center
UPHC: Urban Primary Health Center

**मुख्य बिंदु
ग्रामीण स्वास्थ्य सांख्यिकी
2019-20**

मुख्य बिंदु

- 31 मार्च, 2020 तक, क्रमशः 155404 और 2517 उप केंद्र (एससी), 24918 और 5895 प्राथमिक स्वास्थ्य केंद्र (पीएचसी), 5183 और 466 सामुदायिक स्वास्थ्य केंद्र (सीएचसी) देश के ग्रामीण और शहरी क्षेत्रों में कार्यरत हैं।

उप केंद्र (SC)

- राष्ट्रीय स्तर पर वर्ष 2005 से 9378 एससी की संख्या में वृद्धि हुई है। एससी में उल्लेखनीय वृद्धि राजस्थान (2968), गुजरात (1888), छत्तीसगढ़ (1387), मध्य प्रदेश (1352) और कर्नाटक (1045) राज्यों में देखा गया है।
- 31 मार्च 2020 तक शहरी क्षेत्रों में कुल 2517 उपकेंद्र हैं।
- आदिवासी क्षेत्रों में 31 मार्च 2020 तक कुल 29745 सब सेंटर हैं।

प्राथमिक स्वास्थ्य केंद्र (PHCs)

- राष्ट्रीय स्तर पर, वर्ष 2005 की तुलना में 2020 में 1682 पीएचसी की वृद्धि हुई है। वर्ष 2005 से पीएचसी में वृद्धि जम्मू और कश्मीर (589), कर्नाटक (495), गुजरात (407), राजस्थान (381) और छत्तीसगढ़ (275) राज्यों में देखा गया है।
- 31 मार्च 2020 तक शहरी क्षेत्रों में कुल 5895 पीएचसी हैं।
- 31 मार्च 2020 तक जनजातीय क्षेत्रों में कुल 4203 पीएचसी हैं।

सामुदायिक स्वास्थ्य केंद्र (सीएचसी)

- राष्ट्रीय स्तर पर वर्ष 2005 से 1837 सीएचसी की संख्या में वृद्धि हुई है। वर्ष 2005 से सीएचसी में वृद्धि तमिलनाडु (350), उत्तर प्रदेश (325), पश्चिम बंगाल (253), राजस्थान (222) और ओडिशा (146) है।
- 31 मार्च 2020 तक शहरी क्षेत्रों में कुल 466 सीएचसी हैं।
- आदिवासी क्षेत्रों में 31 मार्च 2020 तक कुल 1035 सीएचसी हैं।

पहली रेफरल इकाइयाँ (एफआरयू)

- 31 मार्च 2020 तक, देश में 3313 एफआरयू कार्य कर रहे हैं। इनमें से, 1706, 821, 668 और 118 क्रमशः सीएचसी, एसडीएच, डीएच और मेडिकल कॉलेज के स्तर पर हैं।

स्वास्थ्य और कल्याण केंद्र (एचडब्ल्यूसी)

- भारत में 31 मार्च 2020, तक हेल्थ एंड वेलनेस सेंटर पोर्टल डेटा के अनुसार, कुल 38595 एचडब्ल्यूसी कार्यरत हैं। कुल 18610 एससी को एचडब्ल्यूसी-एससी में परिवर्तित किया गया। साथ ही पीएचसी के स्तर पर 19985 एचडब्ल्यूसी-पीएचसी में परिवर्तित किया गया है। कुल 19985 एचडब्ल्यूसी-पीएचसी में से, 16635 पीएचसी ग्रामीण क्षेत्रों में और 3350 पीएचसी को शहरी क्षेत्रों में परिवर्तित किया गया है।

जनशक्ति की स्थिति में परिवर्तन

- 2005 में उप केंद्रों और पीएचसी पर एएनएम की संख्या 133194 से बढ़कर 2020 में 212593 हो गई है जो कि लगभग 59.6% की वृद्धि हुई है। 31 मार्च, 2020 तक एचडब्ल्यू (एफ) / एएनएम प्रति उप केंद्र और पीएचसी के पदों में समग्र कमी (जो कुछ राज्यों में मौजूदा अधिशेष को छोड़कर) एक एचडब्ल्यू (एफ) / एएनएम के मानक के अनुसार कुल आवश्यकता का 2% है। स्वीकृत पदों की तुलना में 14.1% एचडब्ल्यू (महिला) / एएनएम (एससीएस + पीएचसी में) की रिक्ति है।
- पीएचसी में एलोपैथिक डॉक्टर 2005 में 20308 से बढ़कर 2020 में 28516 हो गए हैं, जो लगभग 40.4% की वृद्धि है। अखिल भारतीय स्तर में पीएचसी पर एलोपैथिक डॉक्टरों की कुल आवश्यकता में 6.8% की कमी है।
- सीएचसी में विशेषज्ञ डॉक्टर 2005 में 3550 से बढ़कर 2020 में 4957 हो गए हैं। इसके अलावा, मौजूदा बुनियादी ढांचे के लिए आवश्यकता की तुलना में सर्जन की 78.9%, प्रसूति एवं स्त्री रोग विशेषज्ञों की 69.7%, चिकित्सकों की 78.2% और बाल रोग विशेषज्ञों में 78.2% की कमी है। कुल मिलाकर, सीएचसी में मौजूदा सीएचसी की आवश्यकता की तुलना में 76.1% विशेषज्ञों की कमी है।
- विशेषज्ञों के अलावा भी लगभग 15342 जनरल ड्यूटी मेडिकल ऑफिसर्स (जीडीएमओ) एलोपैथिक और 272 जीडीएमओ आयुष के साथ 702 आयुष विशेषज्ञ 31 मार्च, 2020 तक सीएचसी में उपलब्ध हैं। इसके अलावा 890 एनेस्थेतिस्ट और 301 आई सर्जन 31 मार्च 2020 तक सीएचसी में भी उपलब्ध हैं।
- 1193 सब डिविजनल / सब डिस्ट्रिक्ट हॉस्पिटल और 810 डिस्ट्रिक्ट हॉस्पिटल (डीएचएस) पूरे देश में 31 मार्च, 2020 तक काम कर रहे हैं। एसडीएच और डीएच में क्रमशः 13399 और 22827 डॉक्टर और 29937 और 80920 पैरामेडिकल स्टाफ उपलब्ध हैं।
- एसडीएच और डीएच के स्तर पर कुल 143538 और 287025 बेड उपलब्ध हैं।

ग्रामीण स्वास्थ्य संरचना का कवरेज (31 मार्च, 2020 तक)
 स्वास्थ्य सुविधा द्वारा कवर की गई औसत ग्रामीण जनसंख्या (1 जुलाई 2020 के अनुसार मध्य-वर्ष की जनसंख्या के आधार पर):

स्वास्थ्य केंद्र	मानदंड	कवर की गई औसत ग्रामीण जनसंख्या
उप केंद्र	300 – 5000	5729
प्राथमिक स्वास्थ्य केंद्र (पीएचसी)	20000 - 30000	35730
सामुदायिक स्वास्थ्य केंद्र (सीएचसी)	80000 - 120000	171779

- औसत कवर किया गया ग्रामीण क्षेत्र (वर्ग किमी)

उप केंद्र	19.87
प्राथमिक स्वास्थ्य केंद्र (पीएचसी)	123.93
सामुदायिक स्वास्थ्य केंद्र (सीएचसी)	595.82

- औसत कवर किया गया रेडियल दूरी (किमी)

उप केंद्र	2.51
प्राथमिक स्वास्थ्य केंद्र (पीएचसी)	6.28
सामुदायिक स्वास्थ्य केंद्र (सीएचसी)	13.77

- औसत कवर गाँवों की संख्या

उप केंद्र	4
प्राथमिक स्वास्थ्य केंद्र (पीएचसी)	27
सामुदायिक स्वास्थ्य केंद्र (सीएचसी)	128

**HIGHLIGHTS
RURAL HEALTH STATISTICS
2019-20**

Key Highlights

- As on 31st March, 2020, there are 155404 and 2517 Sub Centres (SC), 24918 and 5895 Primary Health Centres (PHCs) and 5183 and 466 Community Health Centres (CHCs) respectively which are functioning in rural and urban areas of the country.

Sub Centres (SCs)

- At national level there is an increase of 9378 numbers of SCs from the year 2005. The significant increase in SCs has been observed in the States of Rajasthan (2968), Gujarat (1888), Chhattisgarh (1387), Madhya Pradesh (1352) and Karnataka (1045).
- There are a total of 2517 Sub Centres in the urban areas as on 31st March 2020.
- There are a total of 29745 Sub Centres in the tribal areas as on 31st March 2020.

Primary Health Centres (PHCs)

- At national level, there is an increase of 1682 PHCs in 2020 with comparison to the year 2005. The increase in PHCs from year 2005 has been observed in the States of Jammu & Kashmir (589), Karnataka (495), Gujarat (407), Rajasthan (381) and Chhattisgarh (275).
- There are a total of 5895 PHCs in the urban areas as on 31st March 2020.
- There are a total of 4203 PHCs in the tribal areas as on 31st March 2020.

Community Health Centres (CHCs)

- At national level there is increase of 1837 number of CHCs from the year 2005. The increase in CHCs from year 2005 has been observed in the States of Tamil Nadu (350), Uttar Pradesh (325), West Bengal (253), Rajasthan (222) and Odisha (146).
- There are a total of 466 CHCs in the urban areas as on 31st March 2020.
- There are a total of 1035 CHCs in the tribal areas as on 31st March 2020.

First Referral Units (FRUs)

- As on 31st March 2020, there are 3313 FRUs functioning in the country. Out of these, 1706, 821, 668 and 118 are at the level of CHC, SDH, DH and Medical College respectively.

Health & Wellness Centres (HWCs)

- As per the Health & Wellness Centre portal data, there are total of 38595 HWCs functional in India as on 31st March 2020. Total 18610 SCs have been converted into HWC-SCs. Also at the level of PHC, a total of 19985 PHCs have been converted into

HWC-PHCs. Out of total 19985 HWC-PHCs, total 16635 PHCs has been converted into HWCs in rural areas and 3350 in urban areas.

Changes on the Manpower position

- The number of ANMs at Sub Centres and PHCs has increased from 133194 in 2005 to 212593 in 2020 which amounts to an increase of about 59.6%. As on 31st March, 2020 the overall shortfall (which excludes the existing surplus in some of the States) in the posts of HW(F) / ANM is 2% of the total requirement as per the norm of one HW(F) / ANM per Sub Centre and PHC. There is vacancy of 14.1% HW (Female)/ ANM (at SCs +PHCs) when compared with the sanctioned posts.
- The allopathic doctors at PHCs have increased from 20308 in 2005 to 28516 in 2020, which is about 40.4% increase. There is shortfall of 6.8% of allopathic doctors at PHC, out of the total requirement at all India level.
- The specialist doctors at CHCs have increased from 3550 in 2005 to 4957 in 2020. Moreover, as compared to requirement for existing infrastructure, there is a shortfall of 78.9% of Surgeons, 69.7% of Obstetricians & Gynecologists, 78.2% of Physicians and 78.2% of Pediatricians. Overall, there is a shortfall of 76.1% specialists at the CHCs as compared to the requirement for existing CHCs.
- In addition to the specialists, about 15342 General Duty Medical Officers (GDMOs) Allopathic and 702 AYUSH Specialists along with 2720 GDMO AYUSH is also available at CHCs as on 31st March, 2020. In addition to this there are 890 Anaesthetists and 301 Eye Surgeons are also at CHCs as on 31st March 2020.
- A total of 1193 Sub Divisional/Sub District Hospital and 810 District Hospitals (DHs) are functioning as on 31st March, 2020 throughout the country. There are 13399 & 22827 doctors and 29937 & 80920 paramedical staffs are available at SDH and DH respectively.
- There are total 143538 and 287025 numbers of beds available at the level of SDH and DH.

Coverage of Rural Health Infrastructure (As on 31st March, 2020)

- Average rural population covered by health facility (based on the mid-year population as on 1st July 2020):

Health Facility	Norm	Average rural population covered
Sub Centre	300 - 5000	5729
Primary Health Centre (PHC)	20000 - 30000	35730
Community Health Centre (CHC)	80000 - 120000	171779

- Average rural area (Sq. Km) covered by:

Sub Centre	19.87
Primary Health Centre (PHC)	123.93
Community Health Centre (CHC)	595.82

- Average radial distance (Km) covered) by:

Sub Centre	2.51
Primary Health Centre (PHC)	6.28
Community Health Centre (CHC)	13.77

- Average number of villages covered by:

Sub Centre	4
Primary Health Centre (PHC)	27
Community Health Centre (CHC)	128

भाग 1
भारत में स्वास्थ्य देखभाल प्रणाली

भारत में ग्रामीण स्वास्थ्य देखभाल प्रणाली

ग्रामीण स्वास्थ्य देखभाल प्रणाली - संरचना एवं वर्तमान परिदृश्य

ग्रामीण क्षेत्रों में स्वास्थ्य देखभाल के बुनियादी ढांचे को तीन स्तरीय प्रणाली के रूप में विकसित किया गया है (चार्ट 1 देखें) और निम्नलिखित जनसंख्या मानदंडों पर आधारित है:

तालिका 1.

केंद्र	जनसंख्या मानक*	
	मैदानी क्षेत्र	पहाड़ी/जनजातीय/कठिन क्षेत्र
उप केंद्र	5000	3000
प्राथमिक स्वास्थ्य केंद्र	30000	20000
सामुदायिक स्वास्थ्य केंद्र	120000	80000

*किसी विशेष केन्द्र (एससी, पीएचसी एवं सीएचसी) की सेवाओं के अंतर्गत कवर किए गए व्यक्तियों की संख्या।

1.1 31 मार्च, 2020 तक, 155404 उप स्वास्थ्य केंद्र (एससी), 24918 प्राथमिक स्वास्थ्य केंद्र (पीएचसी) और 5183 सामुदायिक स्वास्थ्य केंद्र (सीएचसी) हैं जो देश के ग्रामीण क्षेत्रों में कार्यरत हैं। (खंड IV, तालिका 6)

उप केंद्र (एस.सी.)

1.2 उप केंद्र प्राथमिक स्वास्थ्य देखभाल प्रणाली और समुदाय के बीच सबसे अधिक परिधीय और पहला संपर्क बिंदु है। उप-केंद्रों को पारस्परिक परिवर्तन से संबंधित कार्य सौंपे गए हैं ताकि व्यवहार

31 मार्च, 2020 तक, देश में 155404 ग्रामीण उप स्वास्थ्य केंद्र कार्यात्मक हैं।

वर्ष 2005 की तुलना में ग्रामीण उप स्वास्थ्य केंद्रों में राजस्थान (2968), गुजरात (1888), छत्तीसगढ़ (1387), मध्य प्रदेश (1352), और कर्नाटक (1045) राज्यों में महत्वपूर्ण बढ़ोतरी देखी गयी है।

परिवर्तन लाया जा सके और मातृ एवं शिशु स्वास्थ्य, परिवार कल्याण, पोषण, टीकाकरण, दस्त नियंत्रण और संचारी रोगों और गैर संचारी रोग के नियंत्रण के संबंध में सेवाएं प्रदान की जा सकें। प्रत्येक उप केंद्र को कम से कम एक सहायक नर्स मिडवाइफ) एएनएम / (महिला स्वास्थ्य कार्यकर्ता और एक पुरुष स्वास्थ्य कार्यकर्ता द्वारा प्रबंधित किया जाना आवश्यक है

)स्टाफ संरचना के ब्यौरे के विवरण के लिए, देखें बॉक्स 1 और भारतीय सार्वजनिक स्वास्थ्य मानकों (आईपीएचएस) के तहत अनुशंसित स्टाफ संरचना) देखें अनुलग्नक-1 देखें)। एनआरएचएम के तहत, अनुबंध के आधार पर एक अतिरिक्त दूसरी एएनएम का प्रावधान है। एक महिला स्वास्थ्य निरीक्षक (एलएचवी (को छह उप केंद्रों की देखरेख का काम सौंपा जाता है। भारत सरकार एएनएम और एलएचवी का वेतन वहन करती है जबकि पुरुष स्वास्थ्य कार्यकर्ता का वेतन राज्य सरकारों द्वारा वहन किया जाता है। स्वैप योजना के तहत, भारत सरकार ने अप्रैल, 2002 से राज्य सरकारों / केंद्र शासित प्रदेशों में अतिरिक्त 39554 उप केंद्रों का अधिग्रहण कर लिया है, राज्य सरकारों / संघ शासित प्रदेशों को हस्तांतरित 5434 ग्रामीण परिवार कल्याण केंद्रों के बदले। 31 मार्च, 2020तक देश के ग्रामीण क्षेत्रों में कार्यरत कुल 155404 उप केंद्र हैं।)खंड IV, तालिका(6 । राष्ट्रीय स्तर पर वर्ष 2005 से एससी की संख्या में 9378 की वृद्धि हुई है। उप स्वास्थ्य केन्द्रों में राजस्थान

(2968), गुजरात (1888), छत्तीसगढ़ (1387), मध्य प्रदेश (1352), और कर्नाटक (1045) राज्यों में महत्वपूर्ण बढ़ोतरी देखी गयी है।) (अनुभाग I, तुलनात्मक कथन 1)।

प्राथमिक स्वास्थ्य केंद्र (पीएचसी):

1.3 पीएचसी ग्राम समुदाय और चिकित्सा अधिकारी के बीच पहला संपर्क बिंदु है। पीएचसी को स्वास्थ्य देखभाल के निवारक और प्रचार पहलुओं पर जोर देने के साथ ग्रामीण आबादी के लिए एक एकीकृत उपचारात्मक और निवारक स्वास्थ्य देखभाल प्रदान करने की परिकल्पना की गई थी। पीएचसी राज्य सरकारों

राष्ट्रीय स्तर पर, 31 मार्च 2020 तक ग्रामीण क्षेत्रों में 24918 पीएचसी कार्यरत हैं। वर्ष की तुलना में 2005 ग्रामीण पीएचसी में जम्मू और कश्मीर (589), कर्नाटक (495), गुजरात (407), राजस्थान (381) और छत्तीसगढ़ (275) राज्यों में महत्वपूर्ण बढ़ोतरी देखी गयी है।

द्वारा न्यूनतम आवश्यकताओं कार्यक्रम (एमएनपी) / बुनियादी न्यूनतम सेवाओं (बीएमएस) कार्यक्रम के तहत स्थापित और रखरखाव किया जाता है। न्यूनतम आवश्यकता (बॉक्स -1) के अनुसार, एक पीएचसी को 14 पैरामेडिकल और अन्य स्टाफ द्वारा समर्थित चिकित्सा अधिकारी द्वारा देखा जाना है (आईपीएचएस मानदंडों के लिए अनुबंध- I देखें)। एनआरएचएम के तहत, अनुबंध के आधार पर पीएचसी पर दो अतिरिक्त स्टाफ नर्सों के लिए प्रावधान है। यह 6 उप केंद्रों के लिए एक रेफरल इकाई के रूप में कार्य करता है और इसमें रोगियों के लिए 4-6 बेड हैं। PHC की गतिविधियों में उपचारात्मक, निवारक, प्रोत्साहन और परिवार कल्याण सेवाएं शामिल हैं। 31 मार्च, 2020 तक देश के ग्रामीण क्षेत्रों में 24918 कार्यरत हैं (अनुभाग IV, तालिका 6)। राष्ट्रीय स्तर पर वर्ष 2005 से 1682 पीएचसी की वृद्धि हुई है (अनुभाग I, तुलनात्मक कथन 1)।

सामुदायिक स्वास्थ्य केंद्र (सीएचसी):

1.4 एमएनपी / बीएमएस कार्यक्रम के तहत राज्य सरकार द्वारा सीएचसी की स्थापना और रखरखाव किया जा रहा है। न्यूनतम मानदंडों) बॉक्स- 1) के अनुसार, एक सीएचसी को चार चिकित्सा विशेषज्ञों यानी सर्जन,

31 मार्च 2020 तक देश के ग्रामीण क्षेत्रों में 5183 सीएचसी कार्यरत हैं। राष्ट्रीय स्तर पर वर्ष 2005 से सीएचसी की संख्या में 1837 की बढ़ोतरी हुई है।

चिकित्सक, स्त्री रोग विशेषज्ञ और बाल रोग विशेषज्ञ तथा उनके सहयोग के लिए 21 पराचिकित्सा एवं अन्य कर्मचारी अपेक्षित हैं) आईपीएचएस मानदंडों के लिए अनुबंध -I देखें। इसमें एक ओटी, एक्स-रे, लेबर रूम और प्रयोगशाला सुविधाओं के साथ 30-इन-डोर बेड हैं। यह 4 PHCs के लिए एक रेफरल केंद्र के रूप में कार्य करता है और प्रसूति देखभाल और विशेषज्ञ परामर्श के लिए सुविधाएं भी प्रदान करता है। 31 मार्च, 2020 तक, देश के ग्रामीण क्षेत्रों में 5 183 सीएचसी कार्यरत हैं। वर्ष 2005 की तुलना में ग्रामीण सामुदायिक स्वास्थ्य केन्द्रों में तमिलनाडु (350), उत्तर प्रदेश (325), पश्चिम बंगाल (253), राजस्थान (222) और ओडिशा (146) राज्यों में महत्वपूर्ण बढ़ोतरी देखी गयी है। (अनुभाग IV, तालिका 6)।

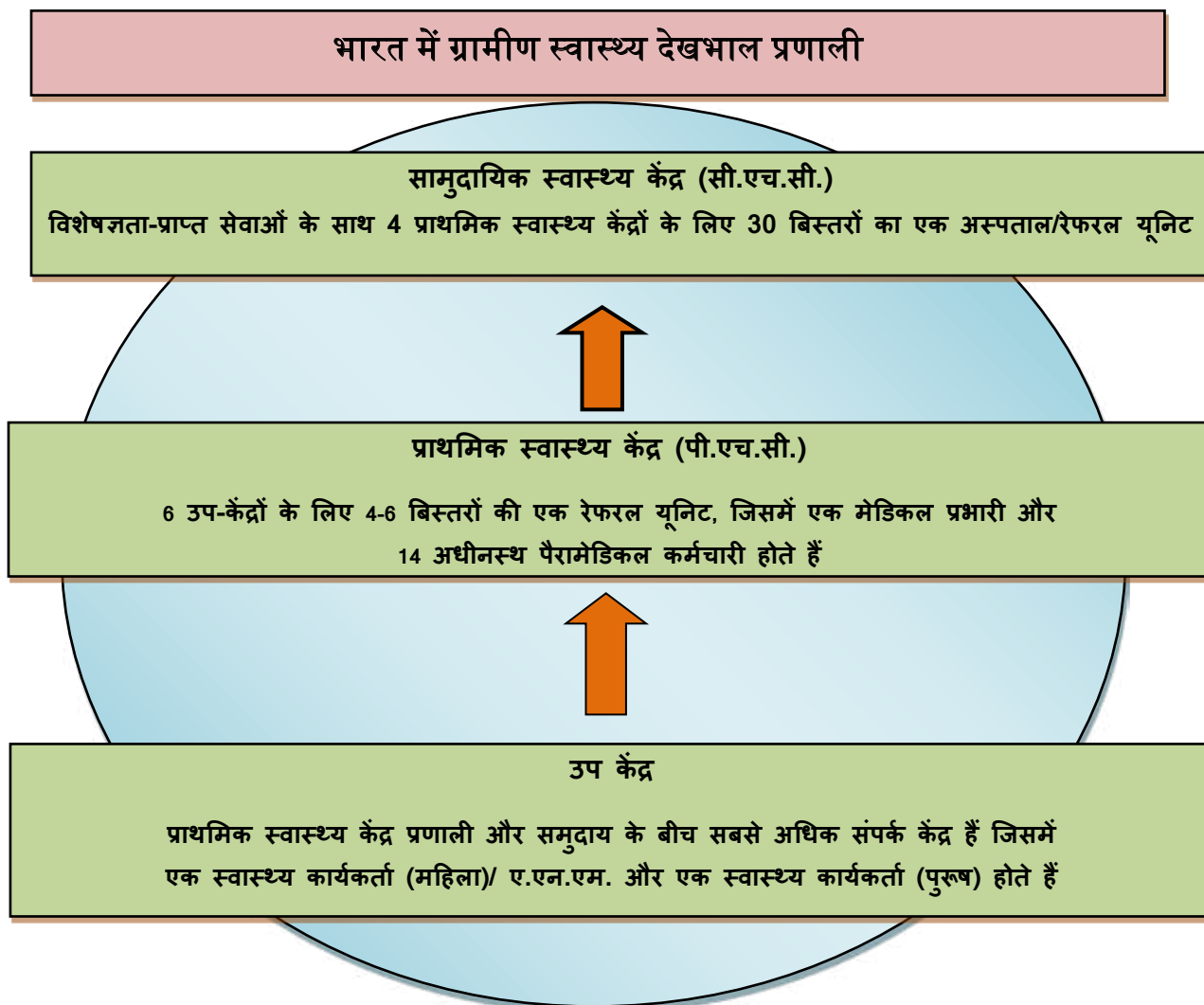
1.5 ग्रामीण स्वास्थ्य अवसंरचना के प्रत्येक स्तर के लिए जनसंख्या मानकों तथा इन मानकों की तुलना में मौजूदा स्थिति का ब्योरा बॉक्स-2 में दिया गया है।

प्रथम रेफरल इकाई (एफआरयू)

1.6 किसी मौजूदा स्वास्थ्य सेवा (जिला अस्पताल, उप-मंडल अस्पताल, सामुदायिक स्वास्थ्य केंद्र आदि) को पूर्णतः संचालित प्रथम रेफरल इकाई (एफआरयू) तभी घोषित किया जा सकता है जब वह उन सभी आपातकालीन सुविधाओं, जिन्हें किसी अस्पताल द्वारा मुहैया कराना अपेक्षित होता है, के अलावा आपातकालीन प्रसूति एवं नवजात शिशु स्वास्थ्य देखभाल सेवाएं 24 घंटे उपलब्ध कराने हेतु सुसज्जित हो। यह ध्यान देना चाहिए कि एफआरयू के रूप में घोषित किए जाने वाले किसी स्वास्थ्य केंद्र के तीन महत्वपूर्ण निर्धारक होते हैं: i) सीजेरियन ऑपरेशन जैसे सर्जिकल उपचारों सहित आपातकालीन प्रसूति देखभाल; ii) नवजात देखभाल; और iii) 24 घंटे रक्त भंडारण की सुविधा।

31 मार्च 2020 तक, देश में 3313 FRU कार्य कर रहे हैं। इनमें से क्रमशः 1706, 821, 668 और 118 सीएचसी, एसडीएच, डीएच और मेडिकल कॉलेज के स्तर पर हैं। (अनुभाग VI, तालिका 47)।

चार्ट.1



2. राष्ट्रीय ग्रामीण स्वास्थ्य मिशन के तहत ग्रामीण स्वास्थ्य अवसंरचना का सुदृढीकरण

2.1 राष्ट्रीय ग्रामीण स्वास्थ्य मिशन उन राज्यों पर विशेष ध्यान देने के साथ पूरे देश में ग्रामीण आबादी को प्रभावी सस्ती स्वास्थ्य सेवा प्रदान करना चाहता है, जिनके पास कमजोर सार्वजनिक स्वास्थ्य संकेतक और / या कमजोर बुनियादी ढांचा है।

2.2 एन.आर.एच.एम. का उद्देश्य स्वास्थ्य प्रणाली में संरचनात्मक सुधार लाना है जिससे वह बढ़ाए गए आबंटनों का प्रभावकारी ढंग से उपयोग करने और उन नीतियों, जो देश में जन-स्वास्थ्य प्रबंधन तथा दी जाने वाली सेवा को मजबूत बनाने हेतु तैयार की गई हैं, को आगे बढ़ाने में सक्षम बनाया जा सके। इसके मुख्य घटक हैं - प्रत्येक गांव में एक महिला स्वास्थ्य कार्यकर्ता का प्रावधान; पंचायत की ग्राम स्वास्थ्य, स्वच्छता एवं पोषण समिति (वीएचएस एंड एनसी) की अध्यक्षता में गठित एक स्थानीय दल के माध्यम से एक ग्राम स्वास्थ्य योजना तैयार करना; प्रभावकारी उपचारात्मक देखभाल हेतु ग्रामीण अस्पताल का सुदृढीकरण और भारतीय जन-स्वास्थ्य मानकों (आई.पी.एच.एस.) के माध्यम से उसे मापने योग्य तथा समुदाय के प्रति उत्तरदायी बनाना; निचले स्तर से लेकर ऊपरी स्तर के स्वास्थ्य एवं परिवार कल्याण कार्यक्रमों का एकीकरण; निधि एवं अवसंरचना का सर्वोत्कृष्ट उपयोग तथा प्राथमिक स्वास्थ्य सेवाओं का सुदृढीकरण। इसमें स्थानीय स्वास्थ्य परंपराओं को पुनः सशक्त करने तथा आयुष को जन-स्वास्थ्य प्रणाली की मुख्यधारा में लाने पर विचार किया गया है। साथ ही, इसका उद्देश्य जिला स्वास्थ्य योजना के माध्यम से स्वच्छता एवं स्वास्थ्य विज्ञान, पोषण तथा सुरक्षित पेयजल जैसे स्वास्थ्य निर्धारकों के साथ स्वास्थ्य संबंधी समस्याओं को प्रभावकारी ढंग से एकीकृत करना भी है। इसमें जिला स्वास्थ्य प्रबंधन हेतु कार्यक्रमों के विकेंद्रीकरण तथा, विशेष रूप से अधिक ध्यान दिए जाने वाले राज्यों में, जन-स्वास्थ्य अवसंरचना हेतु पूरी न की गई आवश्यकता सहित अंतर्राज्यीय जिलों के बीच व्याप्त विषमताओं को दूर करने पर भी विचार किया गया है। इसका उद्देश्य ग्रामीण आबादी, विशेष रूप से गरीब महिलाओं एवं बच्चों को एक-समान, किफायती, जवाबदेह एवं प्रभावकारी प्राथमिक स्वास्थ्य देखभाल की उपलब्धता में सुधार लाना भी है।

बॉक्स 1.

स्टाफ संरचना (न्यूनतम मानक)		
क.	उप केंद्र के कर्मचारी	पदों की संख्या
1	स्वास्थ्य कार्यकर्ता (महिला)/ए.एन.एम.	1
2	अतिरिक्त द्वितीय ए.एन.एम.(संविदा पर)	1
3	स्वास्थ्य कार्यकर्ता (पुरुष).....	1
4	स्वैच्छिक कार्यकर्ता.....	1
	कुल (संविदात्मक कर्मचारियों को छोड़कर):	3
ख.	नए प्राथमिक स्वास्थ्य केंद्र के लिए कर्मचारी	
1	चिकित्सा अधिकारी.....	1
2	फार्मासिस्ट	1

3	नर्स मिड-वाइफ (स्टाफ नर्स).....	1+2	अतिरिक्त स्टाफ नर्स संविदा पर	
4	स्वास्थ्य कार्यकर्ता (महिला)/ ए.एन.एम.....			1
5	स्वास्थ्य प्रशिक्षक			1
6	स्वास्थ्य सहायक (पुरुष).....			1
7	स्वास्थ्य सहायक (महिला)/एल.एच.वी.....			1
8	प्रवर श्रेणी लिपिक			1
9	अवर श्रेणी लिपिक			1
10	प्रयोगशाला तकनीशियन			1
11	वाहन चालक (वाहन उपलब्ध रहने पर).....			1
12	चतुर्थ श्रेणी			4
	कुल (संविदात्मक कर्मचारियों को छोड़कर):.....			15
ग.	सामुदायिक स्वास्थ्य केंद्र के लिए कर्मचारी:			
1	चिकित्सा अधिकारी #.....			4
2	नर्स मिड-वाइफ (स्टाफ नर्स).....			7
3	ड्रेसर			1
4	फार्मासिस्ट/कंपाउण्डर			1
5	प्रयोगशाला तकनीशियन			1
6	रेडियोग्राफर			1
7	वार्ड बॉय			2
8	धोबी			1
9	सफाई कर्मचारी			3
10	माली			1
11	चौकीदार			1
12	आया			1
13	चपरासी			1
	कुल:			25
#:	सर्जन, प्रसूति विशेषज्ञ, फिजीशियन एवं बाल-चिकित्सक के रूप में कार्य करने हेतु अर्हता प्राप्त या विशेष रूप से प्रशिक्षित। उसी प्रकार मौजूदा चिकित्सा अधिकारियों में से एक या तो अर्हता-प्राप्त या जन-स्वास्थ्य में विशेष रूप से प्रशिक्षित होना चाहिए।			
नोट:	उपर्युक्त मानक स्टाफ संरचना हेतु न्यूनतम मानक है जिसमें एनआरएचएम के तहत निर्धारित अतिरिक्त कर्मचारी शामिल हैं जैसा इस अध्याय के अनुलग्नक-1 में दिया गया है।			

बॉक्स 2.

ग्रामीण स्वास्थ्य अवसंरचना-मानक* एवं उपलब्धियों का स्तर (अखिल भारत)					
क्र.सं.	संकेतक	राष्ट्रीय मानक		स्थिति (2020)	
		सामान्य	जनजातीय/ पहाड़ी/ मरुस्थलीय	सामान्य	जनजातीय/ पहाड़ी/ मरुस्थलीय
1	ग्रामीण जनसंख्या (मध्य वर्ष की जनसंख्या 2019, 1 जुलाई 2019 को) द्वारा कवर:				
	उप केंद्र	5000	3000	5729	3381
	प्राथमिक स्वास्थ्य केंद्र (पी.एच.सी.)	30000	20000	35730	23930
	सामुदायिक स्वास्थ्य केंद्र (सी.एच.सी.)	120000	80000	171779	97178

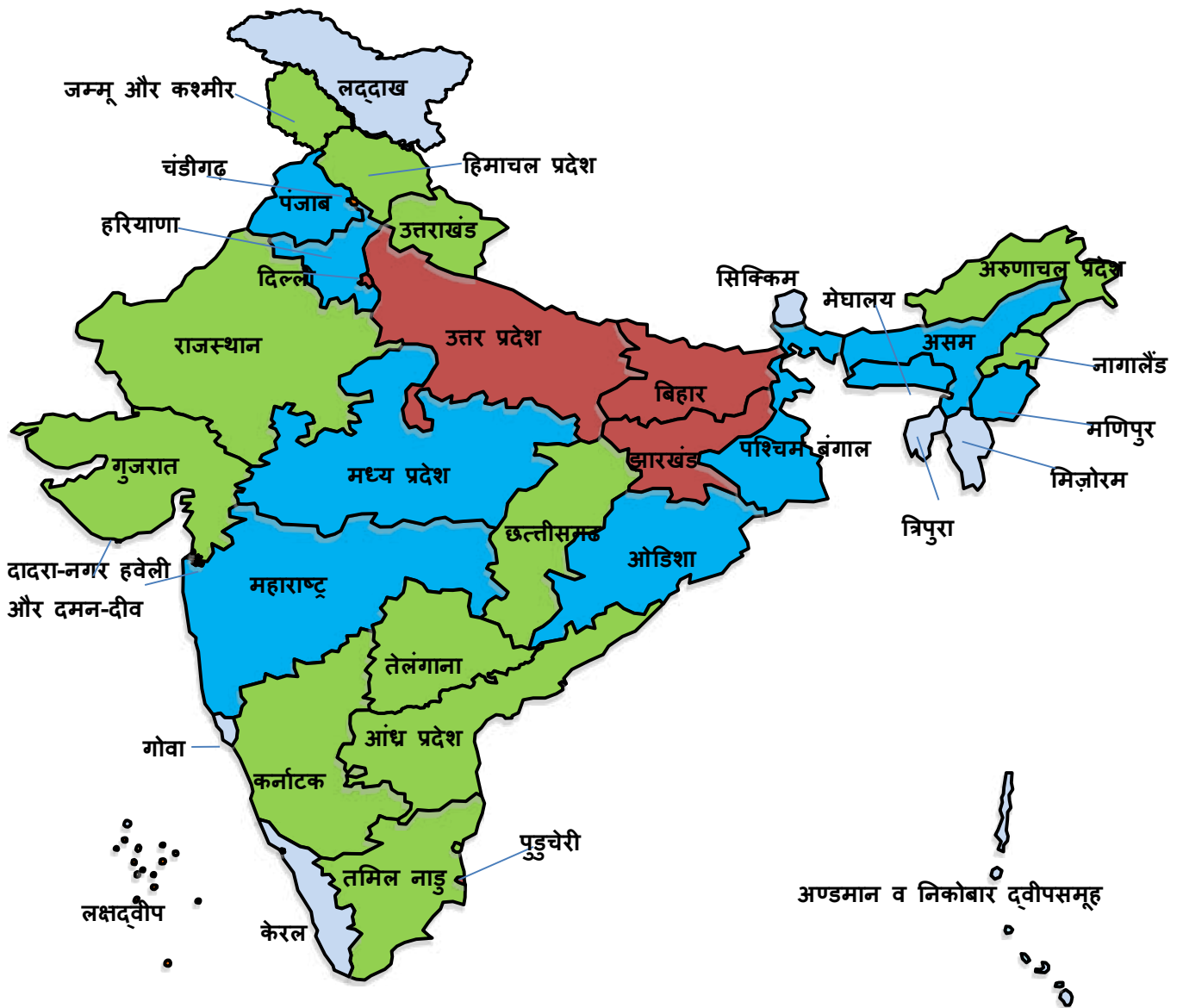
2	प्रति पी.एच.सी. उप-केंद्रों की संख्या	6	6	7
3	प्रति सी.एच.सी. प्राथमिक स्वास्थ्य केंद्रों की संख्या	4	5	4
4	निम्नलिखित में शामिल ग्रामीण जनसंख्या (मध्य वर्ष की जनसंख्या 2019, 1 जुलाई 2020 को)			
	एचडब्ल्यू (एफ) (उप केन्द्रों और पीएचसीओ में)		4188	
	एचडब्ल्यू (एफ + एम+) (उप-केन्द्रों में)		3748	
5	पीएचसी में एचए (एफ + एम) और उप केन्द्रों में एचडब्ल्यू (एफ + एम) का अनुपात	सामान्य	जनजातीय/पहाड़ी/मरुस्थलीय	
		1:19	1:7	
7	निम्नलिखित में शामिल औसत ग्रामीण क्षेत्रफल (वर्ग किलोमीटर)	ग्रामीण क्षेत्र	जनजातीय क्षेत्र	
	उप-केन्द्र	19.87	18.48	
	पीएचसी	123.93	130.75	
	सीएचसी	595.82	530.96	
8	निम्नलिखित में शामिल रेडियल दूरी (किलोमीटरः)	ग्रामीण क्षेत्र	जनजातीय क्षेत्र	
	उप-केन्द्र	2.51	2.42	
	पीएचसी	6.28	6.45	
	सीएचसी	13.77	13.00	
9	निम्नलिखित में शामिल गावों की औसत संख्याः	ग्रामीण क्षेत्र		
	उप केन्द्र	4	-	
	पीएचसी	27	-	
	सीएचसी	128	-	

एम: पुरुष एफ: महिला

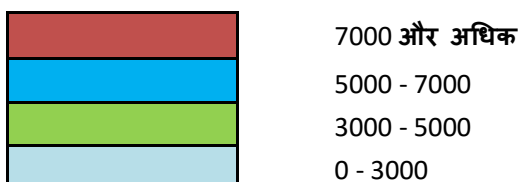
* विशेष संकाय (एससी, पीएचसी और सीएचएस) की सेवाओं के तहत कवर व्यक्तियों की संख्या।

31 मार्च, 2020 तक उप केंद्र, पीएचसी और सीएचसी द्वारा कवर की गई जनसंख्या क्रमशः 5729, 35730 और 171779 है (अनुभाग VIII, तालिका 64, 65 & 66)। उप केंद्र, पीएचसी और सीएचसी द्वारा कवर की गई औसत आबादी में राज्य-वार भिन्नताओं का प्रतिनिधित्व किया जाता है **मानचित्र 1, 2 और 3** क्रमशः।

मानचित्र 1. 31st मार्च, 2020 तक उप केन्द्र (एससी) के अन्तर्गत औसत ग्रामीण जनसंख्या (1 जुलाई 2020 को मध्य-वर्ष की जनसंख्या)

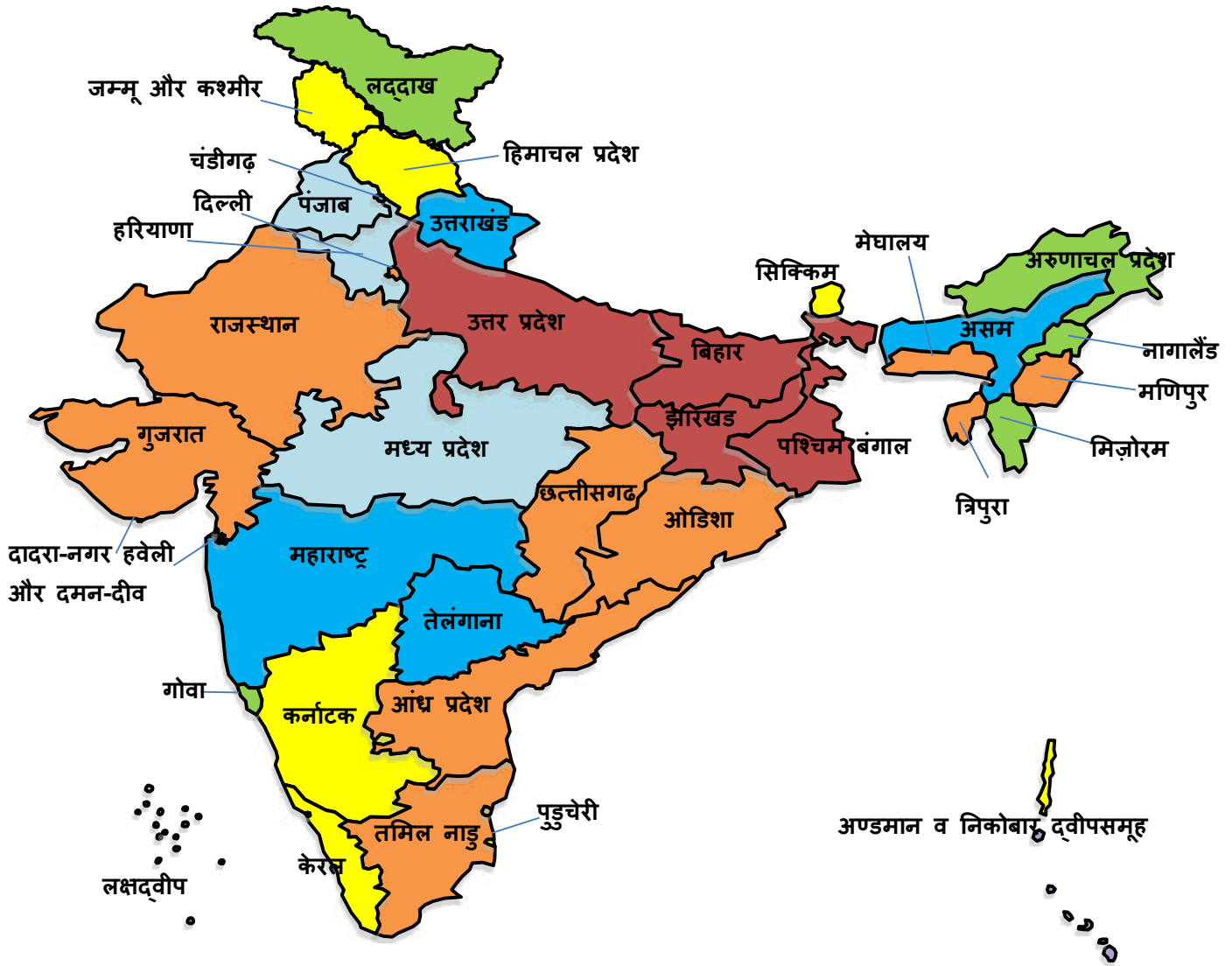


उप केन्द्र के अन्तर्गत ग्रामीण जनसंख्या



नोट: इन मानचित्रों में दर्शाई गई सीमाएं और नाम संयुक्त राष्ट्र संघ द्वारा आधिकारिक रूप से स्वीकृत नहीं हैं।

मानचित्र 2. 31st मार्च, 2020 तक पीएचसी के अन्तर्गत ग्रामीण जनसंख्या (1 जुलाई 2020 को मध्य-वर्ष की जनसंख्या)

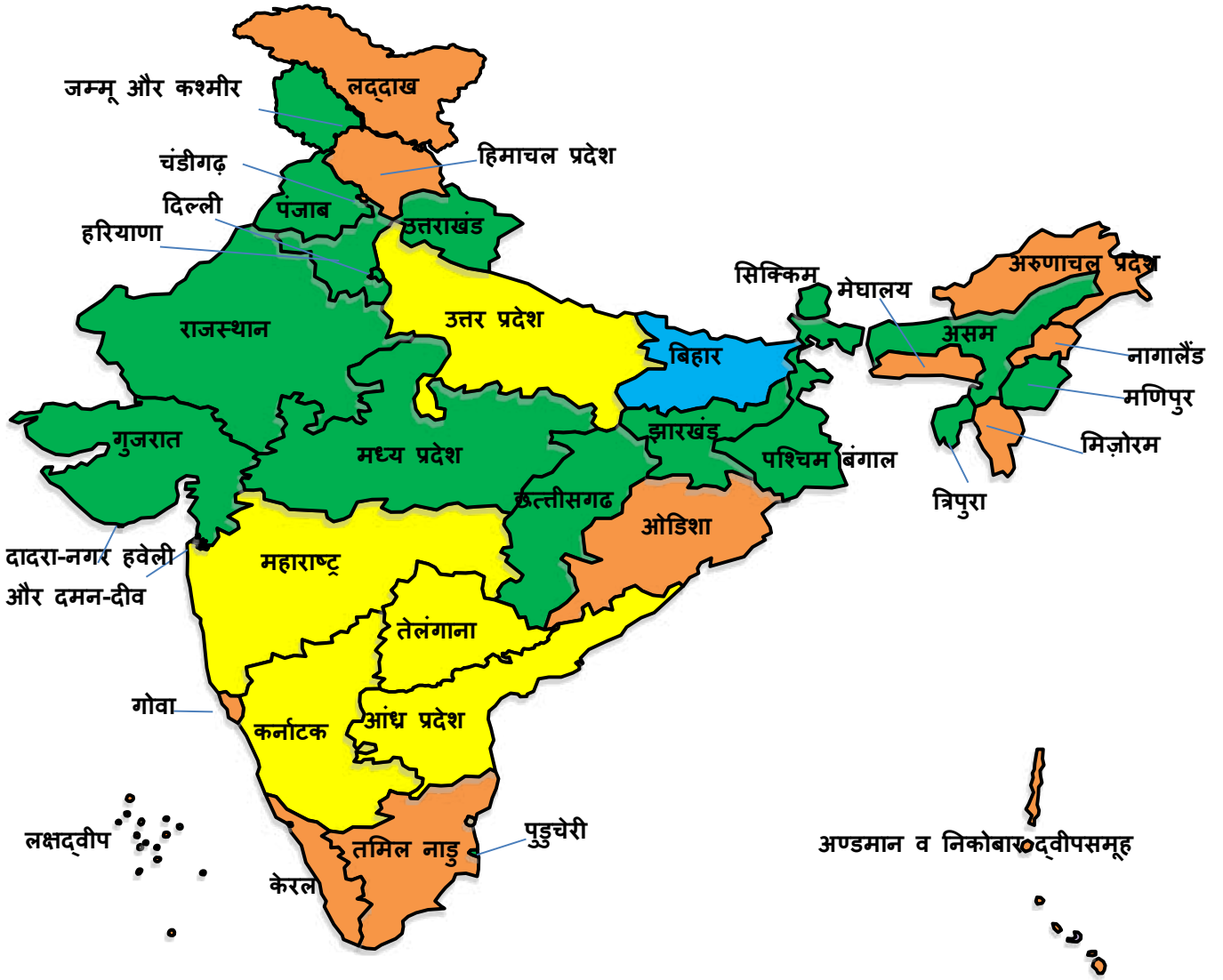


पीएचसी के अन्तर्गत ग्रामीण जनसंख्या

	50000 और अधिक
	40000 - 50000
	30000 - 40000
	20000 - 30000
	10000 - 20000
	0 - 10000

नोट: इन मानचित्रों में दर्शाई गई सीमाएं और नाम संयुक्त राष्ट्र संघ द्वारा आधिकारिक रूप से स्वीकृत नहीं हैं।

मानचित्र 3. 31st मार्च, 2020 तक सीएचसी के अन्तर्गत ग्रामीण जनसंख्या (1 जुलाई 2020 को मध्य-वर्ष की जनसंख्या)



सीएचसी के अन्तर्गत ग्रामीण जनसंख्या

	500000 और अधिक
	200000 - 500000
	100000 - 200000
	0 - 100000

नोट: इन मानचित्रों में दर्शाई गई सीमाएं और नाम संयुक्त राष्ट्र संघ द्वारा आधिकारिक रूप से स्वीकृत नहीं हैं।

3.1. एनएचएम की प्रमुख और अनुपूरक कार्यनीतियां:

3.1 भारत में स्वास्थ्य सेवा प्रणाली - राष्ट्रीय स्वास्थ्य मिशन:

राष्ट्रीय स्वास्थ्य मिशन में दो उप-मिशन, राष्ट्रीय ग्रामीण स्वास्थ्य मिशन और राष्ट्रीय शहरी स्वास्थ्य मिशन शामिल हैं। यह मिशन लचीला और गतिशील है और इसका उद्देश्य स्वास्थ्य प्रणालियों, संस्थानों और क्षमता निर्माण के माध्यम से स्वास्थ्य सेवा के सार्वभौमिक उपयोग की उपलब्धि सुनिश्चित करने की दिशा में राज्यों का मार्गदर्शन करना है। एनएचएम की दृष्टि "स्वास्थ्य के व्यापक सामाजिक निर्धारकों को संबोधित करने के लिए प्रभावी अंतर-क्षेत्रीय अभिसरण कार्रवाई के साथ, लोगों की जरूरतों के प्रति जवाबदेह और उत्तरदायी, समान, सस्ती और गुणवत्तापूर्ण स्वास्थ्य देखभाल सेवाओं के लिए सार्वभौमिक पहुंच की प्राप्ति" है। मिशन का उद्देश्य विशेष रूप से बेहतर स्वास्थ्य बुनियादी ढांचा, मानव संसाधन का संवर्द्धन, सेवा स्तर में वृद्धि और कार्यक्रम के विकेंद्रीकरण से जिला स्तर तक संदर्भ विशिष्ट, सुविधाजनक आधारित हस्तक्षेप, बेहतर इंद्रा और अंतर-क्षेत्रीय अभिसरण की आवश्यकता और संसाधनों के प्रभावी उपयोग को बढ़ावा देने से शहरी और ग्रामीण स्वास्थ्य सेवाओं में गरीबों और कमजोरों के लिए अंतर को कम करना है। एनएचएम सभी राज्यों की राजधानियों, जिला मुख्यालयों और अन्य शहरों / कस्बों को 50,000 और उससे अधिक आबादी वाले (2011 की जनगणना के अनुसार) चरणबद्ध तरीके से शामिल करता है। 50,000 से कम आबादी वाले शहरों और कस्बों को एनएचएम के तहत कवर किया जाना जारी रहेगा।

एनएचएम, राज्यों को आईपीएचएस के जनसंख्या मानदंडों के अनुसार जिलों में माध्यमिक देखभाल स्वास्थ्य सुविधाओं (डीएच / एसडीएच / सीएचसी) की कमी को दूर करने में सहायता प्रदान करता है। यह अतिरिक्त बुनियादी ढांचे, मानव संसाधन, ड्रग्स, डायग्नोस्टिक्स और उपकरणों के साथ-साथ इन स्वास्थ्य सुविधाओं के उन्नयन में राज्यों का समर्थन करता है और सेवा वितरण के लिए इन स्वास्थ्य सुविधाओं को मजबूत करने के लिए आवश्यक तकनीकी और वित्तीय सहायता प्रदान करता है। आयुष्मान भारत के तहत, ग्रामीण और शहरी सभी पीएचसी और एससी को व्यापक प्राथमिक स्वास्थ्य सेवाओं के प्रावधान के लिए पूरे देश में स्वास्थ्य और कल्याण केंद्र (एचडब्ल्यूसी) के रूप में उन्नत किया जा रहा है।

2018 तक, एनएचएम के प्रमुख प्रोग्रामेटिक घटकों में स्वास्थ्य प्रणाली को मजबूत करना, संचारी, गैर-संचारी रोग, आरएमएनसीएच + ए, टीकाकरण आदि शामिल हैं। आयुष्मान भारत के कार्यान्वयन के साथ, व्यापक देखभाल और उचित लिंकेज का आश्वासन देने के लिए चयनात्मक प्राथमिक देखभाल से एक प्रतिमान बदलाव है। स्वास्थ्य और कल्याण केंद्रों (एचडब्ल्यूसी) के माध्यम से रेफरल अस्पतालों में। एचडब्ल्यूसी के प्रमुख तत्वों में विस्तारित सेवा पैकेज शामिल है, जो सार्वभौमिक स्वास्थ्य कवरेज के लिए एनएचपी 2017 की प्रतिबद्धता को पूरा करने वाले व्यापक प्राथमिक स्वास्थ्य देखभाल के प्रावधान के लिए एक रणनीतिक घटक है। इसके अलावा, एचडब्ल्यूसी के अन्य प्रमुख घटक मध्य-स्तर के स्वास्थ्य सेवा प्रदाताओं, दवाओं की विस्तारित सीमा, नई तकनीक और देखभाल निदान के बिंदु, मजबूत आईटी-प्रणाली, सामुदायिक गतिशीलता और स्वास्थ्य प्रचार गतिविधियों के माध्यम से एचआर की विस्तारित सीमा है।

आयुष्मान भारत के तहत एचडब्ल्यूसी ने 12 सेवा पैकेजों को शामिल करने के लिए सेवा वितरण की सीमा का विस्तार किया है:

- i. गर्भावस्था और बाल-जन्म में देखभाल
- ii. नवजात शिशु और शिशु स्वास्थ्य देखभाल सेवाएँ
- iii. बचपन और किशोर देखभाल सेवाएँ
- iv. परिवार नियोजन, गर्भनिरोधक सेवाएँ और अन्य प्रजनन देखभाल सेवाएँ
- v. राष्ट्रीय स्वास्थ्य कार्यक्रमों सहित संचारी रोगों का प्रबंधन
- vi. तीव्र सरल बीमारी और छोटी बीमारी के लिए संचारी रोगों और आउट पेशेंट देखभाल का प्रबंधन
- vii. एनसीडी की स्क्रीनिंग, रोकथाम, नियंत्रण और प्रबंधन
- viii. सामान्य नेत्र और ईएनटी समस्याओं की देखभाल
- ix. बुनियादी मौखिक स्वास्थ्य देखभाल
- x. बुजुर्ग और उपशामक देखभाल सेवाएँ
- xi. आपातकालीन चिकित्सा सेवाएँ
- xii. मानसिक स्वास्थ्य रोगों की जांच और बुनियादी प्रबंधन

एनएचएम के तहत प्रमुख पहल और रणनीतियाँ

- एनएचएम भारतीय सार्वजनिक स्वास्थ्य मानकों (आईपीएचएस) के विरुद्ध सार्वजनिक स्वास्थ्य सुविधाओं डीएच, एसडीएच और सीएचसी के विभिन्न स्तरों पर बुनियादी सुविधाओं, उपकरणों, दवाओं और निदान की कमी को दूर करने में राज्यों को सहायता प्रदान करता है। पीएचसी, यूपीएचसी और एससी को आयुष्मान भारत और आईपीएचएस मानकों के साथ एचडब्ल्यूसी के रूप में मजबूत किया जा रहा है।
- राज्यों में स्वास्थ्य, स्वास्थ्य, मानव संसाधन की तैनाती के आईपीएचएस मानदंडों को प्राप्त करने में मदद करने के लिए आवश्यक कर्मचारियों की भर्ती के लिए ग्रामीण, सुदूर और अनछुए क्षेत्रों में स्वास्थ्य कर्मियों की बेहतर भर्ती, प्रतिधारण और प्रेरणा, मध्य-स्तरीय देखभाल प्रदाताओं का विकास और उपयुक्त कौशल सेट, और इन-सर्विस प्रशिक्षण के साथ नए संवर्गों का निर्माण का समर्थन करने के लिए नीतियों के माध्यम से स्वास्थ्य में मानव संसाधन के लिए एक व्यापक रणनीति विकसित करने के लिए समर्थन करता है।
- कुशल एचआर की कमी को दूर करने के लिए, राज्यों को प्रदर्शन आधारित प्रोत्साहन देने, उच्च वेतन या दूरदराज और ग्रामीण क्षेत्रों में सेवा देने के लिए भत्ते, कैंपस की भर्तियों को बढ़ावा देने और डॉक्टरों और नर्सों की शॉर्ट-इन सर्विस कुशल पाठ्यक्रमों आदि के माध्यम से क्षमता बढ़ाने के लिए लचीलापन दिया गया है।
- एनआरएचएम स्वास्थ्य सुविधाओं जैसे एससी-एचडब्ल्यूसी, पीएचसी- एचडब्ल्यूसी, सीएचसी और डीएच में आयुष सेवाओं के सह-स्थान का भी समर्थन करता है।
- आपातकाल के दौरान सुनिश्चित रेफरल लिंकेज और एम्बुलेंस की उपलब्धता को मजबूत करने के लिए, एनएचएम राज्यों / संघ राज्य क्षेत्रों में आपातकालीन चिकित्सा सेवाओं के लिए एक कार्यात्मक राष्ट्रीय एम्बुलेंस सेवा (एनएएस) नेटवर्क के माध्यम से तकनीकी और वित्तीय सहायता प्रदान करता है।

- एनएचएम के तहत राष्ट्रीय मोबाइल चिकित्सा इकाइयाँ विशेष रूप से दूरस्थ, कठिन, कम सेवा वाले और गैर-पंजीकृत क्षेत्रों में रहने वाले लोगों को सार्वजनिक स्वास्थ्य देखभाल तक पहुंच की सुविधा प्रदान करती हैं।
- आशा के माध्यम से घरेलू स्तर पर बेहतर स्वास्थ्य सेवा तक पहुंच को बढ़ावा देता है, जो सामुदायिक स्तर की देखभाल के लिए सुविधाकर्ता, मोबिलाइजर और प्रदाता के रूप में कार्य करता है। एनएचएम के तहत ग्रामीण और शहरी क्षेत्रों में देश भर में 10.33 लाख आशा हैं जो समुदाय और सार्वजनिक स्वास्थ्य प्रणाली के बीच एक कड़ी के रूप में कार्य करते हैं।
- सभी कार्यात्मक डीएच, एसडीएच, सीएचसी और पीएचसी के लिए रोग कल्याण समितियों के माध्यम से अप्राप्त अनुदान / वार्षिक रखरखाव अनुदान प्रदान किया जा रहा है। इस तरह के समर्थन को नए गठित जन आरोग्य समितियों के माध्यम से एससी-एचडब्ल्यूसी के लिए भी विस्तारित किया गया है।
- ग्राम स्तर पर, गाँव की स्वास्थ्य सेवाओं की योजना बनाने और अनुसूचित जाति के माध्यम से दी जा रही सेवाओं की निगरानी के लिए, गाँव स्वास्थ्य, स्वच्छता और पोषण समिति (वीएचएसएनसी) को अप्रकाशित धन दिया जा रहा है। वीएचएसएनसी ग्राम पंचायत की एक उपसमिति या वैधानिक निकाय के रूप में कार्य करता है।

एचडब्ल्यूसी में सेवाओं की गुणवत्ता में सुधार के लिए सभी राज्यों में हब-एंड-स्पोक मॉडल के माध्यम से टेली-परामर्श का एक नेटवर्क स्थापित किया जा रहा है। सेवा वितरण में सुधार और डेटा की समय पर रिपोर्टिंग को मजबूत करने के लिए एएनएम, आशा और एचडब्ल्यूसी को आईटी समर्थन दिया जा रहा है। एनसीडी से पीड़ित व्यक्तियों पर नज़र रखने, एएनसी-पीएनसी के पंजीकरण और अनुवर्ती, एफपीएन के प्रावधान, टीकाकरण, टीबी के मामलों का पता लगाने और उपचार के अनुपालन आदि के लिए पोर्टल और सॉफ्टवेयर विकसित किए गए हैं। ड्रग्स, डायग्नोस्टिक्स, गर्भावस्था, शिशु के लिए निःशुल्क एंटाइबैक्टीयल, ओओपीई को कम करने और प्राथमिक और माध्यमिक देखभाल तक पहुंच में सुधार के लिए देखभाल, डायलिसिस आदि की शुरुआत की गई है।

3.2 अवसंरचना तथा जनशक्ति सुदृढीकरण से संबंधित एनएचएम की कार्य-योजना

3.2.1 घटक (ए): मान्यता प्राप्त सामाजिक स्वास्थ्य कार्यकर्ता

आशा कार्यक्रम राष्ट्रीय स्वास्थ्य मिशन (एनएचएम) के सामुदायिक प्रक्रियाओं तत्व का एक प्रमुख घटक है, जिसका उद्देश्य स्वास्थ्य प्रणाली के साथ सामुदायिक जुड़ाव बढ़ाने के लक्ष्य को प्राप्त करना है। यह कार्यक्रम वर्ष 2006 में 18 उच्च फोकस राज्यों¹ और अन्य राज्यों के जनजातीय क्षेत्रों में शुरू किया गया था। अन्य राज्यों से मांग के जवाब में, और मातृ और बाल स्वास्थ्य से संबंधित प्रमुख घरेलू व्यवहारों को प्रभावित करने के लिए आशा की क्षमता को मान्यता देते हुए, 2009 में पूरे देश में विस्तार किया गया कार्यक्रम था। राष्ट्रीय शहरी स्वास्थ्य मिशन के शुभारंभ के साथ, कार्यक्रम शहरी क्षेत्रों में भी शुरू किया गया था।

आशा समुदाय द्वारा चुनी गई एक महिला समुदाय स्वास्थ्य कार्यकर्ता है, जो समुदाय में स्वास्थ्य देखभाल सेवाओं तक लोगों की पहुँच को सुरक्षित करने के माध्यम से समुदाय की स्वास्थ्य स्थिति को बेहतर बनाने के लिए प्रशिक्षित, तैनात और समर्थित है। आशा को ग्रामीण क्षेत्रों में 1 प्रति 1000 जनसंख्या और एनयूएचएम के अंतर्गत आने वाले शहरी क्षेत्रों में 1 प्रति 1000-2500 के

मानक पर चुना जाता है। 50,000 या उससे कम आबादी वाले शहरी बस्तियों में, आशा को ग्रामीण क्षेत्रों में पालन किए गए मानदंडों के अनुसार चुना जाता है। दिशानिर्देशों में ग्रामीण इलाकों, आदिवासी, पहाड़ी और रेगिस्तानी इलाकों में छोटी आबादी के लिए और शहरी क्षेत्रों में भौगोलिक फैलाव या सामाजिक और आर्थिक रूप से वंचित समूहों की बिखरी बस्तियों के मामले में आशाओं के चयन के लिए लचीलेपन की अनुमति है।

- आशाओं को राष्ट्रीय, राज्य और जिला आशा प्रशिक्षकों के पूल के माध्यम से एक कैस्केड मॉडल में प्रशिक्षित किया जाता है। आशा प्रशिक्षण को तीन श्रेणियों में बांटा गया है - i) आठ दिनों का प्रेरण प्रशिक्षण, ii) मॉड्यूल 6 और 7 प्रशिक्षण - 20 दिन के प्रशिक्षण को प्रत्येक दिन पांच दिनों के चार राउंड से अधिक और iii) हर साल 15 दिनों का पूरक प्रशिक्षण। मॉड्यूल 6 और 7 प्रशिक्षण आशाओं के लिए कौशल-आधारित प्रशिक्षण है जो मातृ और बाल स्वास्थ्य, संचारी रोगों, महिलाओं तक पहुंचना और महिलाओं के खिलाफ हिंसा के क्षेत्र में दक्षता का निर्माण करता है। इसके अलावा, 2018 में आयुष्मान भारत - स्वास्थ्य और कल्याण केंद्रों और पोशन अभियान के हिस्से के रूप में गैर-संचारी रोगों और गृह-आधारित युवा बाल देखभाल पर आशाओं का प्रशिक्षण शुरू किया गया था। आयुष्मान भारत-स्वास्थ्य और कल्याण केंद्रों की टीम के हिस्से के रूप में, आशाओं को नए सेवा क्षेत्रों जैसे कि प्रशामक और बुजुर्ग देखभाल, मानसिक स्वास्थ्य, मौखिक स्वास्थ्य, नेत्र और ईएनटी देखभाल पर भी प्रशिक्षित किया जाएगा।
- आशा कार्यक्रम में अपने काम को सुविधाजनक बनाने और सामुदायिक स्वास्थ्य कार्यकर्ता के रूप में उसे और अधिक प्रभावी बनाने के लिए इसके चारों ओर बुनी गई सहायक संरचनाओं का एक समूह है। राज्य स्तर पर राज्य आशा सहयोग समूह (एएमजी) और राज्य आशा संसाधन केंद्र के साथ चार स्तरों पर सहायता संरचनाओं की परिकल्पना की गई है, जिला और ब्लॉक स्तर पर समर्पित नोडल अधिकारी और सेक्टर या उप ब्लॉक स्तर पर आशा सहायकों का एक पर्यवेक्षी कैंडर।

आशा मानद स्वयंसेवक हैं, जो गतिविधियों की एक विस्तृत श्रृंखला (लगभग 40 राष्ट्रीय स्वीकृत प्रोत्साहन और कुछ राज्य विशिष्ट प्रोत्साहन) के लिए प्रदर्शन-आधारित प्रोत्साहन प्राप्त करते हैं, जो वे मातृ और बाल स्वास्थ्य, संचारी रोगों और गैर-संचारी रोगों से लेकर करते हैं। प्रदर्शन-आधारित प्रोत्साहनों के अलावा, कुछ राज्यों² ने आशाओं के लिए निश्चित मासिक मानदेय या शीर्ष प्रोत्साहन भी पेश किए हैं, जबकि कुछ राज्यों ने आशाओं को सामाजिक सुरक्षा लाभ प्रदान करने के लिए उपाय प्रस्तुत किए हैं।³

1 बिहार, छत्तीसगढ़, झारखंड, मध्य प्रदेश, उड़ीसा, राजस्थान, उत्तर प्रदेश, उत्तराखंड, उत्तर पूर्व के आठ राज्य और जम्मू और कश्मीर।

2 अरुणाचल प्रदेश, सिक्किम, केरल, राजस्थान, हरियाणा, पश्चिम बंगाल, कर्नाटक, छत्तीसगढ़, त्रिपुरा, ओडिशा, एचपी, एपी, तेलंगाना, दिल्ली, गुजरात, यूपी और यूके।

3 छत्तीसगढ़, असम, झारखंड, केरल, उत्तर प्रदेश, उत्तराखंड, ओडिशा और पश्चिम बंगाल। दिल्ली, महाराष्ट्र, सिक्किम, गुजरात और मध्य प्रदेश।

- इन अनुभवों से आकर्षित होकर, वर्ष 2018 में पात्र आशा और एएफ के तहत पात्र आशा और आशा फैसिलिटेटर्स को जीवन बीमा, दुर्घटना बीमा और पेंशन के लाभ का विस्तार करने के लिए आशा लाभ पैकेज पेश किया गया था।
- * प्रधानमंत्री जीवन ज्योति बीमा योजना (भारत सरकार द्वारा 330 रुपये का प्रीमियम)।
- * प्रधानमंत्री सुरक्षा बीमा योजना (भारत सरकार द्वारा 12 रुपये का प्रीमियम)।
- * प्रधानमंत्री श्रम योगी मान धन (भारत सरकार द्वारा प्रीमियम का 50% योगदान और लाभार्थियों द्वारा 50%)।

3.2.2. घटक (ख): उप-केन्द्रों (एससी) का सुदृढीकरण

- व्यापक क्षेत्रों, विशेषतः पहाड़ी और रेतीले क्षेत्रों में स्वास्थ्य देखभाल सुविधा प्रदान के मामले में "देखभाल प्रदान करने में लगने वाला समय" एक महत्वपूर्ण मुद्दा है। स्वास्थ्य देखभाल सुविधा केन्द्र निवास स्थान से 30 मिनट की पैदल दूरी पर होनी चाहिए, जिसका अर्थ यह है कि जहां जनसंख्या दूर-दूर तक फैली हैं, वहां अतिरिक्त उप-केन्द्रों को बनाने की आवश्यकता है। तथापि, प्रति 5000 व्यक्ति जनसंख्या के लिए एक सुनिश्चित उप-केन्द्र है (पहाड़ी, रेतीले और जनजातीय क्षेत्रों में 3000) किन्तु जहां जनसंख्या अधिक है वहां वर्तमान उप-केन्द्रों/यूपीएचसी में बहु-सेवा प्रदाताओं की नियुक्ति के माध्यम से अंतराल को पूरा किया जा सकता है।

3.2.3. घटक (ग): प्राथमिक स्वास्थ्य केन्द्रों (पीएचसी) का सुदृढीकरण

मिशन का उद्देश्य निम्नलिखित के माध्यम से गुणवत्ता युक्त निवारक, प्रोत्साहक, उपचारात्मक, पर्यवेक्षक तथा आउटरीच सेवाओं में पीएचसी को सुदृढ करना है।

- पीएचसी 30000 (पहाड़ी और आदिवासी क्षेत्रों में 20000) की आबादी को स्वास्थ्य सेवाओं को सुनिश्चित और अपने संबंधित पीएचसी के अधीन उप-केन्द्रों की सेवाओं की निगरानी / पर्यवेक्षण करती है।
- पीएचसी में आवश्यक एवं अच्छी गुणवत्ता की औषधियां और उपकरणों (जिसमें प्रतिरक्षण के लिए ऑटो डिसेबल्ड सिरिंज की आपूर्ति शामिल है) की पर्याप्त और नियमित आपूर्ति करना।
- मानक उपचार दिशानिर्देश और प्रोटोकॉल का पालन करना।
- रोजी कल्याण समिति (आरकेएस) भौतिक बुनियादी ढांचे में सुधार और रखरखाव का कार्य करती है।

3.2.4. घटक (घ): प्रथम रेफरल देखभाल के लिए समुदाय स्वास्थ्य केन्द्रों (सीएचसी) का सुदृढीकरण

इस मिशन की मुख्य कार्यनीति निम्नलिखित है:

- सीएचसी 120000 (पहाड़ी और आदिवासी क्षेत्रों में 80000) की आबादी को स्वास्थ्य सेवाओं को सुनिश्चित करती है।
- सीएचसी के लिए अवसंरचना, स्टाफ उपकरण, प्रबंधन आदि हेतु मानक निर्धारित करते हुए नए भारतीय जन स्वास्थ्य मानदंडों का कोडिफिकेशन करना।
- अस्पताल प्रबंधन के लिए पणधारी समितियों (रोगी कल्याण समितियों) को बढ़ावा देना।

- अस्पताल देखभाल में सेवाओं और लागतों के मानदंडों का विकास करना।
- सीएचसी/पीएचसी स्तर पर सीटीजन चार्टर तैयार करना, प्रदर्शन करना और अनुपालन सुनिश्चित करना।

4. ग्रामीण स्वास्थ्य अवसरचना - सांख्यिकीय निरीक्षण

आधारभूत ढांचे और मानवशक्ति का अखिल भारतीय विश्लेषण विविध राज्यों/संघ राज्य क्षेत्रों से प्राप्त आंकड़ों पर आधारित है। यह नोट किया जाए कि किसी विशिष्ट मद/श्रेणी हेतु संगत आंकड़े प्राप्त न होने वाले राज्यों /संघ राज्य क्षेत्रों को सरकारी भवनों में संचालित सुविधा केन्द्रों, मानवशक्ति की रिक्तियों तथा कमी आदि हेतु प्रतिशतता की गणना करते समय शामिल नहीं किया गया है।

उप केंद्र, प्राथमिक स्वास्थ्य केंद्र और सामुदायिक स्वास्थ्य केंद्र के स्तर पर कार्य करने वाले केंद्र:

4.1 प्राइमरी हेल्थ केयर इंफ्रास्ट्रक्चर को थ्री टियर सिस्टम के रूप में विकसित किया गया है, जिसमें सब सेंटर, प्राइमरी हेल्थ सेंटर (पीएचसी) और कम्युनिटी हेल्थ सेंटर (सीएचसी) प्राइमरी हेल्थ केयर सिस्टम के तीन स्तंभ हैं। उप केंद्रों की प्रगति, जो प्राथमिक स्वास्थ्य देखभाल प्रणाली और समुदाय के बीच सबसे अधिक परिधीय संपर्क बिंदु है, संपूर्ण प्रणाली की समग्र प्रगति के लिए एक शर्त है। 31 मार्च, 2020 तक देश में क्रमशः 155404, 24918 ग्रामीण एससी और पीएचसी कार्य कर रहे हैं। कई वर्षों में, राज्यों में कई पीएचसी को सीएचसी के स्तर पर अपग्रेड किया गया है। एससी और पीएचसी की संख्या में प्रगति के अनुसार, सीएचसी की संख्या में भी पिछले कुछ वर्षों में वृद्धि हुई है। 31 मार्च 2020 तक, ग्रामीण क्षेत्रों में कुल 5183 सीएचसी कार्यरत हैं (अनुभाग IV, तालिका 6)।

4.2 खंड I, तुलनात्मक विवरण 1 2005 में रिपोर्ट किए गए लोगों की तुलना में 2020 में उप केंद्र, पीएचसी और सीएचसी की संख्या को प्रस्तुत करता है। राष्ट्रीय स्तर पर मौजूदा केन्द्रों की तुलना में 2020 में 9378 उप केंद्र, 1682 पीएचसी और 1837 सीएचसी की वृद्धि हुई है। इसका तात्पर्य है कि उप केंद्रों की संख्या में लगभग 6.4%, पीएचसी की संख्या में लगभग 7.2% और 2005 की तुलना में 2020 में सीएचसी की संख्या में लगभग 54.9% की वृद्धि हुई है। उपकेंद्र में महत्वपूर्ण वृद्धि राजस्थान (2968), गुजरात (1888), छत्तीसगढ़ (1387), मध्य प्रदेश (1352), कर्नाटक (1045), ओडिशा (761) और जम्मू और कश्मीर (591) में दर्ज की गई है। इसी तरह से जम्मू और कश्मीर (589), कर्नाटक (495), गुजरात (407), राजस्थान (381) और असम (336) राज्यों में पीएचसी की संख्या में उल्लेखनीय वृद्धि देखी गई है। सीएचसी के मामले में तमिलनाडु (350), उत्तर प्रदेश (325), पश्चिम बंगाल (253), राजस्थान (222) और ओडिशा (146) में उल्लेखनीय वृद्धि देखी गई है।

4.3 अनुभाग I, तुलनात्मक विवरण 12, 2019 में रिपोर्ट किए गए केन्द्रों की तुलना में 2020 में उप केंद्र, पीएचसी और सीएचसी की संख्या प्रस्तुत करता है। राष्ट्रीय स्तर पर शहरी क्षेत्रों में स्वास्थ्य

सुविधाओं के प्रवास के कारण ग्रामीण क्षेत्रों में 2007 उप केंद्र और 152 सीएचसी की कमी है, जबकि इस अवधि के दौरान 63 पीएचसी की वृद्धि देखी गई।

4.4 अनुभाग 1, तुलनात्मक विवरण 2 से तुलनात्मक विवरण 4, 2005 की तुलना में 2020 में, क्रमशः, उप केंद्रों, पीएचसी और सीएचसी के भवनों की स्थिति की तुलनात्मक तस्वीर दी है। जैसा कि देखा जा सकता है, 2005 में सरकारी भवनों में कार्यरत उप केंद्रों का प्रतिशत 43.8% से बढ़ कर 2020 में 69.4% हो गयी है। मुख्य रूप से उत्तर प्रदेश (10630), पश्चिम बंगाल (6657), मध्य प्रदेश (3930), छत्तीसगढ़ (2702), महाराष्ट्र (2542), राजस्थान (2410) और ओडिशा (2355) में सरकारी भवनों में पर्याप्त वृद्धि के कारण हुआ। इसी तरह, सरकारी भवनों में कार्यरत पीएचसी का प्रतिशत भी 2005 में 69% से बढ़कर 2020 में 89.6% हो गया है। यह मुख्य रूप से उत्तर प्रदेश (791), कर्नाटक (581), गुजरात (563), राजस्थान (517), छत्तीसगढ़ (351) और मध्य प्रदेश (346) में सरकारी भवनों में वृद्धि के कारण है। इसके अलावा, 2005 की तुलना में 2020 में सरकारी भवनों में कार्यरत सीएचसी की संख्या में उल्लेखनीय वृद्धि हुई है। सरकारी भवनों में सीएचसी का प्रतिशत भवन 2005 में 84.3% से बढ़कर 2020 में 96.4% हो गया है। यह मुख्य रूप से तमिलनाडु (350), राजस्थान (274), उत्तर प्रदेश (256), पश्चिम बंगाल (253) और ओडिशा (146) राज्यों में सरकारी भवनों में वृद्धि के कारण हुआ है। 2019 और 2020 में उप केंद्र, पीएचसी और सीएचसी के लिए भवनों की तुलनात्मक राज्यवार स्थिति उपलब्ध है **तुलनात्मक विवरण-13**।

सरकारी भवनों में कार्यरत उप-केंद्रों का प्रतिशत 2005 में 43.8% से बढ़कर 2020 में 69.4% हो गया है।
सरकारी भवनों में कार्यरत पीएचसी का प्रतिशत 2005 में 69% से बढ़कर 2020 में 89.6% हो गया है।
सरकारी भवनों में सीएचसी का प्रतिशत 2005 में 84.3% से बढ़कर 2020 में 96.4% हो गए हैं।

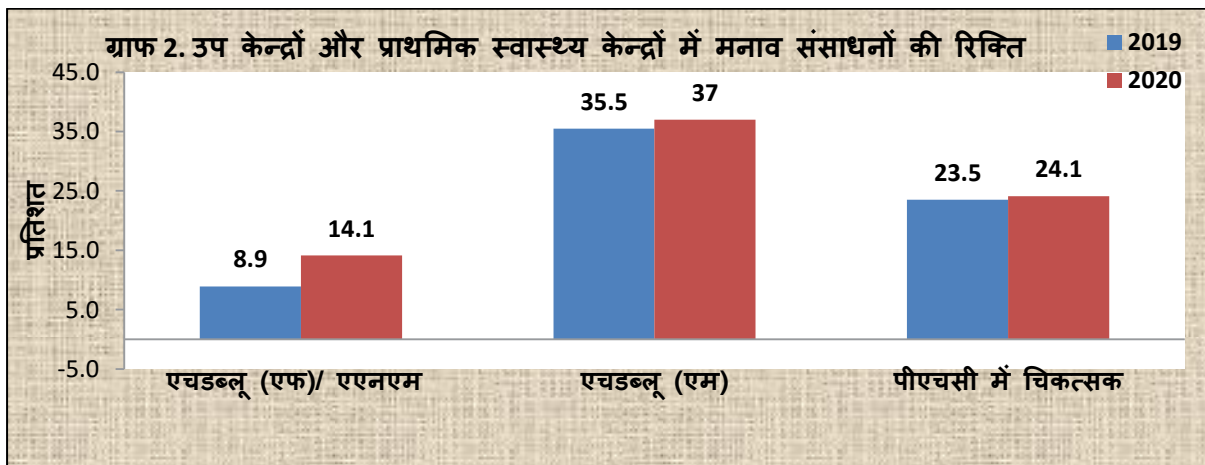
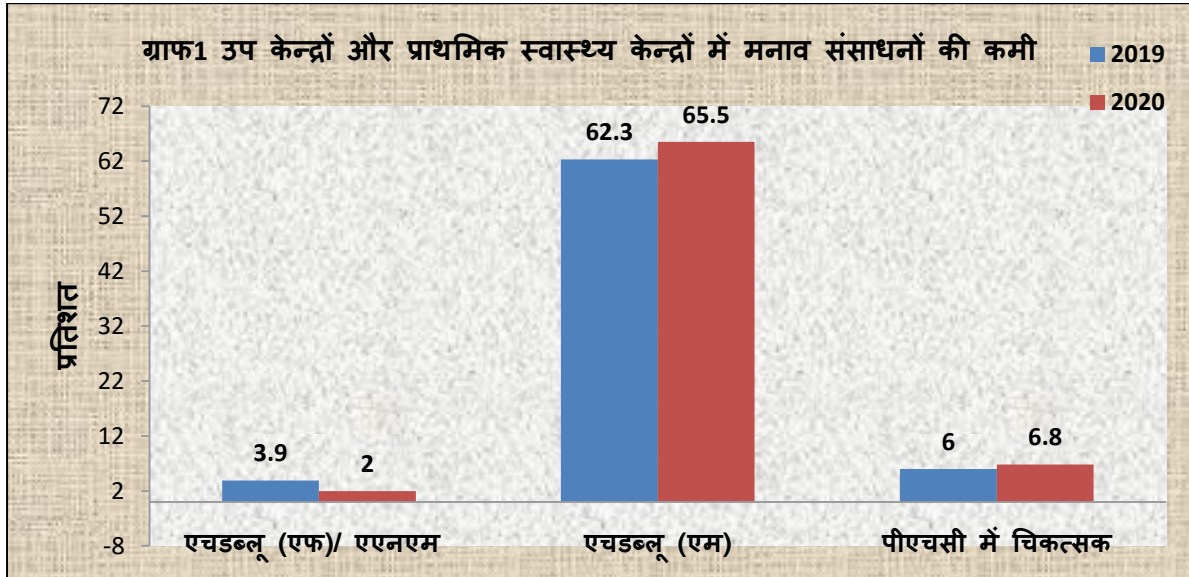
श्रमशक्ति

4.5 ग्रामीण स्वास्थ्य सेवाओं के कुशल कामकाज के लिए जनशक्ति की उपलब्धता एक महत्वपूर्ण पूर्व आवश्यकता है। 31 मार्च, 2020 तक एचडब्ल्यू (एफ) / एएनएम के पदों में समग्र कमी (जो कुछ राज्यों में मौजूदा अधिशेष को छोड़कर) एक एचडब्ल्यू (एफ) / एएनएम के मानक के अनुसार कुल आवश्यकता का 2% है। कुल मिलाकर कमी मुख्य रूप से गुजरात (1073), हिमाचल प्रदेश (992), राजस्थान (657), त्रिपुरा (389) और केरल (277) में कमी के कारण है। एएनएम की कमी में राज्य-वार भिन्नता को दर्शाया गया है **तुलनात्मक विवरण -5**। इसी तरह, एचडब्ल्यू (एम) के मामले में, आवश्यकता के 65.5% की कमी है।

31 मार्च, 2020 तक एचडब्ल्यू (एफ) / एएनएम के पदों में समग्र कमी कुल आवश्यकता का 2% है, जो मुख्य रूप से राज्यों में कमी के कारण है, गुजरात (1073), हिमाचल प्रदेश (992), राजस्थान (657), त्रिपुरा (389) और केरल (277)। पीएचसी पर एलोपैथिक डॉक्टरों के लिए, मौजूदा स्थिति में जनशक्ति की तुलना में बुनियादी ढाँचे के लिए कुल आवश्यकता का 6.8% की कमी है।

यहां तक कि स्वीकृत पदों में से, सभी स्तरों पर पदों का एक महत्वपूर्ण प्रतिशत खाली है। उदाहरण के लिए, एचडब्ल्यू (महिला) / एएनएम (एससीएस + पीएचसी में) के स्वीकृत पदों का 14.1% 2020 में पुरुष स्वास्थ्य कार्यकर्ता के 37% रिक्तियों की तुलना में खाली है। पीएचसी में, स्वास्थ्य सहायक

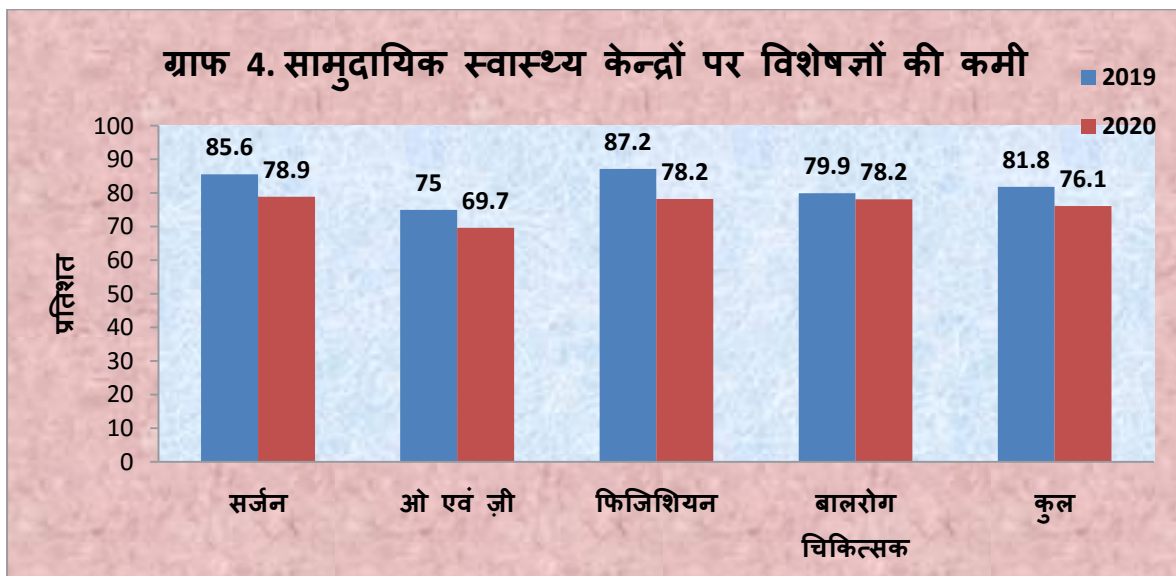
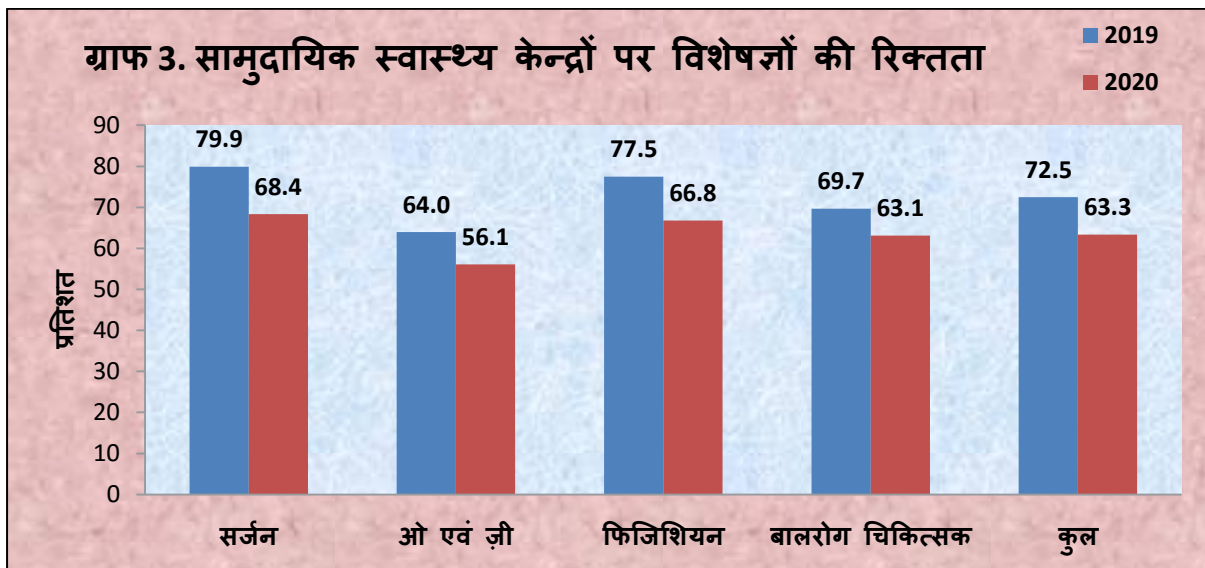
के स्वीकृत पदों में से 37.6% (पुरुष + महिला) और डॉक्टरों के स्वीकृत पदों में से 24.1% 2020 में खाली हैं। (अनुभाग V, तालिका 13, 14, 15, 16, 17 और तुलनात्मक विवरण 5)। विवरण में प्रतिनिधित्व ग्राफ 1 और ग्राफ 2 में किया गया है।



4.6 पीएचसी ग्राम समुदाय और चिकित्सा अधिकारी के बीच पहला संपर्क बिंदु है। पीएचसी में जनशक्ति में एक चिकित्सा अधिकारी शामिल है जो पैरामेडिकल और अन्य कर्मचारियों द्वारा समर्थित है। स्वास्थ्य सहायक (पुरुष + महिला) के लिए पीएचसी के मामले में, कमी 71.9% है। पीएचसी में एलोपैथिक डॉक्टरों के लिए, अखिल भारतीय स्तर पर कुल आवश्यकता का 6.8% की कमी है। यह मुख्य रूप से ओडिशा (461), छत्तीसगढ़ (404), राजस्थान (249), मध्य प्रदेश (134), उत्तर प्रदेश (121) और कर्नाटक (105) राज्यों में पीएचसी में डॉक्टरों की महत्वपूर्ण कमी के कारण है। एलोपैथिक डॉक्टरों के अलावा, पीएचसी में 7482 आयुष चिकित्सक उपलब्ध हैं। (खंड V, तालिका 16, 17 और 18)।

4.7 सामुदायिक स्वास्थ्य केंद्र सर्जनों, प्रसूति एवं स्त्री रोग विशेषज्ञों, चिकित्सकों और बाल रोग विशेषज्ञों की विशेष चिकित्सा देखभाल प्रदान करते हैं। पीएचसी में विशेषज्ञों की जनशक्ति की

वर्तमान स्थिति बताती है कि 31 मार्च, 2020 को, स्वीकृत पदों में से, 68.4% सर्जन, 56.1% प्रसूति एवं स्त्री रोग विशेषज्ञ, 66.8% चिकित्सक और 63.1% बाल रोग विशेषज्ञ खाली हैं। **ग्राफ 3** में रिक्ति के विवरण का प्रतिनिधित्व किया गया है। सीएचसी में विशेषज्ञों के स्वीकृत पदों में से कुल 63.3% पद खाली हैं। इसके अलावा, मौजूदा बुनियादी ढांचे के लिए आवश्यकता की तुलना में, 78.9% सर्जनों, 69.7% प्रसूति एवं स्त्रीरोग विशेषज्ञ, 78.2% चिकित्सक और 78.2% बाल रोग विशेषज्ञ की कमी हैं। कुल मिलाकर, सीएचसी में मौजूदा सीएचसी की आवश्यकता की तुलना में 76.1% विशेषज्ञों की कमी है। **ग्राफ 4** में कमी के विवरण का प्रतिनिधित्व किया है। अधिकांश राज्यों में विशेषज्ञों की कमी काफी अधिक है। हालांकि, विशेषज्ञों के अलावा, लगभग 15342 जनरल ड्यूटी मेडिकल ऑफिसर्स (जीडीएमओ) और 702 आयुष विशेषज्ञों के साथ-साथ 2720 जीडीएमओ आयुष भी 31 मार्च, 2020 तक सीएचसी में उपलब्ध हैं। इसके अलावा 890 एनेस्थेतिस्ट और 301 आई सर्जन हैं। 31 मार्च 2020 तक सीएचसी में भी हैं। (खंड V, तालिका 19, 20, 21, 22, 23, 24, 25, 26, 27 और 28)।



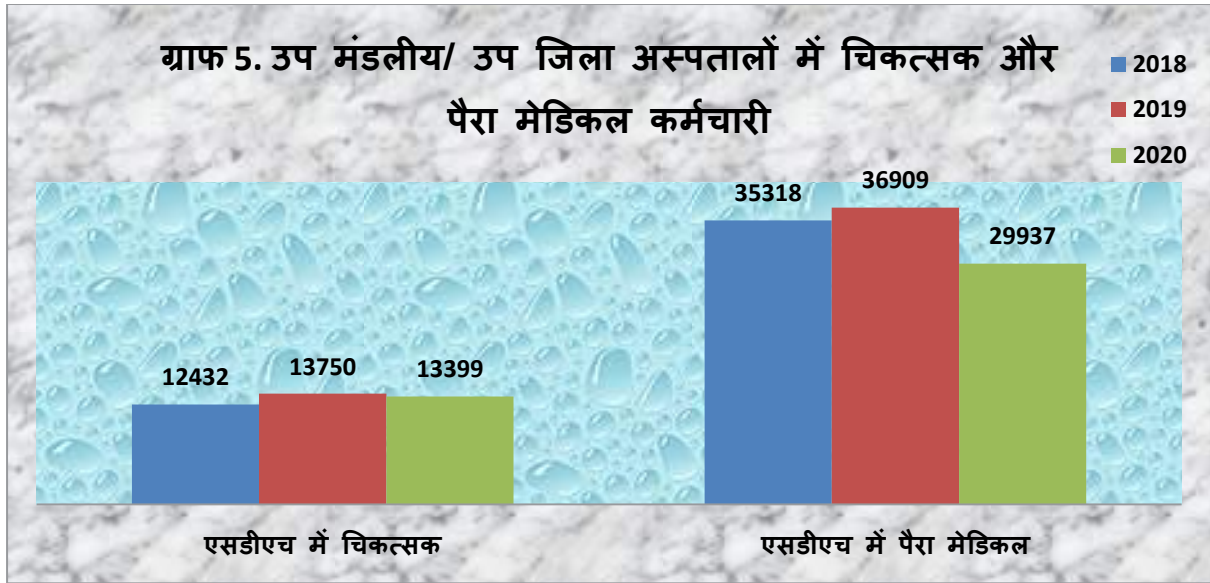
4.8 जब 2005 में उस के साथ 2020 में प्रमुख श्रेणियों की जनशक्ति की स्थिति के साथ तुलना की गयी है **अनुभाग I, तुलनात्मक बयान 5 से तुलनात्मक कथन 11** यह देखा गया है कि सभी श्रेणियों में संख्या के संदर्भ में महत्वपूर्ण सुधार हैं। उदाहरण के लिए, सब सेंटर और पीएचसी पर एएनएम की संख्या 2005 में 133194 से बढ़कर 212593 हो गई है। 2020 में लगभग 59.6% की वृद्धि हुई है। इसी तरह, पीएचसी में एलोपैथिक डॉक्टर 2005 में 20308 से बढ़कर 2020 में 28516 हो गए, जो लगभग 40.4% की वृद्धि है। सीएचसी में विशेषज्ञों की आवश्यकता में 54.9% की वृद्धि हुई है, जबकि इन-पोजीशन विशेषज्ञ की वास्तविक संख्या में केवल 40.4% की वृद्धि हुई है। इसके अलावा, सीएचसी के विशेषज्ञ डॉक्टर 2005 में 3550 से बढ़कर 2020 में 4957 हो गए हैं।

4.9 राज्य-वार तस्वीर को देखते हुए, यह देखा जा सकता है कि एएनएम में वृद्धि मुख्य रूप से 2005-2020 के दौरान पश्चिम बंगाल (9521), उत्तर प्रदेश (5445), कर्नाटक (4827), राजस्थान (3492), गुजरात (3058), जम्मू और कश्मीर (2923) और मध्य प्रदेश (2742)। (**अनुभाग I, तुलनात्मक विवरण 5**)। इसी प्रकार, गुजरात (642), तमिलनाडु (451), राजस्थान (339), जम्मू और कश्मीर (297), मध्य प्रदेश (226) और उत्तराखण्ड (164) में पीएचसी पर डॉक्टरों की संख्या में उल्लेखनीय वृद्धि हुई है। (**अनुभाग I, तुलनात्मक विवरण 6**)। विशेषज्ञों के मामले में पश्चिम बंगाल (508), तमिलनाडु (180), आंध्र प्रदेश (91), केरल (91), जम्मू और कश्मीर (88) और छत्तीसगढ़ (44) में सराहनीय वृद्धि देखी गई है। (**अनुभाग I, तुलनात्मक विवरण 7**)। 2005 की स्थिति की तुलना में पैरामेडिकल स्टाफ की संख्या में उल्लेखनीय वृद्धि भी देखी गई है।

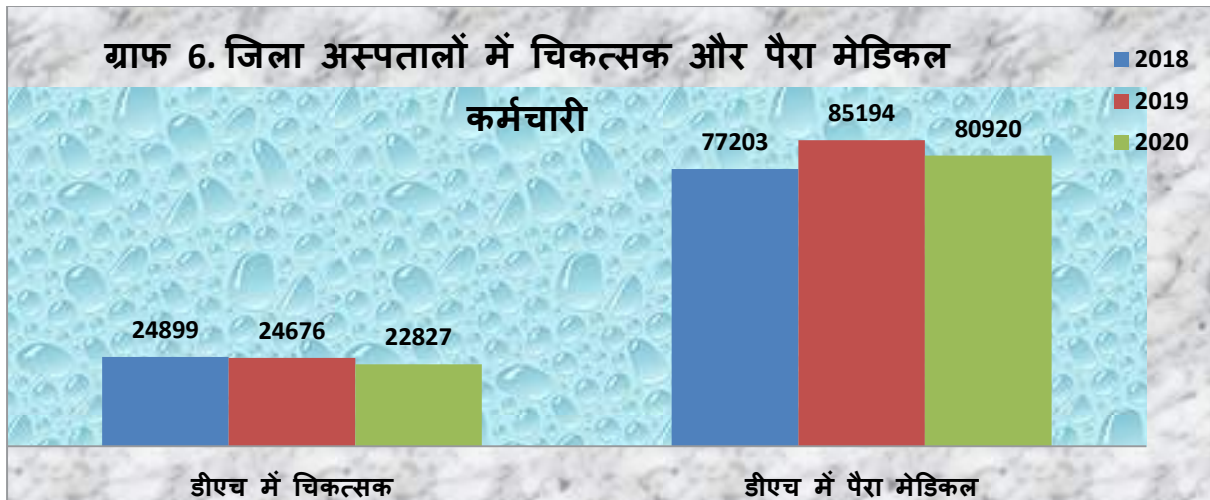
4.10 उप केंद्रों, पीएचसी और सीएचसी में 2019 और 2020 में जनशक्ति की राज्य-वार स्थिति का तुलनात्मक अध्ययन किया गया है **अनुभाग I, तुलनात्मक विवरण 14**। 2020 में प्रमुख श्रेणियों की जनशक्ति की स्थिति की तुलना 2019 में इस अवधि के दौरान एसएचसी और पीएचसी में एएनएम और पीएचसी में डॉक्टरों की संख्या में समग्र कमी दर्शाती है। हालांकि सीएचसी में विशेषज्ञों की संख्या में वृद्धि हुई है। सीएचसी में विशेषज्ञ, संख्या 2019 में 3881 से बढ़कर 2020 में 4957 हो गई है, जो कि 27.7% की वृद्धि है।

4.11 पैरामेडिकल स्टाफ की स्थिति को देखते हुए, पीएचसी और सीएचसी पर 2019 से 2020 के दौरान 18715 से 19903 तक प्रयोगशाला तकनीशियनों की वृद्धि हुई है। इसके अलावा 2019 में 26204 से 25792 तक फार्मासिस्टों की संख्या में मामूली कमी देखी गयी है। 2020 में पीएचसी और सीएचसी के तहत नर्सिंग स्टाफ में 2019 में 80976 से 71847 तक उल्लेखनीय कमी देखी गई है। रेडियोग्राफरों की संख्या वर्ष 2019 में 2419 से 2434 वर्ष 2020 वृद्धि हुई है। (**खंड I, तुलनात्मक विवरण 15**)।

4.12 कुल 1193 सब डिविजनल / सब डिस्ट्रिक्ट हॉस्पिटल 31 मार्च, 2020 तक पूरे देश में कार्यरत हैं। इन अस्पतालों में 13399 डॉक्टर उपलब्ध हैं। इन डॉक्टरों के अलावा, लगभग 29937 पैरामेडिकल स्टाफ भी उन अस्पतालों में 31 मार्च, 2020 तक उपलब्ध हैं (**अनुभाग V, तालिका 36 और 37**)। प्रतिनिधित्व का विवरण **ग्राफ 5** में किया है।



4.13 उपरोक्त के अलावा, पूरे देश में 31 मार्च, 2020 तक 810 जिला अस्पताल (डीएच) भी काम कर रहे हैं। डीएचएस में 22827 डॉक्टर उपलब्ध हैं। डॉक्टरों के अलावा, 31 मार्च, 2020 तक जिला अस्पतालों में लगभग 80920 पैरा मेडिकल स्टाफ भी उपलब्ध है (अनुभाग V, तालिका 36 और 37)। प्रतिनिधित्व का विवरण ग्राफ 6 में किया है



अनुलग्नक I. भारतीय जन स्वास्थ्य मानक (आईपीएचएस) के तहत संस्तुत जनशक्ति

उप-केंद्र के प्रकार	उप-केंद्र ए		उप-केंद्र बी (एमसीएच उप-केंद्र)	
	आवश्यक	वांछनीय	आवश्यक	वांछनीय
एएनएम/स्वास्थ्य कार्यकर्ता (महिला)	1	+1	2	
स्वास्थ्य कार्यकर्ता (पुरुष)	1		1	
स्टाफ नर्स (या एएनएम, यदि स्टाफ नर्स उपलब्ध नहीं हैं)				1**
सफाई-कर्मचारी*	1(अंशकालिक)		1 (पूर्णकालिक)	

*आउटसोर्स कराया जाए

** यदि उप-केंद्रों में हुए प्रसव की संख्या एक माह में 20 या इससे ज्यादा है।

जनशक्ति : पीएचसी

स्टाफ	टाइप ए		टाइप बी	
	आवश्यक	वांछनीय	आवश्यक	वांछनीय
चिकित्सा अधिकारी - एमबीबीएस	1		1	1#
चिकित्सा अधिकारी - आयुष		1^		1^
लेखाकार सह डाटा एंट्री ऑपरेटर	1		1	
फार्मासिस्ट	1		1	
फार्मासिस्ट - आयुष		1		1
नर्स-मिडवाइफ (स्टाफ नर्स)	3	+1	4	+1
स्वास्थ्य कार्यकर्ता (महिला)+++	1*		1*	
स्वास्थ्य सहायक (पुरुष)	1		1	
स्वास्थ्य सहायक (महिला)/ महिला स्वास्थ्य विजिटर	1		1	
स्वास्थ्य शिक्षाकर्मी		1		1
प्रयोगशाला तकनीशियन	1		1	
कोल्ड चैन व टीका लॉजिस्टिक सहायक		1		1
बहुउद्देश्यीय ग्रुप डी कार्यकर्ता	2		2	
सफाई कार्यकर्ता-सह-वॉचमैन	1		1	+1
कुल	13	18	14	21

* पीएचसी के उप-केंद्र क्षेत्र के लिए।

यदि प्रसव प्रतिमाह 30 से ज्यादा हो रहे हैं तो दो चिकित्सा अधिकारी (एमबीबीएस) में से एक महिला होनी चाहिए।

^ जहां-कहीं आस-पास के क्षेत्र में सरकारी आयुष स्वास्थ्य केंद्र उपलब्ध न हों, वहां लोगों को विकल्प मुहैया कराना।

जनशक्ति: सीएचसी

कार्मिक	आवश्यक	वांछनीय	योग्यता	अभ्युक्तियां
ब्लॉक जन स्वास्थ्य एकक				
ब्लॉक चिकित्सा अधिकारी चिकित्सा अधीक्षक	1		जनस्वास्थ्य में अनुभवी वरिष्ठतम विशेषज्ञ/जीडीएमओ को प्राथमिकता/व्यावसायिक विकास पाठ्यक्रम (पीडीसी) में प्रशिक्षित को वरीयता	वह सीएचसी के प्रशासन/ प्रबंधन कार्य के अलावा एनएचपी के समन्वय, आशा के प्रबंधन, प्रशिक्षण तथा सभी दायित्व जो की एनआरएचएम के तहत आते हैं, के लिये उत्तरदायी होगा।
जन स्वास्थ्य विशेषज्ञ	1		एमडी (पीएसएम)/ एमडी (सीएचए)/ एमडी सामुदायिक मेडिसिन या एमबीए/डीपीएच/एमपीए च सहित स्नातकोत्तर डिग्री	
जन स्वास्थ्य नर्स (पीएचएन) #	1	+1		
विशेषज्ञ सेवाएं				
जनरल सर्जन	1		एमएस/ डीएनबी (सामान्य सर्जरी)	
चिकित्सक	1		एमडी/ डीएनबी (सामान्य चिकित्सा)	
प्रसूति व स्त्री रोग	1		डीजीओ/ एमडी/ डीएनबी	
बाल रोग चिकित्सक	1		डीसीएच/ एमडी (बाल रोग विशेषज्ञ)/ डीएनबी	
एनेस्थेतिस्ट	1		एमडी (एनेस्थिसिया)/ डीएनबी/ डीए/ एलएसएसएस प्रशिक्षित चिकित्सा अधिकारी	शल्य चिकित्सा के विशेषज्ञों के प्रयोग के लिए आवश्यक ये संविदा आधार पर नियुक्त हो सकते हैं या उनकी सेवाएं निजी क्षेत्र से प्रत्येक मामले के आधार पर भाड़े पर ली जा सकती हैं।
सामान्य ड्यूटी अधिकारी				
डेंटल सर्जन	1		बीडीएस	

सामान्य इयूटी चिकित्सा अधिकारी	2		एमबीबीएस	
चिकित्सा अधिकारी - आयुष	1		आयुष में स्नातक	
नर्स व पैरामेडिकल				
स्टाफ नर्स	10			
फार्मासिस्ट	1	+1		
फार्मासिस्ट - आयुष	1			
प्रयोगशाला तकनीशियन	2			
रेडियोग्राफर	1			
आहार विज्ञानी		1		
ऑपथालमिक सहायक	1			
दंत चिकित्सा सहायक	1			
कोल्ड चेन व टीका लॉजिस्टिक सहायक	1			
ओटी तकनीशियन	1			
बहु पुनर्वास/सामुदायिक आधारित पुनर्वास कार्यकर्ता	1	+1		
परामर्शदाता	1			
प्रशासनिक स्टाफ				
पंजीकरण लिपिक	2			
सांख्यिकी सहायक/डाटा एंट्री ऑपरेटर	2			
लेखा सहायक	1			
प्रशासनिक सहायक	1			
ग्रुप डी स्टाफ				
ट्रेसर (रेडक्रास/जॉन एंबुलेंस द्वारा प्रमाणित)	1			
वार्ड ब्वाय/नर्सिंग अर्दली	5			
वाहन चालक*	1*	3		
कुल	46	53		

टिप्पणी:

- यदि रोगियों की संख्या बढ़ जाए तो सामान्य ड्यूटी चिकित्सकों की संख्या बढ़ाई जा सकती है।
 - आउटसोर्स और सहायक सेवाएं प्रदान करने के लिए आवश्यकता अनुसार निधि प्रदान की जाएगी
 - एक नर्सिंग अर्दली को सीएसएसडी प्रक्रियाओं में प्रशिक्षित किया जा सकता है।
 - माली, आया, चपरासी, ओपीडी, परिचर, सुरक्षा व सफाई कर्मचारी जैसे श्रेणी IV कर्मचारियों की सेवाएं आउटसोर्स करने के लिए बजट प्रावधान किया जाएगा।
- * आउटसोर्स किया जा सकता है।
- # नर्सिंग में स्नातक या डिप्लोमा और लोक स्वास्थ्य में छह महीने का प्रशिक्षण दिया जाएगा।

भारत में शहरी स्वास्थ्य देखभाल प्रणाली

1.1 पृष्ठभूमि

राष्ट्रीय शहरी स्वास्थ्य मिशन (एनयूएचएम) को केंद्रीय मंत्रिमंडल¹ द्वारा 1 मई, 2013 को शहरी आबादी को बस्ती और सोसाइटी के कमजोर वर्ग के लिए विशेष ध्यान देने के लिए एक समतामूलक और गुणवत्तापूर्ण प्राथमिक स्वास्थ्य देखभाल सेवाएँ प्रदान करने के लिए एक उप-मिशन के तहत एक उप-मिशन के रूप में मंजूरी दी गई थी। एनयूएचएम गुणवत्ता प्राथमिक स्वास्थ्य सेवा तक उनकी पहुंच को आसान बनाकर स्वास्थ्य की स्थिति में सुधार करना चाहता है।

एनयूएचएम 50000 से अधिक आबादी वाले सभी शहरों और कस्बों और 30000 से अधिक आबादी वाले जिला और राज्य मुख्यालय को कवर करता है। शहरी स्वास्थ्य कार्यक्रम शहरी स्थानीय निकायों (यूएलबी) के माध्यम से सात महानगरीय शहरों, मुंबई, नई दिल्ली, चेन्नई, कोलकाता, हैदराबाद, बेंगलुरु और अहमदाबाद में कार्यान्वित किया जा रहा है। शेष शहरों के लिए, राज्य स्वास्थ्य विभाग यह तय करता है कि शहरी स्वास्थ्य कार्यक्रम को स्वास्थ्य विभाग या किसी अन्य शहरी स्थानीय निकाय के माध्यम से लागू किया जाना है या नहीं।

1.2 शहरी स्वास्थ्य सांख्यिकी - संरचना और वर्तमान परिदृश्य

एनयूएचएम एक संगठित सेवा वितरण अवसंरचना की स्थापना की परिकल्पना करता है जो शहरों / कस्बों में विशेष रूप से शहरी गरीबों की स्वास्थ्य संबंधी जरूरतों को पूरा करने के लिए अनुपस्थित है, हालांकि माध्यमिक और तृतीयक देखभाल सुविधाएं उपलब्ध हैं। शहरी क्षेत्रों में स्वास्थ्य देखभाल का बुनियादी ढांचा दिया गया है

तालिका 2

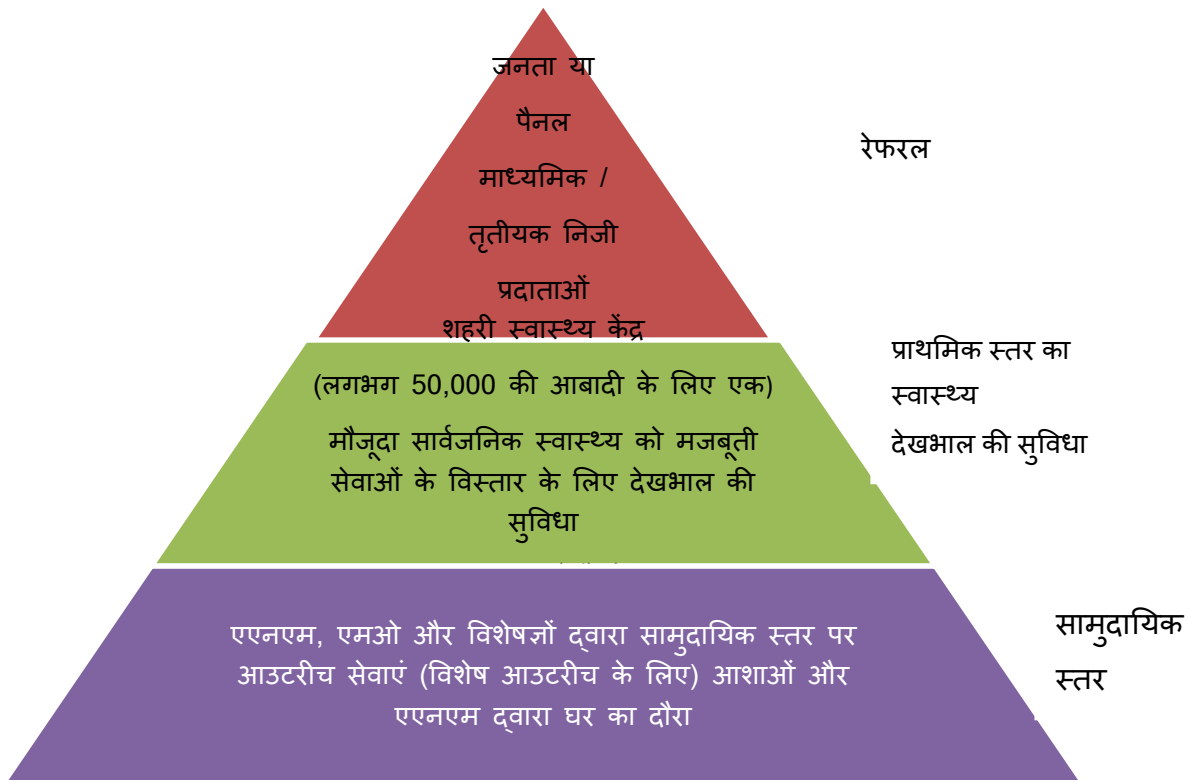
केंद्र ² (शहरी क्षेत्र में)	जनसंख्या मानक
सामुदायिक स्वास्थ्य केंद्र	250000 (5 लाख मेट्रो के लिए)
प्राथमिक स्वास्थ्य केंद्र	50000

1 स्रोत भारत का राजपत्र भाग I - धारा 1 दिनांक 26 जून 2013 स्वास्थ्य और परिवार कल्याण मंत्रालय - स्वास्थ्य और परिवार कल्याण विभाग एल। 19017/1/2008-UH (Vol.III)

2 स्रोत कार्यान्वयन के लिए एनयूएचएम फ्रेमवर्क।

1.3 एनयूएचएम³ के प्रमुख घटक

एनयूएचएम को सुविधा और सामुदायिक स्तर पर स्वास्थ्य सेवाएं प्रदान करने के लिए डिज़ाइन किया गया है। शहरी स्वास्थ्य देखभाल वितरण मॉडल निम्नलिखित घटकों की परिकल्पना करता है:



उपरोक्त मौजूदा संरचनाओं और स्थानीय आवश्यकता के आधार पर राज्य से अलग-अलग हो सकता है। प्रमुख विशेषताओं में शहरी सामुदायिक स्वास्थ्य केंद्र (यूसीएचसी), शहरी प्राथमिक स्वास्थ्य केंद्र (यूपीएचसी) के बुनियादी ढांचे के घटक, एमपीडब्ल्यू (एफ) / एनएएम सहित चिकित्सा और पैरामेडिकल, और एएसएचए और महिंद्रा आरोग्य समिति (एमएएस) जैसे सामुदायिक ढांचे दोनों शामिल हैं। इसके अलावा, एमएएस राष्ट्रीय शहरी स्वास्थ्य मिशन के तहत आशा के अलावा प्रमुख सामुदायिक हस्तक्षेप में से एक है, जिसका उद्देश्य स्वास्थ्य कार्यक्रमों की योजना, कार्यान्वयन और निगरानी सहित सभी स्तरों पर स्वास्थ्य में सामुदायिक भागीदारी को बढ़ावा देना है।

1.3.1 शहरी प्राथमिक स्वास्थ्य केंद्र

व्यापक प्राथमिक स्वास्थ्य सेवा प्रदान करने के लिए, राष्ट्रीय शहरी स्वास्थ्य मिशन का उद्देश्य शहरी प्राथमिक स्वास्थ्य केंद्रों की स्थापना करना है, न कि अकेले स्वास्थ्य सुविधा के रूप में, बल्कि इसकी जलग्रहण आबादी के लिए निवारक, प्रचारक और बुनियादी उपचारात्मक स्वास्थ्य सेवा के केंद्र के रूप में। अपने जलग्रहण क्षेत्र के भीतर, यूपीएचसी प्राथमिक स्वास्थ्य देखभाल और आबादी के सार्वजनिक स्वास्थ्य आवश्यकताओं को प्रदान करने के लिए जिम्मेदार है। निवारक, प्रोत्साहन, उपचारात्मक, पुनर्वास और उपशामक देखभाल के लिए यूपीएचसी में परिकल्पित सेवाओं का पैकेज। इसके अलावा, "आयुष्मान भारत-एचडब्ल्यूसी" के माध्यम से देश भर में व्यापक प्राथमिक स्वास्थ्य देखभाल को मजबूत करने के लिए, राज्य अपने उप केंद्रों और प्राथमिक स्वास्थ्य देखभाल केंद्रों को स्वास्थ्य और कल्याण केंद्रों (एचडब्ल्यूसी) * के रूप में ग्रामीण और शहरी क्षेत्रों में अपग्रेड कर रहे हैं। विवरण 1.3.2 पर पढ़ा जा सकता है।

ग्रामीण क्षेत्रों के विपरीत, शहरी क्षेत्रों में उप-केंद्रों की परिकल्पना नहीं की गई है क्योंकि परिवहन की दूरी और मोड यहां बहुत बेहतर हैं और स्वास्थ्य सुविधाओं की निकटता और पहुंच भी है। 31 मार्च

2020 तक, देश के शहरी क्षेत्रों में 2517 एससी के स्तर पर कार्यात्मक हैं। (अनुभाग IV, तालिका 6)।

क जनसंख्या कवरेज और स्थान:

शहरी आबादी के स्थानिक वितरण के आधार पर, यूपीएचसी द्वारा कवर की गई जनसंख्या 30000 से 50000 तक भिन्न हो सकती है। यूपीएचसी अधिमानतः झुग्गी या इसी तरह की बस्तियों के करीब स्थित है। स्थानीय स्थिति के आधार पर शहर 50000 या इससे अधिक आबादी के लिए भी यूपीएचसी स्थापित कर सकते हैं। 31 मार्च 2020 तक, देश में 5895 यूपीएचसी कार्यात्मक हैं। (अनुभाग IV, तालिका 6)।

ख समय:

परिचालन के घंटे इस तरह हो सकते हैं ताकि शहरी कामकाजी आबादी को आसानी से यूपीएचसी सेवाओं तक पहुंच सकें। राज्य किसी भी उपयुक्त समय के लिए विकल्प चुन सकते हैं, 8 घंटे की सेवाएं प्रदान करते हैं, जो समुदाय के लिए सुविधाजनक हैं। यह अनुशंसा की जाती है कि यूपीएचसी दोपहर 12 बजे से रात 8 बजे तक या दोहरी पारियों में संचालित होता है (यानी सुबह 8 बजे से दोपहर 12 बजे तक और शाम 4 बजे से रात 8 बजे तक); यूपीएचसी की दोहरी पारी का समय कैचमेंट समुदायों के अनुसार संशोधित करने की क्षमता के साथ लचीला हो सकता है।

घ सेवा का प्रावधान*:

यूपीएचसी की प्रमुख जिम्मेदारी व्यापक निवारक, प्रोत्साहन, उपचारात्मक, पुनर्वास, प्रशामक देखभाल प्रदान करना है। यूपीएचसी द्वारा प्रदान की जाने वाली सेवाओं में शामिल हैं:

- ओपीडी (परामर्श)
- प्रयोगशाला सेवाएं
- ड्रग्स और गर्भनिरोधक वितरण
- प्रजनन और बाल स्वास्थ्य (आरसीएच) सेवाओं का वितरण,
- संचारी और गैर-संचारी रोगों के निवारक, प्रचार और उपचारात्मक पहलू।
- मल्टी स्पेशलिस्ट सर्विसेज
- मामूली सर्जिकल प्रक्रियाएं
- काउंसलिंग और हेल्प डेस्क
- आगे बढ़ने की गतिविधियाँ
- जनसंख्या आधारित स्क्रीनिंग

* एबी-सीपीएचसी-एचडब्ल्यूसी के लिए परिचालन दिशानिर्देशों के अनुसार अद्यतन

- रेफरल सेवाएं
- नामित यूपीएचसी-एचडब्ल्यूसी में कल्याण गतिविधियाँ।

1.3.2 शहरी सामुदायिक स्वास्थ्य केंद्र (यू-सीएचसी)

शहरी सामुदायिक स्वास्थ्य केंद्र (यू-सीएचसी) को प्रत्येक 4-5 यू-पीएचसी के लिए एक रेफरल सुविधा के रूप में स्थापित किया गया है। यू-सीएचसी 250000 से 5 लाख की आबादी को पूरा करता है। मेट्रो शहरों के लिए, 100 बिस्तरों वाली प्रत्येक 5 लाख आबादी के लिए यू-सीएचसी की स्थापना की जा सकती है। प्राथमिक स्वास्थ्य देखभाल सुविधाओं के अलावा, यह इन-पेशेंट सेवाएं, चिकित्सा देखभाल, शल्य चिकित्सा सुविधाएं और संस्थागत प्रसव सुविधाएं प्रदान करता है। यह 30-50 बेड की सुविधा है। शहरी सीएचसी के लिए मानदंड ग्रामीण सीएचसी के समान हैं। 31 मार्च 2020 तक, भारत के शहरी क्षेत्रों में कार्यात्मक 466 यू-सीएचसी हैं (अनुभाग IV, तालिका 6)। शहरी स्वास्थ्य के प्रत्येक स्तर के मानदंडों के अनुसार स्टाफिंग पैटर्न का विवरण बॉक्स 3 में दिया गया है।

यूपीएचसी - एचडब्ल्यूसी (स्वास्थ्य और कल्याण केंद्र)⁴

व्यापक प्राथमिक स्वास्थ्य देखभाल (सीपीएचसी) सेवाओं की डिलीवरी सुनिश्चित करने के लिए, मौजूदा यू-पीएचसी को स्वास्थ्य और कल्याण केंद्रों (एचडब्ल्यूसी) में परिवर्तित किया जाएगा। सेवाओं को आउटरीच सेवाओं, मोबाइल मेडिकल यूनिटों, स्वास्थ्य शिविरों, घरेलू यात्राओं और समुदाय-आधारित बातचीत के माध्यम से प्रदान / पूरक किया जा सकता है, लेकिन सिद्धांत देखभाल का एक सहज निरंतरता होना चाहिए जो इक्विटी, गुणवत्ता, सार्वभौमिकता और कोई वित्तीय कठिनाई सुनिश्चित करता है।

यू-पीएचसी में चिकित्सा अधिकारी यह सुनिश्चित करने के लिए जिम्मेदार होगा कि सीपीएचसी सेवाओं को उसके / उसके क्षेत्र के सभी एचडब्ल्यूसी के माध्यम से और यू-पीएचसी के माध्यम से वितरित किया जाए। पीएचसी को एचडब्ल्यूसी को मजबूत करने के लिए, यू-पीएचसी स्टाफ (चिकित्सा अधिकारी, स्टाफ नर्स, फार्मासिस्ट और लैब तकनीशियन) के प्रशिक्षण के लिए सहायता, और "वेल्नेस रूम" के लिए उपकरणों का प्रावधान, आवश्यक आईटी अवसंरचना और उन्नयन के लिए आवश्यक संसाधन सेवाओं की विस्तारित श्रेणियों के पूरक के लिए प्रयोगशाला और नैदानिक सहायता प्रदान की जाएगी। राज्य स्थानीय आवश्यकताओं के आधार पर एचडब्ल्यूसी और पीएचसी में स्टाफिंग को संशोधित करने का विकल्प चुन सकते हैं। एचडब्ल्यूसी सेवाओं की एक विस्तारित सीमा प्रदान करेगा। सभी यू-पीएचसी को एचडब्ल्यूसी में परिवर्तित करने का लक्ष्य रखा गया है।

3 स्रोत "नियोजकों और भागीदारों के लिए अभिविन्यास मॉड्यूल, एनयूएचएम"

4 स्रोत एबी-सीपीएचसी-एचडब्ल्यूसी के लिए परिचालन दिशानिर्देश

बॉक्स 3

स्टाफ पैटर्न (न्यूनतम मानक)		
A	शहरी- प्राथमिक स्वास्थ्य केन्द्रों के लिए स्टाफ	कुल पद
1	चिकित्सा अधिकारी	1 फुल टाइम + 1 पार्ट टाइम
2	फार्मासिस्ट	1
3	स्टाफ नर्स	2-3
4	स्वास्थ्य कार्यकर्ता महिला / एएनएम / एमपीडब्ल्यू (एफ)	5
5	प्रयोगशाला तकनीशियन	1

6	पब्लिक हेल्थ मैनेजर	1
7	लेखाकार सहित सहायक कर्मचारी	1-3
8	एम एंड ई यूनिट	1
	कुल	17
C	शहरी-सामुदायिक स्वास्थ्य केन्द्रों के लिए स्टाफ*	कुल पद
1	चिकित्सा अधिकारी	4
2	नर्स मिड- वाइफ (स्टाफ नर्स)	7
3	ड्रेसर	1
4	फार्मासिस्ट	1
5	प्रयोगशाला तकनीशियन	1
6	रेडियोग्राफर	1
7	वार्ड बॉय	2
8	धोबी	1
9	सफाई कर्मचारी	3
10	माली	1
11	चोकीदार	1
12	आया	1
13	चपरासी	1
	कुल	25
	* ग्रामीण – सीएचसी की तरह	

31 मार्च 2020 तक, भारत में कुल 5895 यू-पीएचसी कार्यात्मक हैं और शहरी जनसंख्या मानदंडों के अनुसार यू-पीएचसी के लगभग 38.2% की कमी है। लगभग 68% यू-पीएचसी सरकारी भवनों में स्थित हैं, 25% किराए के भवनों में स्थित हैं और 7% बिना किराए के भवनों में स्थित हैं (अनुभाग VII, तालिका 48 और 49)।

इसी तरह, देश में 31 मार्च 2020 तक 466 यू-सीएचसी कार्यरत हैं। लगभग 95% यू-सीएचसी सरकारी भवनों में और 4% किराए के भवनों में और 1% बिना किराए के भवनों में स्थित हैं। (अनुभाग VII, तालिका 50)।

शहरी क्षेत्रों में पीएचसी और एससी स्तर पर 15926 एचडब्लू (महिला) / एएनएम उपलब्ध हैं। यू-पीएचसी में 6399 डॉक्टर, 4459 फार्मासिस्ट, 4009 लैब टेक्नीशियन और 8444 स्टाफ नर्स उपलब्ध हैं। जहां तक रिक्ति का संबंध है, पीएचसी और एससी स्तर पर एचडब्ल्यू (एफ) / एएनएम के 20.9% की रिक्ति है। यू-पीएचसी में 16.7% डॉक्टरों, 19.7% फार्मासिस्टों, 20.5% लैब तकनीशियनों और 19.2% स्टाफ नर्सों की रिक्ति है। यू-पीएचसी स्तर पर सभी पदों में कमी देखी गई है। यू-पीएचसी और एससी में 46.4% एएनएम की कमी है। यू-पीएचसी में डॉक्टरों की 11.1%,

फार्मासिस्टों की 30.4%, लैब तकनीशियनों की 32.3% और स्टाफ नर्सों की 13.3% की कमी है (अनुभाग VII, तालिका 51, 52, 58, 60 और 62)।

यू-सीएचसी में 1242 स्पेशलिस्ट, 1028 जीडीएमओ, 274 रेडियोग्राफर, 646 फार्मासिस्ट, 705 लैब टेक्नीशियन और 5880 स्टाफ नर्स हैं। इसके अलावा, 31 मार्च 2020 तक यू-सीएचसी में 257 एनेस्थेसिस्ट और 68 आई सर्जन उपलब्ध हैं। यू-सीएचसी में 33.8% स्पेशलिस्ट, 19.1% जीडीएमओ, 25.9% रेडियोग्राफर, 12.5% फार्मासिस्ट, 12.5% लैब टेक्नीशियन और 11.9% स्टाफ नर्स हैं। कुल विशेषज्ञ का 37.4%, जीडीएमओ का 13.5%, रेडियोग्राफर्स का 41.8%, फार्मासिस्टों का 9.9%, लैब तकनीशियनों का 7.5% और यू-सीएचसी में 9.5% स्टाफ नर्सों की कमी है। (अनुभाग VII, तालिका 53, 56, 57, 59, 61 और 63)।

भारत में स्वास्थ्य देखभाल प्रणाली

आयुष्मान भारत कार्यक्रम के कार्यान्वयन के बाद इन केंद्रों के माध्यम से व्यापक प्राथमिक स्वास्थ्य सेवा प्रदान करने के लिए उप-केंद्रों और प्राथमिक स्वास्थ्य केंद्रों को मजबूत करके उन्हें स्वास्थ्य और कल्याण केंद्रों में परिवर्तित किया जा रहा है। एससी और पीएचसी को चरणबद्ध तरीके से स्वास्थ्य और कल्याण केंद्रों में परिवर्तित करने का प्रस्ताव है।

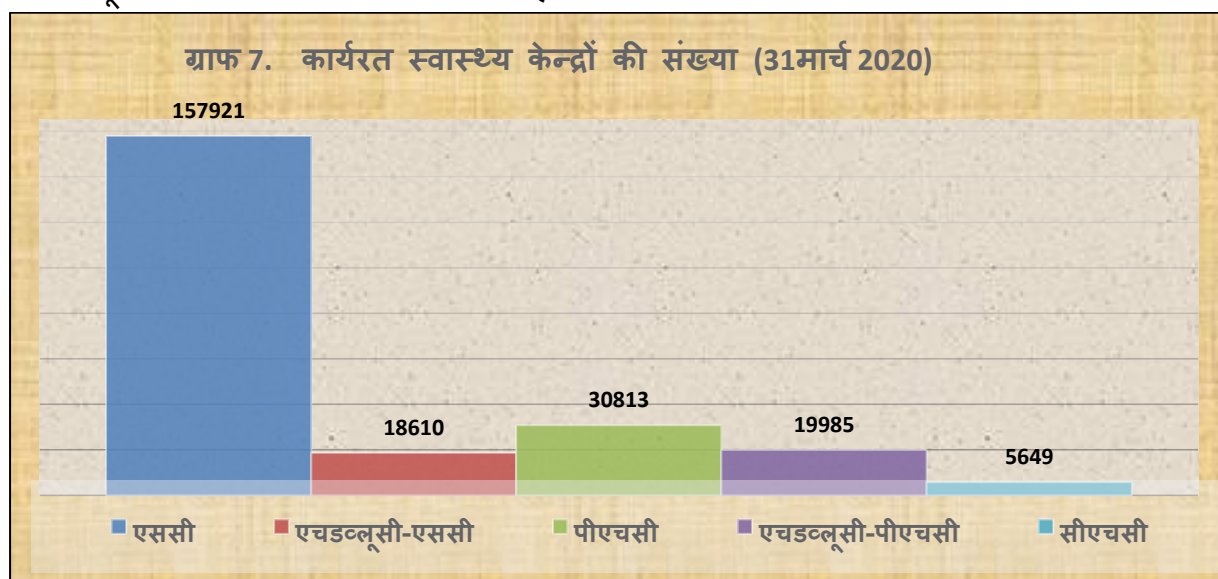
उप केंद्र: 31 मार्च 2020 तक, भारत के ग्रामीण और शहरी दोनों क्षेत्रों में कुल 157921 उप केंद्र (एससी) कार्यरत हैं। इनमें ग्रामीण क्षेत्रों में 155404 एससी और शहरी क्षेत्रों में 2517 एससी शामिल हैं।

प्राथमिक स्वास्थ्य केंद्र: इसी प्रकार भारत में ग्रामीण और शहरी दोनों क्षेत्रों में 30813 प्राथमिक स्वास्थ्य केंद्र (पीएचसी) कार्यरत हैं। इनमें ग्रामीण इलाकों में 24918 पीएचसी और शहरी इलाकों में 5895 पीएचसी हैं।

सामुदायिक स्वास्थ्य केंद्र: देश में 5649 सामुदायिक स्वास्थ्य केंद्र (सीएचसी) कार्यात्मक हैं, जिनमें 5183 ग्रामीण और 466 शहरी सीएचसी शामिल हैं।

स्वास्थ्य और कल्याण केंद्र: हेल्थ एंड वेलनेस सेंटर पोर्टल के आंकड़ों के अनुसार, 31 मार्च 2020 तक भारत में कुल 38595 एचडब्ल्यूसी कार्यात्मक हैं। कुल 18610 एससी को एचडब्ल्यूसी-एससी में परिवर्तित किया गया है। पीएचसी के स्तर पर भी, कुल 19985 पीएचसी को एचडब्ल्यूसी-पीएचसी में परिवर्तित किया गया है। कुल 19985 एचडब्ल्यूसी-पीएचसी में से, कुल 16635 पीएचसी को ग्रामीण क्षेत्रों में एचडब्ल्यूसी में और 3350 शहरी क्षेत्रों में परिवर्तित किया गया है। (अनुभाग IV, तालिका 8)।

ग्राफ 7, 31 मार्च 2020 तक भारत में कार्यात्मक कुल अनुसूचित जाति, पीएचसी, सीएचसी और एचडब्ल्यूसी को चित्रमय प्रतिनिधित्व करता है।



ग्राफ 7 में एससी और पीएचसी के कुल आंकड़ों में एचडब्ल्यूसी की संख्या शामिल है।

आयुष्मान भारत के तहत स्वास्थ्य सुविधाओं का सुदृढीकरण- स्वास्थ्य और कल्याण केंद्र:

आयुष्मान भारत यूनिवर्सल हेल्थ कवरेज के लक्ष्य को पूरा करने के लिए 2018 में शुरू किया गया सरकार का एक प्रमुख कार्यक्रम है। यह एक चयनात्मक दृष्टिकोण से स्वास्थ्य देखभाल के लिए स्थानान्तरित करने का प्रयास है ताकि निवारक, प्रचारक, उपचारात्मक पुनर्वास और उपशामक देखभाल के लिए व्यापक सेवाएं प्रदान की जा सकें। आयुष्मान भारत में दो घटक हैं जो एक दूसरे के पूरक हैं। इसके पहले घटक के तहत, लगभग 1,50,000 मौजूदा उप-स्वास्थ्य केंद्र (SHCs) और प्राथमिक स्वास्थ्य केंद्र (PHCs) को *आयुष्मान भारत व्यापक प्राथमिक स्वास्थ्य देखभाल देने के लिए वर्ष 2022 तक स्वास्थ्य और कल्याण केंद्र (AB-HWCs)* में बदल दिया जाएगा, यह सार्वभौमिक और उपयोगकर्ताओं के लिए स्वतंत्र है, जो कल्याण पर ध्यान केंद्रित करने और समुदाय के करीब सेवाओं की विस्तारित सीमा के वितरण के साथ है। अन्य घटक प्रधानमंत्री जन आरोग्य योजना (PMJAY) है, जो गरीब और कमजोर परिवारों को द्वितीयक और तृतीयक देखभाल प्रदान करने के लिए स्वास्थ्य सुरक्षा कवर प्रदान करता है। इन स्वास्थ्य और कल्याण केंद्रों में प्रदान की जाने वाली सेवाओं की विस्तृत श्रृंखला मौजूदा एमसीएच और संचारी रोग संबंधी सेवाओं को मजबूत करने और अतिरिक्त सेवाओं अर्थात् गैर-संचारी रोगों, मौखिक स्वास्थ्य, मानसिक स्वास्थ्य, ईएनटी, नेत्र रोग, बुजुर्गों की देखभाल, उपशामक देखभाल और आघात देखभाल सेवाओं को लागू करेगी।

सेवाओं की विस्तारित सीमा

- i. गर्भावस्था और बच्चे के जन्म में देखभाल।
- ii. नवजात और शिशु स्वास्थ्य देखभाल सेवाएं।
- iii. बचपन और किशोर स्वास्थ्य देखभाल सेवाएं।
- iv. परिवार नियोजन, गर्भनिरोधक सेवाएं और अन्य प्रजनन स्वास्थ्य देखभाल सेवाएं।
- v. राष्ट्रीय स्वास्थ्य कार्यक्रमों सहित संचारी रोगों का प्रबंधन।
- vi. सामान्य संचारी रोगों का प्रबंधन और तीव्र सरल बीमारियों और छोटी बीमारियों के लिए बाह्य रोगी देखभाल।
- vii. स्क्रीनिंग, रोकथाम, नियंत्रण और गैर-संचारी रोगों का प्रबंधन।
- viii. सामान्य नेत्र और ईएनटी समस्याओं की देखभाल।
- ix. बेसिक ओरल हेल्थ केयर।
- x. बुजुर्ग और उपशामक स्वास्थ्य देखभाल सेवाएँ।
- xi. आपातकालीन चिकित्सा सेवाएँ।
- xii. मानसिक स्वास्थ्य रोगों की जांच और बुनियादी प्रबंधन।

व्यापक प्राथमिक स्वास्थ्य देखभाल (सीपीएचसी) सेवाओं की डिलीवरी सुनिश्चित करने के लिए, 3000 -5000 की आबादी को कवर करने वाले मौजूदा उप केंद्रों को आयुष्मान भारत - स्वास्थ्य और कल्याण केंद्रों में परिवर्तित किया जाएगा। ग्रामीण क्षेत्रों में एचडब्ल्यूसी-एससी के क्लस्टर से जुड़े सभी पीएचसी, 50,000 की आबादी के लिए 20,000-30,000 और शहरी पीएचसी खानपान को कवर करते हुए भी एचडब्ल्यूसी के रूप में सेवाओं की एक विस्तारित रेंज देने के लिए मजबूत किया जाएगा।

एचडब्ल्यूसी के लिए मुख्य जानकारी में शामिल हैं -

1. मानव संसाधन और बहुसंकेतन का विस्तार एचडब्ल्यूसी-एससी में इन सेवाओं को प्रदान करने के लिए, कार्यकर्ता का एक नया कैडर-एक गैर-चिकित्सक स्वास्थ्य कार्यकर्ता: सामुदायिक स्वास्थ्य अधिकारी, सार्वजनिक स्वास्थ्य और प्राथमिक स्वास्थ्य देखभाल की दक्षताओं में प्रशिक्षित, और नैदानिक में सुधार की उम्मीद प्रबंधन, देखभाल की निरंतरता, दवाओं के वितरण और पुरानी बीमारियों / स्वास्थ्य सुविधाओं से छुट्टी पाने वाले रोगियों के लिए करीबी अनुवर्ती बहुउद्देशीय कार्यकर्ता और आशा की टीम का नेतृत्व करता है। अन्य सेवा प्रदाताओं की क्षमता सेवाओं के विस्तारित पैकेज को वितरित करने के लिए उचित रूप से निर्मित की जा रही है। कई राज्यों ने निरंतर क्षमता निर्माण के लिए ईसीएचओ जैसे डिजिटल प्लेटफार्मों के उपयोग की पहल की है।
2. दवाएं और डायग्नोस्टिक्स - उपचार के पालन को सक्षम करने और ओओपीई को कम करने के लिए एचडब्ल्यूसी में योजनाबद्ध अतिरिक्त सेवाओं के लिए दवाओं और डायग्नोस्टिक्स की आवश्यक सूची की उपलब्धता का विस्तार किया जा रहा है।
3. इन्फ्रास्ट्रक्चर - विस्तारित सेवा वितरण के लिए पर्याप्त स्थान की उपलब्धता, दवा के भंडारण और वितरण के लिए, डायग्नोस्टिक परीक्षणों का संचालन, वेलनेस संबंधी गतिविधियों के लिए स्थान, योग के अभ्यास सहित अंतरिक्ष के संचालन आदि को सक्षम करने के लिए इन्फ्रास्ट्रक्चर और ब्रांडिंग का उन्नयन किया जा रहा है।
4. रोबस्ट आईटी सिस्टम - AB- एचडब्ल्यूसी टीम को आईटी सिस्टम से लैस किया जा रहा है, जो आशाओं के लिए स्मार्ट फोन, उप स्वास्थ्य केंद्रों में टैबलेट और पीएचसी स्तर पर लैपटॉप / डेस्कटॉप, एचडब्ल्यूसी द्वारा कवर की गई आबादी के इलेक्ट्रॉनिक स्वास्थ्य रिकॉर्ड बनाने के लिए, रेफरल रिपोर्टिंग की सुविधा, और देखभाल की निरंतरता सक्षम करें।
5. देखभाल, टेलीकॉन्सेलेशन और रेफरल का निरंतरता- सभी स्तरों पर, टेलीकॉन्सेलेशन का उपयोग रेफरल सलाह को बेहतर बनाने, स्पष्टीकरण प्राप्त करने और विशेषज्ञों द्वारा केस प्रबंधन समर्थन सहित आभासी प्रशिक्षण करने के लिए किया जाएगा। एचडब्ल्यूसी टीम को उपचार के पालन, पुनर्वास और समय पर और उचित रेफरल सुनिश्चित करने के लिए माध्यमिक सुविधाओं से छुट्टी पाने वाले रोगियों का भी आरोप लगाया जाएगा।
6. वित्तपोषण / प्रदाता भुगतान सुधार - टीम-आधारित प्रोत्साहन के लिए तंत्र और सीएचओ और फ्रंटलाइन श्रमिकों के लिए लिंक को एचडब्ल्यूसी में पेश किया गया है।
7. सामुदायिक मोबिलाइजेशन और स्वास्थ्य संवर्धन: सामुदायिक स्तर के सामूहिक विवाह जैसे - वीएचएसएनसी, एमएस और एसएचजी के माध्यम से स्वास्थ्य संवर्धन की सुविधा दी जा रही है। एचडब्ल्यूसी के प्रमुख घटक के रूप में कल्याण को एकीकृत करने के लिए कई दृष्टिकोण लागू किए जा रहे हैं और सकारात्मक परिणामों के लिए मल्टीसेक्टरल अभिसरण की आवश्यकता है। इनमें ईट राइट मूवमेंट, फिट इंडिया कैंपेन और एबी-एचडब्ल्यूसी में नियमित कल्याण सत्र आयोजित करने के प्रावधान बनाने जैसी पहल शामिल हैं।



PART 1
HEALTH CARE SYSTEM IN INDIA

Rural Health Care System in India

1. Rural Health Care System – the structure and current scenario

The health care infrastructure in rural areas has been developed as a three tier system (see *Chart 1*) and is based on the following population norms:

Table 1.

Centre	Population Norms *	
	Plain Area	Hilly/Tribal/Difficult Area
Sub Centre	5000	3000
Primary Health Centre	30000	20000
Community Health Centre	120000	80000

***Number of persons covered under the services of a particular Facility (SC, PHC & CHC)**

1.1 As on 31st March, 2020, there are 155404 Sub Centres (SC), 24918 Primary Health Centres (PHCs) and 5183 Community Health Centres (CHCs) which are functioning in rural areas of the country. (**Section IV, Table 6**).

Sub Centres (SCs)

1.2. The Sub Centre is the most peripheral and first contact point between the primary health care system and the community. Sub Centres are assigned tasks relating to interpersonal communication in order to bring about behavioral change and provide services

As on 31st March, 2020, there are 155404 numbers of rural SCs functional in the country.

The significant increase in SCs from year 2005 has been observed in the States of Rajasthan (2968), Gujarat (1888), Chhattisgarh (1387), Madhya Pradesh (1352) and Karnataka (1045).

in different programmes like maternal and child health, family welfare, nutrition, immunization, diarrhoea control and communicable diseases as well as non-communicable diseases. Each Sub Centre is required to be manned by at least one

auxiliary nurse midwife (ANM) / female health worker and one male health worker for details of staffing pattern, (see **Box 1**) and for recommended staffing structure under Indian Public Health Standards (IPHS) (see **Annexure I**). Under NRHM, there is a provision for one additional second ANM on contract basis. One lady health visitor (LHV) is entrusted with the task of supervision of six Sub Centres. Government of India bears the salary of ANM and LHV while the salary of the Male Health Worker is borne by the State governments. Under the Swap Scheme, the Government of India has taken over an additional 39554 Sub Centres from State governments / Union territories since April, 2002 in lieu of 5434 Rural Family Welfare Centres transferred to the State governments / Union territories. There are a total 155404 Sub Centres functioning in rural areas of the country as on 31st March, 2020 (**Section IV, Table 6**). At national level there is an increase of 9378 numbers of SCs from the year 2005. The significant increase in SCs has been observed in the States of Rajasthan (2968),

Gujarat (1888), Chhattisgarh (1387), Madhya Pradesh (1352) and Karnataka (1045). **(Section I, Comparative Statement 1).**

Primary Health Centres (PHCs)

1.3. PHC is the first contact point between village community and the medical officer. The PHCs were envisaged to provide an integrated curative and preventive health care to the rural population with emphasis on preventive and promotive aspects of health care. The PHCs are established and maintained by the State governments under the Minimum Needs Programme (MNP)/ Basic Minimum Services (BMS) Programme. As per minimum requirement (Box-1), a PHC is to be manned by a medical officer supported by 14 paramedical and other staff (See Annexure-I for IPHS norms). Under NRHM, there is a provision for two additional staff nurses at PHCs on contract basis. It acts as a referral unit for 6 Sub Centres and has 4-6 beds for patients. The activities of PHC involve curative, preventive, promotive and family welfare services. There are 24918 PHCs functioning in rural areas of the country as on 31st March, 2020 **(Section IV, Table 6)**. At national level, there is an increase of 1682 PHCs in 2020 with comparison to the year 2005 **(Section I, Comparative Statement 1)**.

At the national level, there are 24918 PHCs functioning in rural areas as on 31st March 2020. The increase in PHCs from year 2005 has been observed in the States of Jammu & Kashmir (589), Karnataka (495), Gujarat (407), Rajasthan (381) and Chhattisgarh (275).

Community Health Centres (CHCs)

1.4. CHCs are being established and maintained by the State government under MNP/BMS programme. As per minimum norms (Box-1), a CHC is required to be manned by four medical specialists i.e. Surgeon, Physician, Obstetrician/Gynecologist and Pediatrician supported by 21 paramedical and other staff (See Annexure-I for IPHS norms). It has 30 in-door beds with one OT, X-ray, labour room and laboratory facilities. It serves as a referral centre for 4 PHCs and also provides facilities for obstetric care and specialist consultations. As on 31st March, 2020, there are 5183 of CHCs functioning in rural areas of the country. The increase in CHCs from year 2005 has been observed in the States of Tamil Nadu (350), Uttar Pradesh (325), West Bengal (253), Rajasthan (222) and Odisha (146)**(Section IV, Table 6)**.

As on 31st March 2020, there are 5183 CHCs functional in rural areas of the country. At national level there is increase of 1837 number of CHCs from the year 2005.

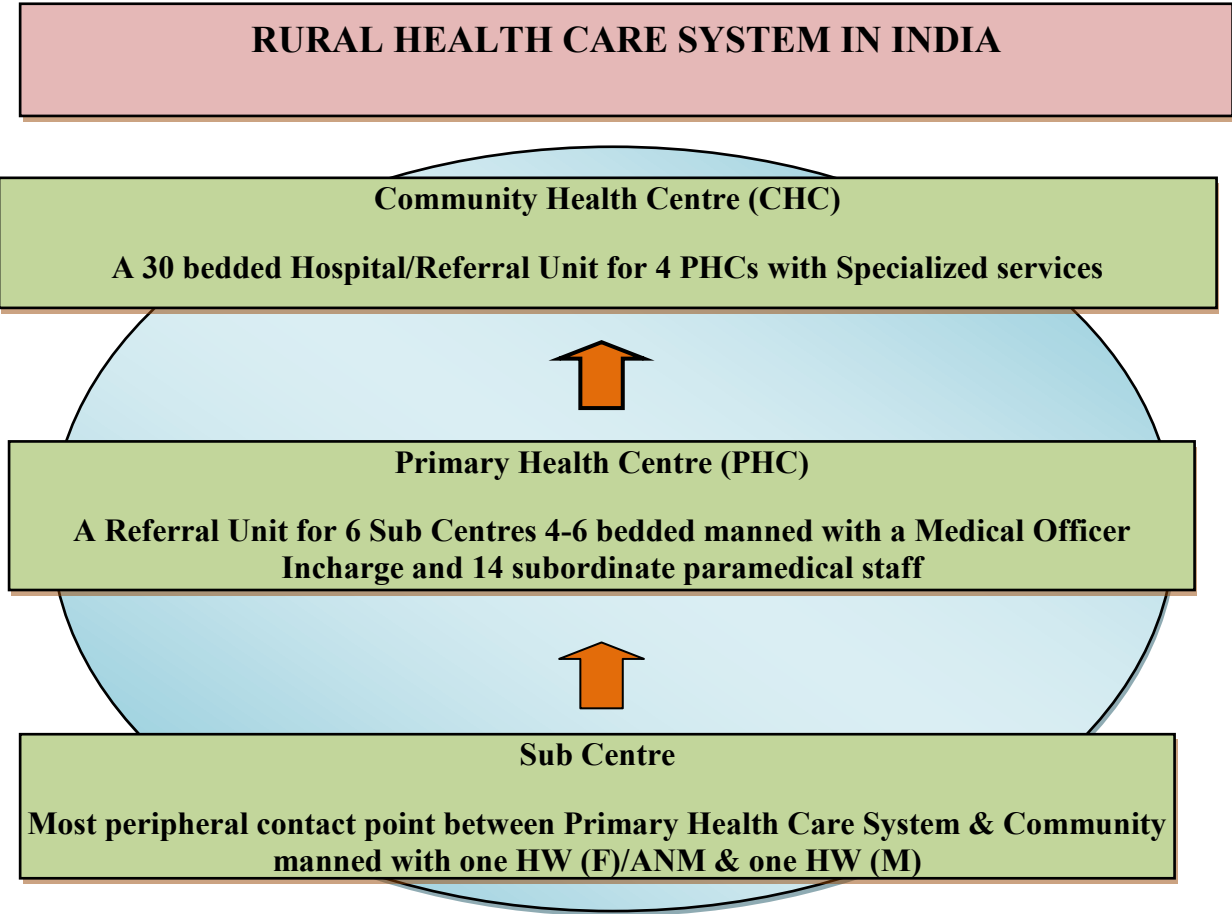
1.5. The details of the population norms for each level of rural health infrastructure and current status against these norms are given in *Box 2*.

First Referral Units (FRUs)

1.6. An existing facility (District Hospital, Sub-divisional Hospital, Community Health Centre etc.) can be declared as a fully operational First Referral Unit (FRU) only if it is equipped to provide round-the-clock services for emergency obstetric and New Born Care, in addition to all emergencies that any hospital is required to provide. It should be noted that there are three critical determinants of a facility being declared as a FRU: i) Emergency Obstetric Care including surgical interventions like caesarean sections; ii) new-born care; and iii) blood storage facility on a 24-hour basis.

As on 31st March 2020, there are 3313 FRUs functioning in the country. Out of these, 1706, 821, 668 and 118 are at the level of CHC, SDH, DH and Medical College respectively. (Section VI, Table 47).

Chart 1.



2. Strengthening of Rural Health Infrastructure under National Rural Health Mission

2.1. The National Rural Health Mission seeks to provide effective affordable healthcare to rural population throughout the country with special focus on those states, which have weak public health indicators and/or weak infrastructure.

2.2. NRHM aims to undertake architectural correction of the health system to enable it to effectively handle increased allocations and promote policies that strengthen public health management and service delivery in the country. It has key components provision of a female health activist in each village; a village health plan prepared through a local team headed by the Village Health, Sanitation & Nutrition Committee (VHS&NC) of the Panchayat; strengthening of the rural hospital for effective curative care and made measurable and accountable to the community through Indian Public Health Standards (IPHS); integration of vertical health & family welfare programmes, optimal utilization of funds & infrastructure, and strengthening delivery of primary healthcare. It seeks to revitalize local health traditions and mainstream AYUSH into the public health system. It further aims at effective integration of health concerns with determinants of health like sanitation & hygiene, nutrition, and safe drinking water through a District Plan for health. It seeks decentralization of programmes for district management of health and to address the inter-State and inter-district disparities, including unmet needs for public health infrastructure. It also seeks to improve access of rural people, especially poor women and children, to equitable, affordable, accountable and effective primary healthcare.

Box 1.

STAFFING PATTERN (Minimum norm)		
A.	<u>STAFF FOR SUB - CENTRE:</u>	Number of Posts
1	Health Worker (Female)/ANM.....	1
2	Additional Second ANM (on contract).....	1
3	Health Worker (Male).....	1
4	Voluntary Worker	1
	Total (excluding contractual staff):	3
B. <u>STAFF FOR NEW PRIMARY HEALTH CENTRE:</u>		
1	Medical Officer.....	1
2	Pharmacist.....	1
3	Nurse Mid-wife (Staff Nurse).....1 + 2 additional Staff Nurses on contract	
4	Health Worker (Female)/ANM.....	1
5	Health Educator.....	1
6	Health Assistant (Male).....	1
7	Health Assistant (Female)/LHV.....	1
8	Upper Division Clerk.....	1
9	Lower Division Clerk.....	1
10	Laboratory Technician	1
11	Driver (Subject to availability of Vehicle)	1
12	Class IV	4
	Total (excluding contractual staff):	15

C. STAFF FOR COMMUNITY HEALTH CENTRE:

1	Medical Officer #	4
2	Nurse Mid- Wife (staff Nurse)	7
3	Dresser	1
4	Pharmacist/Compounder	1
5	Laboratory Technician	1
6	Radiographer	1
7	Ward Boys	2
8	Dhobi.....	1
9	Sweepers	3
10	Mali	1
11	Chowkidar	1
12	Aya	1
13	Peon	1
Total:		25

#: Either qualified or specially trained to work as Surgeon, Obstetrician, Physician and Pediatrician. One of the existing Medical Officers similarly should be either qualified or specially trained in Public Health.

Note: The above is the minimum norm for staffing pattern, including the additional staff prescribed under NRHM as given in Annexure I of this Chapter.

Box 2.

RURAL HEALTH INFRASTRUCTURE – NORMS* AND LEVEL OF ACHIEVEMENTS (ALL INDIA)					
S.No.	Indicator	National Norms		Status (2020)	
1	Rural Population (mid-year population 2020, as on 1st July 2020) covered by a:	General	Tribal/Hilly/Desert	Rural Area	Tribal/Hilly/Desert
	Sub Centre	5000	3000	5729	3381
	Primary Health Centre (PHC)	30000	20000	35730	23930
	Community Health Centre (CHC)	120000	80000	171779	97178
2	Number of Sub Centres per PHC	6		6	7
3	Number of PHCs per CHC	4		5	4
4	Rural Population (mid-year population 2020, as on 1st July 2020) covered by a:				
	HW (F) (at Sub Centres and PHCs)			4188	
	HW (M + F) at Sub Centres			3748	

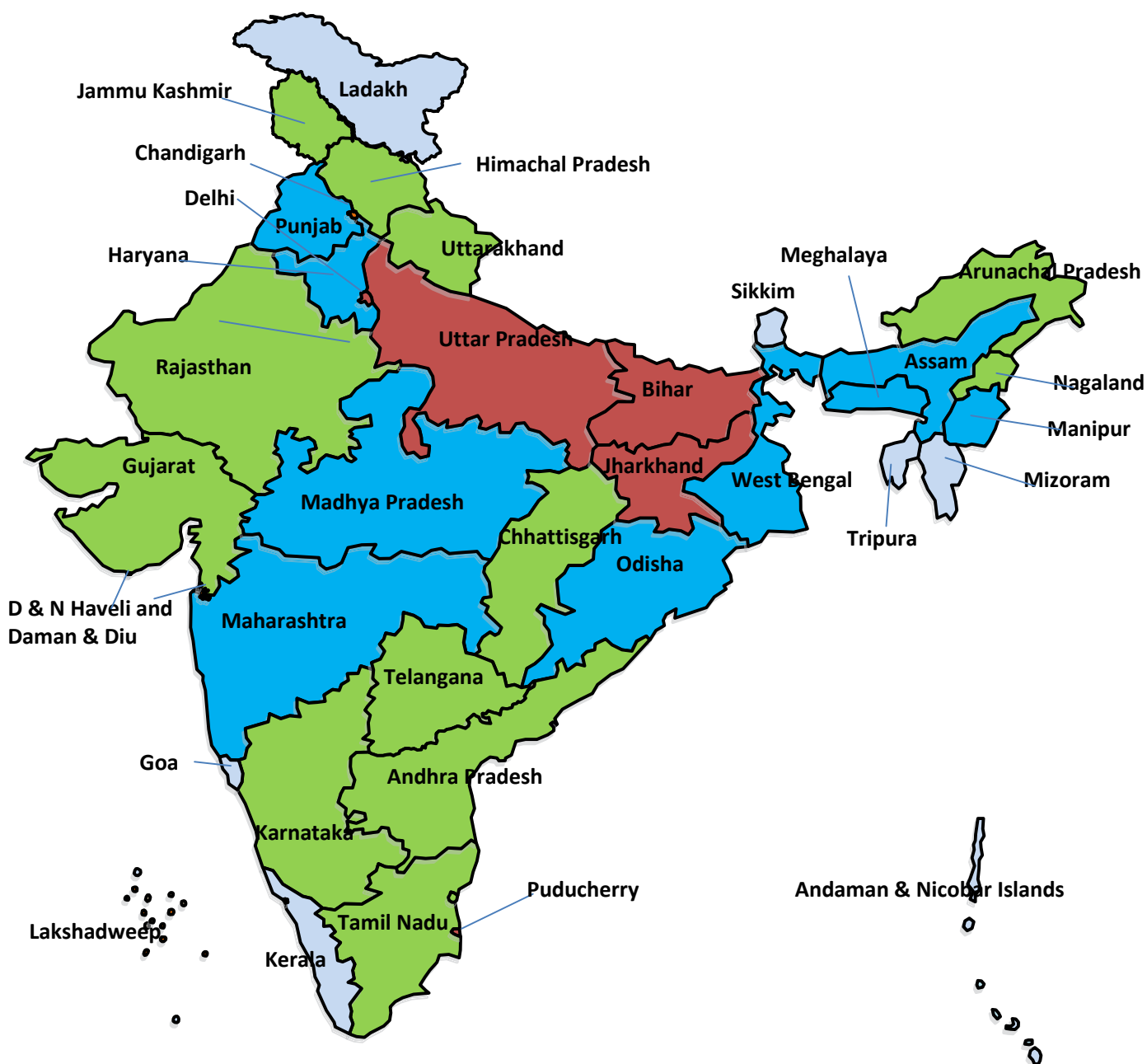
5	Ratio of HA (M + F) at PHCs to HW (M + F) at Sub Centres	Rural Area	Tribal/Hilly/Desert
		1:19	1:7
6	Average Rural Area (Sq. Km) covered by a:		
	Sub Centre	19.87	18.48
	PHC	123.93	130.75
	CHC	595.82	530.96
7	Average Radial Distance (Kms) covered by a:		
	Sub Centre	2.51	2.42
	PHC	6.28	6.45
	CHC	13.77	13.00
8	Average Number of Villages covered by a:	Rural Area	
	Sub Centre	4	-
	PHC	27	-
	CHC	128	-

M: Male F: Female

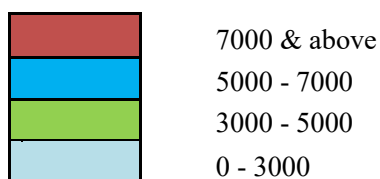
**Number of persons covered under the services of a particular Facility (SC, PHC & CHC)*

The average population covered by a Sub Centre, PHC and CHCs are 5729, 35730 and 171779 respectively as on 31st March, 2020 (**Section VIII, Table 64, 65 & 66**). The State-wise variations in the average population covered by a Sub Centre, PHC and CHC are represented in the **Maps 1, 2 and 3** respectively.

Map 1. Average Rural Population (mid-year Population as on 1st July 2020) Covered per SC as on 31st March, 2020 (Section VIII, Table 64)

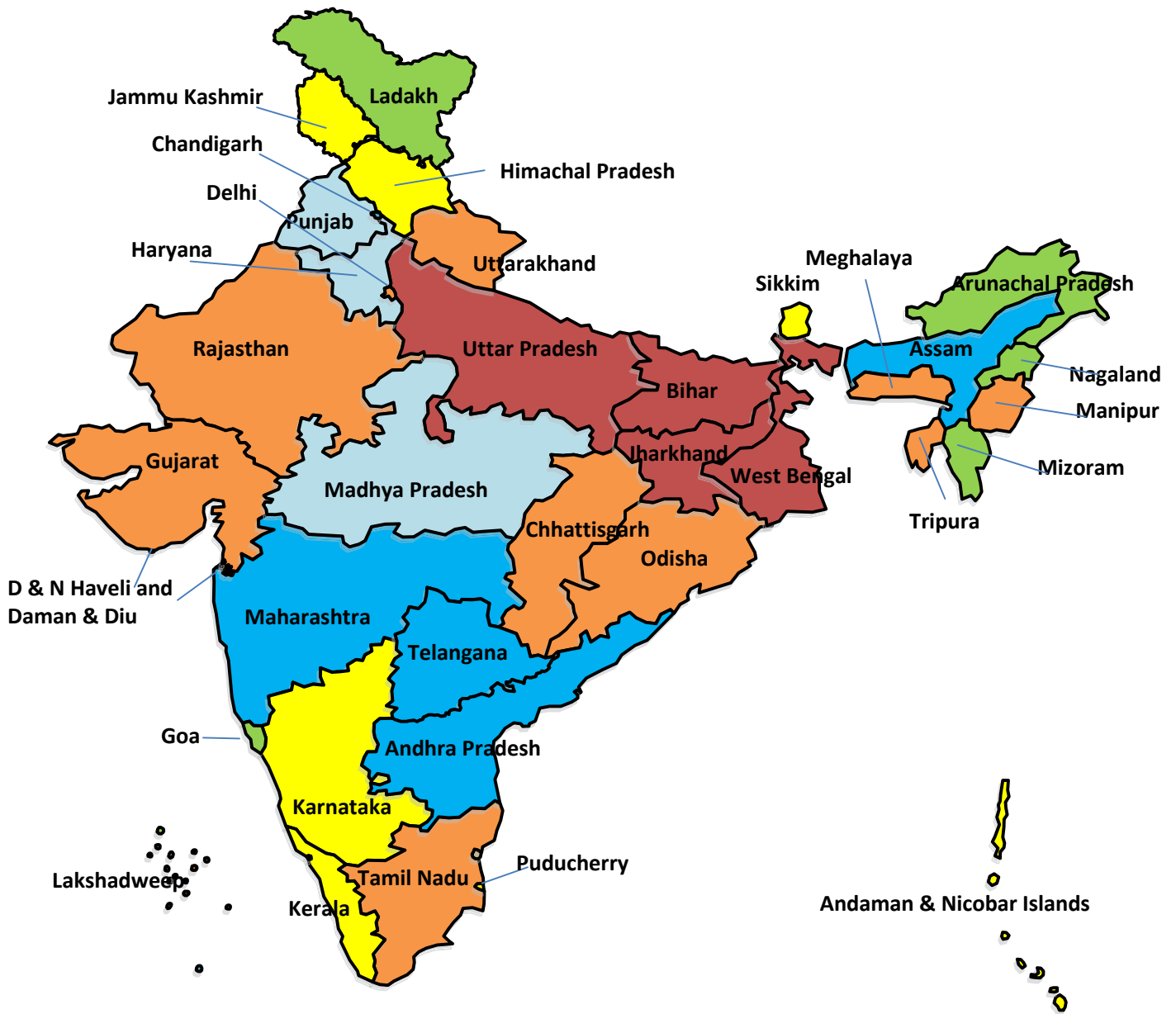


Rural Population Covered per Sub Centres

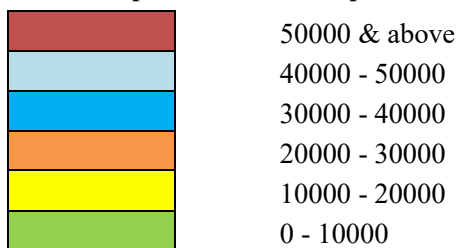


Note: The boundaries and the name shown & the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Map 2. Average Rural Population (mid-year Population as on 1st July 2020) Covered per PHC as on 31st March, 2020 (Section VIII, Table 65)

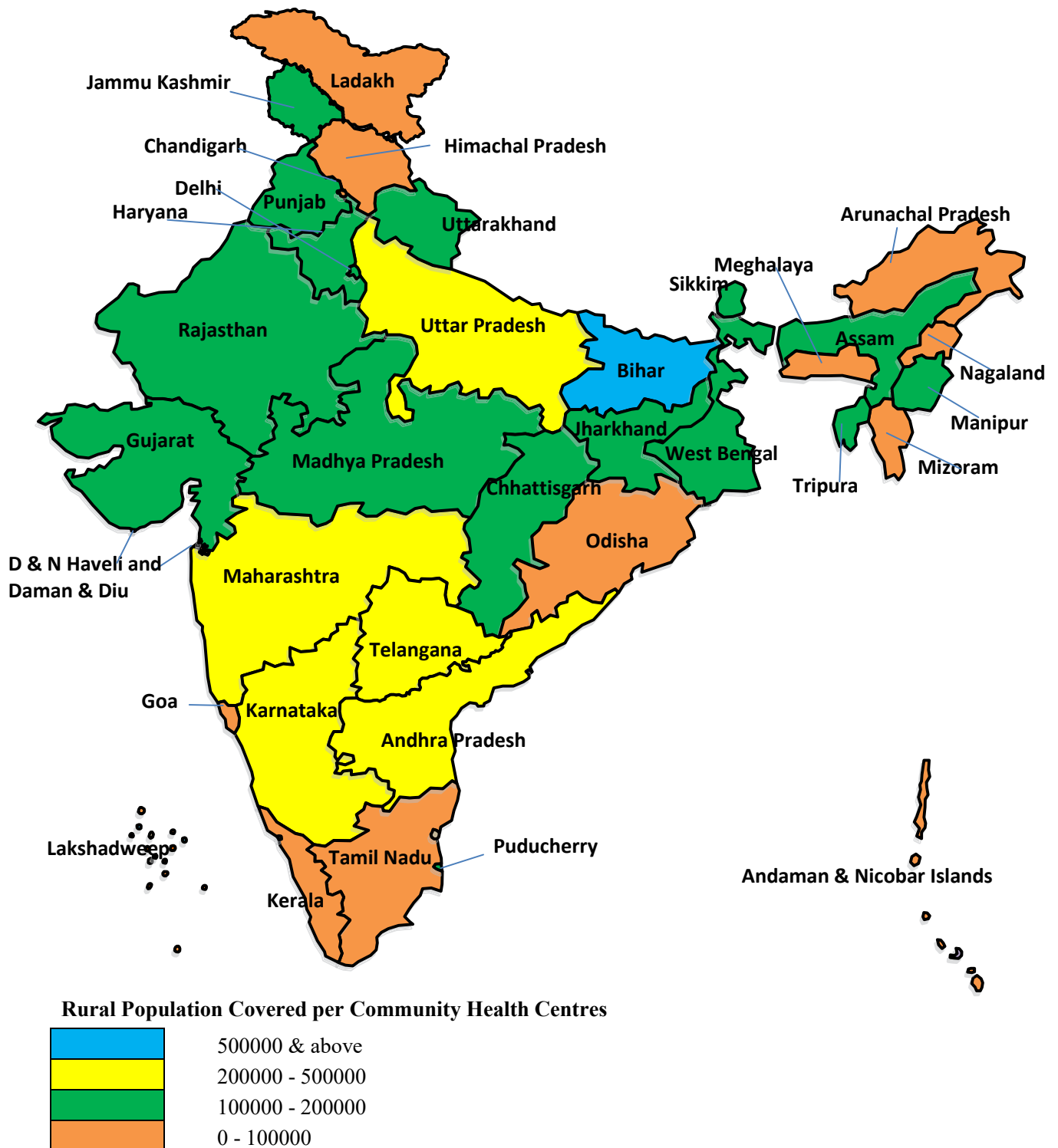


Rural Population Covered per Primary Health Centres



Note: The boundaries and the name shown & the designations used on these maps do not imply official endorsement or acceptance by the United Nations.

Map 3. Average Rural Population (mid-year Population as on 1st July 2020) Covered per CHC as on 31st March, 2020 (Section VIII, Table 66)



Note: The boundaries and the name shown & the designations used on these maps do not imply official endorsement or acceptance by the United Nations

3. Core and Supplementary Strategies of NHM:

3.1 Healthcare System in India – National Health Mission

The National Health Mission, encompasses two sub-missions, National Rural Health Mission and National Urban Health Mission. This mission is flexible and dynamic and is intended to guide states towards ensuring the achievement of universal access of healthcare through strengthening of health systems, institutions and capacity building. The vision of NHM is “Attainment of Universal Access to Equitable, Affordable and Quality health care services, which are accountable and responsive to people’s needs, with effective inter-sectoral convergent action to address the wider social determinants of health”. The mission aims to bridge the gap particularly for poor and vulnerable in urban and rural healthcare services through improved health infrastructure, augmentation of human resources, enhanced service delivery and decentralization of the program to the district level to facilitate context specific, need based interventions, improved intra and inter-sectoral convergence and promote effective utilization of resources. NUHM covers all the State capitals, district headquarters and other cities/towns with a population of 50,000 and above (as per census 2011) in a phased manner. Cities and towns with population below 50,000 will continue to be covered under NRHM.

NHM provides support to the states in overcoming the shortfalls of secondary care health facilities (DH/SDH/CHC) in the districts as per population norms of IPHS. It also supports the states in up gradation of these health facilities in terms of additional infrastructure, human resource, drugs, diagnostics, and equipment as well as provides required technical and financial support to strengthen these healthcare facilities for service delivery. Under Ayushman Bharat, all PHCs and SCs in rural and urban are being upgraded as Health and Wellness centers (HWCs) throughout the country for provision of comprehensive primary healthcare services.

Until 2018, the major programmatic components of NHM included Health system strengthening, communicable, non-communicable diseases, RMNCH+A, immunization etc. With implementation of Ayushman Bharat, there is a paradigm shift from selective primary care to assured comprehensive care and appropriate linkages to referral hospitals through Health & Wellness Centres (HWCs). The major elements of HWCs include expanded service package, which is a strategic component for provision of comprehensive primary healthcare fulfilling the commitment of NHP 2017 towards Universal health coverage. Besides this, the other key components of HWCs are expanded range of HR through mid-level healthcare providers, expanded range of drugs, new technology and point of care diagnostics, robust IT-system, community mobilization and health promotional activities.

The HWCs under AB has expanded the range of service delivery to include 12 service packages as follows:

- i. Care in pregnancy and Child-birth
- ii. Neonatal & infant health care services
- iii. Childhood & adolescent care services
- iv. Family planning, contraceptive services & other reproductive care services

- v. Management of communicable diseases including National Health programs
- vi. Management of communicable diseases and outpatient care for acute simple illness & minor ailment
- vii. Screening, prevention, control and management of NCDs
- viii. Care for common ophthalmic and ENT problems
- ix. Basic Oral healthcare
- x. Elderly & Palliative care services
- xi. Emergency medical services
- xii. Screening & basic management of mental health ailments

Major initiatives and strategies under NHM:

- NHM provides support to states in addressing the shortage of infrastructure, equipment, drugs and diagnostics at different level of public health facilities DH, SDH and CHCs against the Indian Public Health standards (IPHS). PHCs, UPHCs and SCs are being strengthened as HWCs under Ayushman Bharat and also against IPHS standards
- Support states to develop a comprehensive strategy for human resources in health, through policies to support improved recruitment, retention and motivation of health workers in rural, remote and underserved areas, improved workforce management, required staff to help achieve IPHS norms of human resource deployment, development of mid-level care providers and creation of new cadres with appropriate skill sets, and in-service training
- To overcome the shortage of skilled HR, flexibilities have been given to states for giving performance based incentives, higher salaries or allowances for serving in remote and rural areas, promoting campus recruitments and capacity building of doctors and nurses through short-in service skilled courses etc.
- NRHM also supports co-location of AYUSH services in health facilities such as SC-HWCs, PHC-HWCs, CHCs and DHs
- For strengthening assured referral linkages and availability of ambulances during emergency, NHM provides technical and financial support for emergency medical services in States/UTs through a functional National Ambulance Service (NAS) network
- National Mobile Medical Units under NHM facilitates access to public health care particularly to people living in remote, difficult, under-served and unreached areas
- Promotes access to improved healthcare at household levels through ASHA, who act as facilitator, mobilizer and provider of community level care. There are 10.33 lakh ASHAs across the country in rural and urban areas under the NHM who act as a link between the community and the public health system
- Untied grants/ annual maintenance grants are being provided through Rogi Kalyan Samitis for all functional DH, SDH, CHC and PHCs. Such support is also extended to SC-HWCs through newly constituted Jan Aarogya Samitis
- At the Village Level, untied funds are being given to the Village Health, Sanitation and Nutrition Committee (VHSNC), for planning health services of the village and monitoring the services being delivered through the SCs. The VHSNC acts as a subcommittee or statutory body of the Gram Panchayat

A network of tele-consultation through hub-and-spoke model is being established in all the states to improve the quality of services at HWCs. IT supports are being given to ANM, ASHAs and HWCs for improving service delivery and strengthening timely reporting of data. Portals and software have been developed for tracking individuals suffering from NCDs, registration and follow-up of ANC-PNC, provision of FPN, immunization, case-detection and treatment compliance for TB cases etc. Free entitlements for drugs, diagnostics, pregnancy, infant care, dialysis etc. have been initiated for reducing OOPes and improving access to primary and secondary care.

3.2. NHM Plan of Action relating to Infrastructure and Manpower Strengthening

3.2.1 Component (A): Accredited Social Health Activists (ASHA)

The ASHA programme is a key component of the community processes element of the National Health Mission (NHM), intended to achieve the goal of increasing community engagement with the health system. The programme was launched in 18 high focus states¹ and tribal areas of other states in the year 2006. In response to demand from other states, and recognizing the potential of the ASHA to impact key household behaviours related to maternal and child health, the programme was expanded in 2009 to the entire country. With the launch of the National Urban Health Mission, the programme was launched in urban areas also.

The ASHA is a woman community health worker selected by the community, resident in the community, who is trained, deployed and supported to improve the health status of the community through securing people's access to health care services. ASHAs are selected at the norm of 1 per 1000 population in rural areas and 1 per 1000-2500 in urban areas covered under NUHM. In urban habitations with a population of 50,000 or less, ASHAs are selected as per norms followed in rural areas. The guidelines allow flexibility for selection of ASHAs at smaller population in rural areas in tribal, hilly and desert areas with difficult terrain and in urban areas in case of geographic dispersion or scattered settlements of socially and economically disadvantaged groups.

- ASHAs are trained in a cascade model through a pool of National, State and District ASHA trainers. ASHA training is divided into three categories – i) Induction training of eight days, ii) Module 6 & 7 training – 20 days training to be transacted over four rounds of five days each and iii) Supplementary training of 15 days every year. Module 6 & 7 training is skill-based training for ASHAs that build competencies in areas of Maternal and Child health, Communicable Diseases, Reaching the Unreached and Violence against Women. In addition, training of ASHAs on Non-Communicable Diseases and Home-Based Young Child care was launched in 2018 as part of Ayushman Bharat - Health and Wellness Centres and POSHAN Abhiyan respectively. As part of Ayushman Bharat- Health and Wellness Centres team, ASHAs will also be trained on new service areas like Palliative and Elderly Care, Mental Health, Oral Health, Eye and ENT care.

¹ Bihar, Chhattisgarh, Jharkhand, Madhya Pradesh, Orissa, Rajasthan, Uttar Pradesh, Uttarakhand, the eight states of the North East, and Jammu and Kashmir.

- The ASHA programme has a set of supportive structures woven around it, to facilitate her work and make her more effective as a community health worker. The Support structures have been envisaged at four levels with State ASHA Mentoring Group (AMG) and State ASHA Resource Centre at state level, dedicated nodal officers at district and block level and a supervisory cadre of ASHA facilitators at sector/sub block level.
- ASHAs are honorary volunteers who receive performance-based incentives for a wide range of activities (nearly 40 nationally approved incentives and some state specific incentives) that they undertake, ranging from maternal and child health, communicable diseases and non-communicable diseases. In addition to the performance-based incentives, some states² have also introduced fixed monthly honorarium or top up incentives for ASHAs while few states introduced measures for providing social security benefits to ASHAs.³
- Drawing from these experiences, the ASHA benefit package was introduced in the year 2018 to extending benefits of Life insurance, accident insurance and pension to eligible ASHAs and ASHA Facilitators by enrolling eligible ASHAs and AFs under-
 - * Pradhan Mantri Jeevan Jyoti Beema Yojana (premium of Rs. 330 contributed by GOI).
 - * Pradhan Mantri Suraksha Beema Yojana (premium of Rs. 12 contributed by GOI).
 - * Pradhan Mantri Shram Yogi Maan Dhan (50% contribution of premium by GOI and 50% by beneficiaries).

3.2.2 Component (B): Strengthening Sub Centres (SC)

- A critical issue in delivering health care in the outreach areas, particularly in hilly and desert areas is the “time-to-care”. Health care delivery facilities should be within 30 minutes of walking distance, from habitation, implying that additional Sub Centres where population is dispersed would need to be created. Though there is the assured sub centre team per population of 5000 (3000 in hilly, desert and tribal areas), where the population is dense, the gap can be met by positioning multiple service provider teams at existing Sub Centres/ UPHCs.

3.2.3 Component (C): Strengthening Primary Health Centres (PHCs)

Mission aims at strengthening PHCs for quality preventive, promotive, curative, supervisory and outreach services through:

- PHCs assured the services to the population of 30000 (20000 in hilly and tribal areas) and monitors/supervise the services of Sub Centres under its concerned PHCs.
- Adequate and regular supply of essential quality drugs and equipment (including supply of auto disabled syringes for immunization) to PHCs.
- Observance of Standard treatment guidelines & protocols.
- Rogi Kalyan Samiti (RKS) undertake and supervise improvement and maintenance of physical infrastructure is provided.

²Arunachal Pradesh, Sikkim, Kerala, Rajasthan, Haryana, West Bengal, Karnataka, Chhattisgarh, Tripura, Odisha, HP, AP, Telangana, Delhi, Gujarat, UP and UK.

³ Chhattisgarh, Assam, Jharkhand, Kerala, Uttar Pradesh, Uttarakhand, Odisha and West Bengal. States of Delhi, Maharashtra, Sikkim, Gujarat and Madhya Pradesh.

3.2.4 Component (D): Strengthening Community Health Centres (CHCs) for First Referral Care

A key strategy of the Mission is:

- CHCs assured the services to the population of 120000 (80000 in hilly and tribal areas).
- Codification of new Indian Public Health Standards setting norms for infrastructure, staff, equipment, management etc. for CHCs.
- Promotion of stakeholder committees (Rogi Kalyan Samiti) for hospital management.
- Developing standards of services and costs in hospital care.
- Develop, display and ensure compliance to Citizen's Charter at CHC/PHC level.

4. Rural Health Infrastructure - A Statistical Overview

All India analysis for infrastructure and manpower presented below is based on the data reported by the States and UTs. It can be observed that the States / UTs which do not have relevant data for a particular item / category, are excluded while calculating percentages for facilities functioning in Government buildings, manpower vacancies and shortfall etc.

The Centres Functioning at the level of Sub Centre, Primary Health Centres and Community Health Centres:

4.1. The Primary Health Care Infrastructure has been developed as a three tier system with Sub Centre, Primary Health Centre (PHC) and Community Health Centre (CHC) being the three pillars of Primary Health Care System. Progress of Sub Centres, which is the most peripheral contact point between the Primary Health Care System and the community, is a prerequisite for the overall progress of the entire system. There are 155404, 24918 rural SCs and PHCs functioning in the country as on 31st March, 2020, respectively. Over the years, a number of PHCs have been upgraded to the level of CHCs in many States. In accordance with the progress in the number of SCs and PHCs, the number of CHCs has also increased over the years. As on 31st March 2020, total 5183 CHCs are functioning in rural areas (Section IV, Table 6).

4.2. Section I, Comparative Statement 1 presents the number of Sub Centres, PHCs and CHCs existing in 2020 as compared to those reported in 2005. At the national level there is increase of 9378 Sub Centres, 1682 PHCs and 1837 CHCs in 2020 as compared to those existing in 2005. This implies an increase of about 6.4% in number of Sub Centres, about 7.2% in number of PHCs and about 54.9% in number of CHCs in 2020 as compared to 2005. Significant increase in Sub Centres are recorded in the States of Rajasthan (2968), Gujarat (1888), Chhattisgarh (1387), Madhya Pradesh (1352), Karnataka (1045), Odisha (761) and Jammu & Kashmir (591). Similarly significant increases in the number of PHCs have been seen in the States of Jammu & Kashmir (589), Karnataka (495), Gujarat (407), Rajasthan (381) and Assam (336). In case of CHCs, significant increase is observed in the States of Tamil Nadu (350), Uttar Pradesh (325), West Bengal (253), Rajasthan (222) and Odisha (146).

4.3 Section I, Comparative Statement 12 presents the number of Sub Centres, PHCs and CHCs existing in 2020 as compared to those reported in 2019. At the national level there is a decrease of 2007 Sub Centres and 152 CHCs in rural areas due migration of health facilities into Urban areas, whereas an increase of 63 PHCs was observed during this period.

4.4. Section I, Comparative Statement 2 to Comparative Statement 4 give the comparative picture of the status of buildings of Sub Centres, PHCs and CHCs, respectively, in 2020 as compared to that in 2005. As may be seen, percentage of Sub Centres functioning in the government buildings has increased from 43.8% in 2005 to 69.4% in 2020 mainly due to substantial increase in the government buildings in the States of Uttar Pradesh (10630), West Bengal (6657), Madhya Pradesh (3930), Chhattisgarh (2702), Maharashtra (2542), Rajasthan (2410) and Odisha (2355). Similarly, percentage of PHCs functioning in government buildings has also increased significantly from 69% in 2005 to 89.6% in 2020. This is mainly due to increase in the government buildings in the States of Uttar Pradesh (791), Karnataka (581), Gujarat (563), Rajasthan (517), Chhattisgarh (351) and Madhya Pradesh (346). Moreover, number of CHCs functioning in government buildings has increased appreciably in 2020 as compared to 2005. The percentage of CHCs in govt. buildings has increased from 84.3% in 2005 to 96.4% in 2020. This is mainly due to increase in the government buildings in the States of Tamil Nadu (350), Rajasthan (274), Uttar Pradesh (256), West Bengal (253) and Odisha (146). Comparative State-wise status of buildings for Sub Centres, PHCs and CHCs in 2019 and 2020 is available at **Comparative Statement 13**.

Percentage of Sub-Centres functioning in the Government buildings has increased from 43.8% in 2005 to 69.4% in 2020.

Percentage of PHCs functioning in Government buildings has increased significantly from 69% in 2005 to 89.6% in 2020.

Percentage of CHCs in Govt. buildings has increased from 84.3% in 2005 to 96.4% in 2020.

Manpower

4.5 The availability of manpower is one of the important pre-requisite for the efficient functioning of the Rural Health services. As on 31st March, 2020 the overall shortfall (which excludes the existing surplus in some of the States) in the posts of HW(F) / ANM is 2% of the total requirement as per the norm of one HW(F) / ANM per Sub Centre and PHC.

As on 31st March, 2020 the overall shortfall in the posts of HW(F)/ANM is 2% of the total requirement, mainly due to shortfall in States namely, Gujarat (1073), Himachal Pradesh (992), Rajasthan (657), Tripura (389) and Kerala (277).

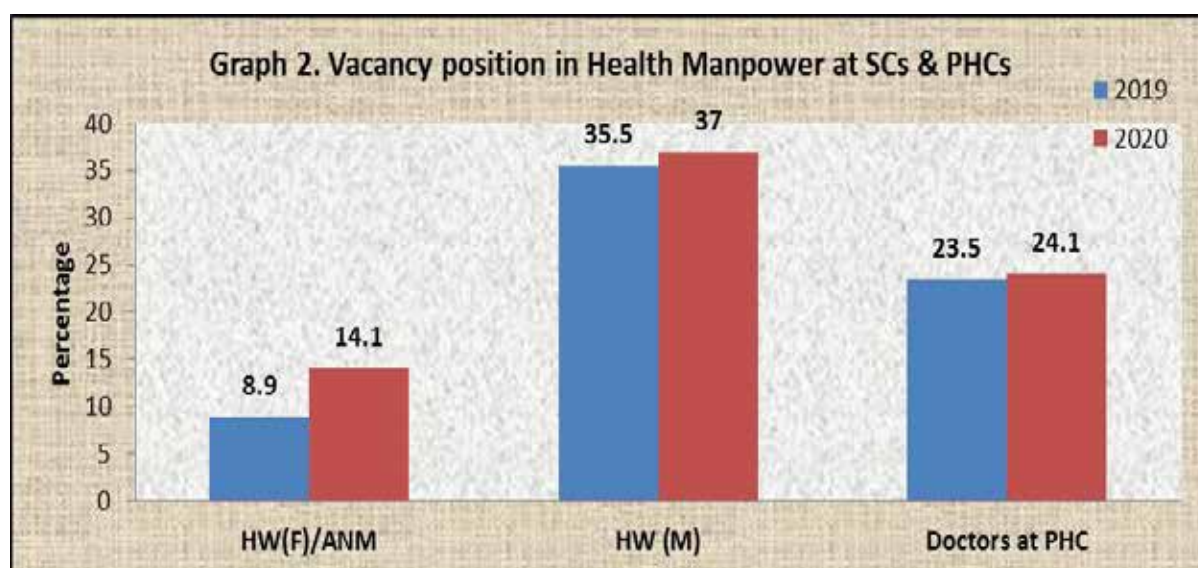
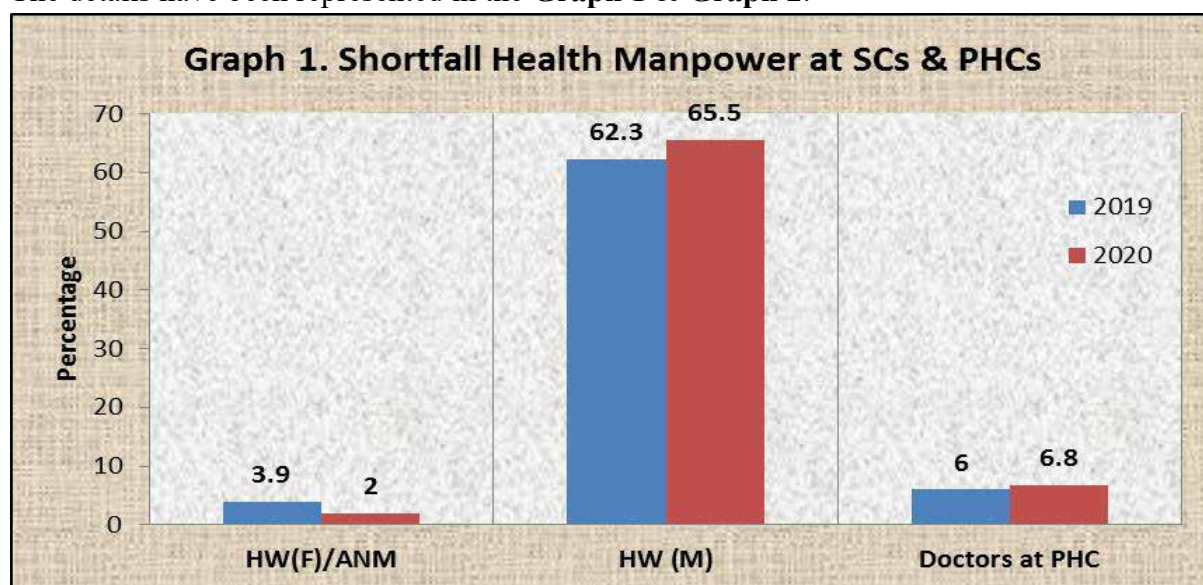
For allopathic Doctors at PHCs, there is a shortfall of 6.8% of the total requirement for existing infrastructure as compared to manpower in position.

The overall shortfall is mainly due to shortfall in States of Gujarat (1073), Himachal Pradesh (992), Rajasthan (657), Tripura (389) and Kerala (277). The State-wise variation in shortfall of ANMs is depicted in the **Comparative Statement-5**. Similarly, in case of HW (M), there is a shortfall of 65.5% of the requirement.

Even out of the sanctioned posts, a significant percentage of posts are vacant at all the levels. For instance, 14.1% of the sanctioned posts of HW (Female)/ ANM (at SCs +PHCs) are vacant as compared to 37% vacancies of Health Worker (Male) in 2020. At PHCs, 37.6% of the sanctioned posts of Health Assistant (Male + Female) and 24.1% of the sanctioned posts

of Doctors are vacant in 2020 (Section V, Table 13, 14, 15, 16, 17 and Comparative Statement-5).

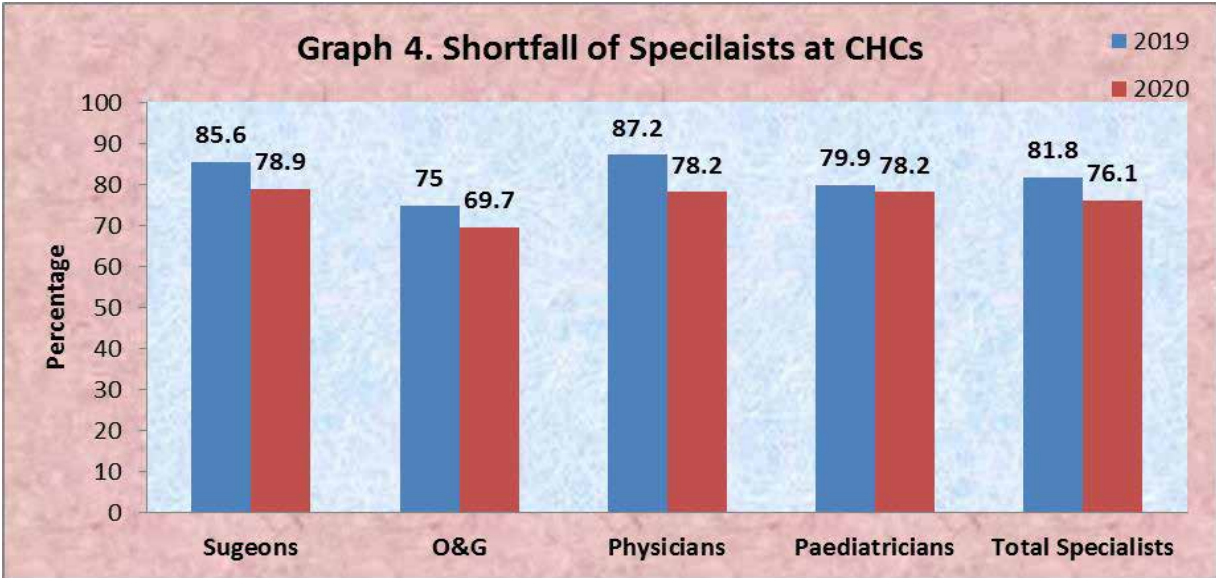
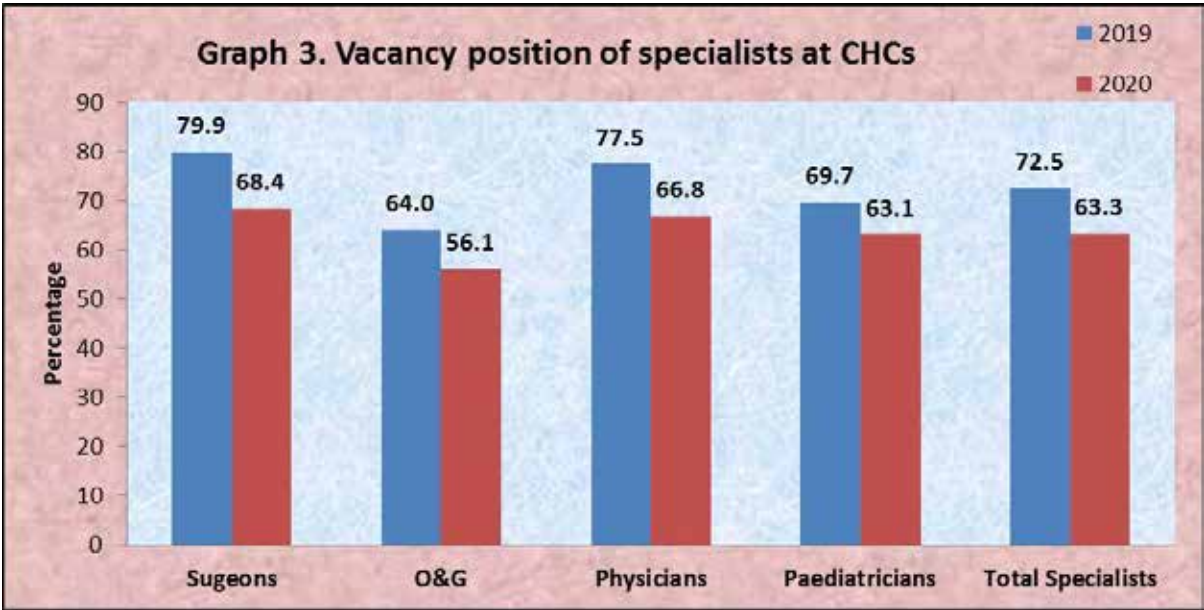
The details have been represented in the Graph 1 & Graph 2.



4.6. PHC is the first contact point between village community and the Medical Officer. Manpower in PHC includes a Medical Officer supported by paramedical and other staff. In case of PHC, for Health Assistant (male + female), the shortfall is 71.9%. For allopathic doctors at PHC, there is a shortfall of 6.8% of the total requirement at all India level. This is again mainly due to significant shortfall of doctors at PHCs in the States of Odisha (461), Chhattisgarh (404), Rajasthan (249), Madhya Pradesh (134), Uttar Pradesh (121) and Karnataka (105). Apart from Allopathic doctors, there are 7459 AYUSH doctors available at PHCs. (Section V, Table 16, 17 and 18).

4.7. The Community Health Centres provide specialized medical care of surgeons, obstetricians & gynecologists, physicians and pediatricians. The current position of specialists manpower at CHCs reveal that as on 31st March, 2020, out of the sanctioned posts, 68.4% of Surgeons, 56.1% of Obstetricians & Gynecologists, 66.8% of physicians and 63.1%

of pediatricians are vacant. The details of vacancy are represented in the **graph 3**. Overall 63.3% of the sanctioned posts of specialists at CHCs are vacant. Moreover, as compared to requirement for existing infrastructure, there is a shortfall of 78.9% of Surgeons, 69.7% of Obstetricians & Gynecologists, 78.2% of Physicians and 78.2% of Pediatricians. Overall, there is a shortfall of 76.1% specialists at the CHCs as compared to the requirement for existing CHCs. The details of the shortfall are represented in the **graph 4**. The shortfall of specialists is significantly high in most of the States. However, in addition to the specialists, about 15342 General Duty Medical Officers (GDMOs) Allopathic and 702 AYUSH Specialists along with 2720 GDMO AYUSH is also available at CHCs as on 31st March, 2020. In addition to this there are 890 Anaesthetists and 301 Eye Surgeons are also at CHCs as on 31st March 2020. (Section V, Table 19, 20, 21, 22, 23, 24, 25, 26, 27 and 28).



4.8. When compared with the manpower position of major categories in 2020 with that in 2005, as presented in **Section I, Comparative Statement 5 to Comparative Statement 11**, it is observed that there are significant improvements in terms of the numbers in all the

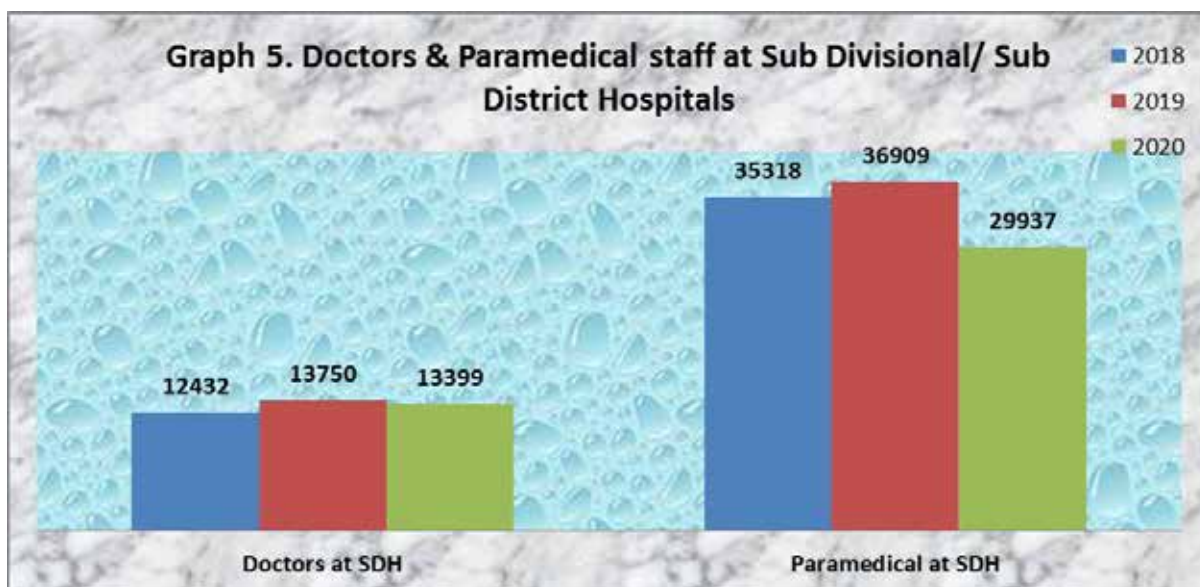
categories. For instance, the number of ANMs at Sub Centres and PHCs has increased from 133194 in 2005 to 212593 in 2020 which amounts to an increase of about 59.6%. Similarly, the allopathic doctors at PHCs have increased from 20308 in 2005 to 28516 in 2020, which is about 40.4% increase. Requirement of Specialists in CHCs has increased by 54.9% whereas there is only an increase of 39.6% in the actual number of in-position Specialists. Moreover, the specialist doctors at CHCs have increased from 3550 in 2005 to 4957 in 2020.

4.9. Looking at the State-wise picture, it may be observed that the increase in in-position of ANMs is attributed mainly to significant increase in the States of West Bengal (9521), Uttar Pradesh (5445), Karnataka (4827), Rajasthan (3492), Gujarat (3058), Jammu Kashmir (2923) and Madhya Pradesh (2742) during 2005 - 2020 (**Section I, Comparative Statement 5**). Similarly, there is a significant increase in the number of doctors at PHCs in the States of Gujarat (642), Tamil Nadu (451), Rajasthan (339), Jammu & Kashmir (297), Madhya Pradesh (226) and Uttarakhand (164) (**Section I, Comparative Statement 6**). In case of specialists, appreciable increase is noticed in the States of West Bengal (508), Tamil Nadu (180), Andhra Pradesh (91), Kerala (91), Jammu & Kashmir (88) and Chhattisgarh (44). (**Section I, Comparative Statement 7**) during the same period. Significant increase in the number of paramedical staff is also observed when compared with the position of 2005.

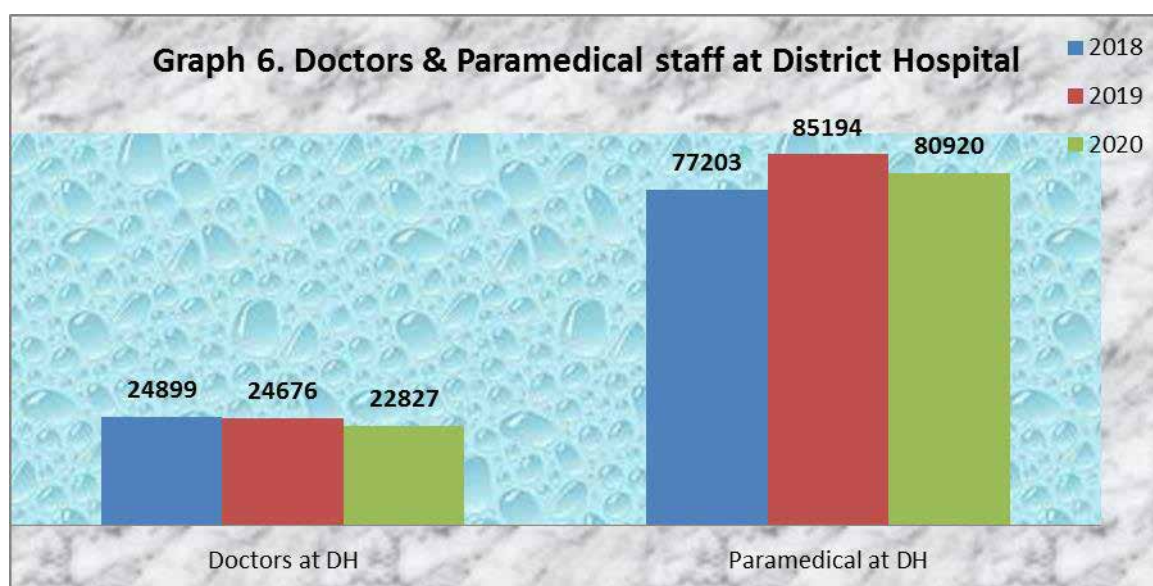
4.10. Comparative study of State-wise status of manpower in 2019 and 2020 at Sub Centres, PHCs and CHCs are given in **Section I, Comparative Statements 14**. Comparison of the manpower position of major categories in 2020 with that in 2019 shows an overall decrease in the number of ANMs at SCs & PHCs and Doctors at PHCs during the period. However there is an increase in number of Specialists at CHCs. The Specialists at CHCs, the number has increased from 3881 in 2019 to 4857 in 2020, which is an increase of 27.7%.

4.11 Considering the status of para medical staff, there is increase of lab Technicians from 18715 to 19903 during 2019 to 2020 at PHCs and CHCs. There is marginal decrease in number of pharmacists from 26204 in 2019 to 25792 in 2020. A significant decrease has also been observed in nursing staff under PHC & CHCs from 80976 in 2019 to 71847 in 2020. The number of radiographers has been increased marginally from 2419 in year 2019 to 2434 in year 2020. (**Section I, Comparative Statements 15**).

4.12 A total of 1193 Sub Divisional/Sub District Hospital are functioning as on 31st March, 2020 throughout the country. In these hospitals, 13399 doctors are available. In addition to these doctors, about 29937 paramedical staffs are also available at those hospitals as on 31st March, 2020 (**Section V, Table 36 and 37**). Details are represented in the **Graph 5**.



4.13 In addition to above, 810 District Hospitals (DHs) are also functioning as on 31st March, 2020 throughout the country. There are 22827 doctors available in the DHs. In addition to the doctors, about 80920 para medical staff is also available at District Hospitals as on 31st March, 2020 (**Section V, Table 36 and 37**). Details are represented in the **Graph 6**.



Annexure I. Manpower Recommended Under Indian Public Health Standards (IPHS).

Manpower: SC

Type of Sub Centre	Sub Centre A		Sub Centre B (MCH Sub Centre)	
	Essential	Desirable	Essential	Desirable
ANM/Health Worker (Female)	1	+1	2	
Health Worker (Male)	1		1	
Staff Nurse (or ANM, if Staff Nurse is not available)				1**
Safai-Karamchari*	1 (Part-time)		1 (Full-time)	

*To be outsourced

** If number of deliveries at the Sub Centre is 20 or more in a month

Manpower : PHC

Staff	Type A		Type B	
	Essential	Desirable	Essential	Desirable
Medical Officer - MBBS	1		1	1#
Medical Officer - AYUSH		1^		1^
Accountant cum Data Entry Operator	1		1	
Pharmacist	1		1	
Pharmacist - AYUSH		1		1
Nurse-midwife (Staff Nurse)	3	+1	4	+1
Health Worker (Female)+++	1*		1*	
Health Assistant (Male)	1		1	
Health Assistant (Female)/ Lady Health Visitor	1		1	
Health Educator		1		1
Laboratory Technician	1		1	
Cold Chain & Vaccine Logistic Assistant		1		1
Multi -skilled Group D worker	2		2	
Sanitary worker cum watchman	1		1	+1
Total	13	18	14	21

* For Sub Centre area of PHC

If the delivery case load is 30 or more per month. One of the two medical officers (MBBS) should be female

^To provide choice to the people wherever an AYUSH public facility is not available in the near vicinity

Manpower : CHC

Personnel	Essential	Desirable	Qualifications	Remarks
Block Public Health Unit				
Block Medical Officer/ Medical Superintendent	1		Senior most specialist/ GDMO preferably with experience in Public Health/ Trained in Professional Development Course (PDC)	Will be responsible for coordination of NHPs, management of ASHAs Training and other responsibilities under NRHM apart from overall administration/ Management of CHC, etc. He will be responsible for quality & protocols of service delivery being delivered in CHC
Public Health Specialist	1		MD (PSM)/ MD (CHA)/ MD Community Medicine or Post Graduation Degree with MBA/ DPH/ MPH	
Public Health Nurse (PHN) #	1	+1		
Speciality Services				
General Surgeon	1		MS/ DNB, (General Surgery)	
Physician	1		MD/ DNB, (General Medicine)	
Obstetrician & Gynaecologist	1		DGO/ MD/ DNB	
Paediatrician	1		DCH/ MD (Paediatrics)/ DNB	
Anaesthetist	1		MD (Anesthesia)/ DNB/ DA/ LSAS trained MO	Essential for utilization of the surgical specialities. They may be on contractual appointment or hiring of services from private sectors on per case basis
General Duty Officers				
Dental Surgeon	1		BDS	
General Duty Medical Officer	2		MBBS	
Medical Officer - AYUSH	1		Graduate in AYUSH	
Nurses and Paramedical				
Staff Nurse	10			
Pharmacist	1	+1		
Pharmacist – AYUSH	1			
Lab. Technician	2			

Radiographer	1			
Dietician		1		
Ophthalmic Assistant	1			
Dental Assistant	1			
Cold Chain & Vaccine Logistic Assistant	1			
OT Technician	1			
Multi Rehabilitation/ Community Based Rehabilitation worker	1	+1		
Counsellor	1			
Administrative Staff				
Registration Clerk	2			
Statistical Assistant/ Data Entry Operator	2			
Account Assistant	1			
Administrative Assistant	1			
Group D Staff				
Dresser (certified by Red Cross/ Johns Ambulance)	1			
Ward Boys/ Nursing Orderly	5			
Driver*	1*	3		
Total	46	53		

Note :

- If patient load increases, then number of General Duty Doctors may be increased
- Funds would be provided for out-sourcing and providing support services as per need
- One of nursing orderlies could be trained in CSSD procedures
- Budget to be provided for outsourcing Class IV services like Mali, Aya, Peon, OPD Attendant, Security and Sanitary workers

* May be outsourced

Graduate or Diploma in Nursing and will be trained for 6 months in Public Health.

Urban Health Care System in India

1.1 Background

National Urban Health Mission (NUHM) was approved by the Union Cabinet¹ on 1st May, 2013 as a sub-mission under an overarching National Health Mission (NHM) for providing equitable and quality primary health care services to the urban population with special focus on slum and vulnerable sections of the Society. NUHM seeks to improve the health status by facilitating their access to quality primary healthcare.

NUHM covers all the cities and towns with more than 50000 population and district and state headquarters with more than 30000 population. Urban Health programme is being implemented through Urban Local Bodies (ULBs), in seven metropolitan cities, viz., Mumbai, New Delhi, Chennai, Kolkata, Hyderabad, Bengaluru and Ahmedabad. For the remaining cities, the State Health department decides whether the Urban Health Programme is to be implemented through health department or any other urban local body.

1.2 Urban Health Statistics – The Structure and Current Scenario

NUHM envisages setting up of an organized service delivery infrastructure which is largely absent in cities/towns to specially address the healthcare needs of urban poor, though the secondary and tertiary care facilities are available. The health care infrastructure in urban areas is given in **table 2** below.

The emphasis is to improve the existing public health delivery system with a thrust on upgrading the existing health facilities in terms of infrastructure and equipment, also establishing new health facilities wherever necessary by providing specialist care as well as strengthening emergency response systems and making available adequate health human resources.

Table 2.

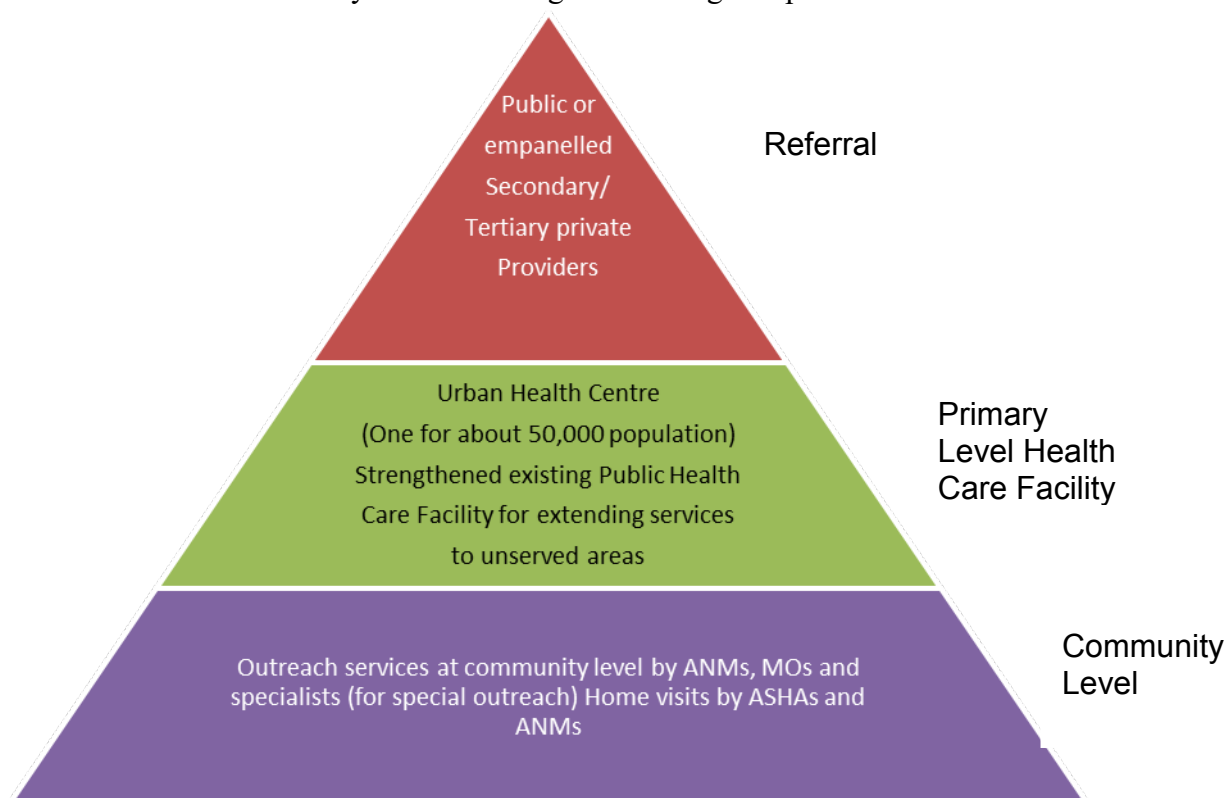
Centre ² (in urban areas)	Population Norms
Community Health Centres	250000 (5 Lakh for metros)
Primary Health Centres	50000

¹ Source The Gazette of India Part I – Section 1 Dated 26th June 2013 Ministry of Health and Family Welfare – Department of Health and Family Welfare No. L. 19017/1/2008-UH(Vol.III)

² Source NUHM Framework for Implementation.

1.3 Key Components of NUHM³

NUHM is designed to provide health services at the facility and community level. Urban Health Care Delivery Model envisages following components:



The above may vary from state to state depending upon the existing structures and local requirement. The key features include infrastructure components of the Urban Community Health Center (UCHC), the Urban Primary Health Center (UPHC), functionaries both medical and paramedical including MPW (F) / ANM, and community structures like ASHAs and the Mahila Aarogya Samiti (MAS). Further, MAS is one of the key community intervention besides ASHAs, under the National Urban Health Mission which is aimed at promoting community participation in health at all levels, including planning, implementing and monitoring of health programmes.

1.3.1 The Urban Primary Health Center

In order to provide comprehensive primary healthcare services, the National Urban Health Mission aims to establish Urban Primary Healthcare Centers, not as a stand-alone health facility, but as a hub of preventive, promotive and basic curative healthcare for its catchment population. Within its catchment area, the UPHC is responsible for providing the primary health care and public health needs of the population. The package of services envisaged at UPHC inclusive of preventive, promotive, curative, rehabilitative and palliative care. Further, in order to strengthen Comprehensive Primary Health Care across the country through “Ayushman Bharat-HWCs”, states are upgrading their Sub Centres and Primary Health Care centers as Health and Wellness Centres (HWCs)* across rural and urban areas. The details may be read at para 1.3.2

Unlike rural areas, Sub-centres are not envisaged in the urban areas as distances and mode of transportation are much better here and also there is closer proximity and

accessibility of health facilities. As on 31st March 2020, there are 2517 at the level of SC is functional in the urban areas of the country. **(Section IV, Table 6).**

a. Population coverage and Location: Depending on the spatial distribution of the urban population, the population covered by a UPHC may vary from 30000 to 50000. The U-PHC is located preferably closer to slum or similar habitations. Based upon the local situation cities may establish a U-PHC for 50000 or more population as well. As on 31st March 2020, there are 5895 U-PHCs are functional in the country. **(Section IV, Table 6).**

b. Timings: The hours of operation may be such so as to enable the urban working population to conveniently access the UPHC services. States may opt for any suitable timing, providing 8 hours of services, which are convenient to the community. It is recommended that the UPHC operates preferably from 12 noon to 8 pm or in dual shifts (i.e. 8am to 12pm and 4pm to 8pm); Dual shift timing of UPHC could be flexible with the ability to be modified according to the catchment communities.

c. Service Provision*: The UPHC's key responsibility is to provide comprehensive preventive, promotive, curative, rehabilitative, palliative care. Services provided by UPHC include:

- OPD (consultation)
- Laboratory Services
- Drugs and contraceptive dispensing
- Delivery of Reproductive and Child Health (RCH) services,
- Preventive, promotive and curative aspects of communicable and non-communicable diseases.
- Multi-Specialist Services
- Minor surgical procedures
- Counselling and Help Desk
- Outreach activities
- Population Based Screening

** Updated as per operational guidelines for AB-CPHC-HWCs*

- Referral Services
- Wellness activities in designated UPHC-HWCs.

1.3.2 Urban Community Health Centres (U-CHCs)

Urban Community Health Centre (U-CHC) is set up as a referral facility for every 4-5 U-PHCs. The U-CHC caters to a population of 250000 to 5 Lakhs. For the metro cities, U-CHCs may be established for every 5 lakh population with 100 beds. In addition to primary health care facilities, it provides inpatient services, medical care, surgical facilities and institutional delivery facilities. It is a 30-50 bedded facility. The norms for urban CHC are same as rural CHCs. As on 31st March 2020, there are 466 U-CHCs functional in urban areas of the India (**Section IV, Table 6**).

The details of the staffing pattern as per the norms for each level of urban health are given in Box 3.

UPHC – HWCs (Health and Wellness Centres)⁴

In order to ensure delivery of Comprehensive Primary Health Care (CPHC) services, existing U-PHCs would be converted to Health and Wellness Centres (HWC). Services could also be provided/ complemented through outreach services, Mobile Medical Units, health camps, home visits and community-based interaction, but the principle should be a seamless continuum of care that ensures equity, quality, universality and no financial hardship.

The Medical Officer at the U-PHC would be responsible for ensuring that CPHC services are delivered through all HWCs in her/his area and through the U-PHC itself. For PHCs to be strengthened to HWCs, support for training of U-PHC staff (Medical Officers, Staff Nurses, Pharmacist, and Lab Technicians), and provision of equipment for “Wellness Room”, the necessary IT infrastructure and the resources required for upgrading laboratory and diagnostic support to complement the expanded ranges of services would be provided. States could choose to modify staffing at HWC and PHC, based on local needs. The HWC would deliver an expanded range of services. All the U-PHCs are targeted to be converted into HWCs.

³ Source “Orientation Module for Planners, Implementers and Partners NUHM”

⁴ Source operational guidelines for AB-CPHC-HWCs

Box 3

STAFFING PATTERN (Minimum norm)		
A	STAFF FOR URBAN PRIMARY HEALTH CENTRE	No. of Posts
1	Medical Officer	1 full time + 1 part time
2	Pharmacist	1
3	Staff Nurse	2-3
4	Health Worker Female / ANM / MPW (F)	5
5	Laboratory Technician	1
6	Public Health Manager	1
7	Support Staff including accountant	1-3
8	M & E Unit	1
	Total	17
B	STAFF FOR URBAN COMMUNITY HEALTH CENTRE*	No. of Posts
1	Medical Officer	4
2	Nurse Mid- Wife (Staff Nurses)	7
3	Dresser	1
4	Pharmacist	1
5	Laboratory Technician	1
6	Radiographer	1
7	Ward Boys	2
8	Dhobi	1
9	Sweepers	3
10	Mali	1
11	Chowkidar	1
12	Aya	1
13	Peon	1
	Total	25
	*Same as Rural – CHC	

As on 31st March 2020, there are total 5895 U-PHCs functional in India and there is a shortfall of 38.2% of U-PHCs as per the urban population norms. About 68% of U-PHCs are located in the government buildings, 25% located in the rented buildings and 7% are located in the rent free buildings (**Section VII, Table 48 and 49**).

Similarly, there are 466 U-CHCs functional in the country as on 31st March 2020. About 95% of U-CHCs are located in government buildings, 4% in rented buildings and 1% are located in the rent free buildings (**Section VII, Table 50**).

There are 15926 HW (female)/ ANM available at the PHCs level in urban areas. There are 6399 Doctors, 4459 Pharmacists, 4009 Lab Technicians and 8444 Staff nurses available at U-PHCs. As far as vacancy is concerned there is a vacancy of 20.9% of HW (F)/ ANMs at PHCs level. There is a vacancy of 16.7% of Doctors, 19.7% of Pharmacists, 20.5% of Lab Technicians and 19.2% of Staff nurses at the U-PHCs. At U-PHC level shortfall has been observed in all the posts. There is a shortfall of 46.4% ANMs at PHCs. There is a shortfall of 11.1% of Doctors, 30.4% of Pharmacists, 32.3% of Lab Technicians and 13.3% of Staff nurses at U-PHCs (**Section VII, Table 51, 52, 58, 60 and 62**).

At U-CHCs there are 1242 Specialists, 1028 GDMOs, 274 Radiographers, 646 Pharmacists, 705 Lab Technicians and 5880 Staff nurses available at U-CHCs. Also, there are 257 Anaesthetists and 68 Eye Surgeons available at U-CHCs as on 31st March 2020.

There is a vacancy of 33.8% of Specialists, 19.1% of GDMOs, 25.9% of Radiographers, 12.5% of Pharmacists, 12.5% of Lab Technicians and 11.9% of Staff nurses at U-CHCs. There is shortfall of 37.4% of total specialist, 13.5% of GDMOs, 41.8% of Radiographers, 9.9% of Pharmacists, 7.5% of Lab Technicians and 9.5% of Staff nurses at U-CHCs (**Section VII, Table 53, 56, 57, 59, 61 and 63**).

Health Care System in India

After the implementation of Ayushman Bharat programme strengthening of Sub Centres and Primary Health Centres are being done by converting them into Health and Wellness Centres to deliver comprehensive Primary Healthcare services through these Centres. SCs and PHCs are proposed to be converted into Health and Wellness Centres in the phased manner.

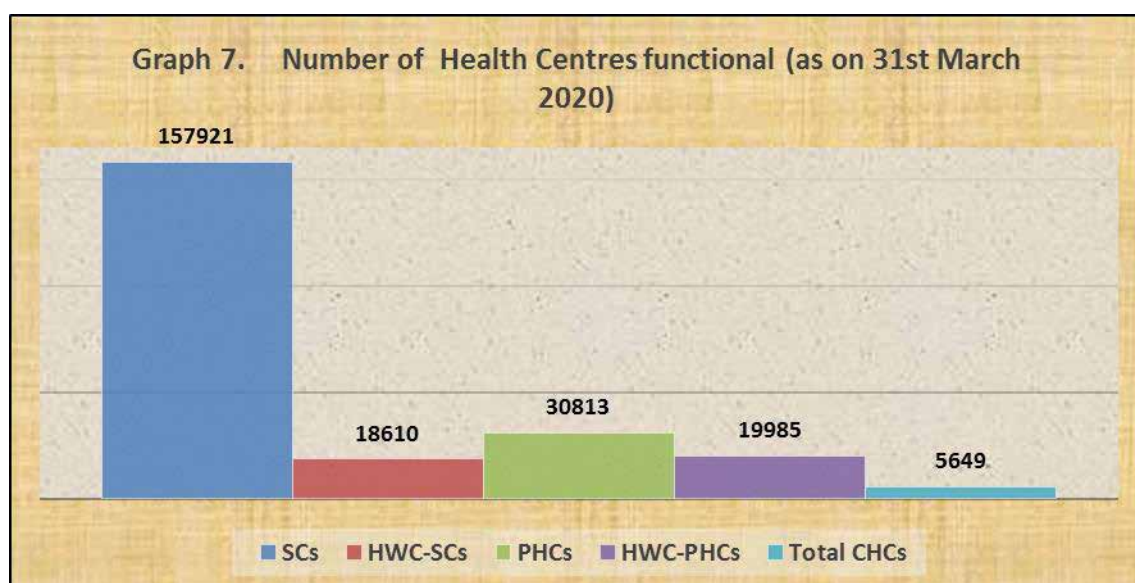
Sub Centres: As on 31st March 2020, there are a total of 157921 Sub Centres (SCs) functioning both in rural and urban areas of India. These consist of 155404 SCs in rural areas & 2517 SCs in urban areas.

Primary Health Centres: Similarly there are 30813 Primary Health Centres (PHCs) functioning in both rural and urban areas in India. These consists of 24918 PHCs in rural areas and 5895 PHCs in urban areas.

Community Health Centres: There are 5649 Community Health Centres (CHCs) functional in the country, consisting of 5183 rural and 466 urban CHCs.

Health and Wellness Centres: As per the Health & Wellness Centre portal data, there are total of 38595 HWCs functional in India as on 31st March 2020. Total 18610 SCs have been converted into HWC-SCs. Also at the level of PHC, a total of 19985 PHCs have been converted into HWC-PHCs. Out of total 19985 HWC-PHCs, total 16635 PHCs has been converted into HWCs in rural areas and 3350 in urban areas (**Section IV, Table No.8**).

The **Graph 7** shows the graphical representation of total SCs, PHCs, CHCs and HWCs functional in India as on 31st March 2020.



*Total figures of SCs and PHCs in the **Graph 7** include the number of HWCs.*

Strengthening of Health facilities under AYUSHMAN BHARAT- Health and Wellness Centres:

Ayushman Bharat is a flagship program of the government launched in 2018 to meet the goal of Universal Health Coverage. It is an attempt to move from a selective approach to health care to delivering comprehensive range of services spanning preventive, promotive, curative rehabilitative and palliative care. Ayushman Bharat has two components which are complementary to each other. Under its first component, about 1,50,000 existing Sub- Health Centres (SHCs) & Primary Health Centres (PHCs) will be transformed to *Ayushman Bharat Health & Wellness Centres (AB-HWCs)* by the year 2022 to deliver *Comprehensive Primary Health Care*, that is universal and free to users, with a focus on wellness and the delivery of an expanded range of services close to the community. The other component is the Pradhan Mantri Jan Arogya Yojana (PMJAY) that provides health protection cover to poor and vulnerable families for seeking secondary and tertiary care. The wide range of services provided at these Health and Wellness Centres will encompass strengthening of existing MCH and communicable disease related services and roll out of additional services v.i.z, Non-Communicable diseases, Oral health, Mental health, ENT, Ophthalmology, elderly care, palliative care and trauma care.

Expanded range of services

- i. Care in pregnancy and childbirth.
- ii. Neonatal and infant health care services.
- iii. Childhood and adolescent health care services.
- iv. Family planning, Contraceptive services and Other Reproductive Health Care services.
- v. Management of Communicable diseases: National Health Programs.
- vi. Management of Common Communicable Diseases and General Out-patient care for acute simple illnesses and minor ailments.
- vii. Screening, Prevention, Control and Management of Non-Communicable diseases and chronic communicable disease like TB and Leprosy.
- viii. Basic Oral health care.
- ix. Care for Common Ophthalmic and ENT problems.
- x. Elderly and Palliative health care services.
- xi. Emergency Medical Services.
- xii. Screening and Basic management of Mental health ailment.

- In order to ensure delivery of Comprehensive Primary Health Care (CPHC) services, existing Sub Centres covering a population of 3000 -5000 would be converted to Ayushman Bharat - Health and Wellness Centres. All PHCs linked to cluster of SHC-HWCs in rural areas, covering a population of 20,000-30,000 and Urban PHCs catering to 50,000 population would also be strengthened as HWCs to deliver an expanded range of services.

Key inputs for HWC include -

1. Expanding Human Resource and Multiskilling- In order to provide these services at the SHC HWC, a new cadre of worker –a non-physician health worker: Community Health

Officer, trained in competencies of public health and primary health care, and expected to improve clinical management, continuum of care, dispensation of drugs and close follow up for those with chronic illness/patients discharged from health facilities leads the team of Multipurpose Workers, and ASHAs. The capacity of other services providers is being built appropriately to deliver the expanded package of services. Several states have initiated the use of digital platforms such as ECHO for continuous capacity building.

2. Medicines and Diagnostics – Availability of essential list of medicines and diagnostics at AB-HWCs is being expanded commensurate to the additional services planned at HWC to enable treatment adherence and reduce OOPe.
3. Infrastructure – Upgradation of infrastructure and branding of AB-HWC is being done to enable availability of sufficient space for expanded service delivery, for storage and dispensation of medicine, conduct expanded diagnostic tests, space for wellness related activities including the practice of yoga etc.
4. Robust IT systems – AB-HWC team is being equipped with IT system i.e, smart phones for ASHAs, Tablets at Sub Health Centres and Laptop/ Desktop at PHC level to create electronic health record of the population covered by HWCs, facilitate referral reporting, and enable continuum of care.
5. Continuum of care, Teleconsultation and Referral –At all levels, teleconsultation would be used to improve referral advice, seek clarifications, and undertake virtual training including case management support by specialists. The HWC team will also be charged with following up patients discharged from secondary facilities to ensure treatment adherence, rehabilitation, and timely and appropriate referral.
6. Financing / Provider payment reforms – Mechanisms for team-based incentives linked to performance for the CHO and frontline workers have been introduced at HWCs.
7. Community Mobilization and Health Promotion: Health promotion is being facilitated through engagement of community level collectives such as – VHSNCs, MAS and SHGs. Several approaches are being implemented to integrate wellness as a key component of HWC and require multisectoral convergence for positive outcomes. These include initiatives like Eat Right Movement, Fit India Campaign and creating provisions for organizing regular wellness sessions at AB-HWCs.



PART 2
DETAILED STATISTICS



SECTION 1
COMPARATIVE STATEMENTS

Comparative Statement 1.
NUMBER OF SCs, PHCs & CHCs FUNCTIONING in Rural Areas-I

S. No.	State/UT	2005			2020		
		Sub Centre	PHCs	CHCs	Sub Centre	PHCs	CHCs
1	Andhra Pradesh	12522	1570	164	7437	1142	141
2	Arunachal Pradesh	379	85	31	356	119	60
3	Assam	5109	610	100	4659	946	190
4	Bihar	10337	1648	101	9112	1702	57
5	Chhattisgarh	3818	517	116	5205	792	170
6	Goa	172	19	5	218	55	6
7	Gujarat	7274	1070	272	9162	1477	348
8	Haryana	2433	408	72	2617	385	118
9	Himachal Pradesh	2068	439	66	2092	564	85
10	Jharkhand	4462	561	47	3848	291	171
11	Karnataka	8143	1681	254	9188	2176	189
12	Kerala	5094	911	106	5410	784	211
13	Madhya Pradesh	8874	1192	229	10226	1199	309
14	Maharashtra	10453	1780	382	10647	1829	278
15	Manipur	420	72	16	418	85	17
16	Meghalaya	401	101	24	440	119	28
17	Mizoram	366	57	9	311	57	9
18	Nagaland	394	87	21	395	130	21
19	Odisha	5927	1282	231	6688	1288	377
20	Punjab	2858	484	116	2950	427	143
21	Rajasthan	10512	1713	326	13480	2094	548
22	Sikkim	147	24	4	147	24	2
23	Tamil Nadu	8682	1380	35	8713	1420	385
24	Telangana	-	-	-	4744	636	85
25	Tripura	539	73	10	965	107	22
26	Uttarakhand	1576	225	44	1839	257	56
27	Uttar Pradesh	20521	3660	386	20778	2880	711
28	West Bengal	10356	1173	95	10357	913	348
29	A& N Islands	107	20	4	124	22	4
30	Chandigarh	13	0	1	0	0	0
31	Dadra & Nagar Haveli	38	6	1	94	10	4
32	Daman & Diu	21	3	1			
33	Delhi	41	8	0	12	5	0
34	Jammu & Kashmir	1879	334	70	2470	923	77
35	Ladakh	-	-	-	238	32	7
36	Lakshadweep	14	4	3	11	4	3
37	Puducherry	76	39	4	53	24	3
All India/ Total		146026	23236	3346	155404	24918	5183

Notes: *Telangana came to existence in 2014 after bifurcation of Andhra Pradesh*
Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.
Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

Comparative Statement 2.
BUILDING POSITION FOR SUB CENTRES in Rural Areas

S. No.	State/UT	2005				2020			
		Total Number of Sub Centers functioning	Sub Centres functioning in			Total Number of Sub Centers functioning	Sub Centres functioning in		
			Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building		Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building
1	Andhra Pradesh	12522	4221	8301	0	7437	2326	4811	300
2	Arunachal Pradesh	379	NA	NA	NA	356	356	0	0
3	Assam	5109	2637	2472	0	4659	3626	695	338
4	Bihar	10337	NA	NA	NA	9112	3756	3250	2106
5	Chhattisgarh	3818	1458	0	2360	5205	4160	573	472
6	Goa	172	40	132	0	218	93	122	3
7	Gujarat	7274	5554	0	1720	9162	6358	147	2657
8	Haryana	2433	1499	0	934	2617	1714	362	541
9	Himachal Pradesh	2068	1262	14	792	2092	1630	25	437
10	Jharkhand	4462	NA	NA	NA	3848	2422	1219	207
11	Karnataka	8143	4460	2893	790	9188	5075	1481	2632
12	Kerala	5094	2986	1098	1010	5410	3818	586	1006
13	Madhya Pradesh	8874	3996	4878	0	10226	7926	1223	1077
14	Maharashtra	10453	6527	1098	2828	10647	9069	1417	161
15	Manipur	420	216	131	73	418	332	19	67
16	Meghalaya	401	391	10	0	440	428	2	10
17	Mizoram	366	366	0	0	311	311	0	0
18	Nagaland	394	NA	NA	NA	395	313	3	79
19	Odisha	5927	2542	3385	0	6688	4897	1624	167
20	Punjab	2858	1443	0	1415	2950	1848	29	1073
21	Rajasthan	10512	8211	0	2301	13480	10621	1204	1655
22	Sikkim	147	108	31	8	147	146	1	0
23	Tamil Nadu	8682	6510	2172	0	8713	6290	2420	3
24	Telangana	-	-	-	-	4744	1273	2694	777
25	Tripura	539	278	202	59	965	777	38	150
26	Uttarakhand	1576	562	1014	0	1839	1296	506	37
27	Uttar Pradesh	20521	6494	14027	0	20778	17124	3642	12
28	West Bengal	10356	1923	8433	0	10357	8580	1332	445
29	A& N Islands	107	107	0	0	124	124	0	0
30	Chandigarh	13	8	0	5	0	N App	N App	N App
31	D & N Haveli	38	38	0	0	94	69	15	10
32	Daman & Diu	21	20	1	0				
33	Delhi	41	NA	NA	NA	12	1	8	3
34	Jammu & Kashmir	1879	NA	NA	NA	2470	872	1598	0
35	Ladakh	-	-	-	-	238	207	31	0
36	Lakshadweep	14	8	6	0	11	8	0	3
37	Puduchery	76	36	40	0	53	40	13	0
All India/ Total		146026	63901	50338	14295	155404	107886	31090	16428

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable

Comparative Statement 3.
BUILDING POSITION FOR PRIMARY HEALTH CENTRES in Rural Areas

S. No.	State/UT	2005				2020			
		Total Number of PHCs functioning	PHCs functioning in			Total Number of PHCs functioning	PHCs functioning in		
			Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building		Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building
1	Andhra Pradesh	1570	1281	289	0	1142	1126	1	15
2	Arunachal Pradesh	85	NA	NA	NA	119	119	0	0
3	Assam	610	610	0	0	946	946	0	0
4	Bihar	1648	NA	NA	NA	1702	986	362	354
5	Chhattisgarh	517	326	0	191	792	677	0	115
6	Goa	19	18	1	0	55	22	3	30
7	Gujarat	1070	663	0	407	1477	1226	3	248
8	Haryana	408	288	0	120	385	301	14	70
9	Himachal Pradesh	439	312	46	81	564	485	6	73
11	Jharkhand	561	NA	NA	NA	291	160	17	114
12	Karnataka	1681	1439	92	150	2176	2020	69	87
13	Kerala	911	837	34	40	784	775	7	2
14	Madhya Pradesh	1192	746	446	0	1199	1092	107	0
15	Maharashtra	1780	1417	7	356	1829	1707	122	0
16	Manipur	72	NA	NA	NA	85	79	2	4
17	Meghalaya	101	101	0	0	119	118	1	0
18	Mizoram	57	57	0	0	57	57	0	0
19	Nagaland	87	87	0	0	130	123	0	7
20	Odisha	1282	1282	0	0	1288	1255	0	33
21	Punjab	484	409	0	75	427	362	5	60
22	Rajasthan	1713	1446	0	267	2094	1963	21	110
23	Sikkim	24	24	0	0	24	24	0	0
24	Tamil Nadu	1380	1340	40	0	1420	1390	0	30
25	Telangana	-	-	-	-	636	636	0	0
26	Tripura	73	73	0	0	107	107	0	0
27	Uttarakhand	225	182	43	0	257	227	18	12
28	Uttar Pradesh	3660	1835	1825	0	2880	2626	218	36
29	West Bengal	1173	1173	0	0	913	913	0	0
30	A& N Islands	20	20	0	0	22	22	0	0
31	Chandigarh	0	0	0	0	0	N App	N App	N App
32	D & N Haveli	6	6	0	0	10	10	0	0
33	Daman & Diu	3	3	0	0				
34	Delhi	8	8	0	0	5	5	0	0
35	Jammu & Kashmir	334	NA	NA	NA	923	714	209	0
36	Ladakh	-	-	-	-	32	32	0	0
37	Lakshadweep	4	4	0	0	4	4	0	0
38	Puducherry	39	36	3	0	24	24	0	0
All India/ Total		23236	16023	2826	1687	24918	22333	1185	1400

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available

N App: Not Applicable

Comparative Statement 4.
BUILDING POSITION FOR COMMUNITY HEALTH CENTRES in Rural Areas

S. No.	State/UT	2005				2020			
		Total Number of CHCs functioning	CHCs functioning in			Total Number of CHCs functioning	CHCs functioning in		
			Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building		Govt. Building	Rented Building	Rent Free Panchayat / Vol. Society Building
1	Andhra Pradesh	164	164	0	0	141	141	0	0
2	Arunachal Pradesh	31	NA	NA	NA	60	60	0	0
3	Assam	100	100	0	0	190	190	0	0
4	Bihar	101	NA	NA	NA	57	57	0	0
5	Chhattisgarh	116	116	0	0	170	160	0	10
6	Goa	5	5	0	0	6	6	0	0
7	Gujarat	272	225	0	47	348	298	0	50
8	Haryana	72	72	0	0	118	113	2	3
9	Himachal Pradesh	66	65	0	1	85	83	1	1
10	Jharkhand	47	NA	NA	NA	171	171	0	0
11	Karnataka	254	207	0	47	189	181	8	0
12	Kerala	106	105	0	1	211	211	0	0
13	Madhya Pradesh	229	229	0	0	309	304	5	0
14	Maharashtra	382	290	5	87	278	270	2	6
15	Manipur	16	NA	NA	NA	17	17	0	0
16	Meghalaya	24	24	0	0	28	28	0	0
17	Mizoram	9	9	0	0	9	9	0	0
18	Nagaland	21	21	0	0	21	21	0	0
19	Odisha	231	231	0	0	377	377	0	0
20	Punjab	116	115	0	1	143	132	0	4
21	Rajasthan	326	256	0	70	548	530	2	16
22	Sikkim	4	4	0	0	2	2	0	0
23	Tamil Nadu	35	35	0	0	385	385	0	0
24	Telangana	-	-	-	-	85	85	0	0
25	Tripura	10	10	0	0	22	22	0	0
26	Uttarakhand	44	44	0	0	56	56	0	0
27	Uttar Pradesh	386	386	0	0	711	642	47	22
28	West Bengal	95	95	0	0	348	348	0	0
29	A& N Islands	4	4	0	0	4	4	0	0
30	Chandigarh	1	1	0	0	0	N App	N App	N App
31	D & N Haveli	1	1	0	0	4	4	0	0
32	Daman & Diu	1	1	0	0				
33	Delhi	0	0	0	0	0	N App	N App	N App
34	Jammu & Kashmir	70	NA	NA	NA	77	77	0	0
35	Ladakh	-	-	-	-	7	7	0	0
36	Lakshadweep	3	3	0	0	3	3	0	0
37	Puducherry	4	4	0	0	3	3	0	0
All India/ Total		3346	2822	5	254	5183	4997	67	112

Notes: *Telangana came to existence in 2014 after bifurcation of Andhra Pradesh*
Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.
Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.
NA: Not Available N App: Not Applicable

Comparative Statement 5.
HEALTH WORKER [FEMALE] / ANM AT SUB CENTRES & PHCs in Rural Areas

S. No.	State/UT	2005					2020				
		Health Worker [Female]/ANM					Health Worker [Female]/ANM				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	14092	14077	13740	337	352	8579	17126	15742	1384	*
2	Arunachal Pradesh	464	454	454	0	10	475	NA	471	NA	4
3	Assam	5719	5719	5719	0	0	5605	5216	8614	*	*
4	Bihar	11985	NA	NA	NA	NA	10814	24121	15656	8465	*
5	Chhattisgarh	4335	4335	3667	668	668	5997	6377	5921	456	76
6	Goa	191	196	179	17	12	273	342	347	*	*
7	Gujarat	8344	7274	6508	766	1836	10639	12023	9566	2457	1073
8	Haryana	2841	2841	2818	23	23	3002	5337	4534	803	*
9	Himachal Pradesh	2507	2210	1790	420	717	2656	2281	1664	617	992
10	Jharkhand	5023	NA	NA	NA	NA	4139	6406	6010	396	*
11	Karnataka	9824	8756	8544	212	1280	11364	17748	13371	4377	*
12	Kerala	6005	5675	5565	110	440	6194	6194	5917	277	277
13	Madhya Pradesh	10066	10027	9345	682	721	11425	12904	12087	817	*
14	Maharashtra	12233	11032	10699	333	1534	12476	14766	12804	1962	*
15	Manipur	492	463	463	0	29	503	962	1002	*	*
16	Meghalaya	502	667	608	59	*	559	478	1041	*	*
17	Mizoram	423	366	345	21	78	368	NA	346	NA	22
18	Nagaland	481	342	342	0	139	525	747	900	*	*
19	Odisha	7209	7121	6768	353	441	7976	7704	8985	*	*
20	Punjab	3342	2704	2602	102	740	3377	4491	3703	788	*
21	Rajasthan	12225	11425	11425	0	800	15574	17941	14917	3024	657
22	Sikkim	171	267	260	7	*	171	218	268	*	*
23	Tamil Nadu	10062	10366	10112	254	*	10133	12012	10489	1523	*
24	Telangana	-	-	-	-	-	5380	8996	7943	1053	*
25	Tripura	612	525	561	*	51	1072	N App	683	N App	389
26	Uttarakhand	1801	1660	1486	174	315	2096	2203	2006	197	90
27	Uttar Pradesh	24181	18577	18146	431	6035	23658	27476	23591	3885	67
28	West Bengal	11529	10356	9070	1286	2459	11270	19238	18591	647	*
29	A & N Islands	127	127	127	0	0	146	134	179	*	*
30	Chandigarh	13	13	13	0	0	0	N App	N App	N App	N App
31	D & N Haveli	44	38	38	0	6	104	115	147	*	*
32	Daman & Diu	24	24	24	0	0					
33	Delhi	49	60	51	9	*	17	33	34	*	*
34	Jammu & Kashmir	2213	1964	1588	376	625	3393	5000	4511	489	*
35	Ladakh	-	-	-	-	-	270	347	394	*	*
36	Lakshadweep	18	22	22	0	*	15	40	40	0	*
37	Puducherry	115	115	115	0	0	77	120	119	1	*
	All India^{2/} Total	169262	139798	133194	6640	19311	180322	239096	212593	33618	3647

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ One per each existing Sub Centre and Primary Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

DOCTORS³ AT PRIMARY HEALTH CENTRES in Rural Areas

S. No.	State/UT	2005					2020				
		Doctors at PHCs					Doctors at PHCs				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1570	2497	2137	360	*	1142	1861	1798	63	*
2	Arunachal Pradesh	85	78	78	0	7	119	NA	194	NA	*
3	Assam	610	NA	NA	NA	NA	946	906	1424	*	*
4	Bihar	1648	NA	NA	NA	NA	1702	4129	1745	2384	*
5	Chhattisgarh	517	1034	628	406	*	792	811	388	423	404
6	Goa	19	56	53	3	*	55	72	75	*	*
7	Gujarat	1070	1070	848	222	222	1477	1869	1490	379	*
8	Haryana	408	862	862	0	*	385	766	491	275	*
9	Himachal Pradesh	439	354	467	*	*	564	722	471	251	93
10	Jharkhand	561	NA	NA	NA	NA	291	330	222	108	69
11	Karnataka	1681	2237	2041	196	*	2176	2323	2071	252	105
12	Kerala	911	1345	949	396	*	784	1237	1028	209	*
13	Madhya Pradesh	1192	1278	839	439	353	1199	1525	1065	460	134
14	Maharashtra	1780	3157	3158	*	*	1829	3587	2848	739	*
15	Manipur	72	95	67	28	5	85	170	311	*	*
16	Meghalaya	101	127	123	4	*	119	91	190	*	*
17	Mizoram	57	57	35	22	22	57	NA	58	NA	*
18	Nagaland	87	53	53	0	34	130	113	120	*	10
19	Odisha	1282	1353	1353	0	*	1288	1288	827	461	461
20	Punjab	484	646	373	273	111	427	585	391	194	36
21	Rajasthan	1713	1517	1506	11	207	2094	2170	1845	325	249
22	Sikkim	24	48	48	0	*	24	48	34	14	*
23	Tamil Nadu	1380	3806	2257	1549	*	1420	2976	2708	268	*
24	Telangana	-	-	-	-	-	636	1254	1213	41	*
25	Tripura	73	161	152	9	*	107	N App	222	N App	*
26	Uttarakhand	225	272	182	90	43	257	476	346	130	*
27	Uttar Pradesh	3660	NA	NA	NA	NA	2880	3578	2759	819	121
28	West Bengal	1173	1560	1319	241	*	913	1390	1098	292	*
29	A & N Islands	20	36	36	0	*	22	30	48	*	*
30	Chandigarh	0	0	0	0	0	0	N App	N App	N App	N App
31	D & N Haveli	6	6	6	0	0	10	9	13	*	*
32	Daman & Diu	3	5	5	0	*					
33	Delhi	8	31	23	8	*	5	19	18	1	*
34	Jammu & Kashmir	334	668	643	25	*	923	1477	940	537	*
35	Ladakh	-	-	-	-	-	32	23	10	13	22
36	Lakshadweep	4	4	4	0	0	4	10	10	0	*
37	Puducherry	39	63	63	0	*	24	45	45	0	*
All India^{2/} Total		23236	24476	20308	4282	1004	24918	35890	28516	8638	1704

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ One per Primary Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded

³ Allopathic Doctors

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Comparative Statement 7.
TOTAL SPECIALISTS AT CHCs in Rural Areas

S. No.	State/UT	2005					2020				
		[Surgeons, OB&GY, Physicians & Paediatricians]					[Surgeons, OB&GY, Physicians & Paediatricians]				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	656	406	224	182	432	564	378	315	63	249
2	Arunachal Pradesh	124	4	0	4	124	240	NA	14	NA	226
3	Assam	400	NA	NA	NA	NA	760	126	188	*	572
4	Bihar	404	NA	NA	NA	NA	228	636	124	512	104
5	Chhattisgarh	464	464	18	446	446	680	581	62	519	618
6	Goa	20	14	7	7	13	24	12	14	*	10
7	Gujarat	1088	321	92	229	996	1392	268	13	255	1379
8	Haryana	288	288	49	239	239	472	135	27	108	445
9	Himachal Pradesh	264	NA	NA	NA	NA	340	16	21	*	319
10	Jharkhand	188	NA	NA	NA	NA	684	339	179	160	505
11	Karnataka	1016	843	691	152	325	756	499	252	247	504
12	Kerala	424	424	82	342	342	844	192	173	19	671
13	Madhya Pradesh	916	253	49	204	867	1236	1032	46	986	1190
14	Maharashtra	1528	1987	1099	888	429	1112	558	399	159	713
15	Manipur	64	40	19	21	45	68	24	4	20	64
16	Meghalaya	96	1	1	0	95	112	5	4	1	108
17	Mizoram	36	0	0	0	36	36	NA	0	NA	36
18	Nagaland	84	0	0	0	84	84	2	9	*	75
19	Odisha	924	496	NA	NA	NA	1508	1482	313	1169	1195
20	Punjab	464	393	226	167	238	572	485	139	346	433
21	Rajasthan	1304	811	581	230	723	2192	1376	438	938	1754
22	Sikkim	16	16	4	12	12	8	4	2	2	6
23	Tamil Nadu	140	48	48	0	92	1540	319	228	91	1312
24	Telangana	-	-	-	-	-	340	625	258	367	82
25	Tripura	40	2	2	0	38	88	N App	1	N App	87
26	Uttarakhand	176	163	71	92	105	224	236	32	204	192
27	Uttar Pradesh	1544	NA	NA	NA	NA	2844	2171	816	1355	2028
28	West Bengal	380	310	133	177	247	1392	1422	641	781	751
29	A& N Islands	16	12	0	12	16	16	NA	1	NA	15
30	Chandigarh	4	4	4	0	0	0	N App	N App	N App	N App
31	D & N Haveli	4	2	2	0	2	16	2	1	1	15
32	Daman & Diu	4	0	0	0	4					
33	Delhi	0	0	0	0	0	0	N App	N App	N App	N App
34	Jammu & Kashmir	280	276	142	134	138	308	321	230	91	78
35	Ladakh	-	-	-	-	-	28	11	5	6	23
36	Lakshadweep	12	0	0	0	12	12	8	8	0	4
37	Puducherry	16	4	6	*	10	12	1	0	1	12
All India^{2/} Total		13384	7582	3550	3538	6110	20732	13266	4957	8401	15775

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ Four Specialists per Community Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

OB&GY - Obstetrician & Gynaecologist

Comparative Statement 8.
RADIOGRAPHERS at CHCs in Rural Areas

S. No.	State/UT	2005					2020				
		Radiographer					Radiographer				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	164	161	140	21	24	141	112	56	56	85
2	Arunachal Pradesh	31	22	22	0	9	60	NA	13	NA	47
3	Assam	100	NA	NA	NA	NA	190	51	117	*	73
4	Bihar	101	NA	NA	NA	NA	57	94	3	91	54
5	Chhattisgarh	116	116	95	21	21	170	170	161	9	9
6	Goa	5	7	7	0	*	6	4	2	2	4
7	Gujarat	272	271	113	158	159	348	348	126	222	222
8	Haryana	72	118	106	12	*	118	109	38	71	80
9	Himachal Pradesh	66	66	54	12	12	85	38	26	12	59
10	Jharkhand	47	NA	NA	NA	NA	171	188	122	66	49
11	Karnataka	254	51	30	21	224	189	152	122	30	67
12	Kerala	106	17	16	1	90	211	16	12	4	199
13	Madhya Pradesh	229	NA	NA	NA	NA	309	309	183	126	126
14	Maharashtra	382	180	159	21	223	278	136	104	32	174
15	Manipur	16	5	5	0	11	17	10	9	1	8
16	Meghalaya	24	28	26	2	*	28	10	24	*	4
17	Mizoram	9	NA	NA	NA	NA	9	NA	8	NA	1
18	Nagaland	21	11	11	0	10	21	3	3	0	18
19	Odisha	231	26	8	18	223	377	127	63	64	314
20	Punjab	116	80	57	23	59	143	147	120	27	23
21	Rajasthan	326	269	269	0	57	548	664	329	335	219
22	Sikkim	4	8	5	3	*	2	3	4	*	*
23	Tamil Nadu	35	28	28	0	7	385	235	144	91	241
24	Telangana	-	-	-	-	-	85	99	44	55	41
25	Tripura	10	4	4	0	6	22	N App	13	N App	9
26	Uttarakhand	44	40	30	10	14	56	22	9	13	47
27	Uttar Pradesh	386	NA	NA	NA	NA	711	402	189	213	522
28	West Bengal	95	86	77	9	18	348	283	162	121	186
29	A & N Islands	4	4	4	0	0	4	4	4	0	0
30	Chandigarh	1	1	1	0	0	0	N App	N App	N App	N App
31	D & N Haveli	1	1	1	0	0	4	4	4	0	0
32	Daman & Diu	1	1	1	0	0	0	0	0	0	0
33	Delhi	0	0	0	0	0	0	N App	N App	N App	N App
34	Jammu & Kashmir	70	61	61	0	9	77	265	208	57	*
35	Ladakh	-	-	-	-	-	7	6	4	2	3
36	Lakshadweep	3	3	3	0	0	3	5	5	0	*
37	Puducherry	4	4	4	0	0	3	3	3	0	0
All India^{2/} Total		3346	1669	1337	332	1176	5183	4019	2434	1700	2884

Notes: *Telangana came to existence in 2014 after bifurcation of Andhra Pradesh*
Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.
Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.
*NA: Not Available N App: Not Applicable *: Surplus.*

¹ One per Community Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Comparative Statement 9.
PHARMACISTS at PHCs & CHCs in Rural Areas

S. No.	State/UT	2005					2020				
		Pharmacist					Pharmacist				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1734	1704	1637	67	97	1283	1263	1039	224	244
2	Arunachal Pradesh	116	31	31	0	85	179	NA	108	NA	71
3	Assam	710	NA	NA	NA	NA	1136	731	1384	*	*
4	Bihar	1749	NA	NA	NA	NA	1759	1567	492	1075	1267
5	Chhattisgarh	633	749	467	282	166	962	1079	946	133	16
6	Goa	24	28	27	1	*	61	51	57	*	4
7	Gujarat	1342	1413	807	606	535	1825	1846	1538	308	287
8	Haryana	480	480	464	16	16	503	656	405	251	98
9	Himachal Pradesh	505	505	375	130	130	649	723	511	212	138
10	Jharkhand	608	NA	NA	NA	NA	462	391	228	163	234
11	Karnataka	1935	1935	1880	55	55	2365	2367	1749	618	616
12	Kerala	1017	1038	858	180	159	995	890	774	116	221
13	Madhya Pradesh	1421	1419	216	1203	1205	1508	1508	1323	185	185
14	Maharashtra	2162	2256	2055	201	107	2107	2205	1958	247	149
15	Manipur	88	111	88	23	0	102	99	152	*	*
16	Meghalaya	125	145	121	24	4	147	80	168	*	*
17	Mizoram	66	69	35	34	31	66	NA	42	NA	24
18	Nagaland	108	85	85	0	23	151	132	132	0	19
19	Odisha	1513	2040	1984	56	*	1665	1868	1694	174	*
20	Punjab	600	854	811	43	*	570	852	629	223	*
21	Rajasthan	2039	2375	2355	20	*	2642	1968	1110	858	1532
22	Sikkim	28	28	3	25	25	26	15	13	2	13
23	Tamil Nadu	1415	1440	1252	188	163	1805	1823	1585	238	220
24	Telangana	-	-	-	-	-	721	675	442	233	279
25	Tripura	83	47	63	*	20	129	N App	171	N App	*
26	Uttarakhand	269	293	281	12	*	313	325	317	8	*
27	Uttar Pradesh	4046	NA	NA	NA	NA	3591	4239	4181	58	*
28	West Bengal	1268	1438	1231	207	37	1261	1549	1460	89	*
29	A & N Islands	24	28	28	0	*	26	22	29	*	*
30	Chandigarh	1	6	6	0	*	0	N App	N App	N App	N App
31	D & N Haveli	7	8	8	0	*	14	15	18	*	*
32	Daman & Diu	4	4	4	0	0					
33	Delhi	8	13	11	2	*	5	4	4	0	1
34	Jammu & Kashmir	404	456	456	0	*	1000	1289	1058	231	*
35	Ladakh	-	-	-	-	-	39	24	22	2	17
36	Lakshadweep	7	11	11	0	*	7	20	20	0	*
37	Puducherry	43	63	58	5	*	27	30	33	*	*
All India^{2/} Total		26582	21072	17708	3380	2858	30101	30306	25792	5648	5635

Notes: *Telangana came to existence in 2014 after bifurcation of Andhra Pradesh*

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ One per each Primary Health Centre and Community Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Comparative Statement 10.
LABORATORY TECHNICIANS at PHCs & CHCs in Rural Areas

S. No.	State/UT	2005					2020				
		Lab Technician					Lab Technician				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1734	1691	1437	254	297	1283	1241	913	328	370
2	Arunachal Pradesh	116	18	18	0	98	179	NA	120	NA	59
3	Assam	710	NA	NA	NA	NA	1136	608	1279	*	*
4	Bihar	1749	NA	NA	NA	NA	1759	1506	438	1068	1321
5	Chhattisgarh	633	633	348	285	285	962	1000	811	189	151
6	Goa	24	26	25	1	*	61	38	44	*	17
7	Gujarat	1342	1357	870	487	472	1825	1792	1478	314	347
8	Haryana	480	391	231	160	249	503	671	400	271	103
9	Himachal Pradesh	505	505	462	43	43	649	239	48	191	601
10	Jharkhand	608	NA	NA	NA	NA	462	545	364	181	98
11	Karnataka	1935	1650	1451	199	484	2365	1922	1725	197	640
12	Kerala	1017	368	358	10	659	995	587	565	22	430
13	Madhya Pradesh	1421	454	386	68	1035	1508	1508	823	685	685
14	Maharashtra	2162	1845	1709	136	453	2107	2118	1574	544	533
15	Manipur	88	38	30	8	58	102	53	112	*	*
16	Meghalaya	125	137	134	3	*	147	76	192	*	*
17	Mizoram	66	69	31	38	35	66	NA	74	NA	*
18	Nagaland	108	45	45	0	63	151	143	143	0	8
19	Odisha	1513	344	311	33	1202	1665	500	711	*	954
20	Punjab	600	747	600	147	0	570	772	528	244	42
21	Rajasthan	2039	2153	2065	88	*	2642	2929	1979	950	663
22	Sikkim	28	36	32	4	*	26	31	37	*	*
23	Tamil Nadu	1415	1024	861	163	554	1805	1872	1165	707	640
24	Telangana	-	-	-	-	-	721	773	647	126	74
25	Tripura	83	55	43	12	40	129	N App	146	N App	*
26	Uttarakhand	269	90	32	58	237	313	136	61	75	252
27	Uttar Pradesh	4046	NA	NA	NA	NA	3591	2452	1812	640	1779
28	West Bengal	1268	427	341	86	927	1261	1101	717	384	544
29	A&N Islands	24	24	24	0	0	26	15	25	*	1
30	Chandigarh	1	2	2	0	*	0	N App	N App	N App	N App
31	D & N Haveli	7	7	7	0	0	14	18	23	*	*
32	Daman & Diu	4	4	4	0	0					
33	Delhi	8	8	5	3	3	5	2	1	1	4
34	Jammu & Kashmir	404	395	395	0	9	1000	1004	882	122	118
35	Ladakh	-	-	-	-	-	39	22	20	2	19
36	Lakshadweep	7	8	7	1	0	7	18	18	0	*
37	Puducherry	43	20	20	0	23	27	30	28	2	*
	All India^{2/} Total	26582	14571	12284	2287	7226	30101	25722	19903	7243	10453

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ One per each Primary Health Centre and Community Health Centre

² Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded

Comparative Statement 11.
NURSING STAFF AT PHCs & CHCs in Rural Areas

S. No.	State/UT	2005					2020				
		Nursing Staff					Nursing Staff				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]	[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	2718	2309	2053	256	665	2129	3421	3088	333	*
2	Arunachal Pradesh	302	105	105	0	197	539	NA	679	NA	*
3	Assam	1310	NA	NA	NA	NA	2276	1512	3575	*	*
4	Bihar	2355	NA	NA	NA	NA	2101	3594	1346	2248	755
5	Chhattisgarh	1329	601	540	61	789	1982	3186	2718	468	*
6	Goa	54	129	119	10	*	97	267	273	*	*
7	Gujarat	2974	2769	1453	1316	1521	3913	3639	2969	670	944
8	Haryana	912	1530	1160	370	*	1211	2921	2193	728	*
9	Himachal Pradesh	901	1540	1259	281	*	1159	458	242	216	917
10	Jharkhand	890	NA	NA	NA	NA	1488	1913	888	1025	600
11	Karnataka	3459	3229	3100	129	359	3499	4574	4741	*	*
12	Kerala	1653	2811	2578	233	*	2261	1984	1760	224	501
13	Madhya Pradesh	2795	908	902	6	1893	3362	3362	2853	509	509
14	Maharashtra	4454	2766	2575	191	1879	3775	3834	3165	669	610
15	Manipur	184	83	62	21	122	204	338	336	2	*
16	Meghalaya	269	355	263	92	6	315	315	754	*	*
17	Mizoram	120	270	122	148	*	120	NA	245	NA	*
18	Nagaland	234	520	520	0	*	277	316	316	0	*
19	Odisha	2899	657	637	20	2262	3927	1402	2504	*	1423
20	Punjab	1296	697	640	57	656	1428	2466	1732	734	*
21	Rajasthan	3995	9891	8425	1466	*	5930	10410	8174	2236	*
22	Sikkim	52	45	45	0	7	38	97	92	5	*
23	Tamil Nadu	1625	167	167	0	1458	4115	8245	7072	1173	*
24	Telangana	-	-	-	-	-	1231	2412	2076	336	*
25	Tripura	143	125	274	*	*	261	N App	746	N App	*
26	Uttarakhand	533	145	129	16	404	649	392	243	149	406
27	Uttar Pradesh	6362	NA	NA	NA	NA	7857	9757	7408	2349	449
28	West Bengal	1838	1901	1479	422	359	3349	8609	7778	831	*
29	A & N Islands	48	108	108	0	*	50	122	148	*	*
30	Chandigarh	7	13	13	0	*	0	N App	N App	N App	N App
31	D & N Haveli	13	12	10	2	3	38	64	77	*	*
32	Daman & Diu	10	12	12	0	*					
33	Delhi	8	10	4	6	4	5	6	6	0	*
34	Jammu & Kashmir	824	244	68	176	756	1462	1815	1385	430	77
35	Ladakh	-	-	-	-	-	81	34	37	*	44
36	Lakshadweep	25	13	13	0	12	25	63	63	0	*
37	Puducherry	67	96	95	1	*	45	156	165	*	*
All India^{2/} Total		46658	34061	28930	5280	13352	61199	81684	71847	15335	7235

Notes: Telangana came to existence in 2014 after bifurcation of Andhra Pradesh

Jammu & Kashmir and Ladakh bifurcated and became UTs during Aug 2019.

Dadra & Nagar Haveli and Daman Diu merged as single UT during Jan 2020.

NA: Not Available N App: Not Applicable *: Surplus.

¹ One per Primary Health Centre and 7 per Community Health Centre

Total given in the Table are not strictly comparable as figures for some of the States were not available in 2005. For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, may be excluded

Comparative Statement 12.
NUMBER OF SCs, PHCs & CHCs FUNCTIONING in Rural Areas- II

S. No.	State/UT	As on March 2019			As on March 2020		
		Sub centre	PHCs	CHCs	Sub centre	PHCs	CHCs
1	Andhra Pradesh	7437	1145	140	7437	1142	141
2	Arunachal Pradesh	385	143	63	356	119	60
3	Assam	4643	946	177	4659	946	190
4	Bihar	9949	1899	150	9112	1702	57
5	Chhattisgarh	5205	792	170	5205	792	170
6	Goa	219	24	5	218	55	6
7	Gujarat	9166	1476	362	9162	1477	348
8	Haryana	2604	379	115	2617	385	118
9	Himachal Pradesh	2089	586	87	2092	564	85
10	Jharkhand	3848	298	171	3848	291	171
11	Karnataka	9758	2127	198	9188	2176	189
12	Kerala	5380	848	227	5410	784	211
13	Madhya Pradesh	10226	1199	309	10226	1199	309
14	Maharashtra	10668	1828	364	10647	1829	278
15	Manipur	490	90	23	418	85	17
16	Meghalaya	477	118	28	440	119	28
17	Mizoram	370	59	9	311	57	9
18	Nagaland	433	126	21	395	130	21
19	Odisha	6688	1288	377	6688	1288	377
20	Punjab	2950	416	89	2950	427	143
21	Rajasthan	13512	2082	571	13480	2094	548
22	Sikkim	176	29	2	147	24	2
23	Tamil Nadu	8713	1422	385	8713	1420	385
24	Telangana	4744	636	85	4744	636	85
25	Tripura	972	108	18	965	107	22
26	Uttarakhand	1847	257	67	1839	257	56
27	Uttar Pradesh	20782	2936	679	20778	2880	711
28	West Bengal	10357	908	348	10357	913	348
29	A & N Islands	124	22	4	124	22	4
30	Chandigarh	0	0	0	0	0	0
31	D & N Haveli	71	9	2	94	10	4
32	Daman & Diu	23	4	0			
33	Delhi	12	5	0	12	5	0
34	Jammu & Kashmir	3025	622	84	2470	923	77
35	Ladakh	-	-	-	238	32	7
36	Lakshadweep	14	4	3	11	4	3
37	Puducherry	54	24	2	53	24	3
All India/ Total		157411	24855	5335	155404	24918	5183

BUILDING POSITION OF SCs, PHCs & CHCs in Rural Areas

S. No.	State/UT	Sub Centres				PHCs				CHCs			
		(As on March, 2019)		(As on March, 2020)		(As on March, 2019)		(As on March, 2020)		(As on March, 2019)		(As on March, 2020)	
		Total	In Govt. Buildings	Total	In Govt. Buildings	Total	In Govt. Buildings	Total	In Govt. Buildings	Total	In Govt. Buildings	Total	In Govt. Buildings
1	Andhra Pradesh	7437	1769	7437	2326	1145	1145	1142	1126	140	140	141	141
2	Arunachal Pradesh	385	385	356	356	143	143	119	119	63	63	60	60
3	Assam	4643	4049	4659	3626	946	946	946	946	177	177	190	190
4	Bihar	9949	5643	9112	3756	1899	1493	1702	986	150	150	57	57
5	Chhattisgarh	5205	4202	5205	4160	792	677	792	677	170	159	170	160
6	Goa	219	46	218	93	24	23	55	22	5	5	6	6
7	Gujarat	9166	8515	9162	6358	1476	1476	1477	1226	362	361	348	298
8	Haryana	2604	1669	2617	1714	379	321	385	301	115	112	118	113
9	Himachal Pradesh	2089	1588	2092	1630	586	455	564	485	87	85	85	83
10	Jharkhand	3848	2277	3848	2422	298	255	291	160	171	171	171	171
11	Karnataka	9758	7908	9188	5075	2127	2054	2176	2020	198	198	189	181
12	Kerala	5380	4260	5410	3818	848	779	784	775	227	227	211	211
13	Madhya Pradesh	10226	7505	10226	7926	1199	1164	1199	1092	309	309	309	304
14	Maharashtra	10668	9863	10647	9069	1828	1796	1829	1707	364	364	278	270
15	Manipur	490	459	418	332	90	90	85	79	23	23	17	17
16	Meghalaya	477	468	440	428	118	118	119	118	28	28	28	28
17	Mizoram	370	370	311	311	59	59	57	57	9	9	9	9
18	Nagaland	433	316	395	313	126	118	130	123	21	21	21	21
19	Odisha	6688	4797	6688	4897	1288	1288	1288	1255	377	377	377	377
20	Punjab	2950	1907	2950	1848	416	368	427	362	89	89	143	132
21	Rajasthan	13512	10647	13480	10621	2082	1952	2094	1963	571	552	548	530
22	Sikkim	176	175	147	146	29	29	24	24	2	2	2	2
23	Tamil Nadu	8713	6579	8713	6290	1422	1374	1420	1390	385	385	385	385
24	Telangana	4744	1273	4744	1273	636	636	636	636	85	85	85	85
25	Tripura	972	810	965	777	108	108	107	107	18	18	22	22
26	Uttarakhand	1847	1304	1839	1296	257	227	257	227	67	67	56	56
27	Uttar Pradesh	20782	20782	20778	17124	2936	2936	2880	2626	679	679	711	642
28	West Bengal	10357	7819	10357	8580	908	894	913	913	348	348	348	348
29	A& N Islands	124	124	124	124	22	22	22	22	4	4	4	4
30	Chandigarh	0	0	0	N App	0	0	0	N App	0	0	0	N App
31	D & N Haveli	71	63	94	69	9	9	10	10	2	2	4	4
32	Daman & Diu	23	19			4	3			0	0		
33	Delhi	12	1	12	1	5	5	5	5	0	0	0	N App
34	Jammu & Kashmir	3025	956	2470	872	622	506	923	714	84	84	77	77
35	Ladakh	-	-	238	207	-	-	32	32	-	-	7	7
36	Lakshadweep	14	8	11	8	4	4	4	4	3	3	3	3
37	Puducherry	54	44	53	40	24	24	24	24	2	2	3	3
All India/ Total		157411	118600	155404	107886	24855	23497	24918	22333	5335	5299	5183	4997

MANPOWER POSITION IN SCs, PHCs & CHCs in Rural Areas- I

S. No.	State/UT	ANM at Sub Center & PHC		Doctors ⁺ at PHC		Total Specialists at CHC	
		March, 2019	March, 2020	March, 2019	March, 2020	March, 2019	March, 2020
1	Andhra Pradesh	11815	15742	1715	1798	237	315
2	Arunachal Pradesh	689	471	116	194	4	14
3	Assam	11502	8614	1925	1424	136	188
4	Bihar	24228	15656	2085	1745	82	124
5	Chhattisgarh	6808	5921	321	388	61	62
6	Goa	250	347	56	75	5	14
7	Gujarat	9168	9566	2186	1490	118	13
8	Haryana	4606	4534	542	491	15	27
9	Himachal Pradesh	1845	1664	486	471	5	21
10	Jharkhand	6325	6010	336	222	66	179
11	Karnataka	8462	13371	2111	2071	465	252
12	Kerala	7504	5917	1531	1028	35	173
13	Madhya Pradesh	11824	12087	1053	1065	104	46
14	Maharashtra	21753	12804	2951	2848	485	399
15	Manipur	1044	1002	208	311	3	4
16	Meghalaya	1173	1041	149	190	4	4
17	Mizoram#	699	346	60	58	0	0
18	Nagaland	1008	900	133	120	8	9
19	Odisha	9187	8985	813	827	236	313
20	Punjab	4530	3703	562	391	93	139
21	Rajasthan	15425	14917	1932	1845	455	438
22	Sikkim	260	268	41	34	0	2
23	Tamil Nadu	9983	10489	1777	2708	179	228
24	Telangana	7932	7943	1213	1213	258	258
25	Tripura	664	683	216	222	2	1
26	Uttarakhand	1825	2006	269	346	27	32
27	Uttar Pradesh	29082	23591	3180	2759	484	816
28	West Bengal	18997	18591	810	1098	71	641
29	A& N Islands	336	179	34	48	0	1
30	Chandigarh	0	N App	0	N App	0	N App
31	D & N Haveli	137	147	12	13	0	1
32	Daman & Diu	52		3		0	
33	Delhi	24	34	5	18	0	N App
34	Jammu & Kashmir	4908	4511	919	940	242	230
35	Ladakh	-	394	-	10	-	5
36	Lakshadweep	47	40	8	10	0	8
37	Puducherry	128	119	41	45	1	0
All India/ Total		234220	212593	29799	28516	3881	4957

Note:

+: Allopathic Doctors

Comparative Statement 15.
MANPOWER POSITION IN SCs, PHCs & CHCs in Rural Areas- II

S No.	State/UT	Radiographers at CHC		Pharmacists at PHC & CHC		Lab Technicians at PHC & CHC		Nursing Staff at PHCs & CHCs	
		March, 2019	March, 2020	March, 2019	March, 2020	March, 2019	March, 2020	March, 2019	March, 2020
1	Andhra Pradesh	40	56	1016	1039	817	913	2861	3088
2	Arunachal Pradesh	17	13	101	108	113	120	617	679
3	Assam	90	117	1779	1384	1409	1279	3369	3575
4	Bihar	1	3	287	492	611	438	1630	1346
5	Chhattisgarh	161	161	1003	946	844	811	2618	2718
6	Goa	7	2	41	57	30	44	135	273
7	Gujarat	192	126	1675	1538	1729	1478	4218	2969
8	Haryana	54	38	430	405	356	400	2110	2193
9	Himachal Pradesh	24	26	293	511	78	48	404	242
10	Jharkhand	59	122	241	228	264	364	1190	888
11	Karnataka	167	122	1973	1749	1469	1725	3511	4741
12	Kerala	0	12	1299	774	372	565	2427	1760
13	Madhya Pradesh	214	183	1383	1323	1021	823	2816	2853
14	Maharashtra	107	104	1825	1958	1436	1574	2698	3165
15	Manipur	56	9	161	152	75	112	430	336
16	Meghalaya	18	24	171	168	174	192	751	754
17	Mizoram	5	8	56	42	86	74	205	245
18	Nagaland	3	3	117	132	96	143	381	316
19	Odisha	66	63	1778	1694	632	711	2568	2504
20	Punjab	139	120	722	629	551	528	1806	1732
21	Rajasthan	343	329	1224	1110	1893	1979	8889	8174
22	Sikkim	4	4	15	13	35	37	73	92
23	Tamil Nadu	92	144	2043	1585	1064	1165	5888	7072
24	Telangana	44	44	442	442	647	647	2097	2076
25	Tripura	11	13	163	171	120	146	636	746
26	Uttarakhand	5	9	304	317	63	61	329	243
27	Uttar Pradesh	82	189	2883	4181	963	1812	18504	7408
28	West Bengal	182	162	1411	1460	785	717	5811	7778
29	A& N Islands	0	4	49	29	19	25	193	148
30	Chandigarh	0	N App	0	N App	0	N App	0	N App
31	D & N Haveli	2	4	14	18	17	23	51	77
32	Daman & Diu	0		4		4		11	
33	Delhi	0	N App	4	4	2	1	0	6
34	Jammu & Kashmir	226	208	1235	1058	901	882	1513	1385
35	Ladakh	-	4	-	22	-	20	-	37
36	Lakshadweep	5	5	16	20	13	18	54	63
37	Puducherry	3	3	46	33	26	28	182	165
All India/ Total		2419	2434	26204	25792	18715	19903	80976	71847



SECTION II
DISTRICT-WISE HEALTH CARE
INFRASTRUCTURE IN INDIA

DISTRICT-WISE AVAILABILITY OF HEALTH CENTRES IN INDIA (RURAL + URBAN)

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
1	Andhra Pradesh	Anantapur	586	107	15	2	1
		Chittoor	644	120	15	4	1
		Cuddapah	448	89	12	1	1
		East Godavari	840	142	26	3	1
		Guntur	680	117	18	2	1
		Krishna	593	124	12	2	1
		Kurnool	542	110	19	1	1
		Nellore	477	88	14	2	1
		Prakasam	534	99	15	2	1
		Srikakulam	465	88	15	2	1
		Vishakapatnam	583	113	12	3	1
		Vizianagaram	431	76	11	1	1
		West Godavari	635	112	14	3	1
		Total Districts = 13	7458	1385	198	28	13
2	Arunachal Pradesh	Anjaw	8	6	4	0	1
		Changlang	18	5	5	0	1
		Dibang Valley	5	1	0	0	1
		East Kameng	25	11	3	0	1
		East Siang	21	11	3	0	1
		Kra Daadi	8	4	1	0	0
		Kurung Kumey	20	4	2	0	1
		Lohit	20	4	2	0	1
		Longding	6	1	3	0	0
		Lower Dibang Valley	14	3	4	0	1
		Lower Subansiri	35	7	3	0	1
		Namsai	17	4	2	0	1
		Papum Pare	34	16	4	0	0
		Siang	27	7	3	0	0
		Tawang	10	6	2	0	1
		Tirap	9	7	1	0	1
		Upper Siang	13	2	4	0	1
		Upper Subansiri	31	8	5	0	1
		West Kameng	23	5	5	0	1
		West Siang	19	12	4	0	2
		Total Districts = 20	363	124	60	0	17
3	Assam	Baksa	157	35	8	0	1
		Barpeta	264	48	11	1	1
		Bongaigaon	108	29	4	0	1
		Cachar	270	31	7	0	1
		Chirang	87	24	4	0	1
		Darrang	159	33	7	0	1
		Dhemaji	98	24	4	0	1
		Dhubri	231	43	8	2	1
		Dibrugarh	234	31	10	0	0
		Dima Hasao	76	12	3	0	1
		Goalpara	155	37	6	0	1
		Golaghat	143	40	5	1	1
		Hailakandi	107	13	1	0	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Jorhat	145	42	8	2	0
		Kamrup M	51	45	5	0	1
		Kamrup R	279	65	13	1	1
		Karbi Anglong	154	42	8	1	0
		Karimganj	230	30	7	0	1
		Kokrajhar	162	46	2	1	1
		Lakhimpur	157	29	8	1	1
		Marigaon	122	34	6	0	1
		Nagaon	352	78	18	0	1
		Nalbari	122	44	11	0	1
		Sibsagar	220	46	4	2	1
		Sonitpur	281	55	9	2	1
		Tinsukia	166	22	8	0	1
		Udalguri	150	24	7	0	1
		Total Districts = 27	4680	1002	192	14	24
4	Bihar	Araria	221	44	2	1	1
		Arwal	63	33	0	0	1
		Aurangabad	248	72	3	1	1
		Banka	251	42	3	0	1
		Begusarai	292	44	2	1	1
		Bhagalpur	330	74	3	2	1
		Bhojpur	300	45	3	1	1
		Buxar	149	39	0	1	1
		Champan East	414	104	3	0	1
		Champan West	554	55	0	1	1
		Darbhanga	259	71	2	2	0
		Gaya	474	91	1	2	1
		Gopalganj	189	37	3	1	1
		Jamui	234	39	3	0	1
		Jehanabad	110	38	1	0	1
		Kaimur	178	30	2	1	1
		Katihar	341	63	1	2	1
		Khagaria	187	32	1	0	1
		Kishanganj	155	19	1	0	1
		Lakhisarai	102	21	1	0	1
		Madhepura	272	37	0	1	1
		Madhubani	439	96	1	1	1
		Munger	154	34	0	1	1
		Muzaffarpur	500	103	1	0	1
		Nalanda	367	70	4	2	1
		Nawada	173	52	1	1	1
		Patna	382	106	4	4	0
		Purnia	473	56	2	1	1
		Rohtas	249	56	2	2	1
		Saharsa	168	44	0	0	1
		Samastipur	358	70	1	3	1
		Saran	396	63	3	1	1
		Sheikhpura	104	23	1	0	1
		Sheohar	96	14	0	0	1
		Sitamarhi	208	57	1	0	1
		Siwan	379	68	3	1	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Supaul	174	33	2	0	1
		Vaishali	337	52	3	1	1
		Total Districts = 38	10280	2027	64	35	36
5	Chhattisgarh	Balod	196	30	6	0	1
		Baloda Bazar	223	32	6	1	1
		Balrampur	194	28	6	1	1
		Bastar	253	41	8	1	1
		Bemetra	128	20	4	1	1
		Bijapur	123	11	5	0	1
		Bilaspur	274	59	8	1	1
		Dantewada	76	13	4	0	1
		Dhamtari	194	27	4	1	1
		Durg	221	32	8	1	1
		Gariyaband	199	18	6	1	1
		Janjgir Champa	276	47	11	1	1
		Jashpur	258	35	8	2	1
		Kanker	253	35	8	1	1
		Kawardha	152	25	6	0	1
		Kondagaon	173	21	6	0	1
		Korba	289	40	7	0	1
		Koriya	197	29	6	0	1
		Mahasamund	227	31	5	0	1
		Mungeli	126	29	3	0	1
		Narayanpur	58	8	1	0	1
		Raigarh	350	53	9	3	1
		Raipur	280	49	11	3	1
		Rajnandgaon	336	50	10	1	1
		Sukma	86	12	3	0	1
		Surajpur	219	35	8	0	1
		Surguja	208	27	7	1	0
		Total Districts = 27	5569	837	174	20	26
6	Goa	North Goa	113	30	4	0	1
		South Goa	105	29	2	2	1
		Total Districts = 2	218	59	6	2	2
7	Gujarat	Ahmedabad	211	118	15	2	0
		Amreli	248	44	12	3	1
		Anand	277	61	14	0	2
		Arvalli	219	38	10	2	0
		Banaskantha	759	125	26	2	1
		Bharuch	241	46	9	0	1
		Bhavnagar	299	66	13	2	0
		Botad	95	19	5	0	1
		Chhota Udepur	310	51	12	0	1
		Dahod	637	99	20	1	0
		Dang	68	10	3	0	1
		Devbhumi Dwarka	169	25	4	1	1
		Gandhinagar	172	36	9	1	0
		Gir Somnath	174	33	7	0	1
		Jamnagar	210	45	9	0	0

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Junagadh	235	46	9	0	0
		Kachchh	442	77	16	2	0
		Kheda	316	58	14	1	1
		Mahesana	295	63	13	3	1
		Mahisagar	225	36	8	1	1
		Morbi	198	34	5	1	1
		Narmada	174	28	3	1	1
		Navsari	296	50	12	2	1
		Panchmahal	300	54	13	0	1
		Patan	326	55	14	1	0
		Porbandar	85	15	4	0	1
		Rajkot	347	83	12	4	1
		Sabarkantha	281	49	12	2	0
		Surat	358	102	20	1	0
		Surendrangr	349	55	12	2	1
		Tapi	241	39	7	0	1
		Vadodara	242	77	10	0	1
		Valsad	363	58	10	2	0
		Total Districts = 33	9162	1795	362	37	22
8	Haryana	Ambala	106	22	4	2	1
		Bhiwani	139	26	6	3	1
		Charkhi Dadri	75	12	3	0	1
		Faridabad	61	25	8	2	1
		Fatehabad	131	22	5	1	1
		Gurugram	80	29	3	2	1
		Hisar	198	31	10	2	1
		Jhajjar	134	29	6	2	1
		Jind	164	23	8	1	1
		Kaithal	144	21	6	0	1
		Karnal	147	25	6	1	1
		Kurukshetra	117	18	6	0	1
		Mahendragarh	135	18	7	1	1
		Mewat	94	17	3	0	1
		Palwal	95	18	7	0	1
		Panchkula	46	9	3	0	1
		Panipat	89	22	6	0	1
		Rewari	113	16	5	1	1
		Rohtak	116	21	7	0	1
		Sirsa	156	28	8	1	1
		Sonipat	164	34	8	1	1
		Yamunanagar	113	19	6	1	1
		Total Districts = 22	2617	485	131	21	22
9	Himachal Pradesh	Bilaspur	120	38	6	4	1
		Chamba	177	45	4	7	0
		Hamirpur	150	32	2	5	0
		Kangra	441	87	19	18	1
		Kinnaur	34	24	4	1	1
		Kullu	103	27	4	5	1
		Lahul Spiti	36	17	3	0	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Mandi	331	87	12	15	1
		Shimla	252	122	17	12	1
		Sirmaur	149	44	6	5	0
		Solan	175	41	6	6	1
		Una	136	24	9	5	1
		Total Districts = 12	2104	588	92	83	9
10	Jharkhand	Bokaro	115	20	8	3	1
		Chatra	93	9	5	0	1
		Deoghar	180	8	7	1	1
		Dhanbad	140	33	9	0	0
		Dumka	248	35	10	0	1
		Garhwa	117	11	6	1	1
		Giridih	179	17	11	0	1
		Godda	181	10	7	0	1
		Gumla	243	2	10	0	1
		Hazaribagh	140	16	8	1	1
		Jamtara	129	13	4	0	1
		Khunti	108	5	5	0	1
		Kodarma	65	8	4	0	1
		Latehar	97	7	6	0	1
		Lohardaga	74	7	4	0	1
		Pakur	121	10	5	0	1
		Palamu	171	24	7	2	1
		Pashchimi Singhbhum	343	16	13	1	1
		Purbi Singhbhum	243	25	9	1	1
		Ramgarh	54	8	6	0	1
		Ranchi	324	34	13	1	1
		Sahibganj	136	12	8	1	1
		Saraikela	192	13	6	1	1
		Simdega	155	8	6	0	1
		Total Districts = 24	3848	351	177	13	23
11	Karnataka	Bagalkote	233	55	8	5	1
		Bangalore Rural	199	50	2	4	0
		Bangalore Urban	279	203	11	5	7
		Belgaum	620	153	16	9	0
		Bellary	293	74	11	6	1
		Bidar	275	58	8	4	0
		Bijapur	310	67	9	4	1
		Chamrajnagar	254	62	3	3	0
		Chikkaballapur	203	61	2	5	1
		Chikmagalur	368	91	5	6	1
		Chitradurga	343	86	11	5	1
		Dakshina Kannada	430	80	5	4	2
		Davanagere	324	108	6	5	2
		Dharwad	185	53	0	3	1
		Gadag	191	42	2	4	1
		Gulbarga	337	102	16	6	0
		Hassan	486	138	15	7	0
		Haveri	311	72	5	6	1
		Kodagu	196	30	7	2	0

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Kolar	266	68	2	5	1
		Koppal	176	48	9	3	0
		Mandya	410	117	9	6	0
		Mysore	510	147	10	6	1
		Raichur	213	57	6	4	0
		Ramanagar	249	65	4	3	1
		Shimoga	356	106	7	7	0
		Tumkur	569	150	4	9	1
		Udupi	336	62	6	2	1
		Uttara Kannada	344	85	3	10	0
		Yadgir	169	44	6	2	1
		Total Districts = 30	9435	2534	208	150	26
12	Kerala	Alappuzha	366	63	16	6	4
		Ernakulam	410	90	23	11	4
		Idukki	309	41	13	4	2
		Kannur	414	88	9	9	3
		Kasargod	247	42	6	5	2
		Kollam	421	62	17	8	2
		Kottayam	333	59	20	3	5
		Kozhikode	401	74	16	7	4
		Malappuram	589	96	21	7	5
		Palakkad	503	81	19	6	3
		Pathanamthitta	261	44	12	4	3
		Thiruvananthapuram	485	85	22	8	6
		Thrissur	471	83	24	6	3
		Wayanad	200	24	9	2	2
		Total Districts = 14	5410	932	227	86	48
13	Madhya Pradesh	Agar Malwa	77	6	3	0	1
		Alirajpur	185	16	6	0	1
		Anuppur	169	18	8	0	1
		Ashok Nagar	132	11	2	2	1
		Balaghat	292	38	7	3	1
		Barwani	330	30	8	2	1
		Betul	323	36	9	1	1
		Bhind	210	28	7	1	1
		Bhopal	66	52	2	3	1
		Burhanpur	98	15	4	0	1
		Chhatarpur	235	40	10	0	1
		Chhindwada	305	69	11	4	1
		Damoh	176	18	6	1	1
		Datia	110	13	4	2	1
		Dewas	209	25	7	2	1
		Dhar	475	52	15	1	1
		Dindori	191	22	7	0	1
		Guna	160	19	5	1	1
		Gwalior	119	55	3	4	1
		Harda	79	7	4	0	1
		Hoshangabad	157	17	6	2	1
		Indore	115	58	6	3	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Jabalpur	178	51	6	3	1
		Jhabua	292	21	5	2	1
		Katni	163	20	6	1	1
		Khandwa	181	31	7	1	1
		Khargone	317	63	10	2	1
		Mandla	274	34	8	1	1
		Mandsaur	180	40	7	2	1
		Morena	237	27	7	3	1
		Narsinghpur	136	23	7	1	1
		Neemuch	103	18	3	2	1
		Panna	155	17	6	0	1
		Raisen	187	21	7	3	1
		Rajgarh	215	30	5	4	1
		Ratlam	197	30	6	2	1
		Rewa	316	40	9	3	1
		Sagar	266	41	11	3	1
		Satna	309	50	9	2	1
		Sehore	163	24	8	2	1
		Seoni	283	32	5	3	1
		Shahdol	233	30	7	1	1
		Shajapur	117	17	4	3	1
		Sheopur	107	12	3	0	1
		Shivpuri	263	15	9	0	1
		Sidhi	196	28	6	0	1
		Singroli	206	15	7	0	1
		Tikamgarh	207	24	7	0	1
		Ujjain	208	37	5	6	1
		Umaria	124	13	3	0	1
		Vidisha	200	27	7	2	1
		Total Districts = 51	10226	1476	330	84	51
14	Maharashtra	Ahmadnagar	558	106	23	3	1
		Akola	178	45	5	1	1
		Amravati	334	74	10	4	3
		Aurangabad	279	82	11	3	1
		Bhandara	193	35	7	2	1
		Bid	297	55	10	3	2
		Brihan Mumbai	0	298	22	0	5
		Buldana	280	58	12	2	2
		Chandrapur	339	67	10	3	0
		Dhule	232	49	5	2	0
		Gadchiroli	376	48	9	3	2
		Gondiya	258	41	10	1	0
		Hingoli	132	27	3	2	2
		Jalgaon	442	95	19	3	0
		Jalna	218	43	8	1	2
		Kolhapur	413	91	18	4	0
		Latur	252	57	10	2	1
		Nagpur	316	95	12	2	1
		Nanded	379	80	13	4	2
		Nandurbar	292	61	12	2	1
		Nashik	587	156	27	6	4

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Osmanabad	211	44	6	3	2
		Palghar	311	70	14	3	0
		Parbhani	214	38	6	2	2
		Pune	542	193	28	11	2
		Raigarh	288	59	8	5	1
		Ratnagiri	378	68	8	3	1
		Sangli	320	71	15	2	0
		Satara	401	76	15	2	1
		Sindhudurg	248	38	7	3	1
		Solapur	427	95	16	3	0
		Thane	176	133	11	5	6
		Wardha	181	32	7	2	1
		Washim	153	26	7	0	1
		Yavatmal	444	69	14	3	0
		Total Districts = 35	10649	2675	418	100	49
15	Manipur	Bishnupur	33	7	2	0	1
		Chandel	25	5	1	1	1
		Churachandpur	71	11	1	0	1
		Imphal East	50	14	2	0	0
		Imphal West	53	12	2	0	0
		Senapati	67	14	2	0	1
		Tamenglong	30	6	1	0	1
		Thoubal	50	16	5	0	1
		Ukhrul	39	8	1	0	1
		Total Districts = 9	418	93	17	1	7
16	Meghalaya	East Garo Hills	31	8	1	0	1
		East Jaintia Hills	35	6	2	0	0
		East Khasi Hills	71	44	7	0	2
		North Garo Hills	52	9	1	0	0
		Ri Bhoi	33	10	3	0	1
		South Garo Hills	21	7	1	0	1
		South West Garo Hills	27	9	1	0	1
		South West Khasi Hills	18	4	2	0	0
		West Garo Hills	64	15	5	0	2
		West Jaintia Hills	46	15	3	0	1
		West Khasi Hills	45	16	2	0	2
		Total Districts = 11	443	143	28	0	11
17	Mizoram	Aizawl East	55	9	2	0	0
		Aizawl West	41	9	0	1	2
		Champhai	59	11	2	0	1
		Kolasib	26	5	1	0	1
		Lawngtlai	37	5	1	0	1
		Lunglei	68	11	1	1	1
		Mamit	33	6	1	0	1
		Saiha	24	4	0	0	1
		Serchhip	27	5	1	0	1
		Total Districts = 9	370	65	9	2	9
18	Nagaland	Mon	50	15	2	0	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Dimapur	52	12	2	0	1
		Kiphire	22	4	1	0	1
		Kohima	41	15	3	0	1
		Longleng	10	3	0	0	1
		Mokokchung	51	17	3	0	1
		Peren	16	8	1	0	1
		Phek	46	23	3	0	1
		Tuensang	38	14	2	0	1
		Wokha	42	13	2	0	1
		Zunheboto	47	13	2	0	1
		Total Districts = 11	415	137	21	0	11
19	Odisha	Anugul	166	31	9	3	1
		Balangir	226	48	15	2	1
		Baleshwar	275	74	17	1	1
		Bargarh	204	49	15	1	1
		Baudh	67	12	5	0	1
		Bhadrak	178	54	7	0	1
		Cuttack	332	73	22	2	1
		Deogarh	42	8	4	0	1
		Dhenkanal	167	38	10	2	1
		Gajapati	136	22	8	0	1
		Ganjam	460	101	28	4	1
		Jagatsinghpur	189	35	11	0	1
		Jajapur	260	62	12	0	1
		Jharsuguda	66	20	6	0	1
		Kalahandi	242	46	18	1	1
		Kandhamal	172	40	14	1	1
		Kendrapara	227	46	8	1	1
		Keonjhar	351	67	17	2	1
		Khordha	202	74	16	0	2
		Koraput	307	51	16	0	1
		Malkangiri	158	27	6	2	1
		Mayurbhanj	589	88	28	3	1
		Nabarangapur	289	41	10	1	1
		Nayagarh	166	38	12	1	1
		Nuapada	95	17	5	1	1
		Puri	241	51	17	0	1
		Rayagada	235	39	11	1	1
		Sambalpur	167	36	11	2	1
		Sonapur	89	20	5	1	1
		Sundargarh	390	69	21	1	2
		Total Districts = 30	6688	1377	384	33	32
20	Punjab	Amritsar	194	49	7	2	1
		Barnala	76	12	4	1	1
		Bathinda	143	24	9	3	1
		Faridkot	62	11	3	1	1
		Fatehgarh Sahib	74	15	5	1	1
		Ferozepur	122	19	4	1	1
		Fazilka	111	22	5	1	1
		Gurdaspur	227	33	13	1	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Pathankot	68	11	4	0	1
		Hoshiarpur	250	33	12	3	1
		Jalandhar	211	38	14	2	1
		Kapurthala	89	14	5	3	1
		Ludhiana	278	47	10	4	1
		Mansa	105	13	4	2	1
		Moga	123	23	6	0	1
		SAS Nagar	77	19	7	2	1
		Muktsar	104	21	5	3	1
		Nawanshehar	96	18	5	1	1
		Patiala	205	41	11	3	1
		Ropar	85	13	3	1	1
		Sangrur	194	33	8	4	1
		Tarn Taran	153	18	11	2	1
		Total Districts = 22	3047	527	155	41	22
21	Rajasthan	Ajmer	371	90	22	3	1
		Alwar	684	133	37	0	1
		Banswara	453	59	22	0	1
		Baran	265	53	14	0	1
		Barmer	721	104	24	1	1
		Bharatpur	395	75	17	0	1
		Bhilwara	534	86	25	0	1
		Bikaner	419	72	17	0	0
		Bundi	207	33	13	0	1
		Chittorgarh	383	54	23	1	1
		Churu	436	102	16	2	1
		Dausa	315	47	16	0	1
		Dholpur	230	36	7	1	1
		Dungarpur	349	59	15	1	1
		Ganganagar	415	62	18	0	1
		Hanumangarh	361	59	16	0	1
		Jaipur	617	207	34	1	0
		Jaisalmer	157	31	8	0	1
		Jalore	407	72	11	0	1
		Jhalawar	323	48	14	0	0
		Jhunjhunu	592	116	26	0	1
		Jodhpur	653	111	27	0	0
		Karauli	278	40	11	1	1
		Kota	188	63	13	0	0
		Nagaur	798	131	32	3	1
		Pali	476	89	23	1	1
		Pratapgarh	203	32	8	0	1
		Rajsamand	259	47	12	1	1
		Sawai Madhopur	266	39	14	1	1
		Sikar	638	113	30	2	1
		Sirohi	223	34	9	0	1
		Tonk	290	65	11	0	1
		Udaipur	624	115	29	1	0
		Total Districts = 33	13530	2477	614	20	27
22	Sikkim	East	54	7	1	1	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		North	19	5	0	0	1
		South	39	6	1	0	1
		West	41	7	0	0	1
		Total Districts = 4	153	25	2	1	4
23	Tamil Nadu	Ariyalur	117	32	6	3	1
		Chennai	0	144	15	3	1
		Coimbatore	328	77	12	12	1
		Cuddalore	319	58	13	9	1
		Dharmapuri	218	43	8	3	1
		Dindigul	311	59	14	12	1
		Erode	311	62	14	7	1
		Kancheepuram	364	64	13	9	1
		Kanniyakumari	267	38	9	8	1
		Karur	168	29	8	6	1
		Krishnagiri	239	51	10	6	1
		Madurai	314	75	13	6	1
		Nagapattinam	258	47	11	11	1
		Namakkal	240	48	15	8	1
		Nilgiris	194	33	4	3	1
		Perambalur	90	25	4	12	1
		Pudukkottai	242	62	13	9	1
		Ramanathapuram	244	48	11	11	1
		Salem	398	87	20	16	1
		Sivaganga	275	40	12	13	1
		Thanjavur	309	63	14	5	1
		Theni	162	33	8	5	1
		Thiruvallur	303	54	14	8	1
		Thiruvarur	195	40	10	9	1
		Tiruchirappalli	307	70	14	16	1
		Tirunelveli	379	85	19	9	1
		Tirupur	242	54	13	10	1
		Tiruvanamalai	410	81	18	9	1
		Toothukudi	253	48	12	7	1
		Vellore	454	99	20	12	1
		Viluppuram	557	88	22	11	1
		Virudhunagar	245	47	11	10	1
		Total Districts = 32	8713	1884	400	278	32
24	Telangana	Adilabad	126	27	2	0	0
		Bhadradi Kothagudem	267	34	4	3	0
		Hyderabad	53	91	10	3	1
		Jagtial	151	23	3	1	0
		Jangaon	112	17	0	1	1
		Jayashankar Bhupalapally	90	14	2	0	0
		Jogulamba Gadwal	91	13	1	1	0
		Kamareddy	170	23	6	2	0
		Karimnagar	139	26	3	1	1
		Khammam	226	30	3	0	1
		Komaram Bheem Asifabad	108	22	2	0	0

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Mahabubabad	173	21	2	1	0
		Mahabubnagar	130	17	2	0	0
		Mancherial	121	21	3	1	0
		Medak	156	18	2	2	0
		Medchal Malkajgiri	127	34	2	0	0
		Mulugu	89	15	2	1	0
		Nagarkurnool	178	27	4	1	0
		Nalgonda	257	39	1	3	0
		Narayanpet	87	16	2	1	0
		Nirmal	102	20	2	2	0
		Nizamabad	225	37	8	1	0
		Peddapalli	104	24	3	1	0
		Rajanna Sircilla	89	17	0	1	0
		Rangareddy	252	56	7	2	0
		Sangareddy	245	36	2	4	1
		Siddipet	193	34	3	1	0
		Suryapet	171	27	2	1	0
		Vikarabad	154	25	4	0	1
		Wanaparthy	102	15	2	1	0
		Warangal Rural	143	17	3	0	0
		Warangal Urban	81	28	0	0	0
		Yadadri Bhongir	129	21	3	1	0
		Total Districts = 33	4841	885	95	37	6
25	Tripura	Dhalai	121	16	2	3	1
		Gomati	146	11	3	2	1
		Khowai	104	9	1	1	1
		North Tripura	94	14	3	1	1
		Sipahijala	146	15	4	2	0
		South Tripura	148	18	5	2	1
		Unakoti	70	11	1	1	1
		West Tripura	172	18	3	0	1
		Total Districts = 8	1001	112	22	12	7
26	Uttarakhand	Almora	203	26	9	2	1
		Bageshwar	89	15	3	0	1
		Chamoli	112	21	3	1	1
		Champawat	66	6	2	1	1
		Dehradun	180	33	5	4	1
		Haridwar	166	41	8	2	1
		Nainital	136	19	8	4	1
		Pauri Garhwal	209	31	5	3	1
		Pithoragarh	162	18	4	0	1
		Rudra Prayag	73	13	2	0	1
		Tehri Garhwal	212	28	11	1	1
		US Nagar	154	32	5	1	1
		Uttar Kashi	85	12	3	0	1
		Total Districts = 13	1847	295	68	19	13
27	Uttar Pradesh	Agra	395	75	16	0	2
		Aligarh	333	53	13	0	4
		Allahabad	562	84	19	0	6

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Ambedkar Nagar	272	28	10	0	1
		Auraiya	165	26	7	0	2
		Azamgarh	493	77	19	0	4
		Bagpat	200	24	7	0	1
		Bahraich	320	56	14	0	2
		Ballia	367	81	9	0	2
		Balrampur	215	27	9	0	3
		Banda	277	52	4	0	2
		Barabanki	350	56	19	0	3
		Bareilly	411	81	6	0	2
		Basti	273	39	14	0	3
		Bijnor	343	64	7	0	2
		Budaun	291	56	9	0	2
		Bulandshahar	344	71	10	0	4
		C S M Nagar	213	31	13	0	1
		Chandauli	248	30	4	0	4
		Chitrakoot	134	28	6	0	1
		Deoria	320	77	16	0	2
		Etah	191	34	4	0	2
		Etawah	169	34	8	0	3
		Faizabad	255	40	5	0	4
		Farrukhabad	192	31	8	0	3
		Fatehpur	321	47	11	0	2
		Firozabad	220	19	3	0	3
		Gautam Buddha Nagar	128	37	5	0	2
		Ghaziabad	146	66	4	0	3
		Ghazipur	418	12	6	0	2
		Gonda	322	52	16	0	2
		Gorakhpur	529	91	9	0	2
		Hamirpur	214	40	4	0	2
		Hapur	176	26	4	0	0
		Hardoi	433	62	8	0	2
		Hathras	194	27	7	0	2
		Jalaun	286	41	7	0	2
		Jaunpur	507	83	22	0	2
		Jhansi	338	49	8	0	2
		Jyotiba Phule Nagar	175	32	8	0	2
		Kannauj	191	34	11	0	2
		Kanpur Dehat	240	31	8	0	2
		Kanpur Nagar	390	90	10	0	5
		Kashi Ram Nagar	170	31	7	0	1
		Kaushambi	175	36	5	0	1
		Kushinagar	368	57	16	0	1
		Lakhimpur Kheri	386	60	14	0	2
		Lalitpur	197	27	4	0	2
		Lucknow	306	80	17	0	9
		Maharajganj	291	40	12	0	1
		Mahoba	150	17	4	0	2
		Mainpuri	206	46	10	0	2
		Mathura	205	37	7	0	3
		Maunathbhanjan	225	43	6	0	2
		Meerut	280	57	12	0	2

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
		Mirzapur	263	38	16	0	2
		Moradabad	267	60	7	0	2
		Muzaffarnagar	286	49	4	0	2
		Pilibhit	199	28	6	0	2
		Pratapgarh	355	60	19	0	2
		Rae Bareli	352	51	17	0	2
		Rampur	211	35	5	0	2
		Saharanpur	364	62	14	0	2
		Sambhal	214	31	9	0	1
		Sant Kabir Nagar	185	23	4	0	1
		Sant Ravidas Nagar	161	17	6	0	2
		Shahjahanpur	298	46	17	0	2
		Shamli	135	26	7	0	0
		Shrawasti	125	12	6	0	1
		Siddharth Nagar	278	65	8	0	1
		Sitapur	471	67	18	0	2
		Sonbhadra	173	31	7	0	2
		Sultanpur	244	42	13	0	2
		Unnav	357	54	7	0	2
		Varanasi	320	51	12	0	4
		Total Districts = 75	20778	3473	723	0	168
28	West Bengal	Alipurduar	236	14	7	1	1
		Coochbehar	406	38	12	4	0
		Jalpaiguri	301	27	7	1	1
		Darjeeling	181	28	9	1	2
		Uttar Dinajpur	344	24	9	2	0
		Dakshin Dinajpur	248	22	8	1	1
		Malda	511	40	16	1	0
		Murshidabad	832	83	27	4	0
		Nadia	469	64	17	5	1
		North 24 Parganas	742	149	22	10	2
		South 24 Parganas	1068	78	30	7	1
		Kalimpong	49	6	3	0	1
		Kolkata	0	144	0	0	0
		Howrah	448	74	15	7	1
		Hooghly	660	89	18	4	1
		Purba Bardhaman	592	83	25	2	0
		Birbhum	484	62	19	1	1
		Bankura	564	73	22	1	1
		Purulia	485	55	20	1	0
		Paschim Medinipur	639	67	21	2	0
		Purba Medinipur	706	59	24	4	2
		Paschim Bardhaman	173	64	9	1	1
		Jhargram	219	26	8	0	1
		Total Districts = 23	10357	1369	348	60	18
29	A& N Islands	Nicobar	40	4	1	0	1
		North & Middle Andman	45	8	2	0	1
		South Andman	39	15	1	0	1
		Total Districts = 3	124	27	4	0	3

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
30	Chandigarh	Chandigarh	0	48	2	1	2
31	Dadra & Nagar Haveli and Daman & Diu	Dadra and Nagar Haveli	71	9	2	1	1
		Daman	20	3	1	0	1
		Diu	6	1	1	0	1
		Total Districts = 3	97	13	4	1	3
32	Delhi	Central	14	72	2	4	6
		East	15	34	3	0	2
		New Delhi	13	74	2	3	5
		North	8	39	1	0	3
		North East	12	29	3	0	1
		North West	27	64	2	1	4
		Shahdara	39	33	2	0	6
		South	13	36	0	0	1
		South East	43	46	5	0	1
		South West	40	46	0	0	4
		West	34	73	3	1	5
		Total Districts = 11	258	546	23	9	38
33	Jammu & Kashmir	Anantnag	139	63	5	0	1
		Bandipora	70	27	3	0	1
		Baramulla	188	87	6	0	1
		Budgam	136	70	9	0	1
		Doda	165	42	3	0	1
		Ganderbal	60	30	1	0	1
		Jammu	161	102	8	0	2
		Kathua	185	53	5	0	1
		Kishtwar	87	25	1	0	1
		Kulgam	118	45	3	0	1
		Kupwara	233	63	7	0	1
		Poonch	137	44	3	0	1
		Pulwama	96	47	3	0	1
		Rajouri	197	55	7	0	1
		Rambam	85	31	3	0	1
		Reasi	103	33	2	0	1
		Samba	82	21	3	0	1
		Shopian	57	16	2	0	1
		Srinagar	47	69	1	0	1
		Udhampur	146	49	2	0	1
		Total Districts = 20	2492	972	77	0	21
34	Ladakh	Kargil	117	16	4	0	1
		Leh Ladakh	121	16	3	0	1
		Total Districts = 2	238	32	7	0	2
35	Lakshadweep	Lakshadweep	11	4	3	2	1

S No.	States/Union Territory	Name of the District	(As on 31st March, 2020)				
			Number of functional				
			Sub Centres	PHCs	CHCs	Sub Divisional Hospital	District Hospital
36	Puducherry	Karaikal	17	11	1	1	1
		Mahe	4	1	1	0	1
		Puducherry	56	27	2	2	2
		Yanam	4	0	0	0	1
		Total Districts = 4	81	39	4	3	5
All India/ Total			157921	30813	5649	1193	810



SECTION III
DEMOGRAPHIC INDICATORS

Table 1.

STATE/UT-WISE AREA, DISTRICTS AND VILLAGES IN INDIA								
S. No.	State/UT	Area [Sq. Km.]					Number of Districts	Number of Villages
		Tribal**	Rural	Urban	Total	Rural %		
1	Andhra Pradesh*	14132	158856.00	4119.00	162975.00	97.47	13	17950
2	Arunachal Pradesh	NA	NA	NA	83743.00	NA	20	5545
3	Assam	18549.42	77178.12	1259.88	78438.00	98.39	27	27927
4	Bihar	NA	91838.28	2324.72	94163.00	97.53	38	45413
5	Chhattisgarh	82315.23	131810.30	3381.70	135192.00	97.50	27	20618
6	Goa	163	2903.14	798.86	3702.00	78.42	2	410
7	Gujarat	35284.32	188840.46	7403.54	196244.00	96.23	33	19034
8	Haryana	NA	42235.92	1976.08	44212.00	95.53	22	7652
9	Himachal Pradesh	23695.00	55402.18	270.82	55673.00	99.51	12	21204
10	Jharkhand	40795.16	77467.12	2248.88	79716.00	97.18	24	32712
11	Karnataka	20662.00	185783.46	6007.54	191791.00	96.87	30	34334
12	Kerala	NA	31253.20	7598.80	38852.00	80.44	14	1664
13	Madhya Pradesh	93000.00	300505.59	7746.41	308252.00	97.49	51	55910
14	Maharashtra	50757.00	298628.75	9084.25	307713.00	97.05	35	44345
15	Manipur	NA	22147.50	179.50	22327.00	99.20	9	3932
16	Meghalaya	NA	22146.11	282.89	22429.00	98.74	11	6983
17	Mizoram	21081.00	20494.00	587.00	21081.00	97.22	9	864
18	Nagaland	NA	16335.52	243.48	16579.00	98.53	11	1626
19	Odisha	4785.36	152355.34	3351.66	155707.00	97.85	30	52141
20	Punjab	NA	47847.40	2514.60	50362.00	4.99	22	12968
21	Rajasthan	19770.15	335606.04	6632.96	342239.00	98.06	34	46737
22	Sikkim	4520.00	7057.75	38.25	7096.00	99.46	4	454
23	Tamil Nadu	2538.00	116427.97	13632.03	130060.00	89.52	32	18478
24	Telangana*	16156.00	94949.00	3735.00	98684.00	96.22	31	11227
25	Tripura	7132.56	10094.12	391.88	10486.00	96.26	8	898
26	Uttarakhand	NA	52581.08	901.92	53483.00	98.31	13	17053
27	Uttar Pradesh	NA	233365.71	7562.29	240928.00	96.86	75	107256
28	West Bengal	32911.31	83632.59	5119.41	88752.00	94.23	23	41002
29	Andaman & Nicobar Islands	1841	8211.08	37.92	8249.00	99.54	3	560
30	Chandigarh	NA	0.00	114.00	114.00	0.00	1	0
31	D & N Haveli and Daman & Diu	306	501.68	100.32	602.00	83.34	3	101
32	Delhi	NA	326.44	1156.56	1483.00	22.01	11	222
33	Jammu & Kashmir	NA	161844.10	1245.90	163090.00	99.24	20	6854
34	Ladakh	59146.00	59146.00	0	59146.00	100	2	243
35	Lakshadweep	0	8.05	21.95	30.00	26.83	1	27
36	Puducherry	0	335.44	154.56	490.00	68.46	4	125
	All India	549541	3088115	102225	3274083	94.32	705	664469

Notes:

NA: Not Available.

* Data collected from the States after bifurcation

The figures of the number of districts in the States/UTs are as per the number of Districts mapped in the HMIS portal

The figures of the number of the villages in the States/UTs are per the LG Directory portal.

Area of Rural, Urban and total are as per data of Census 2011.

** Tribal area is a part of total area (Data collected from the states)

Table 2.

STATE/UT-WISE RURAL AND URBAN POPULATION AS PER 2011 CENSUS AND 2020 ESTIMATION OF MID-YEAR POPULATION									
S. No	State/UT	Population 2011 Census				Estimated mid-year Population 2020 (as on 1st July 2020)			
		Rural	Urban	Total	Rural %	Rural	Urban	Total	Rural %
1	Andhra Pradesh**	34776389	14610410	49386799	70.4	34256000	18343000	52599000	65.1
2	Arunachal Pradesh	1066358	317369	1383727	77.1	1141000	381000	1522000	75.0
3	Assam	26807034	4398542	31205576	85.9	29492000	5301000	34793000	84.8
4	Bihar	92341436	11758016	104099452	88.7	107187000	14708000	121895000	87.9
5	Chhattisgarh	19607961	5937237	25545198	76.8	21557000	7680000	29237000	73.7
6	Goa	551731	906814	1458545	37.8	421000	1132000	1553000	27.1
7	Gujarat	34694609	25745083	60439692	57.4	36380000	32791000	69171000	52.6
8	Haryana	16509359	8842103	25351462	65.1	17374000	11839000	29213000	59.5
9	Himachal Pradesh	6176050	688552	6864602	90.0	6608000	754000	7362000	89.8
10	Jharkhand	25055073	7933061	32988134	76.0	28313000	9802000	38115000	74.3
11	Karnataka	37469335	23625962	61095297	61.3	37815000	28681000	66496000	56.9
12	Kerala	17471135	15934926	33406061	52.3	10777000	24591000	35368000	30.5
13	Madhya Pradesh	52557404	20069405	72626809	72.4	59718000	24037000	83755000	71.3
14	Maharashtra	61556074	50818259	112374333	54.8	64555000	59121000	123676000	52.2
15	Manipur	2021640	834154	2855794	70.8	2145000	997000	3142000	68.3
16	Meghalaya	2371439	595450	2966889	79.9	2593000	671000	3264000	79.4
17	Mizoram	525435	571771	1097206	47.9	550000	657000	1207000	45.6
18	Nagaland	1407536	570966	1978502	71.1	1263000	914000	2177000	58.0
19	Odisha	34970562	7003656	41974218	83.3	37123000	8342000	45465000	81.7
20	Punjab	17344192	10399146	27743338	62.5	17848000	12331000	30179000	59.1
21	Rajasthan	51500352	17048085	68548437	75.1	57986000	20623000	78609000	73.8
22	Sikkim	456999	153578	610577	74.8	379000	293000	672000	56.4
23	Tamil Nadu	37229590	34917440	72147030	51.6	36182000	39985000	76167000	47.5
24	Telangana**	21585313	13608665	35193978	61.3	20401000	17135000	37536000	54.4
25	Tripura	2712464	961453	3673917	73.8	2576000	1466000	4042000	63.7
26	Uttarakhand	7036954	3049338	10086292	69.8	7393000	3920000	11313000	65.3
27	Uttar Pradesh	155317278	44495063	199812341	77.7	174804000	54127000	228931000	76.4
28	West Bengal	62183113	29093002	91276115	68.1	62854000	34865000	97719000	64.3
29	Andaman & Nicobar Islands	237093	143488	380581	62.3	229000	170000	399000	57.4
30	Chandigarh	28991	1026459	1055450	2.7	4000	1194000	1198000	0.3
31	D & N Haveli and Daman & Diu	243510	343446	586956	41.5	230000	808000	1038000	22.2
32	Delhi	419042	16368899	16787941	2.5	148000	20171000	20319000	0.7
33	Jammu & Kashmir	9108060	3433242	12541302	72.6	9357000	3983000	13340000	70.1
34	Ladakh	<i>Ladakh UT came to existence during Aug 2019</i>				210000	86000	296000	70.9
35	Lakshadweep	14141	50332	64473	21.9	3000	65000	68000	4.4
36	Puducherry	395200	852753	1247953	31.7	468000	1081000	1549000	30.2
	All India	833748852	377106125	1210854977	68.9	890329000	463049000	1353378000	65.8

Source: Population Census of India, Office of the Registrar General & Census Commissioner, India.

Figures are as per report of Technical Committee for Population Estimation.

** Data collected from the States

Data for Jammu & Kashmir for the year 2011 includes both Jammu & Kashmir and Ladakh.

Data for D & N Haveli and Daman Diu for Census 2011 has been merged for the purpose of calculation.

Table 3.

STATE/UT-WISE POPULATION DENSITY				
S. No.	State/UT	Population Density		
		[2020] Persons/Sq. Km.		
		Rural	Urban	Total
1	Andhra Pradesh**	216	4453	323
2	Arunachal Pradesh	NA	NA	18
3	Assam	382	4208	444
4	Bihar	1167	6327	1295
5	Chhattisgarh	164	2271	216
6	Goa	145	1417	420
7	Gujarat	193	4429	352
8	Haryana	411	5991	661
9	Himachal Pradesh	119	2784	132
10	Jharkhand	365	4359	478
11	Karnataka	204	4774	347
12	Kerala	345	3236	910
13	Madhya Pradesh	199	3103	272
14	Maharashtra	216	6508	402
15	Manipur	97	5554	141
16	Meghalaya	117	2372	146
17	Mizoram	27	1119	57
18	Nagaland	77	3754	131
19	Odisha	244	2489	292
20	Punjab	373	4904	599
21	Rajasthan	173	3109	230
22	Sikkim	54	7660	95
23	Tamil Nadu	311	2933	586
24	Telangana**	215	4588	380
25	Tripura	255	3741	385
26	Uttarakhand	141	4346	212
27	Uttar Pradesh	749	7157	950
28	West Bengal	752	6810	1101
29	Andaman & Nicobar Islands	28	4483	48
30	Chandigarh	N App	10474	10509
31	D & N Haveli and Daman & Diu	458	8054	1724
32	Delhi	453	17441	13701
33	Jammu & Kashmir	58	3197	82
34	Ladakh	4	N App	5
35	Lakshadweep	373	2961	2267
36	Puducherry	1395	6994	3161
	All India	288	4530	413

Notes:

NA: Not Available.

N App: Not Applicable

Table 4.

STATE WISE ESTIMATES OF BIRTH RATE AND DEATH RATE - 2018							
S. No.	State/UT	Birth Rate			Death Rate		
		Total	Rural	Urban	Total	Rural	Urban
1	Andhra Pradesh	16.0	16.4	15.3	6.7	7.4	5.0
2	Arunachal Pradesh	17.9	18.4	15.4	6.0	6.2	4.7
3	Assam	21.1	22.2	14.6	6.4	6.6	5.1
4	Bihar	26.2	26.8	21.9	5.8	5.9	5.1
5	Chhattisgarh	22.5	24.0	17.8	8.0	8.6	6.3
6	Goa	12.4	12.0	12.7	5.9	7.0	5.1
7	Gujarat	19.7	21.6	17.4	5.9	6.3	5.3
8	Haryana	20.3	21.7	18.0	5.9	6.6	4.9
9	Himachal Pradesh	15.7	16.2	10.3	6.9	7.1	4.8
10	Jammu & Kashmir and Ladakh	15.4	17.0	11.7	4.9	5.1	4.2
11	Jharkhand	22.6	24.0	18.1	5.4	5.7	4.5
12	Karnataka	17.2	18.1	15.9	6.3	7.2	4.8
13	Kerala	13.9	13.8	14.0	6.9	7.1	6.7
14	Madhya Pradesh	24.6	26.6	19.1	6.7	7.1	5.5
15	Maharashtra	15.6	15.9	15.2	5.5	6.3	4.5
16	Manipur	14.3	14.5	13.9	4.5	4.2	5.0
17	Meghalaya	22.1	24.0	13.6	5.8	6.1	4.5
18	Mizoram	14.8	17.5	12.1	4.1	4.0	4.3
19	Nagaland	12.9	13.7	12.2	3.5	4.2	2.7
20	Odisha	18.2	19.2	13.4	7.3	7.6	5.9
21	Punjab	14.8	15.3	14.0	6.6	7.7	5.1
22	Rajasthan	24.0	24.9	21.3	5.9	6.1	5.0
23	Sikkim	16.3	15.2	17.9	4.5	5.2	3.5
24	Tamil Nadu	14.7	14.8	14.6	6.5	7.8	5.3
25	Telangana	16.9	17.2	16.5	6.3	7.5	4.5
26	Tripura	13.0	13.7	11.2	5.5	5.0	6.5
27	Uttarakhand	16.7	16.8	16.4	5.2	6.5	5.3
28	Uttar Pradesh	25.6	26.6	22.5	6.6	7.0	5.3
29	West Bengal	15.0	16.5	11.5	5.6	5.6	5.7
30	Andaman & Nicobar Islands	11.2	12.0	10.3	5.3	6.4	4.0
31	Chandigarh	13.3	18.7	13.2	4.3	3.4	4.3
32	Dadra & Nagar Haveli	22.9	20.1	25.1	3.8	4.6	3.3
33	Daman & Diu	19.6	15.8	20.4	4.5	5.5	4.3
34	Delhi	14.7	16.2	14.7	3.3	3.7	3.3
35	Lakshadweep	15.3	21.6	13.7	5.6	7.1	5.3
36	Puducherry	13.7	13.6	13.7	6.9	7.9	6.6
	All India	20.0	21.6	16.7	6.2	6.7	5.1

Source: SRS Bulletin May 2020, Sample Registration System, Office of Registrar General, India.

Table 5.

STATE WISE INFANT MORTALITY RATES - 2018				
S. No.	State/UT	Infant Mortality Rate [IMR]		
		Total	Rural	Urban
1	Andhra Pradesh	29	33	21
2	Arunachal Pradesh	37	38	28
3	Assam	41	44	20
4	Bihar	32	32	30
5	Chhattisgarh	41	42	35
6	Goa	7	8	7
7	Gujarat	28	33	20
8	Haryana	30	33	25
9	Himachal Pradesh	19	20	14
10	Jammu & Kashmir and Ladakh	22	23	20
11	Jharkhand	30	31	26
12	Karnataka	23	25	20
13	Kerala	7	9	5
14	Madhya Pradesh	48	52	36
15	Maharashtra	19	24	14
16	Manipur	11	12	9
17	Meghalaya	33	35	17
18	Mizoram	5	7	2
19	Nagaland	4	5	3
20	Odisha	40	41	31
21	Punjab	20	21	19
22	Rajasthan	37	41	26
23	Sikkim	7	8	6
24	Tamil Nadu	15	18	12
25	Telangana	27	30	21
26	Tripura	27	26	31
27	Uttarakhand	31	31	29
28	Uttar Pradesh	43	46	35
29	West Bengal	22	22	20
30	Andaman & Nicobar Islands	9	12	3
31	Chandigarh	13	4	13
32	Dadra & Nagar Haveli	13	19	9
33	Daman & Diu	16	19	16
34	Delhi	13	8	13
35	Lakshadweep	14	14	14
36	Puducherry	11	9	12
	All India	32	36	23

Source: SRS Bulletin May 2020, Sample Registration System, Office of Registrar General, India.



SECTION IV
HEALTHCARE INFRASTRUCTURE
& BUILDING POSITION

Table 6.

NUMBER OF SUB-CENTRES, PHCs, CHCs FUNCTIONING IN RURAL & URBAN AREAS							
S. No.	State/UT	(As on 31st March 2020)					
		Sub centre		PHCs		CHCs	
		Rural	Urban	Rural	Urban	Rural	Urban
1	Andhra Pradesh	7437	21	1142	243	141	57
2	Arunachal Pradesh	356	7	119	5	60	0
3	Assam	4659	21	946	56	190	2
4	Bihar	9112	1168	1702	325	57	7
5	Chhattisgarh	5205	364	792	45	170	4
6	Goa	218	0	55	4	6	0
7	Gujarat	9162	0	1477	318	348	14
8	Haryana	2617	0	385	100	118	13
9	Himachal Pradesh	2092	12	564	24	85	7
10	Jharkhand	3848	0	291	60	171	6
11	Karnataka	9188	247	2176	358	189	19
12	Kerala	5410	0	784	148	211	16
13	Madhya Pradesh	10226	0	1199	277	309	21
14	Maharashtra	10647	2	1829	846	278	140
15	Manipur	418	0	85	8	17	0
16	Meghalaya	440	3	119	24	28	0
17	Mizoram	311	59	57	8	9	0
18	Nagaland	395	20	130	7	21	0
19	Odisha	6688	0	1288	89	377	7
20	Punjab	2950	97	427	100	143	12
21	Rajasthan	13480	50	2094	383	548	66
22	Sikkim	147	6	24	1	2	0
23	Tamil Nadu	8713	0	1420	464	385	15
24	Telangana	4744	97	636	249	85	10
25	Tripura	965	36	107	5	22	0
26	Uttarakhand	1839	8	257	38	56	12
27	Uttar Pradesh	20778	0	2880	593	711	12
28	West Bengal	10357	0	913	456	348	0
29	Andaman & Nicobar Islands	124	0	22	5	4	0
30	Chandigarh	0	0	0	48	0	2
31	Dadra & Nagar Haveli and Daman & Diu	94	3	10	3	4	0
32	Delhi	12	246	5	541	0	23
33	Jammu & Kashmir	2470	22	923	49	77	0
34	Ladakh	238	0	32	0	7	0
35	Lakshadweep	11	0	4	0	3	0
36	Puducherry	53	28	24	15	3	1
	All India	155404	2517	24918	5895	5183	466

Note:

For Maharashtra, in Urban area 846 institutes like Maternity homes, Health Posts and Dispensaries are functioning. But out of these only 605 are equivalent to UPHCs. Also there are 37 UCHCs among 140 Urban institutes

Table 7.

NUMBER OF SUB DIVISIONAL HOSPITAL, DISTRICT HOSPITAL & MEDICAL COLLEGES FUNCTIONING				
S. No.	State/UT	As on 31st March 2020		
		Sub Divisional Hospital (SDH)	District Hospital (DH)	Medical Colleges
1	Andhra Pradesh	28	13	12
2	Arunachal Pradesh	0	17	1
3	Assam	14	24	7
4	Bihar	35	36	8
5	Chhattisgarh	20	26	6
6	Goa	2	2	1
7	Gujarat	37	22	18
8	Haryana	21	22	6
9	Himachal Pradesh	83	9	6
10	Jharkhand	13	23	3
11	Karnataka	150	26	19
12	Kerala	86	48	7
13	Madhya Pradesh	84	51	7
14	Maharashtra	100	49	24
15	Manipur	1	7	2
16	Meghalaya	0	11	1
17	Mizoram	2	9	1
18	Nagaland	0	11	0
19	Odisha	33	32	7
20	Punjab	41	22	3
21	Rajasthan	20	27	37
22	Sikkim	1	4	0
23	Tamil Nadu	278	32	29
24	Telangana	37	6	9
25	Tripura	12	7	2
26	Uttarakhand	19	13	3
27	Uttar Pradesh	0	168	19
28	West Bengal	60	18	18
29	Andaman & Nicobar Islands	0	3	0
30	Chandigarh	1	2	2
31	Dadra & Nagar Haveli and Daman & Diu	1	3	0
32	Delhi	9	38	10
33	Jammu & Kashmir	0	21	4
34	Ladakh	0	2	0
35	Lakshadweep	2	1	0
36	Puducherry	3	5	2
	All India/ Total	1193	810	274

Table 8.

NUMBER OF HEALTH & WELLNESS CENTRES FUNCTIONING IN INDIA					
S. No.	State/UT	As on 31st March 2020			
		HWC-SCs	HWC-PHCs	HWC-UPHCs	Total
1	Andhra Pradesh	779	1145	243	2167
2	Arunachal Pradesh	78	38	4	120
3	Assam	765	379	52	1196
4	Bihar	117	650	97	864
5	Chhattisgarh	1424	379	43	1846
6	Goa	0	55	5	60
7	Gujarat	3515	1072	221	4808
8	Haryana	165	350	99	614
9	Himachal Pradesh	259	392	4	655
10	Jharkhand	820	132	52	1004
11	Karnataka	1517	720	336	2573
12	Kerala	0	658	33	691
13	Madhya Pradesh	1754	1144	132	3030
14	Maharashtra	1184	1740	425	3349
15	Manipur	85	29	1	115
16	Meghalaya	67	35	19	121
17	Mizoram	42	54	8	104
18	Nagaland	103	46	7	156
19	Odisha	304	1227	86	1617
20	Punjab	1019	349	92	1460
21	Rajasthan	138	1872	73	2083
22	Sikkim	27	13	0	40
23	Tamil Nadu	859	1374	458	2691
24	Telangana	238	614	239	1091
25	Tripura	233	32	5	270
26	Uttarakhand	211	194	36	441
27	Uttar Pradesh	1883	1409	401	3693
28	West Bengal	670	268	150	1088
29	Andaman & Nicobar Islands	28	17	5	50
30	Chandigarh	0	0	10	10
31	Dadra & Nagar Haveli and Daman & Diu	44	12	0	56
32	Delhi	0	0	0	0
33	Jammu & Kashmir	244	200	13	457
34	Ladakh	0	0	0	0
35	Lakshadweep	0	0	0	0
36	Puducherry	38	36	1	75
	All India/ Total	18610	16635	3350	38595

Note:

Data as reported by States/UTs on the HWC portal

Table 9.

SHORTFALL IN HEALTH FACILITIES AS PER MID YEAR POPULATION (as on 1st July 2020) IN INDIA IN RURAL AREAS															
S.No.	State/ UT	Estimated mid-year Population for Rural areas	Estimated mid-year Population for Tribal areas	Sub Centres				PHCs				CHCs			
				R	P	S	% Shortfall	R	P	S	% Shortfall	R	P	S	% Shortfall
1	Andhra Pradesh	34256000	2258788	7152	7437	*	*	1179	1142	37	3	294	141	153	52
2	Arunachal Pradesh	1141000	845133	340	356	*	*	52	119	*	*	13	60	*	*
3	Assam	29492000	4032528	6436	4659	1777	28	1050	946	104	10	262	190	72	27
4	Bihar	107187000	1475163	21634	9112	12522	58	3597	1702	1895	53	899	57	842	94
5	Chhattisgarh	21557000	7949854	5371	5205	166	3	851	792	59	7	212	170	42	20
6	Goa	421000	66873	93	218	*	*	15	55	*	*	3	6	*	*
7	Gujarat	36380000	8411532	8397	9162	*	*	1352	1477	*	*	338	348	*	*
8	Haryana	17374000	0	3474	2617	857	25	579	385	194	34	144	118	26	18
9	Himachal Pradesh	6608000	400577	1375	2092	*	*	226	564	*	*	56	85	*	*
10	Jharkhand	28313000	8891251	6848	3848	3000	44	1091	291	800	73	272	171	101	37
11	Karnataka	37815000	3461432	8024	9188	*	*	1318	2176	*	*	329	189	140	43
12	Kerala	10777000	267151	2191	5410	*	*	363	784	*	*	90	211	*	*
13	Madhya Pradesh	59718000	16222003	14106	10226	3880	28	2260	1199	1061	47	565	309	256	45
14	Maharashtra	64555000	9444840	14170	10647	3523	25	2309	1829	480	21	577	278	299	52
15	Manipur	2145000	839400	540	418	122	23	85	85	0	0	21	17	4	19
16	Meghalaya	2593000	2336538	830	440	390	47	125	119	6	5	31	28	3	10
17	Mizoram	550000	531192	180	311	*	*	27	57	*	*	6	9	*	*
18	Nagaland	1263000	1172642	408	395	13	3	61	130	*	*	15	21	*	*
19	Odisha	37123000	9548607	8697	6688	2009	23	1396	1288	108	8	349	377	*	*
20	Punjab	17848000	0	3569	2950	619	17	594	427	167	28	148	143	5	3
21	Rajasthan	57986000	9787883	12902	13480	*	*	2095	2094	1	*	523	548	*	*
22	Sikkim	379000	138618	94	147	*	*	14	24	*	*	3	2	1	33
23	Tamil Nadu	36182000	641701	7321	8713	*	*	1216	1420	*	*	304	385	*	*
24	Telangana	20401000	2777773	4450	4744	*	*	726	636	90	12	181	85	96	53
25	Tripura	2576000	1061341	656	965	*	*	103	107	*	*	25	22	3	12
26	Uttarakhand	7393000	278218	1515	1839	*	*	251	257	*	*	62	56	6	*
27	Uttar Pradesh	174804000	1160439	35115	20778	14337	41	5846	2880	2966	51	1461	711	750	51
28	West Bengal	62854000	4907496	13225	10357	2868	22	2176	913	1263	58	544	348	196	36
29	A & N Islands	229000	25803	49	124	*	*	8	22	*	*	2	4	*	*
30	Chandigarh	4000	0	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
31	D & N Haveli and Daman & Diu	230000	149753	65	94	*	*	10	10	0	0	2	4	*	*
32	Delhi	148000	0	29	12	17	59	4	5	*	*	1	0	1	100
33	Jammu & Kashmir	9357000	1281909	2042	2470	*	*	333	923	*	*	83	77	6	7
34	Ladakh	210000	210000	70	238	*	*	10	32	*	*	2	7	*	*
35	Lakshadweep	3000	2856	0	11	*	*	0	4	*	*	0	3	*	*
36	Puducherry	468000	0	93	53	40	43	15	24	*	*	3	3	0	0
	All India/ Total	890329000	100579297	191461	155404	46140	24	31337	24918	9231	29	7820	5183	3002	38

Notes: The requirement is calculated using the prescribed norms on the basis of rural population estimation for the year 2020.

All India shortfall is derived by adding state-wise figures of shortfall ignoring the existing surplus in some of the state.

(Mid year Tribal population for the year 2020 calculated based on the percentages of Tribal population in the Rural areas in Census 2011)

R: Required; P: In Position; S: Shortfall; *: Surplus

N App- Not Applicable

Table 10.

BUILDING POSITION OF SUB CENTRES in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Total Number of Sub Centers	Sub-Centres & HWC-Scs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat / Vol. Society Buildings	
1	Andhra Pradesh	7437	2326	4811	300	5111
2	Arunachal Pradesh	356	356	0	0	0
3	Assam	4659	3626	695	338	1033
4	Bihar	9112	3756	3250	2106	5356
5	Chhattisgarh	5205	4160	573	472	1045
6	Goa	218	93	122	3	125
7	Gujarat	9162	6358	147	2657	2804
8	Haryana	2617	1714	362	541	903
9	Himachal Pradesh	2092	1630	25	437	462
10	Jharkhand	3848	2422	1219	207	1426
11	Karnataka	9188	5075	1481	2632	4113
12	Kerala	5410	3818	586	1006	1592
13	Madhya Pradesh	10226	7926	1223	1077	2300
14	Maharashtra	10647	9069	1417	161	1578
15	Manipur	418	332	19	67	86
16	Meghalaya	440	428	2	10	12
17	Mizoram	311	311	0	0	0
18	Nagaland	395	313	3	79	82
19	Odisha	6688	4897	1624	167	1791
20	Punjab	2950	1848	29	1073	1102
21	Rajasthan	13480	10621	1204	1655	2859
22	Sikkim	147	146	1	0	1
23	Tamil Nadu	8713	6290	2420	3	2423
24	Telangana	4744	1273	2694	777	3471
25	Tripura	965	777	38	150	188
26	Uttarakhand	1839	1296	506	37	543
27	Uttar Pradesh	20778	17124	3642	12	3654
28	West Bengal	10357	8580	1332	445	1777
29	Andaman & Nicobar Islands	124	124	0	0	0
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	69	15	10	25
32	Delhi	12	1	8	3	11
33	Jammu & Kashmir	2470	872	1598	0	1598
34	Ladakh	238	207	31	0	31
35	Lakshadweep	11	8	0	3	3
36	Puducherry	53	40	13	0	13
	All India/ Total	155404	107886	31090	16428	47518

Notes: N App - Not Applicable

¹ All India figure of required number of building to be constructed = Total functioning - Government Buildings (ignoring States/UTs having excess.)

Table 11.

BUILDING POSITION OF PRIMARY HEALTH CENTRES in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Total Number of PHCs functioning	PHCs & HWC-PHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat / Vol. Society Buildings	
1	Andhra Pradesh	1142	1126	1	15	16
2	Arunachal Pradesh	119	119	0	0	0
3	Assam	946	946	0	0	0
4	Bihar	1702	986	362	354	716
5	Chhattisgarh	792	677	0	115	115
6	Goa	55	22	3	30	33
7	Gujarat	1477	1226	3	248	251
8	Haryana	385	301	14	70	84
9	Himachal Pradesh	564	485	6	73	79
10	Jharkhand	291	160	17	114	131
11	Karnataka	2176	2020	69	87	156
12	Kerala	784	775	7	2	9
13	Madhya Pradesh	1199	1092	107	0	107
14	Maharashtra	1829	1707	122	0	122
15	Manipur	85	79	2	4	6
16	Meghalaya	119	118	1	0	1
17	Mizoram	57	57	0	0	0
18	Nagaland	130	123	0	7	7
19	Odisha	1288	1255	0	33	33
20	Punjab	427	362	5	60	65
21	Rajasthan	2094	1963	21	110	131
22	Sikkim	24	24	0	0	0
23	Tamil Nadu	1420	1390	0	30	30
24	Telangana	636	636	0	0	0
25	Tripura	107	107	0	0	0
26	Uttarakhand	257	227	18	12	30
27	Uttar Pradesh	2880	2626	218	36	254
28	West Bengal	913	913	0	0	0
29	Andaman & Nicobar Islands	22	22	0	0	0
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	10	0	0	0
32	Delhi	5	5	0	0	0
33	Jammu & Kashmir	923	714	209	0	209
34	Ladakh	32	32	0	0	0
35	Lakshadweep	4	4	0	0	0
36	Puducherry	24	24	0	0	0
	All India/ Total	24918	22333	1185	1400	2585

Notes: N App - Not Applicable

¹ All India figure of required number of building to be constructed = Total functioning - Government Buildings (ignoring States/UTs having excess.)

Table 12.

BUILDING POSITION OF COMMUNITY HEALTH CENTRES in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Total Number of CHCs functioning	CHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat / Vol. Society Buildings	
1	Andhra Pradesh	141	141	0	0	0
2	Arunachal Pradesh	60	60	0	0	0
3	Assam	190	190	0	0	0
4	Bihar	57	57	0	0	0
5	Chhattisgarh	170	160	0	10	10
6	Goa	6	6	0	0	0
7	Gujarat	348	298	0	50	50
8	Haryana	118	113	2	3	5
9	Himachal Pradesh	85	83	1	1	2
10	Jharkhand	171	171	0	0	0
11	Karnataka	189	181	8	0	8
12	Kerala	211	211	0	0	0
13	Madhya Pradesh	309	304	5	0	5
14	Maharashtra	278	270	2	6	8
15	Manipur	17	17	0	0	0
16	Meghalaya	28	28	0	0	0
17	Mizoram	9	9	0	0	0
18	Nagaland	21	21	0	0	0
19	Odisha	377	377	0	0	0
20	Punjab	143	132	0	4	11
21	Rajasthan	548	530	2	16	18
22	Sikkim	2	2	0	0	0
23	Tamil Nadu	385	385	0	0	0
24	Telangana	85	85	0	0	0
25	Tripura	22	22	0	0	0
26	Uttarakhand	56	56	0	0	0
27	Uttar Pradesh	711	642	47	22	69
28	West Bengal	348	348	0	0	0
29	Andaman & Nicobar Islands	4	4	0	0	0
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	4	0	0	0
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	77	0	0	0
34	Ladakh	7	7	0	0	0
35	Lakshadweep	3	3	0	0	0
36	Puducherry	3	3	0	0	0
	All India/ Total	5183	4997	67	112	186

Notes: N App - Not Applicable

¹ All India figure of required number of building to be constructed = Total functioning - Government Buildings (ignoring States/Uts having excess.)



SECTION V
STATUS OF HEALTH MANPOWER
IN RURAL AREAS

Table 13.

HEALTH WORKER [FEMALE] / ANM AT SUB CENTRE in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	7437	17126	15742	1384	*
2	Arunachal Pradesh	356	NA	356	NA	0
3	Assam	4659	4597	7494	*	*
4	Bihar	9112	20544	13425	7119	*
5	Chhattisgarh	5205	5567	5171	396	34
6	Goa	218	228	232	*	*
7	Gujarat	9162	10641	8820	1821	342
8	Haryana	2617	4642	3986	656	*
9	Himachal Pradesh	2092	2281	1578	703	514
10	Jharkhand	3848	5926	5566	360	*
11	Karnataka	9188	11028	7727	3301	1461
12	Kerala	5410	5410	5147	263	263
13	Madhya Pradesh	10226	10226	9721	505	505
14	Maharashtra	10647	11975	10492	1483	155
15	Manipur	418	842	738	104	*
16	Meghalaya	440	376	774	*	*
17	Mizoram	311	NA	302	NA	9
18	Nagaland	395	702	696	6	*
19	Odisha	6688	6688	8139	*	*
20	Punjab	2950	4365	3621	744	*
21	Rajasthan	13480	15130	12656	2474	824
22	Sikkim	147	160	196	*	*
23	Tamil Nadu	8713	8713	7562	1151	1151
24	Telangana	4744	8996	7943	1053	*
25	Tripura	965	N App	576	N App	389
26	Uttarakhand	1839	2003	1847	156	*
27	Uttar Pradesh	20778	23656	20389	3267	389
28	West Bengal	10357	19238	18591	647	*
29	Andaman & Nicobar Islands	124	109	142	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	110	141	*	*
32	Delhi	12	12	13	*	*
33	Jammu & Kashmir	2470	4195	3773	422	*
34	Ladakh	238	337	381	*	*
35	Lakshadweep	11	10	10	0	1
36	Puducherry	53	53	52	1	1
	All India²/Total	155404	205886	183999	28016	6038

Notes: N App - Not Applicable

*: Surplus

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One ANM per each existing Sub Centre as per IPHS norms² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 14.

HEALTH WORKER [MALE] AT SUB CENTRES in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	7437	4743	2933	1810	4504
2	Arunachal Pradesh	356	NA	209	NA	147
3	Assam	4659	3000	2719	281	1940
4	Bihar	9112	3625	220	3405	8892
5	Chhattisgarh	5205	4685	3860	825	1345
6	Goa	218	136	118	18	100
7	Gujarat	9162	9137	7217	1920	1945
8	Haryana	2617	2356	1657	699	960
9	Himachal Pradesh	2092	2070	654	1416	1438
10	Jharkhand	3848	3845	1614	2231	2234
11	Karnataka	9188	5388	3394	1994	5794
12	Kerala	5410	4230	4027	203	1383
13	Madhya Pradesh	10226	4260	1549	2711	8677
14	Maharashtra	10647	10211	8015	2196	2632
15	Manipur	418	421	255	166	163
16	Meghalaya	440	141	193	*	247
17	Mizoram	311	NA	258	NA	53
18	Nagaland	395	53	152	*	243
19	Odisha	6688	5240	3329	1911	3359
20	Punjab	2950	2788	2353	435	597
21	Rajasthan	13480	559	327	232	13153
22	Sikkim	147	110	100	10	47
23	Tamil Nadu	8713	4691	3183	1508	5530
24	Telangana	4744	1911	1222	689	3522
25	Tripura	965	N App	748	N App	217
26	Uttarakhand	1839	340	8	332	1831
27	Uttar Pradesh	20778	7301	1901	5400	18877
28	West Bengal	10357	291	291	0	10066
29	Andaman & Nicobar Islands	124	41	35	6	89
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	46	71	*	*
32	Delhi	12	0	0	0	12
33	Jammu & Kashmir	2470	1013	886	127	1584
34	Ladakh	238	114	45	69	193
35	Lakshadweep	11	10	10	0	1
36	Puducherry	53	0	0	0	53
	All India²/Total	155404	82756	53553	30594	101828

Notes: N App - Not Applicable *: Surplus

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per each existing Sub Centre as per IPHS norms

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 15.

HEALTH WORKER [FEMALE] / ANM AT PHCs in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	1142	0	0	0	1142
2	Arunachal Pradesh	119	NA	115	NA	4
3	Assam	946	619	1120	*	*
4	Bihar	1702	3577	2231	1346	*
5	Chhattisgarh	792	810	750	60	42
6	Goa	55	114	115	*	*
7	Gujarat	1477	1382	746	636	731
8	Haryana	385	695	548	147	*
9	Himachal Pradesh	564	NA	86	NA	478
10	Jharkhand	291	480	444	36	*
11	Karnataka	2176	6720	5644	1076	*
12	Kerala	784	784	770	14	14
13	Madhya Pradesh	1199	2678	2366	312	*
14	Maharashtra	1829	2791	2312	479	*
15	Manipur	85	120	264	*	*
16	Meghalaya	119	102	267	*	*
17	Mizoram	57	NA	44	NA	13
18	Nagaland	130	45	204	*	*
19	Odisha	1288	1016	846	170	442
20	Punjab	427	126	82	44	345
21	Rajasthan	2094	2811	2261	550	*
22	Sikkim	24	58	72	*	*
23	Tamil Nadu	1420	3299	2927	372	*
24	Telangana	636	0	0	0	636
25	Tripura	107	N App	107	N App	0
26	Uttarakhand	257	200	159	41	98
27	Uttar Pradesh	2880	3820	3202	618	*
28	West Bengal	913	0	0	0	913
29	Andaman & Nicobar Islands	22	25	37	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	5	6	*	4
32	Delhi	5	21	21	0	*
33	Jammu & Kashmir	923	805	738	67	185
34	Ladakh	32	10	13	*	19
35	Lakshadweep	4	30	30	0	*
36	Puducherry	24	67	67	0	*
	All India² Total	24918	33210	28594	5968	5066

Notes: NA - Not Available N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per each existing PHC as per IPHS norms

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 16.

HEALTH ASSISTANT at PHCs in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	2284	0	0	0	2284
2	Arunachal Pradesh	238	NA	78	NA	160
3	Assam	1892	193	126	67	1766
4	Bihar	3404	848	167	681	3237
5	Chhattisgarh	1584	415	191	224	1393
6	Goa	110	3	2	1	108
7	Gujarat	2954	3144	2233	911	721
8	Haryana	770	300	206	94	564
9	Himachal Pradesh	1128	171	34	137	1094
10	Jharkhand	582	105	21	84	561
11	Karnataka	4352	4129	2914	1215	1438
12	Kerala	1568	NA	NA	NA	NA
13	Madhya Pradesh	2398	2124	764	1360	1634
14	Maharashtra	3658	3436	3005	431	653
15	Manipur	170	41	22	19	148
16	Meghalaya	238	72	140	*	98
17	Mizoram	114	0	0	0	114
18	Nagaland	260	12	40	*	220
19	Odisha	2576	0	0	0	2576
20	Punjab	854	126	100	26	754
21	Rajasthan	4188	1743	1077	666	3111
22	Sikkim	48	21	22	*	26
23	Tamil Nadu	2840	855	633	222	2207
24	Telangana	1272	0	0	0	1272
25	Tripura	214	N App	0	N App	214
26	Uttarakhand	514	0	0	0	514
27	Uttar Pradesh	5760	1703	475	1228	5285
28	West Bengal	1826	0	0	0	1826
29	Andaman & Nicobar Islands	44	5	2	3	42
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	20	2	1	1	19
32	Delhi	10	17	15	2	*
33	Jammu & Kashmir	1846	177	138	39	1708
34	Ladakh	64	1	1	0	63
35	Lakshadweep	8	4	4	0	4
36	Puducherry	48	38	38	0	10
	All India² Total	49836	19685	12449	7411	35824

Notes: N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ Two per Primary Health Centre as per IPHS norms² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Health Assistant = Health Assistant (Male + Female)

Table 17.

DOCTORS ⁺ AT PRIMARY HEALTH CENTRES in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1142	1861	1798	63	*
2	Arunachal Pradesh	119	NA	194	NA	*
3	Assam	946	906	1424	*	*
4	Bihar	1702	4129	1745	2384	*
5	Chhattisgarh	792	811	388	423	404
6	Goa	55	72	75	*	*
7	Gujarat	1477	1869	1490	379	*
8	Haryana	385	766	491	275	*
9	Himachal Pradesh	564	722	471	251	93
10	Jharkhand	291	330	222	108	69
11	Karnataka	2176	2323	2071	252	105
12	Kerala	784	1237	1028	209	*
13	Madhya Pradesh	1199	1525	1065	460	134
14	Maharashtra	1829	3587	2848	739	*
15	Manipur	85	170	311	*	*
16	Meghalaya	119	91	190	*	*
17	Mizoram	57	NA	58	NA	*
18	Nagaland	130	113	120	*	10
19	Odisha	1288	1288	827	461	461
20	Punjab	427	585	391	194	36
21	Rajasthan	2094	2170	1845	325	249
22	Sikkim	24	48	34	14	*
23	Tamil Nadu	1420	2976	2708	268	*
24	Telangana	636	1254	1213	41	*
25	Tripura	107	N App	222	N App	*
26	Uttarakhand	257	476	346	130	*
27	Uttar Pradesh	2880	3578	2759	819	121
28	West Bengal	913	1390	1098	292	*
29	Andaman & Nicobar Islands	22	30	48	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	9	13	*	*
32	Delhi	5	19	18	1	*
33	Jammu & Kashmir	923	1477	940	537	*
34	Ladakh	32	23	10	13	22
35	Lakshadweep	4	10	10	0	*
36	Puducherry	24	45	45	0	*
	All India²/ Total	24918	35890	28516	8638	1704

Notes: NA: Not Available. N App - Not Applicable

+: Allopathic Doctors

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

*: Surplus.

¹ One per Primary Health Centre as per IPHS norms

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 18.

AYUSH Doctors at Primary Health Centres in Rural Areas					
S. No.	State/UT	No. of PHCs functional	(As on 31st March 2020)		
			Sanctioned	In-Position	Vacant
1	Andhra Pradesh	1142	348	203	145
2	Arunachal Pradesh	119	NA	32	NA
3	Assam	946	185	297	*
4	Bihar	1702	1377	917	460
5	Chhattisgarh	792	376	248	128
6	Goa	55	24	36	*
7	Gujarat	1477	919	885	34
8	Haryana	385	109	71	38
9	Himachal Pradesh	564	0	0	0
10	Jharkhand	291	83	63	20
11	Karnataka	2176	297	356	*
12	Kerala	784	NA	NA	NA
13	Madhya Pradesh	1199	NA	208	NA
14	Maharashtra	1829	277	118	159
15	Manipur	85	28	57	*
16	Meghalaya	119	29	64	*
17	Mizoram	57	0	5	*
18	Nagaland	130	8	8	0
19	Odisha	1288	0	802	*
20	Punjab	427	216	143	73
21	Rajasthan	2094	870	570	300
22	Sikkim	24	5	4	1
23	Tamil Nadu	1420	475	418	57
24	Telangana	636	394	243	151
25	Tripura	107	N App	97	N App
26	Uttarakhand	257	71	65	6
27	Uttar Pradesh	2880	1213	747	466
28	West Bengal	913	368	172	196
29	Andaman & Nicobar Islands	22	3	14	*
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	7	9	*
32	Delhi	5	0	0	0
33	Jammu & Kashmir	923	489	569	*
34	Ladakh	32	6	6	0
35	Lakshadweep	4	8	8	0
36	Puducherry	24	24	24	0
	All India¹/ Total	24918	8209	7459	2234

Notes:

N App - Not Applicable

*: Surplus.

¹ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 19.

AYUSH Specialist at Community Health Centres in Rural Areas						
(As on 31st March 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	24	14	10	127
2	Arunachal Pradesh	60	NA	3	NA	57
3	Assam	190	13	7	6	183
4	Bihar	57	58	5	53	52
5	Chhattisgarh	170	78	16	62	154
6	Goa	6	4	4	0	2
7	Gujarat	348	NA	NA	NA	NA
8	Haryana	118	21	13	8	105
9	Himachal Pradesh	85	0	0	0	85
10	Jharkhand	171	80	75	5	96
11	Karnataka	189	27	21	6	168
12	Kerala	211	NA	NA	NA	NA
13	Madhya Pradesh	309	309	0	309	309
14	Maharashtra	278	68	59	9	219
15	Manipur	17	5	3	2	14
16	Meghalaya	28	NA	0	NA	28
17	Mizoram	9	NA	0	NA	9
18	Nagaland	21	NA	0	NA	21
19	Odisha	377	0	0	0	377
20	Punjab	143	21	9	12	134
21	Rajasthan	548	76	51	25	497
22	Sikkim	2	1	0	1	2
23	Tamil Nadu	385	87	72	15	313
24	Telangana	85	0	0	0	85
25	Tripura	22	N App	2	N App	20
26	Uttarakhand	56	10	4	6	52
27	Uttar Pradesh	711	374	202	172	509
28	West Bengal	348	280	142	138	206
29	Andaman & Nicobar Islands	4	NA	0	NA	4
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	0	0	0	4
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	4	0	4	77
34	Ladakh	7	1	0	1	7
35	Lakshadweep	3	0	0	0	3
36	Puducherry	3	0	0	0	3
	All India²/ Total	5183	1541	702	844	3922

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 20.

SURGEONS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	64	50	14	91
2	Arunachal Pradesh	60	NA	1	NA	59
3	Assam	190	28	9	19	181
4	Bihar	57	141	28	113	29
5	Chhattisgarh	170	152	18	134	152
6	Goa	6	3	0	3	6
7	Gujarat	348	58	2	56	346
8	Haryana	118	38	8	30	110
9	Himachal Pradesh	85	NA	4	NA	81
10	Jharkhand	171	74	35	39	136
11	Karnataka	189	71	28	43	161
12	Kerala	211	167	151	16	60
13	Madhya Pradesh	309	324	7	317	302
14	Maharashtra	278	94	41	53	237
15	Manipur	17	6	0	6	17
16	Meghalaya	28	1	1	0	27
17	Mizoram	9	NA	0	NA	9
18	Nagaland	21	NA	3	NA	18
19	Odisha	377	370	94	276	283
20	Punjab	143	123	37	86	106
21	Rajasthan	548	475	101	374	447
22	Sikkim	2	0	0	0	2
23	Tamil Nadu	385	134	104	30	281
24	Telangana	85	85	32	53	53
25	Tripura	22	N App	0	N App	22
26	Uttarakhand	56	61	6	55	50
27	Uttar Pradesh	711	527	166	361	545
28	West Bengal	348	348	107	241	241
29	Andaman & Nicobar Islands	4	NA	1	NA	3
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	0	0	0	4
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	86	59	27	18
34	Ladakh	7	3	1	2	6
35	Lakshadweep	3	2	2	0	1
36	Puducherry	3	0	0	0	3
	All India/ Total	5183	3435	1096	2348	4087

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 21.

OBSTETRICIANS & GYNAECOLOGISTS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	136	128	8	13
2	Arunachal Pradesh	60	NA	3	NA	57
3	Assam	190	41	91	*	99
4	Bihar	57	164	26	138	31
5	Chhattisgarh	170	147	20	127	150
6	Goa	6	4	7	*	*
7	Gujarat	348	76	3	73	345
8	Haryana	118	33	8	25	110
9	Himachal Pradesh	85	NA	5	NA	80
10	Jharkhand	171	72	36	36	135
11	Karnataka	189	180	119	61	70
12	Kerala	211	8	8	0	203
13	Madhya Pradesh	309	324	21	303	288
14	Maharashtra	278	185	158	27	120
15	Manipur	17	6	2	4	15
16	Meghalaya	28	1	1	0	27
17	Mizoram	9	NA	0	NA	9
18	Nagaland	21	NA	3	NA	18
19	Odisha	377	370	122	248	255
20	Punjab	143	130	46	84	97
21	Rajasthan	548	265	101	164	447
22	Sikkim	2	1	0	1	2
23	Tamil Nadu	385	76	46	30	339
24	Telangana	85	244	103	141	*
25	Tripura	22	N App	1	N App	21
26	Uttarakhand	56	56	12	44	44
27	Uttar Pradesh	711	513	161	352	550
28	West Bengal	348	348	292	56	56
29	Andaman & Nicobar Islands	4	NA	0	NA	4
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	2	1	1	3
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	87	63	24	14
34	Ladakh	7	3	2	1	5
35	Lakshadweep	3	2	2	0	1
36	Puducherry	3	1	0	1	3
	All India/ Total	5183	3475	1591	1949	3611

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 22.

PHYSICIANS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	60	40	20	101
2	Arunachal Pradesh	60	NA	10	NA	50
3	Assam	190	30	42	*	148
4	Bihar	57	177	51	126	6
5	Chhattisgarh	170	135	9	126	161
6	Goa	6	2	3	*	3
7	Gujarat	348	58	2	56	346
8	Haryana	118	35	7	28	111
9	Himachal Pradesh	85	16	8	8	77
10	Jharkhand	171	126	92	34	79
11	Karnataka	189	78	24	54	165
12	Kerala	211	9	6	3	205
13	Madhya Pradesh	309	324	7	317	302
14	Maharashtra	278	98	43	55	235
15	Manipur	17	6	0	6	17
16	Meghalaya	28	2	2	0	26
17	Mizoram	9	NA	0	NA	9
18	Nagaland	21	2	2	0	19
19	Odisha	377	371	42	329	335
20	Punjab	143	110	24	86	119
21	Rajasthan	548	405	129	276	419
22	Sikkim	2	2	2	0	0
23	Tamil Nadu	385	79	62	17	323
24	Telangana	85	79	30	49	55
25	Tripura	22	N App	0	N App	22
26	Uttarakhand	56	60	4	56	52
27	Uttar Pradesh	711	639	309	330	402
28	West Bengal	348	348	115	233	233
29	Andaman & Nicobar Islands	4	NA	0	NA	4
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	0	0	0	4
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	76	63	13	14
34	Ladakh	7	2	0	2	7
35	Lakshadweep	3	2	2	0	1
36	Puducherry	3	0	0	0	3
	All India/ Total	5183	3331	1130	2224	4053

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 23.

PAEDIATRICIANS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	118	97	21	44
2	Arunachal Pradesh	60	NA	0	NA	60
3	Assam	190	27	46	*	144
4	Bihar	57	154	19	135	38
5	Chhattisgarh	170	147	15	132	155
6	Goa	6	3	4	*	2
7	Gujarat	348	76	6	70	342
8	Haryana	118	29	4	25	114
9	Himachal Pradesh	85	NA	4	NA	81
10	Jharkhand	171	67	16	51	155
11	Karnataka	189	170	81	89	108
12	Kerala	211	8	8	0	203
13	Madhya Pradesh	309	60	11	49	298
14	Maharashtra	278	181	157	24	121
15	Manipur	17	6	2	4	15
16	Meghalaya	28	1	0	1	28
17	Mizoram	9	NA	0	NA	9
18	Nagaland	21	NA	1	NA	20
19	Odisha	377	371	55	316	322
20	Punjab	143	122	32	90	111
21	Rajasthan	548	231	107	124	441
22	Sikkim	2	1	0	1	2
23	Tamil Nadu	385	30	16	14	369
24	Telangana	85	217	93	124	*
25	Tripura	22	N App	0	N App	22
26	Uttarakhand	56	59	10	49	46
27	Uttar Pradesh	711	492	180	312	531
28	West Bengal	348	378	127	251	221
29	Andaman & Nicobar Islands	4	NA	0	NA	4
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	0	0	0	4
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	72	45	27	32
34	Ladakh	7	3	2	1	5
35	Lakshadweep	3	2	2	0	1
36	Puducherry	3	0	0	0	3
	All India/ Total	5183	3025	1140	1910	4051

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 24.

TOTAL SPECIALISTS AT CHCs in Rural Areas						
Total Specialists [Surgeons, OB&GY, Physicians & Paediatricians]						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	564	378	315	63	249
2	Arunachal Pradesh	240	NA	14	NA	226
3	Assam	760	126	188	*	572
4	Bihar	228	636	124	512	104
5	Chhattisgarh	680	581	62	519	618
6	Goa	24	12	14	*	10
7	Gujarat	1392	268	13	255	1379
8	Haryana	472	135	27	108	445
9	Himachal Pradesh	340	16	21	*	319
10	Jharkhand	684	339	179	160	505
11	Karnataka	756	499	252	247	504
12	Kerala	844	192	173	19	671
13	Madhya Pradesh	1236	1032	46	986	1190
14	Maharashtra	1112	558	399	159	713
15	Manipur	68	24	4	20	64
16	Meghalaya	112	5	4	1	108
17	Mizoram	36	NA	0	NA	36
18	Nagaland	84	2	9	*	75
19	Odisha	1508	1482	313	1169	1195
20	Punjab	572	485	139	346	433
21	Rajasthan	2192	1376	438	938	1754
22	Sikkim	8	4	2	2	6
23	Tamil Nadu	1540	319	228	91	1312
24	Telangana	340	625	258	367	82
25	Tripura	88	N App	1	N App	87
26	Uttarakhand	224	236	32	204	192
27	Uttar Pradesh	2844	2171	816	1355	2028
28	West Bengal	1392	1422	641	781	751
29	Andaman & Nicobar Islands	16	NA	1	NA	15
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	16	2	1	1	15
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	308	321	230	91	78
34	Ladakh	28	11	5	6	23
35	Lakshadweep	12	8	8	0	4
36	Puducherry	12	1	0	1	12
	All India²/ Total	20732	13266	4957	8401	15775

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ Four per Community Health Centre as per IPHS norms² For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, are excluded

Table 25.

ANAESTHETISTS at CHCs in Rural Areas					
(As on 31st March, 2020)					
S. No.	State/UT	Total Number of CHCs functioning	Sanctioned	In Position	Vacant
1	Andhra Pradesh	141	111	92	19
2	Arunachal Pradesh	60	NA	1	NA
3	Assam	190	25	29	*
4	Bihar	57	190	13	177
5	Chhattisgarh	170	139	10	129
6	Goa	6	3	0	3
7	Gujarat	348	58	10	48
8	Haryana	118	24	4	20
9	Himachal Pradesh	85	NA	3	NA
10	Jharkhand	171	55	26	29
11	Karnataka	189	157	63	94
12	Kerala	211	1	1	0
13	Madhya Pradesh	309	60	5	55
14	Maharashtra	278	142	91	51
15	Manipur	17	6	1	5
16	Meghalaya	28	NA	0	NA
17	Mizoram	9	NA	0	NA
18	Nagaland	21	3	3	0
19	Odisha	377	0	0	0
20	Punjab	143	31	6	25
21	Rajasthan	548	154	58	96
22	Sikkim	2	2	0	2
23	Tamil Nadu	385	73	61	12
24	Telangana	85	219	93	126
25	Tripura	22	N App	1	N App
26	Uttarakhand	56	56	4	52
27	Uttar Pradesh	711	461	155	306
28	West Bengal	348	142	103	39
29	Andaman & Nicobar Islands	4	NA	1	NA
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	0	0	0
32	Delhi	0	N App	N App	N App
33	Jammu & Kashmir	77	77	53	24
34	Ladakh	7	3	1	2
35	Lakshadweep	3	2	2	0
36	Puducherry	3	0	0	0
	All India/ Total	5183	2194	890	1314

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Table 26.

EYE SURGEONS at CHCs in Rural Areas					
S. No.	State/UT	(As on 31st March, 2020)			
		Total Number of CHCs functioning	Sanctioned	In Position	Vacant
1	Andhra Pradesh	141	15	8	7
2	Arunachal Pradesh	60	NA	1	NA
3	Assam	190	23	20	3
4	Bihar	57	73	2	71
5	Chhattisgarh	170	45	18	27
6	Goa	6	3	2	1
7	Gujarat	348	3	2	1
8	Haryana	118	21	2	19
9	Himachal Pradesh	85	NA	6	NA
10	Jharkhand	171	45	4	41
11	Karnataka	189	23	9	14
12	Kerala	211	3	3	0
13	Madhya Pradesh	309	0	0	0
14	Maharashtra	278	45	29	16
15	Manipur	17	6	0	6
16	Meghalaya	28	NA	0	NA
17	Mizoram	9	NA	0	NA
18	Nagaland	21	NA	0	NA
19	Odisha	377	0	0	0
20	Punjab	143	31	8	23
21	Rajasthan	548	75	17	58
22	Sikkim	2	2	0	2
23	Tamil Nadu	385	20	13	7
24	Telangana	85	44	25	19
25	Tripura	22	N App	0	N App
26	Uttarakhand	56	12	3	9
27	Uttar Pradesh	711	422	105	317
28	West Bengal	348	60	7	53
29	Andaman & Nicobar Islands	4	NA	0	NA
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	3	1	2
32	Delhi	0	N App	N App	N App
33	Jammu & Kashmir	77	49	15	34
34	Ladakh	7	2	1	1
35	Lakshadweep	3	0	0	0
36	Puducherry	3	2	0	2
	All India/ Total	5183	1027	301	733

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Table 27.

General Duty Medical Officers (GDMOs) - Ayush at CHCs in Rural Areas					
S. No.	State/UT	(As on 31st March, 2020)			
		Total Number of CHCs functioning	Sanctioned	In Position	Vacant
		[R]	[S]	[P]	[S-P]
1	Andhra Pradesh	141	51	37	14
2	Arunachal Pradesh	60	NA	46	NA
3	Assam	190	46	136	*
4	Bihar	57	112	27	85
5	Chhattisgarh	170	99	95	4
6	Goa	6	5	7	*
7	Gujarat	348	NA	NA	NA
8	Haryana	118	93	85	8
9	Himachal Pradesh	85	0	0	0
10	Jharkhand	171	188	140	48
11	Karnataka	189	57	85	*
12	Kerala	211	NA	NA	NA
13	Madhya Pradesh	309	309	89	220
14	Maharashtra	278	174	164	10
15	Manipur	17	6	21	*
16	Meghalaya	28	8	25	*
17	Mizoram	9	NA	6	NA
18	Nagaland	21	21	21	0
19	Odisha	377	0	257	*
20	Punjab	143	229	180	49
21	Rajasthan	548	277	221	56
22	Sikkim	2	2	1	1
23	Tamil Nadu	385	316	301	15
24	Telangana	85	57	28	29
25	Tripura	22	N App	20	N App
26	Uttarakhand	56	30	20	10
27	Uttar Pradesh	711	580	510	70
28	West Bengal	348	280	142	138
29	Andaman & Nicobar Islands	4	1	5	*
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	5	5	0
32	Delhi	0	N App	N App	N App
33	Jammu & Kashmir	77	23	35	*
34	Ladakh	7	2	0	2
35	Lakshadweep	3	6	6	0
36	Puducherry	3	5	5	0
	All India¹/ Total	5183	2982	2720	759

Notes:

N App - Not Applicable

*: Surplus.

¹ For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 28.

General Duty Medical Officers (GDMOs) - Allopathic at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	282	192	174	18	108
2	Arunachal Pradesh	120	NA	135	NA	*
3	Assam	380	230	626	*	*
4	Bihar	114	935	152	783	*
5	Chhattisgarh	340	478	565	*	*
6	Goa	12	28	32	*	*
7	Gujarat	696	1103	1071	32	*
8	Haryana	236	698	366	332	*
9	Himachal Pradesh	170	344	170	174	0
10	Jharkhand	342	752	648	104	*
11	Karnataka	378	190	181	9	197
12	Kerala	422	533	516	17	*
13	Madhya Pradesh	618	713	609	104	9
14	Maharashtra	556	660	525	135	31
15	Manipur	34	102	110	*	*
16	Meghalaya	56	29	89	*	*
17	Mizoram	18	NA	23	NA	*
18	Nagaland	42	39	39	0	3
19	Odisha	754	405	1063	*	*
20	Punjab	286	381	387	*	*
21	Rajasthan	1096	1696	1343	353	*
22	Sikkim	4	4	4	0	0
23	Tamil Nadu	770	2053	1874	179	*
24	Telangana	170	353	231	122	*
25	Tripura	44	N App	80	N App	*
26	Uttarakhand	112	115	179	*	*
27	Uttar Pradesh	1422	1793	1793	0	*
28	West Bengal	696	2361	1716	645	*
29	Andaman & Nicobar Islands	8	16	16	0	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	8	5	13	*	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	154	729	571	158	*
34	Ladakh	14	10	7	3	7
35	Lakshadweep	6	14	14	0	*
36	Puducherry	6	20	20	0	*
	All India²/Total	10366	16981	15342	3168	355

Notes:

*N App - Not Applicable**: *Surplus.*¹ *Two per Community Health Centre as per IPHS norms*² *For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded*

Table 29.

RADIOGRAPHERS at CHCs in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	112	56	56	85
2	Arunachal Pradesh	60	NA	13	NA	47
3	Assam	190	51	117	*	73
4	Bihar	57	94	3	91	54
5	Chhattisgarh	170	170	161	9	9
6	Goa	6	4	2	2	4
7	Gujarat	348	348	126	222	222
8	Haryana	118	109	38	71	80
9	Himachal Pradesh	85	38	26	12	59
10	Jharkhand	171	188	122	66	49
11	Karnataka	189	152	122	30	67
12	Kerala	211	16	12	4	199
13	Madhya Pradesh	309	309	183	126	126
14	Maharashtra	278	136	104	32	174
15	Manipur	17	10	9	1	8
16	Meghalaya	28	10	24	*	4
17	Mizoram	9	NA	8	NA	1
18	Nagaland	21	3	3	0	18
19	Odisha	377	127	63	64	314
20	Punjab	143	147	120	27	23
21	Rajasthan	548	664	329	335	219
22	Sikkim	2	3	4	*	*
23	Tamil Nadu	385	235	144	91	241
24	Telangana	85	99	44	55	41
25	Tripura	22	N App	13	N App	9
26	Uttarakhand	56	22	9	13	47
27	Uttar Pradesh	711	402	189	213	522
28	West Bengal	348	283	162	121	186
29	Andaman & Nicobar Islands	4	4	4	0	0
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	4	4	0	0
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	265	208	57	*
34	Ladakh	7	6	4	2	3
35	Lakshadweep	3	5	5	0	*
36	Puducherry	3	3	3	0	0
	All India/Total	5183	4019	2434	1700	2884

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 30.

PHARMACISTS at PHCs in Rural Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1142	1108	910	198	232
2	Arunachal Pradesh	119	NA	52	NA	67
3	Assam	946	593	1030	*	*
4	Bihar	1702	1292	395	897	1307
5	Chhattisgarh	792	792	676	116	116
6	Goa	55	38	41	*	14
7	Gujarat	1477	1477	1309	168	168
8	Haryana	385	397	240	157	145
9	Himachal Pradesh	564	581	404	177	160
10	Jharkhand	291	203	64	139	227
11	Karnataka	2176	2057	1549	508	627
12	Kerala	784	665	560	105	224
13	Madhya Pradesh	1199	1199	988	211	211
14	Maharashtra	1829	1831	1613	218	216
15	Manipur	85	65	122	*	*
16	Meghalaya	119	64	124	*	*
17	Mizoram	57	NA	35	NA	22
18	Nagaland	130	109	109	0	21
19	Odisha	1288	1258	1127	131	161
20	Punjab	427	534	386	148	41
21	Rajasthan	2094	1328	644	684	1450
22	Sikkim	24	13	11	2	13
23	Tamil Nadu	1420	1394	1204	190	216
24	Telangana	636	525	376	149	260
25	Tripura	107	N App	132	N App	*
26	Uttarakhand	257	213	251	*	6
27	Uttar Pradesh	2880	2699	2685	14	195
28	West Bengal	913	918	863	55	50
29	Andaman & Nicobar Islands	22	15	22	*	0
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	10	12	*	*
32	Delhi	5	4	4	0	1
33	Jammu & Kashmir	923	1007	852	155	71
34	Ladakh	32	15	13	2	19
35	Lakshadweep	4	8	8	0	*
36	Puducherry	24	24	26	*	*
	All India/Total	24918	22436	18837	4424	6240

Notes:

*N App - Not Applicable**: *Surplus.**All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs*¹ *One per each Primary Health Centre as per IPHS norms*

Table 31.

PHARMACISTS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	155	129	26	12
2	Arunachal Pradesh	60	NA	56	NA	4
3	Assam	190	138	354	*	*
4	Bihar	57	275	97	178	*
5	Chhattisgarh	170	287	270	17	*
6	Goa	6	13	16	*	*
7	Gujarat	348	369	229	140	119
8	Haryana	118	259	165	94	*
9	Himachal Pradesh	85	142	107	35	*
10	Jharkhand	171	188	164	24	7
11	Karnataka	189	310	200	110	*
12	Kerala	211	225	214	11	*
13	Madhya Pradesh	309	309	335	*	*
14	Maharashtra	278	374	345	29	*
15	Manipur	17	34	30	4	*
16	Meghalaya	28	16	44	*	*
17	Mizoram	9	NA	7	NA	2
18	Nagaland	21	23	23	0	*
19	Odisha	377	610	567	43	*
20	Punjab	143	318	243	75	*
21	Rajasthan	548	640	466	174	82
22	Sikkim	2	2	2	0	0
23	Tamil Nadu	385	429	381	48	4
24	Telangana	85	150	66	84	19
25	Tripura	22	N App	39	N App	*
26	Uttarakhand	56	112	66	46	*
27	Uttar Pradesh	711	1540	1496	44	*
28	West Bengal	348	631	597	34	*
29	Andaman & Nicobar Islands	4	7	7	0	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	5	6	*	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	282	206	76	*
34	Ladakh	7	9	9	0	*
35	Lakshadweep	3	12	12	0	*
36	Puducherry	3	6	7	*	*
	All India/Total	5183	7870	6955	1292	249

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 32

LABORATORY TECHNICIANS at PHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	1142	1079	753	326	389
2	Arunachal Pradesh	119	NA	45	NA	74
3	Assam	946	488	892	*	54
4	Bihar	1702	1230	363	867	1339
5	Chhattisgarh	792	669	498	171	294
6	Goa	55	28	33	*	22
7	Gujarat	1477	1443	1280	163	197
8	Haryana	385	376	197	179	188
9	Himachal Pradesh	564	184	29	155	535
10	Jharkhand	291	203	94	109	197
11	Karnataka	2176	1702	1515	187	661
12	Kerala	784	383	374	9	410
13	Madhya Pradesh	1199	1199	355	844	844
14	Maharashtra	1829	1759	1244	515	585
15	Manipur	85	39	72	*	13
16	Meghalaya	119	56	140	*	*
17	Mizoram	57	NA	59	NA	*
18	Nagaland	130	89	89	0	41
19	Odisha	1288	0	199	*	1089
20	Punjab	427	456	260	196	167
21	Rajasthan	2094	1811	1193	618	901
22	Sikkim	24	25	31	*	*
23	Tamil Nadu	1420	1420	738	682	682
24	Telangana	636	638	592	46	44
25	Tripura	107	N App	114	N App	*
26	Uttarakhand	257	66	23	43	234
27	Uttar Pradesh	2880	1640	1007	633	1873
28	West Bengal	913	392	74	318	839
29	Andaman & Nicobar Islands	22	11	18	*	4
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	12	16	*	*
32	Delhi	5	2	1	1	4
33	Jammu & Kashmir	923	623	530	93	393
34	Ladakh	32	10	10	0	22
35	Lakshadweep	4	8	8	0	*
36	Puducherry	24	24	21	3	3
	All India/Total	24918	18065	12867	6158	12098

Notes:

*N App - Not Applicable**: *Surplus.**All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States /UTs*¹ *One per each Primary Health Centre as per IPHS norms*

Table 33.

LABORATORY TECHNICIANS at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	141	162	160	2	*
2	Arunachal Pradesh	60	NA	75	NA	*
3	Assam	190	120	387	*	*
4	Bihar	57	276	75	201	*
5	Chhattisgarh	170	331	313	18	*
6	Goa	6	10	11	*	*
7	Gujarat	348	349	198	151	150
8	Haryana	118	295	203	92	*
9	Himachal Pradesh	85	55	19	36	66
10	Jharkhand	171	342	270	72	*
11	Karnataka	189	220	210	10	*
12	Kerala	211	204	191	13	20
13	Madhya Pradesh	309	309	468	*	*
14	Maharashtra	278	359	330	29	*
15	Manipur	17	14	40	*	*
16	Meghalaya	28	20	52	*	*
17	Mizoram	9	NA	15	NA	*
18	Nagaland	21	54	54	0	*
19	Odisha	377	500	512	*	*
20	Punjab	143	316	268	48	*
21	Rajasthan	548	1118	786	332	*
22	Sikkim	2	6	6	0	*
23	Tamil Nadu	385	452	427	25	*
24	Telangana	85	135	55	80	30
25	Tripura	22	N App	32	N App	*
26	Uttarakhand	56	70	38	32	18
27	Uttar Pradesh	711	812	805	7	*
28	West Bengal	348	709	643	66	*
29	Andaman & Nicobar Islands	4	4	7	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	6	7	*	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	77	381	352	29	*
34	Ladakh	7	12	10	2	*
35	Lakshadweep	3	10	10	0	*
36	Puducherry	3	6	7	*	*
	All India/Total	5183	7657	7036	1245	284

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 34.

NURSING STAFF (STAFF NURSE) at PHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	1142	2349	2119	230	*
2	Arunachal Pradesh	119	NA	201	NA	*
3	Assam	946	835	1751	*	*
4	Bihar	1702	2381	884	1497	818
5	Chhattisgarh	792	1312	1152	160	*
6	Goa	55	87	113	*	*
7	Gujarat	1477	1152	766	386	711
8	Haryana	385	1205	912	293	*
9	Himachal Pradesh	564	205	50	155	514
10	Jharkhand	291	203	162	41	129
11	Karnataka	2176	2754	3137	*	*
12	Kerala	784	1195	1145	50	*
13	Madhya Pradesh	1199	1199	1137	62	62
14	Maharashtra	1829	1384	898	486	931
15	Manipur	85	168	221	*	*
16	Meghalaya	119	166	372	*	*
17	Mizoram	57	NA	202	NA	*
18	Nagaland	130	210	210	0	*
19	Odisha	1288	367	475	*	813
20	Punjab	427	985	583	402	*
21	Rajasthan	2094	4165	3197	968	*
22	Sikkim	24	72	79	*	*
23	Tamil Nadu	1420	4713	4073	640	*
24	Telangana	636	1350	1186	164	*
25	Tripura	107	N App	537	N App	*
26	Uttarakhand	257	79	42	37	215
27	Uttar Pradesh	2880	2805	1613	1192	1267
28	West Bengal	913	2157	1838	319	*
29	Andaman & Nicobar Islands	22	66	95	*	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	31	44	*	*
32	Delhi	5	6	6	0	*
33	Jammu & Kashmir	923	788	622	166	301
34	Ladakh	32	17	21	*	11
35	Lakshadweep	4	16	16	0	*
36	Puducherry	24	99	114	*	*
	All India/Total	24918	34521	29973	7248	5772

Notes:

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Primary Health Centre as per IPHS norms

Table 35.

NURSING STAFF at CHCs in Rural Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	987	1072	969	103	18
2	Arunachal Pradesh	420	NA	478	NA	*
3	Assam	1330	677	1824	*	*
4	Bihar	399	1213	462	751	*
5	Chhattisgarh	1190	1874	1566	308	*
6	Goa	42	180	160	20	*
7	Gujarat	2436	2487	2203	284	233
8	Haryana	826	1716	1281	435	*
9	Himachal Pradesh	595	253	192	61	403
10	Jharkhand	1197	1710	726	984	471
11	Karnataka	1323	1820	1604	216	*
12	Kerala	1477	789	615	174	862
13	Madhya Pradesh	2163	2163	1716	447	447
14	Maharashtra	1946	2450	2267	183	*
15	Manipur	119	170	115	55	4
16	Meghalaya	196	149	382	*	*
17	Mizoram	63	NA	43	NA	20
18	Nagaland	147	106	106	0	41
19	Odisha	2639	1035	2029	*	610
20	Punjab	1001	1481	1149	332	*
21	Rajasthan	3836	6245	4977	1268	*
22	Sikkim	14	25	13	12	1
23	Tamil Nadu	2695	3532	2999	533	*
24	Telangana	595	1062	890	172	*
25	Tripura	154	N App	209	N App	*
26	Uttarakhand	392	313	201	112	191
27	Uttar Pradesh	4977	6952	5795	1157	*
28	West Bengal	2436	6452	5940	512	*
29	Andaman & Nicobar Islands	28	56	53	3	*
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	28	33	33	0	*
32	Delhi	0	N App	N App	N App	N App
33	Jammu & Kashmir	539	1027	763	264	*
34	Ladakh	49	17	16	1	33
35	Lakshadweep	21	47	47	0	*
36	Puducherry	21	57	51	6	*
	All India/Total	36281	47163	41874	8393	3334

Notes:

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ Seven per Community Health Centre as per IPHS norms

Table 36.

DOCTORS AT DISTRICT HOSPITAL AND SUB DISTRICT/ SUB DIVISIONAL HOSPITAL					
(As on 31st March, 2020)					
S.No.	State/UT	DISTRICT HOSPITAL		SUB DISTRICT/ SUB DIVISIONAL HOSPITAL	
		Sanctioned	In Position	Sanctioned	In Position
1	Andhra Pradesh	590	474	416	362
2	Arunachal Pradesh	41	249	N App	N App
3	Assam	200	692	77	140
4	Bihar	1551	875	1025	366
5	Chhattisgarh	476	445	68	57
6	Goa	79	123	79	52
7	Gujarat	207	115	166	289
8	Haryana	586	888	352	323
9	Himachal Pradesh	NA	356	745	525
10	Jharkhand	690	416	260	113
11	Karnataka	595	677	1769	1396
12	Kerala	1300	1214	780	771
13	Madhya Pradesh	1134	1186	470	395
14	Maharashtra	2081	1704	1577	1174
15	Manipur	205	246	15	15
16	Meghalaya	114	310	N App	N App
17	Mizoram	NA	200	NA	12
18	Nagaland	133	133	N App	N App
19	Odisha	1390	1359	400	270
20	Punjab	904	733	845	591
21	Rajasthan	1786	1348	567	457
22	Sikkim	124	99	NA	NA
23	Tamil Nadu	1655	1506	2649	2396
24	Telangana	319	266	1421	681
25	Tripura	N App	243	N App	124
26	Uttarakhand	380	447	305	266
27	Uttar Pradesh	3486	2849	N App	N App
28	West Bengal	1910	804	2493	2130
29	Andaman & Nicobar Islands	28	26	N App	N App
30	Chandigarh	NA	214	NA	32
31	Dadra & Nagar Haveli and Daman & Diu	125	121	26	15
32	Delhi	1974	1434	217	183
33	Jammu & Kashmir	1095	803	N App	N App
34	Ladakh	108	78	N App	N App
35	Lakshadweep	NA	22	28	38
36	Puducherry	198	172	267	226
	All India/Total	25464	22827	17017	13399

Notes:

NA: Not Available.

N App - Not Applicable

Table 37.

PARA MEDICAL STAFF AT DISTRICT HOSPITAL AND SUB DISTRICT/ SUB DIVISIONAL HOSPITAL					
S.No.	State/UT	(As on 31st March, 2020)			
		DISTRICT HOSPITAL		SUB DISTRICT/ SUB DIVISIONAL HOSPITAL	
		Sanctioned	In Position	Sanctioned	In Position
1	Andhra Pradesh	1904	1557	963	878
2	Arunachal Pradesh	156	862	N App	N App
3	Assam	875	3335	157	409
4	Bihar	4856	2305	2035	796
5	Chhattisgarh	1594	1619	257	227
6	Goa	182	605	232	178
7	Gujarat	135	106	307	426
8	Haryana	2684	2814	839	582
9	Himachal Pradesh	1072	938	1362	1001
10	Jharkhand	1748	1171	382	169
11	Karnataka	2539	2311	5927	3887
12	Kerala	4931	4862	1275	1263
13	Madhya Pradesh	14404	7937	7451	1569
14	Maharashtra	8916	7706	3434	4059
15	Manipur	504	511	27	27
16	Meghalaya	336	1315	N App	N App
17	Mizoram	NA	880	NA	36
18	Nagaland	148	927	N App	N App
19	Odisha	2861	4669	816	810
20	Punjab	3023	2412	1875	1389
21	Rajasthan	5032	4111	1459	949
22	Sikkim	95	110	NA	NA
23	Tamil Nadu	5252	3830	6153	5103
24	Telangana	698	615	1217	849
25	Tripura	N App	228	N App	139
26	Uttarakhand	783	804	624	466
27	Uttar Pradesh	10938	9051	N App	N App
28	West Bengal	1004	865	3165	2822
29	Andaman & Nicobar Islands	391	59	N App	N App
30	Chandigarh	388	580	NA	104
31	Dadra & Nagar Haveli and Daman & Diu	524	474	73	68
32	Delhi	9781	8122	678	498
33	Jammu & Kashmir	2227	1904	N App	N App
34	Ladakh	483	408	N App	N App
35	Lakshadweep	NA	92	81	145
36	Puducherry	965	825	1224	1088
	All India/Total	91429	80920	42013	29937

Notes:

NA: Not Available.

N App - Not Applicable



SECTION VI
STATUS OF HEALTH
INFRASTRUCTURE IN RURAL AREAS

Table 38.

INFRASTRUCTURE FACILITIES AVAILABLE AT SUB CENTRES in Rural Areas- I					
(As on 31st March, 2020)					
S.No.	State/UT	Number of Sub Centres Functioning	Number of Sub Centres with ANM Quarter		No. of Sub Centres Functioning as per IPHS norms
			Number	%	
1	Andhra Pradesh	7437	2321	31.2	0
2	Arunachal Pradesh	356	166	46.6	0
3	Assam	4659	2357	50.6	0
4	Bihar	9112	3280	36.0	18
5	Chhattisgarh	5205	3939	75.7	0
6	Goa	218	63	28.9	202
7	Gujarat	9162	6380	69.6	2
8	Haryana	2617	1390	53.1	0
9	Himachal Pradesh	2092	1280	61.2	0
10	Jharkhand	3848	1782	46.3	0
11	Karnataka	9188	5495	59.8	0
12	Kerala	5410	5410	100.0	0
13	Madhya Pradesh	10226	7926	77.5	0
14	Maharashtra	10647	9098	85.5	430
15	Manipur	418	46	11.0	0
16	Meghalaya	440	298	67.7	0
17	Mizoram	311	213	68.5	0
18	Nagaland	395	52	13.2	0
19	Odisha	6688	4779	71.5	0
20	Punjab	2950	506	17.2	0
21	Rajasthan	13480	8628	64.0	0
22	Sikkim	147	116	78.9	64
23	Tamil Nadu	8713	6210	71.3	2845
24	Telangana	4744	1793	37.8	1363
25	Tripura	965	346	35.9	79
26	Uttarakhand	1839	1295	70.4	252
27	Uttar Pradesh	20778	15403	74.1	0
28	West Bengal	10357	4929	47.6	N App
29	Andaman & Nicobar Islands	124	88	71.0	0
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	55	58.5	55
32	Delhi	12	1	8.3	0
33	Jammu & Kashmir	2470	171	6.9	0
34	Ladakh	238	0	0.0	0
35	Lakshadweep	11	0	0.0	0
36	Puducherry	53	32	60.4	53
	All India/Total	155404	95848	61.7	5363

Notes: N App - Not Applicable

Table 39.

INFRASTRUCTURE FACILITIES AVAILABLE AT SUB CENTRES in Rural Areas- II						
(As on 31st March, 2020)						
S.No.	State/UT	Number of Sub Centres Functioning	Number of Sub Centres			
			Without Regular Water Supply		Without Electric Supply	
			Number	%	Number	%
1	Andhra Pradesh	7437	0	NA	0	NA
2	Arunachal Pradesh	356	56	15.7	200	56.2
3	Assam	4659	429	9.2	2292	49.2
4	Bihar	9112	4887	53.6	5005	54.9
5	Chhattisgarh	5205	591	11.4	708	13.6
6	Goa	218	10	4.6	9	4.1
7	Gujarat	9162	1211	13.2	1605	17.5
8	Haryana	2617	76	2.9	161	6.2
9	Himachal Pradesh	2092	111	5.3	18	0.9
10	Jharkhand	3848	1042	27.1	1928	50.1
11	Karnataka	9188	2487	27.1	2777	30.2
12	Kerala	5410	937	17.3	721	13.3
13	Madhya Pradesh	10226	1748	17.1	219	2.1
14	Maharashtra	10647	834	7.8	1254	11.8
15	Manipur	418	128	30.6	286	68.4
16	Meghalaya	440	60	13.6	289	65.7
17	Mizoram	311	56	18.0	121	38.9
18	Nagaland	395	242	61.3	93	23.5
19	Odisha	6688	606	9.1	2768	41.4
20	Punjab	2950	79	2.7	187	6.3
21	Rajasthan	13480	2243	16.6	4695	34.8
22	Sikkim	147	6	4.1	0	NA
23	Tamil Nadu	8713	874	10.0	1066	12.2
24	Telangana	4744	0	NA	0	NA
25	Tripura	965	132	13.7	379	39.3
26	Uttarakhand	1839	691	37.6	544	29.6
27	Uttar Pradesh	20778	1274	6.1	15614	75.1
28	West Bengal	10357	702	6.8	173	1.7
29	Andaman & Nicobar Islands	124	4	3.2	0	NA
30	Chandigarh	0	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	3	3.2	14	14.9
32	Delhi	12	1	8.3	0	NA
33	Jammu & Kashmir	2470	1075	43.5	819	33.2
34	Ladakh	238	172	72.3	136	57.1
35	Lakshadweep	11	0	NA	0	NA
36	Puducherry	53	0	NA	0	NA
	All India/Total	155404	22767	14.7	44081	28.4

Notes: NA: Not Available.

N App - Not Applicable

Table 40.

INFRASTRUCTURE FACILITIES AT PRIMARY HEALTH CENTRES in Rural Areas-I										
(As on 31st March, 2020)										
S.No.	State/UT	Number of PHCs Functioning	Number of Primary Health Centres							
			PHCs functioning on 24X7 basis		With Labour Room		With OT		With at least 4 beds	
			Number	%	Number	%	Number	%	Number	%
1	Andhra Pradesh	1142	596	52.2	1142	100.0	1142	100.0	1142	100.0
2	Arunachal Pradesh	119	30	25.2	73	61.3	4	3.4	48	40.3
3	Assam	946	299	31.6	762	80.5	66	7.0	418	44.2
4	Bihar	1702	507	29.8	548	32.2	356	20.9	483	28.4
5	Chhattisgarh	792	481	60.7	783	98.9	111	14.0	668	84.3
6	Goa	55	13	23.6	13	23.6	5	9.1	12	21.8
7	Gujarat	1477	306	20.7	1205	81.6	371	25.1	1127	76.3
8	Haryana	385	248	64.4	330	85.7	51	13.2	296	76.9
9	Himachal Pradesh	564	0	0.0	194	34.4	148	26.2	173	30.7
10	Jharkhand	291	212	72.9	212	72.9	85	29.2	160	55.0
11	Karnataka	2176	877	40.3	1823	83.8	1146	52.7	1964	90.3
12	Kerala	784	128	16.3	0	0.0	270	34.4	113	14.4
13	Madhya Pradesh	1199	751	62.6	992	82.7	448	37.4	1144	95.4
14	Maharashtra	1829	700	38.3	1729	94.5	1642	89.8	1821	99.6
15	Manipur	85	54	63.5	75	88.2	6	7.1	67	78.8
16	Meghalaya	119	61	51.3	111	93.3	2	1.7	108	90.8
17	Mizoram	57	41	71.9	57	100.0	39	68.4	57	100.0
18	Nagaland	130	33	25.4	98	75.4	9	6.9	84	64.6
19	Odisha	1288	126	9.8	642	49.8	76	5.9	103	8.0
20	Punjab	427	183	42.9	225	52.7	55	12.9	233	54.6
21	Rajasthan	2094	627	29.9	1794	85.7	463	22.1	2094	100.0
22	Sikkim	24	0	0.0	24	100.0	13	54.2	22	91.7
23	Tamil Nadu	1420	1310	92.3	1349	95.0	124	8.7	1005	70.8
24	Telangana	636	324	50.9	636	100.0	636	100.0	636	100.0
25	Tripura	107	82	76.6	107	100.0	82	76.6	107	100.0
26	Uttarakhand	257	76	29.6	140	54.5	163	63.4	219	85.2
27	Uttar Pradesh	2880	50	1.7	2205	76.6	988	34.3	1644	57.1
28	West Bengal	913	229	25.1	430	47.1	113	12.4	262	28.7
29	Andaman & Nicobar Islands	22	22	100.0	22	100.0	8	36.4	21	95.5
30	Chandigarh	0	N App	N App	N App	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	9	90.0	9	90.0	1	10.0	9	90.0
32	Delhi	5	0	0.0	0	0.0	0	0.0	0	0.0
33	Jammu & Kashmir	923	105	11.4	286	31.0	16	1.7	392	42.5
34	Ladakh	32	12	37.5	6	18.8	1	3.1	4	12.5
35	Lakshadweep	4	3	75.0	3	75.0	0	0.0	4	100.0
36	Puducherry	24	19	79.2	24	100.0	0	0.0	18	75.0
	All India/Total	24918	8514	34.2	18049	72.4	8640	34.7	16658	66.9

Notes:

N App - Not Applicable

Table 41.

INFRASTRUCTURE FACILITIES AT PRIMARY HEALTH CENTRES in Rural Areas -II												
(As on 31st March, 2020)												
S.No.	State/UT	Number of PHCs Functioning	Number of Primary Health Centres									
			Without Electric Supply		Without Regular Water Supply		Without All-Weather Motorable		With Telephone		With Computer	
			Number	%	Number	%	Number	%	Number	%	Number	%
1	Andhra Pradesh	1142	0	0.0	0	0.0	0	0.0	715	62.6	1142	100.0
2	Arunachal Pradesh	119	14	11.8	5	4.2	32	26.9	21	17.6	53	44.5
3	Assam	946	41	4.3	17	1.8	87	9.2	271	28.6	597	63.1
4	Bihar	1702	282	16.6	377	22.2	323	19.0	423	24.9	438	25.7
5	Chhattisgarh	792	27	3.4	10	1.3	43	5.4	173	21.8	762	96.2
6	Goa	55	0	0.0	30	54.5	0	0.0	25	45.5	23	41.8
7	Gujarat	1477	31	2.1	96	6.5	98	6.6	917	62.1	1294	87.6
8	Haryana	385	9	2.3	4	1.0	14	3.6	245	63.6	358	93.0
9	Himachal Pradesh	564	8	1.4	32	5.7	54	9.6	196	34.8	237	42.0
10	Jharkhand	291	65	22.3	120	41.2	17	5.8	25	8.6	121	41.6
11	Karnataka	2176	35	1.6	93	4.3	78	3.6	1476	67.8	1899	87.3
12	Kerala	784	0	0.0	74	9.4	0	0.0	784	100.0	784	100.0
13	Madhya Pradesh	1199	0	0.0	111	9.3	81	6.8	1144	95.4	776	64.7
14	Maharashtra	1829	39	2.1	53	2.9	74	4.0	1383	75.6	1668	91.2
15	Manipur	85	6	7.1	12	14.1	18	21.2	5	5.9	43	50.6
16	Meghalaya	119	2	1.7	0	0.0	20	16.8	26	21.8	94	79.0
17	Mizoram	57	2	3.5	6	10.5	4	7.0	22	38.6	47	82.5
18	Nagaland	130	25	19.2	42	32.3	17	13.1	29	22.3	57	43.8
19	Odisha	1288	24	1.9	37	2.9	4	0.3	1288	100.0	827	64.2
20	Punjab	427	2	0.5	9	2.1	11	2.6	119	27.9	132	30.9
21	Rajasthan	2094	77	3.7	99	4.7	53	2.5	1016	48.5	1932	92.3
22	Sikkim	24	0	0.0	0	0.0	1	4.2	3	12.5	24	100.0
23	Tamil Nadu	1420	5	0.4	23	1.6	67	4.7	1217	85.7	1301	91.6
24	Telangana	636	0	0.0	0	0.0	0	0.0	575	90.4	636	100.0
25	Tripura	107	0	0.0	0	0.0	0	0.0	107	100.0	91	85.0
26	Uttarakhand	257	35	13.6	57	22.2	51	19.8	38	14.8	128	49.8
27	Uttar Pradesh	2880	133	4.6	166	5.8	492	17.1	423	14.7	479	16.6
28	West Bengal	913	40	4.4	44	4.8	130	14.2	90	9.9	92	10.1
29	Andaman & Nicobar Islands	22	0	0.0	0	0.0	0	0.0	17	77.3	17	77.3
30	Chandigarh	0	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	0	0.0	0	0.0	0	0.0	6	60.0	9	90.0
32	Delhi	5	0	0.0	0	0.0	0	0.0	2	40.0	4	80.0
33	Jammu & Kashmir	923	172	18.6	182	19.7	168	18.2	69	7.5	104	11.3
34	Ladakh	32	2	6.3	26	81.3	0	0.0	3	9.4	2	6.3
35	Lakshadweep	4	0	0.0	0	0.0	0	0.0	4	100.0	4	100.0
36	Puducherry	24	0	0.0	0	0.0	0	0.0	24	100.0	24	100.0
	All India/Total	24918	1076	4.3	1725	6.9	1937	7.8	12881	51.7	16199	65.0

Notes:

N App - Not Applicable

Table 42.

INFRASTRUCTURE FACILITIES AT PRIMARY HEALTH CENTRES in Rural Areas -III					
(As on 31st March, 2020)					
S.No.	States / UT	Number of PHCs Functioning	Referral Transport	Registered RKS	No. of PHCs Functioning as per IPHS norms
1	Andhra Pradesh	1142	1142	1142	596
2	Arunachal Pradesh	119	78	119	0
3	Assam	946	830	909	5
4	Bihar	1702	568	938	100
5	Chhattisgarh	792	701	708	0
6	Goa	55	23	23	21
7	Gujarat	1477	1390	1349	5
8	Haryana	385	374	330	1
9	Himachal Pradesh	564	564	488	0
10	Jharkhand	291	291	291	0
11	Karnataka	2176	2065	1701	0
12	Kerala	784	689	784	0
13	Madhya Pradesh	1199	1199	1199	0
14	Maharashtra	1829	1821	1775	758
15	Manipur	85	67	83	0
16	Meghalaya	119	110	110	0
17	Mizoram	57	34	57	0
18	Nagaland	130	45	111	0
19	Odisha	1288	1288	1237	0
20	Punjab	427	261	392	0
21	Rajasthan	2094	1890	2094	0
22	Sikkim	24	24	23	24
23	Tamil Nadu	1420	1420	1420	1211
24	Telangana	636	636	636	331
25	Tripura	107	107	107	0
26	Uttarakhand	257	79	224	63
27	Uttar Pradesh	2880	2317	1301	0
28	West Bengal	913	625	804	N App
29	Andaman & Nicobar Islands	22	22	22	17
30	Chandigarh	0	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	10	10	5	10
32	Delhi	5	4	1	0
33	Jammu & Kashmir	923	424	653	112
34	Ladakh	32	6	4	0
35	Lakshadweep	4	4	4	0
36	Puducherry	24	24	24	24
	All India/Total	24918	21132	21068	3278

Notes:

N App - Not Applicable

Table 43.

INFRASTRUCTURE FACILITIES AVAILABLE AT COMMUNITY HEALTH CENTRES in Rural Areas - I										
(As on 31st March, 2020)										
S.No.	State/UT	Number of CHCs Functioning	Number of Community Health Centres							
			With all four specialists	With computer/ Statistical Asst. for MIS/ Accountant	With functional Laboratory	With functional I.O.T.	With functional Labor Room	With functioning Stabilization Units for New Born	With New Born Care Corner	With at least 30 beds
1	Andhra Pradesh	141	12	141	136	141	108	141	126	141
2	Arunachal Pradesh	60	0	30	44	16	23	25	47	2
3	Assam	190	1	29	187	186	115	174	180	101
4	Bihar	57	8	27	36	45	34	38	49	43
5	Chhattisgarh	170	7	159	161	123	161	147	159	142
6	Goa	6	0	6	6	5	2	6	6	5
7	Gujarat	348	4	161	321	248	283	265	307	331
8	Haryana	118	0	73	113	88	111	95	111	37
9	Himachal Pradesh	85	2	16	65	49	32	47	44	22
10	Jharkhand	171	8	171	171	165	171	39	171	96
11	Karnataka	189	5	34	183	186	137	152	174	183
12	Kerala	211	0	211	211	133	1	1	1	69
13	Madhya Pradesh	309	0	246	297	304	304	33	309	309
14	Maharashtra	278	16	13	279	274	259	247	262	281
15	Manipur	17	0	3	17	9	8	11	12	2
16	Meghalaya	28	0	9	28	11	28	23	24	25
17	Mizoram	9	0	9	9	9	9	9	9	9
18	Nagaland	21	0	15	21	4	0.15	5	20	5
19	Odisha	377	18	314	367	330	368	352	354	65
20	Punjab	143	7	97	133	130	100	79	108	63
21	Rajasthan	548	34	521	531	461	532	271	475	548
22	Sikkim	2	0	2	2	1	2	2	0	0
23	Tamil Nadu	385	4	329	381	368	276	382	326	376
24	Telangana	85	45	85	85	85	85	18	85	85
25	Tripura	22	0	16	22	22	22	6	22	22
26	Uttarakhand	56	0	45	55	55	55	26	56	46
27	Uttar Pradesh	711	31	449	625	626	418	509	617	676
28	West Bengal	348	56	348	322	312	348	300	320	270
29	A& N Islands	4	0	1	4	4	4	4	4	4
30	Chandigarh	0	N App	N App	N App	N App	N App	N App	N App	N App
31	D & N Haveli and Daman & Diu	4	0	4	4	4	1	3	4	4
32	Delhi	0	N App	N App	N App	N App	N App	N App	N App	N App
33	Jammu & Kashmir	77	44	58	74	59	72	67	68	55
34	Ladakh	7	0	1	3	1	0	2	3	3
35	Lakshadweep	3	2	0	3	2	3	2	2	3
36	Puducherry	3	0	3	3	3	3	3	3	3
	All India/Total	5183	304	3626	4899	4459	4075	3484	4458	4026

Note:

N App - Not Applicable

Table 44.

INFRASTRUCTURE FACILITIES AVAILABLE AT COMMUNITY HEALTH CENTRES in Rural Areas - II							
(As on 31st March, 2020)							
S.No.	State/UT	Number of CHCs Functioning	Number of Community Health Centres				No. of CHC having a regular supply of
			With functional X-Ray machine	With referral transport available	With registered RKS	Functioning as per IPHS norms	Allopathic drugs for common ailments
1	Andhra Pradesh	141	66	141	141	0	141
2	Arunachal Pradesh	60	11	50	50	0	51
3	Assam	190	100	170	187	8	190
4	Bihar	57	27	48	42	0	29
5	Chhattisgarh	170	138	159	161	0	162
6	Goa	6	6	6	6	6	5
7	Gujarat	348	28	211	211	0	211
8	Haryana	118	52	118	115	1	117
9	Himachal Pradesh	85	42	85	85	0	85
10	Jharkhand	171	65	171	171	0	171
11	Karnataka	189	164	177	171	0	184
12	Kerala	211	28	211	211	0	211
13	Madhya Pradesh	309	223	309	309	0	309
14	Maharashtra	278	234	272	279	0	282
15	Manipur	17	11	14	16	0	16
16	Meghalaya	28	16	25	27	0	28
17	Mizoram	9	9	8	9	0	9
18	Nagaland	21	4	21	20	0	21
19	Odisha	377	69	377	377	0	377
20	Punjab	143	109	104	128	0	134
21	Rajasthan	548	401	548	548	0	548
22	Sikkim	2	2	2	2	0	2
23	Tamil Nadu	385	202	385	385	349	385
24	Telangana	85	54	85	85	41	85
25	Tripura	22	15	22	22	0	22
26	Uttarakhand	56	22	61	56	29	56
27	Uttar Pradesh	711	364	610	608	0	628
28	West Bengal	348	128	348	340	N App	348
29	A& N Islands	4	4	4	4	0	4
30	Chandigarh	0	N App	N App	N App	N App	N App
31	D & N Haveli and Daman & Diu	4	4	4	4	2	4
32	Delhi	0	N App	N App	N App	N App	N App
33	Jammu & Kashmir	77	72	73	74	0	74
34	Ladakh	7	3	4	1	0	1
35	Lakshadweep	3	3	3	3	0	3
36	Puducherry	3	3	3	3	3	3
	All India/Total	5183	2679	4829	4851	439	4896

Note:

N App - Not Applicable

Table 45.

NUMBER OF BEDS IN DISTRICT HOSPITAL AND SUB DISTRICT/ SUB DIVISIONAL HOSPITAL			
(As on 31st March, 2020)			
S.No.	State/UT	SUB DISTRICT/ SUB DIVISIONAL HOSPITAL	DISTRICT HOSPITAL
1	Andhra Pradesh	2800	11532
2	Arunachal Pradesh	N App	1503
3	Assam	745	10563
4	Bihar	1837	10279
5	Chhattisgarh	486	4460
6	Goa	280	1945
7	Gujarat	3108	19555
8	Haryana	1245	7296
9	Himachal Pradesh	3945	4602
10	Jharkhand	2318	2269
11	Karnataka	14821	21508
12	Kerala	8730	21363
13	Madhya Pradesh	8438	14856
14	Maharashtra	9270	27484
15	Manipur	25	1826
16	Meghalaya	N App	2687
17	Mizoram	100	1057
18	Nagaland	N App	1057
19	Odisha	1881	8306
20	Punjab	2506	5822
21	Rajasthan	13358	8888
22	Sikkim	500	400
23	Tamil Nadu	42170	13242
24	Telangana	3750	8434
25	Tripura	830	2415
26	Uttarakhand	2310	1749
27	Uttar Pradesh	N App	30443
28	West Bengal	14815	9690
29	Andaman & Nicobar Islands	N App	674
30	Chandigarh	100	3514
31	Dadra & Nagar Haveli and Daman & Diu	100	506
32	Delhi	424	19980
33	Jammu & Kashmir	N App	5223
34	Ladakh	N App	330
35	Lakshadweep	70	50
36	Puducherry	2576	1517
	All India/Total	143538	287025

Note:

*N App - Not Applicable**Institutions serving as medical colleges are also included under SDH & DH categories.*

Table 46.

Availability of Toilets in SCs, PHCs and CHCs (As on 31st March 2020) in Rural Areas							
S.No.	State/UT	Sub Centre		Primary Health Centre		Community Health Centre	
		No. of Sub Centre Functioning	With Separate Toilet for Male & Female Patients	No. of PHCs Functioning	With Separate Toilet for Male & Female Patients	No. of CHCs Functioning	With Separate Toilet for Male & Female Patients
1	Andhra Pradesh	7437	3137	1142	1117	141	141
2	Arunachal Pradesh	356	61	119	43	60	33
3	Assam	4659	1405	946	824	190	189
4	Bihar	9112	1651	1702	562	57	57
5	Chhattisgarh	5205	2276	792	668	170	157
6	Goa	218	35	55	22	6	6
7	Gujarat	9162	4928	1477	1232	348	290
8	Haryana	2617	1688	385	368	118	115
9	Himachal Pradesh	2092	0	564	262	85	64
10	Jharkhand	3848	1724	291	213	171	171
11	Karnataka	9188	3039	2176	1887	189	181
12	Kerala	5410	3	784	784	211	211
13	Madhya Pradesh	10226	5938	1199	1092	309	304
14	Maharashtra	10647	7269	1829	1714	278	278
15	Manipur	418	92	85	59	17	14
16	Meghalaya	440	48	119	80	28	25
17	Mizoram	311	124	57	51	9	8
18	Nagaland	395	52	130	50	21	15
19	Odisha	6688	2918	1288	838	377	369
20	Punjab	2950	1183	427	289	143	129
21	Rajasthan	13480	4640	2094	1637	548	539
22	Sikkim	147	59	24	19	2	1
23	Tamil Nadu	8713	2888	1420	1295	385	385
24	Telangana	4744	0	636	636	85	85
25	Tripura	965	493	107	102	22	22
26	Uttarakhand	1839	322	257	200	56	51
27	Uttar Pradesh	20778	8120	2880	2296	711	638
28	West Bengal	10357	3809	913	627	348	317
29	Andaman & Nicobar Islands	124	26	22	22	4	4
30	Chandigarh	0	N App	0	N App	0	N App
31	Dadra & Nagar Haveli and Daman & Diu	94	35	10	10	4	4
32	Delhi	12	3	5	3	0	N App
33	Jammu & Kashmir	2470	584	923	565	77	67
34	Ladakh	238	21	32	4	7	1
35	Lakshadweep	11	9	4	3	3	3
36	Puducherry	53	53	24	24	3	3
	All India/Total	155404	58633	24918	19598	5183	4877

Note:

N App - Not Applicable

Table 47.

NUMBER OF FIRST REFERRAL UNITS IN INDIA (As on 31st March 2020)						
S.No.	State/UT	Total no. of FRUs	At CHC Level	At SDH Level	At DH Level	Medical Colleges
1	Andhra Pradesh	240	198	28	14	0
2	Arunachal Pradesh	13	1	0	11	1
3	Assam	69	32	11	25	1
4	Bihar	135	64	35	36	0
5	Chhattisgarh	57	31	3	23	0
6	Goa	2	0	0	2	0
7	Gujarat	130	67	41	22	0
8	Haryana	49	12	15	22	0
9	Himachal Pradesh	18	1	5	12	0
10	Jammu & Kashmir	95	71	0	21	3
11	Jharkhand	76	39	11	23	3
12	Karnataka	179	22	136	15	6
13	Kerala	80	0	43	37	0
14	Madhya Pradesh	148	45	52	51	0
15	Maharashtra	268	119	89	41	19
16	Manipur	6	0	0	4	2
17	Meghalaya	9	0	0	8	1
18	Mizoram	14	5	1	8	0
19	Nagaland	16	5	0	11	0
20	Odisha	94	34	28	32	0
21	Punjab	183	120	39	22	2
22	Rajasthan	153	108	17	27	1
23	Sikkim	3	0	0	3	0
24	Tamil Nadu	570	367	152	32	19
25	Telangana	147	95	37	6	9
26	Tripura	15	1	5	7	2
27	Uttarakhand	29	10	9	8	2
28	Uttar Pradesh	318	208	0	93	17
29	West Bengal	141	47	58	18	18
30	A & N Islands	1	0	0	1	0
31	Chandigarh	7	2	1	2	2
32	D & N Haveli	2	0	1	1	0
33	Daman & Diu	4	2	0	2	0
34	Delhi	34	0	3	23	8
35	Lakshadweep	2	0	1	1	0
36	Puducherry	6	0	0	4	2
	All India/Total	3313	1706	821	668	118

SECTION VII
STATUS OF INFRASTRUCTURE & HEALTH
MANPOWER IN URBAN AREAS

Table 48.

SHORTFALL IN PRIMARY HEALTH CENTRES AS PER MID YEAR POPULATION (as on 1st July 2020) in INDIA in URBAN AREAS						
S.No.	State/ UT	Estimated mid-year population for Urban areas (as on 1st July 2020)	PHCs			
			Required	In Position	Shortfall	% Shortfall
			R	P	S	
1	Andhra Pradesh	18343000	367	243	124	34
2	Arunachal Pradesh	381000	8	5	3	34
3	Assam	5301000	106	56	50	47
4	Bihar	14708000	294	325	-31	-10
5	Chhattisgarh	7680000	154	45	109	71
6	Goa	1132000	23	4	19	82
7	Gujarat	32791000	656	318	338	52
8	Haryana	11839000	237	100	137	58
9	Himachal Pradesh	754000	15	24	-9	-59
10	Jharkhand	9802000	196	60	136	69
11	Karnataka	28681000	574	358	216	38
12	Kerala	24591000	492	148	344	70
13	Madhya Pradesh	24037000	481	277	204	42
14	Maharashtra	59121000	1182	846	336	28
15	Manipur	997000	20	8	12	60
16	Meghalaya	671000	13	24	*	*
17	Mizoram	657000	13	8	5	39
18	Nagaland	914000	18	7	11	62
19	Odisha	8342000	167	89	78	47
20	Punjab	12331000	247	100	147	59
21	Rajasthan	20623000	412	383	29	7
22	Sikkim	293000	6	1	5	83
23	Tamil Nadu	39985000	800	464	336	42
24	Telangana	17135000	343	249	94	27
25	Tripura	1466000	29	5	24	83
26	Uttarakhand	3920000	78	38	40	52
27	Uttar Pradesh	54127000	1083	593	490	45
28	West Bengal	34865000	697	456	241	35
29	A & N Islands	170000	3	5	*	*
30	Chandigarh	1194000	24	48	*	*
31	D & N Haveli and Daman & Diu	808000	16	3	13	81
32	Delhi	20171000	403	541	*	*
33	Jammu & Kashmir	3983000	80	49	31	38
34	Ladakh	86000	2	0	2	100
35	Lakshadweep	65000	1	0	1	100
36	Puducherry	1081000	22	15	7	31
	All India	463049000	9261	5895	3540	38.2

Notes: The requirement is calculated using the prescribed norms on the basis of urban population from mid-year population (as on 1st July 2020). All India shortfall is derived by adding state-wise figures of shortfall ignoring the existing surplus in some of the states.

R: Required; P: In Position; S: Shortfall; *: Surplus

Table 49.

BUILDING POSITION OF PRIMARY HEALTH CENTRES in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Total Number of PHCs functioning	PHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat / Vol. Society Buildings	
1	Andhra Pradesh	243	193	50	0	50
2	Arunachal Pradesh	5	5	0	0	0
3	Assam	56	22	22	12	34
4	Bihar	325	225	77	23	100
5	Chhattisgarh	45	43	2	0	2
6	Goa	4	3	1	0	1
7	Gujarat	318	253	62	3	65
8	Haryana	100	17	77	6	83
9	Himachal Pradesh	24	18	2	4	6
10	Jharkhand	60	26	32	2	34
11	Karnataka	358	234	73	51	124
12	Kerala	148	136	11	1	12
13	Madhya Pradesh	277	156	121	0	121
14	Maharashtra	846	663	60	123	183
15	Manipur	8	5	3	0	3
16	Meghalaya	24	4	20	0	20
17	Mizoram	8	5	3	0	3
18	Nagaland	7	5	2	0	2
19	Odisha	89	89	0	0	0
20	Punjab	100	58	8	34	42
21	Rajasthan	383	299	55	29	84
22	Sikkim	1	1	0	0	0
23	Tamil Nadu	464	395	28	41	69
24	Telangana	249	165	84	0	84
25	Tripura	5	5	0	0	0
26	Uttarakhand	38	4	30	4	34
27	Uttar Pradesh	593	111	480	2	482
28	West Bengal	456	431	15	10	25
29	Andaman & Nicobar Islands	5	5	0	0	0
30	Chandigarh	48	39	0	9	9
31	Dadra & Nagar Haveli and Daman & Diu	3	2	0	1	1
32	Delhi	541	354	138	49	187
33	Jammu & Kashmir	49	22	27	0	27
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	15	0	0	0
	All India/ Total	5895	4008	1483	404	1887

Notes: N App - Not Applicable

¹ All India figure of required number of building to be constructed = Total functioning - Government Buildings.

Table 50.

BUILDING POSITION OF COMMUNITY HEALTH CENTRES in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Total Number of CHCs functioning	CHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat / Vol. Society Buildings	
1	Andhra Pradesh	57	57	0	0	0
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	2	2	0	0	0
4	Bihar	7	7	0	0	0
5	Chhattisgarh	4	2	0	2	2
6	Goa	0	N App	N App	N App	N App
7	Gujarat	14	14	0	0	0
8	Haryana	13	9	4	0	4
9	Himachal Pradesh	7	7	0	0	0
10	Jharkhand	6	6	0	0	0
11	Karnataka	19	19	0	0	0
12	Kerala	16	16	0	0	0
13	Madhya Pradesh	21	21	0	0	0
14	Maharashtra	140	126	13	1	14
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	7	7	0	0	0
20	Punjab	12	11	0	1	1
21	Rajasthan	66	66	0	0	0
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	15	14	0	1	1
24	Telangana	10	10	0	0	0
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	12	12	0	0	0
27	Uttar Pradesh	12	12	0	0	0
28	West Bengal	0	0	0	0	0
29	Andaman & Nicobar Islands	0	N App	N App	N App	N App
30	Chandigarh	2	2	0	0	0
31	Dadra & Nagar Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	23	22	0	1	1
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	1	1	0	0	0
	All India/ Total	466	443	17	6	23

Notes: N App - Not Applicable

¹ All India figure of required number of building to be constructed = Total functioning - Government Buildings.

Table 51.

HEALTH WORKER [FEMALE] / ANM AT PHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	1215	486	486	0	729
2	Arunachal Pradesh	25	NA	17	NA	8
3	Assam	280	101	201	*	79
4	Bihar	1625	481	374	107	1251
5	Chhattisgarh	225	388	266	122	*
6	Goa	20	10	8	2	12
7	Gujarat	1590	3801	1550	2251	40
8	Haryana	500	532	504	28	*
9	Himachal Pradesh	120	NA	43	NA	77
10	Jharkhand	300	358	168	190	132
11	Karnataka	1790	1209	1039	170	751
12	Kerala	740	148	148	0	592
13	Madhya Pradesh	1385	282	767	*	618
14	Maharashtra	4230	4021	3555	466	675
15	Manipur	40	22	27	*	13
16	Meghalaya	120	20	58	*	62
17	Mizoram	40	NA	10	NA	30
18	Nagaland	35	15	19	*	16
19	Odisha	445	167	498	*	*
20	Punjab	500	307	277	30	223
21	Rajasthan	1915	684	639	45	1276
22	Sikkim	5	7	7	0	*
23	Tamil Nadu	2320	1441	1310	131	1010
24	Telangana	1245	968	650	318	595
25	Tripura	25	N App	9	N App	16
26	Uttarakhand	190	179	182	*	8
27	Uttar Pradesh	2965	1739	1906	*	1059
28	West Bengal	2280	397	397	0	1883
29	Andaman & Nicobar Islands	25	NA	9	NA	16
30	Chandigarh	240	124	124	0	116
31	Dadra & Nagar Haveli and Daman & Diu	15	23	23	0	*
32	Delhi	2705	336	459	*	2246
33	Jammu & Kashmir	245	113	112	1	133
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	75	84	84	0	*
	All India²/Total	29475	18443	15926	3861	13666

Notes: NA - Not Available N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ 5 per urban Primary Health Centres as per norms to cater the urban population of 10000 by each Health Worker (female).

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded.

Total figures of ANMs represents ANMs working at PHCs and SCs under the PHCs.

Table 52.

DOCTORS ⁺ AT PRIMARY HEALTH CENTRES in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	243	243	243	0	0
2	Arunachal Pradesh	5	NA	20	NA	*
3	Assam	56	60	74	*	*
4	Bihar	325	437	166	271	159
5	Chhattisgarh	45	82	65	17	*
6	Goa	4	6	6	0	*
7	Gujarat	318	317	116	201	202
8	Haryana	100	101	93	8	7
9	Himachal Pradesh	24	20	22	*	2
10	Jharkhand	60	46	23	23	37
11	Karnataka	358	350	356	*	2
12	Kerala	148	207	184	23	*
13	Madhya Pradesh	277	173	141	32	136
14	Maharashtra	846	944	914	30	*
15	Manipur	8	12	16	*	*
16	Meghalaya	24	10	24	*	0
17	Mizoram	8	NA	8	NA	0
18	Nagaland	7	8	8	0	*
19	Odisha	89	89	87	2	2
20	Punjab	100	186	154	32	*
21	Rajasthan	383	375	396	*	*
22	Sikkim	1	1	1	0	0
23	Tamil Nadu	464	628	592	36	*
24	Telangana	249	498	470	28	*
25	Tripura	5	N App	5	N App	0
26	Uttarakhand	38	38	31	7	7
27	Uttar Pradesh	593	623	494	129	99
28	West Bengal	456	924	543	381	*
29	Andaman & Nicobar Islands	5	2	7	*	*
30	Chandigarh	48	34	70	*	*
31	Dadra & Nagar Haveli and Daman & Diu	3	2	3	*	0
32	Delhi	541	843	955	*	*
33	Jammu & Kashmir	49	99	87	12	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	25	25	0	*
	All India²/ Total	5895	7383	6399	1232	653

Notes: NA: Not Available. N App - Not Applicable

+: Allopathic Doctors

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Primary Health Centre as per IPHS norms

² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 53.

TOTAL SPECIALISTS AT CHCs in Urban Areas						
Total Specialists [Surgeons, OB&GY, Physicians & Paediatricians]						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	228	195	180	15	48
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	8	5	8	*	0
4	Bihar	28	25	3	22	25
5	Chhattisgarh	16	0	0	0	16
6	Goa	0	N App	N App	N App	N App
7	Gujarat	56	116	39	77	17
8	Haryana	52	19	6	13	46
9	Himachal Pradesh	28	NA	2	NA	26
10	Jharkhand	24	18	4	14	20
11	Karnataka	76	64	60	4	16
12	Kerala	64	4	4	0	60
13	Madhya Pradesh	84	84	10	74	74
14	Maharashtra	560	788	612	176	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	28	37	35	2	*
20	Punjab	48	40	20	20	28
21	Rajasthan	264	198	110	88	154
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	60	24	19	5	41
24	Telangana	40	113	52	61	*
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	48	44	7	37	41
27	Uttar Pradesh	48	38	28	10	20
28	West Bengal	0	0	0	0	0
29	Andaman & Nicobar Islands	0	N App	N App	N App	N App
30	Chandigarh	8	0	12	*	*
31	Dadra & Nagar Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	92	33	29	4	63
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	4	5	2	3	2
	All India²/ Total	1864	1850	1242	625	697

Notes:

NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ Four per Community Health Centre as per IPHS norms² For calculating the overall percentages of vacancy and shortfall, the States/UTs for which manpower position is not available, are excluded

Table 54.

ANAESTHETISTS at CHCs in Urban Areas					
(As on 31st March, 2020)					
S. No.	State/UT	Total Number of CHCs functioning	Sanctioned	In Position	Vacant
1	Andhra Pradesh	57	52	41	11
2	Arunachal Pradesh	0	N App	N App	N App
3	Assam	2	1	2	*
4	Bihar	7	25	0	25
5	Chhattisgarh	4	0	0	0
6	Goa	0	N App	N App	N App
7	Gujarat	14	0	0	0
8	Haryana	13	2	0	2
9	Himachal Pradesh	7	0	0	0
10	Jharkhand	6	3	0	3
11	Karnataka	19	16	17	*
12	Kerala	16	0	0	0
13	Madhya Pradesh	21	21	2	19
14	Maharashtra	140	185	157	28
15	Manipur	0	N App	N App	N App
16	Meghalaya	0	N App	N App	N App
17	Mizoram	0	N App	N App	N App
18	Nagaland	0	N App	N App	N App
19	Odisha	7	0	1	*
20	Punjab	12	3	0	3
21	Rajasthan	66	39	10	29
22	Sikkim	0	N App	N App	N App
23	Tamil Nadu	15	9	4	5
24	Telangana	10	43	11	32
25	Tripura	0	N App	N App	N App
26	Uttarakhand	12	7	0	7
27	Uttar Pradesh	12	13	8	5
28	West Bengal	0	0	0	0
29	Andaman & Nicobar Islands	0	N App	N App	N App
30	Chandigarh	2	0	1	*
31	Dadra & Nagar Haveli and Daman & Diu	0	N App	N App	N App
32	Delhi	23	7	3	4
33	Jammu & Kashmir	0	N App	N App	N App
34	Ladakh	0	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App
36	Puducherry	1	0	0	0
	All India/ Total	466	426	257	173

Notes:

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Table 55.

EYE SURGEONS at CHCs in Urban Areas					
(As on 31st March, 2020)					
S. No.	State/UT	Total Number of CHCs functioning	Sanctioned	In Position	Vacant
1	Andhra Pradesh	57	4	3	1
2	Arunachal Pradesh	0	N App	N App	N App
3	Assam	2	0	1	*
4	Bihar	7	18	0	18
5	Chhattisgarh	4	0	0	0
6	Goa	0	N App	N App	N App
7	Gujarat	14	0	0	0
8	Haryana	13	1	0	1
9	Himachal Pradesh	7	0	0	0
10	Jharkhand	6	0	0	0
11	Karnataka	19	0	1	*
12	Kerala	16	0	0	0
13	Madhya Pradesh	21	0	0	0
14	Maharashtra	140	52	41	11
15	Manipur	0	N App	N App	N App
16	Meghalaya	0	N App	N App	N App
17	Mizoram	0	N App	N App	N App
18	Nagaland	0	N App	N App	N App
19	Odisha	7	1	1	0
20	Punjab	12	2	2	0
21	Rajasthan	66	22	9	13
22	Sikkim	0	N App	N App	N App
23	Tamil Nadu	15	2	0	2
24	Telangana	10	3	1	2
25	Tripura	0	N App	N App	N App
26	Uttarakhand	12	1	0	1
27	Uttar Pradesh	12	4	2	2
28	West Bengal	0	0	0	0
29	Andaman & Nicobar Islands	0	N App	N App	N App
30	Chandigarh	2	0	2	*
31	Dadra & Nagar Haveli and Daman & Diu	0	N App	N App	N App
32	Delhi	23	3	5	*
33	Jammu & Kashmir	0	N App	N App	N App
34	Ladakh	0	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App
36	Puducherry	1	0	0	0
	All India/ Total	466	113	68	51

Notes:

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

Table 56.

General Duty Medical Officers (GDMOs) - Allopathic at CHCs in Urban Areas						
S. No.	State/UT	Required ¹	(As on 31st March, 2020)			
			Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	114	81	84	*	30
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	4	0	1	*	3
4	Bihar	14	27	24	3	*
5	Chhattisgarh	8	5	4	1	4
6	Goa	0	N App	N App	N App	N App
7	Gujarat	28	0	0	0	28
8	Haryana	26	29	25	4	1
9	Himachal Pradesh	14	18	12	6	2
10	Jharkhand	12	6	1	5	11
11	Karnataka	38	21	15	6	23
12	Kerala	32	50	50	0	*
13	Madhya Pradesh	42	126	48	78	*
14	Maharashtra	280	474	416	58	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	14	14	19	*	*
20	Punjab	24	33	32	1	*
21	Rajasthan	132	187	138	49	*
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	30	15	21	*	9
24	Telangana	20	15	15	0	5
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	24	23	25	*	*
27	Uttar Pradesh	24	35	14	21	10
28	West Bengal	0	0	0	0	0
29	A & N Islands	0	N App	N App	N App	N App
30	Chandigarh	4	NA	22	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	46	52	55	*	*
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	2	6	7	*	*
	All India²/Total	932	1217	1028	232	126

Notes:

NA: Not Available. N App: Not Applicable

*: Surplus.

¹ Two per Community Health Centre as per IPHS norms² For calculating the overall percentages of vacancy, the States/UTs for which manpower position is not available, are excluded

Table 57.

RADIOGRAPHERS at CHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	57	51	35	16	22
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	2	1	1	0	1
4	Bihar	7	10	1	9	6
5	Chhattisgarh	4	0	0	0	4
6	Goa	0	N App	N App	N App	N App
7	Gujarat	14	0	0	0	14
8	Haryana	13	7	3	4	10
9	Himachal Pradesh	7	NA	1	NA	6
10	Jharkhand	6	0	0	0	6
11	Karnataka	19	10	9	1	10
12	Kerala	16	2	2	0	14
13	Madhya Pradesh	21	25	16	9	5
14	Maharashtra	140	121	110	11	30
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	7	0	0	0	7
20	Punjab	12	9	8	1	4
21	Rajasthan	66	96	64	32	2
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	15	5	2	3	13
24	Telangana	10	16	10	6	0
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	12	1	1	0	11
27	Uttar Pradesh	12	2	1	1	11
28	West Bengal	0	0	0	0	0
29	A& N Islands	0	N App	N App	N App	N App
30	Chandigarh	2	NA	5	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	23	2	4	*	19
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	1	1	1	0	0
	All India/Total	466	359	274	93	195

Notes:

NA: Not Available. N App: Not Applicable

*: Surplus

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Community Health Centre as per IPHS norms

Table 58.

PHARMACISTS at PHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	243	0	0	0	243
2	Arunachal Pradesh	5	NA	6	NA	*
3	Assam	56	36	60	*	*
4	Bihar	325	223	94	129	231
5	Chhattisgarh	45	38	34	4	11
6	Goa	4	5	5	0	*
7	Gujarat	318	643	291	352	27
8	Haryana	100	100	98	2	2
9	Himachal Pradesh	24	8	10	*	14
10	Jharkhand	60	12	3	9	57
11	Karnataka	358	292	300	*	58
12	Kerala	148	123	118	5	30
13	Madhya Pradesh	277	103	24	79	253
14	Maharashtra	846	665	635	30	211
15	Manipur	8	5	3	2	5
16	Meghalaya	24	10	26	*	*
17	Mizoram	8	NA	8	NA	0
18	Nagaland	7	6	6	0	1
19	Odisha	89	32	83	*	6
20	Punjab	100	114	102	12	*
21	Rajasthan	383	178	82	96	301
22	Sikkim	1	NA	NA	NA	NA
23	Tamil Nadu	464	416	392	24	72
24	Telangana	249	223	186	37	63
25	Tripura	5	N App	5	N App	0
26	Uttarakhand	38	149	34	115	4
27	Uttar Pradesh	593	530	487	43	106
28	West Bengal	456	456	357	99	99
29	Andaman & Nicobar Islands	5	1	4	*	1
30	Chandigarh	48	47	79	*	*
31	Dadra & Nagar Haveli and Daman & Diu	3	2	3	*	0
32	Delhi	541	745	803	*	*
33	Jammu & Kashmir	49	103	102	1	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	18	19	*	*
	All India/Total	5895	5283	4459	1039	1795

Notes: NA: Not Available.

N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per each Primary Health Centre as per IPHS norms

Table 59.

PHARMACISTS at CHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	57	91	72	19	*
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	2	NA	5	NA	*
4	Bihar	7	13	4	9	3
5	Chhattisgarh	4	2	2	0	2
6	Goa	0	N App	N App	N App	N App
7	Gujarat	14	0	0	0	14
8	Haryana	13	23	24	*	*
9	Himachal Pradesh	7	7	1	6	6
10	Jharkhand	6	12	3	9	3
11	Karnataka	19	23	24	*	*
12	Kerala	16	19	19	0	*
13	Madhya Pradesh	21	42	41	1	*
14	Maharashtra	140	303	290	13	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	7	9	9	0	*
20	Punjab	12	18	13	5	*
21	Rajasthan	66	66	61	5	5
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	15	13	11	2	4
24	Telangana	10	22	8	14	2
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	12	12	6	6	6
27	Uttar Pradesh	12	11	11	0	1
28	West Bengal	0	0	0	0	0
29	A & N Islands	0	N App	N App	N App	N App
30	Chandigarh	2	NA	13	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	23	22	26	*	*
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	1	3	3	0	*
	All India/Total	466	711	646	89	46

Notes:

NA: Not Available. N App: Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per each Community Health Centre as per IPHS norms

Table 60.

LABORATORY TECHNICIANS at PHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	243	243	243	0	0
2	Arunachal Pradesh	5	NA	19	NA	*
3	Assam	56	30	54	*	2
4	Bihar	325	150	69	81	256
5	Chhattisgarh	45	52	45	7	0
6	Goa	4	5	7	*	*
7	Gujarat	318	666	290	376	28
8	Haryana	100	99	97	2	3
9	Himachal Pradesh	24	1	0	1	24
10	Jharkhand	60	57	40	17	20
11	Karnataka	358	286	319	*	39
12	Kerala	148	89	75	14	73
13	Madhya Pradesh	277	124	35	89	242
14	Maharashtra	846	532	520	12	326
15	Manipur	8	4	3	1	5
16	Meghalaya	24	7	19	*	5
17	Mizoram	8	NA	10	NA	*
18	Nagaland	7	6	6	0	1
19	Odisha	89	28	71	*	18
20	Punjab	100	94	77	17	23
21	Rajasthan	383	186	93	93	290
22	Sikkim	1	1	1	0	0
23	Tamil Nadu	464	414	407	7	57
24	Telangana	249	215	195	20	54
25	Tripura	5	N App	5	N App	0
26	Uttarakhand	38	38	28	10	10
27	Uttar Pradesh	593	593	519	74	74
28	West Bengal	456	456	307	149	149
29	Andaman & Nicobar Islands	5	1	3	*	2
30	Chandigarh	48	0	19	*	29
31	Dadra & Nagar Haveli and Daman & Diu	3	1	2	*	1
32	Delhi	541	297	368	*	173
33	Jammu & Kashmir	49	51	50	1	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	15	13	2	2
	All India/Total	5895	4741	4009	973	1906

Notes: NA: Not Available. N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States /UTs

¹ One per each Primary Health Centre as per IPHS norms

Table 61.

LABORATORY TECHNICIANS at CHCs in Urban Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	57	66	64	2	*
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	2	3	6	*	*
4	Bihar	7	5	3	2	4
5	Chhattisgarh	4	3	3	0	1
6	Goa	0	N App	N App	N App	N App
7	Gujarat	14	0	0	0	14
8	Haryana	13	22	23	*	*
9	Himachal Pradesh	7	7	1	6	6
10	Jharkhand	6	12	4	8	2
11	Karnataka	19	19	28	*	*
12	Kerala	16	16	16	0	0
13	Madhya Pradesh	21	42	38	4	*
14	Maharashtra	140	311	307	4	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	7	3	5	*	2
20	Punjab	12	16	19	*	*
21	Rajasthan	66	148	96	52	*
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	15	17	19	*	*
24	Telangana	10	23	12	11	*
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	12	12	6	6	6
27	Uttar Pradesh	12	16	16	0	*
28	West Bengal	0	0	0	0	0
29	A& N Islands	0	N App	N App	N App	N App
30	Chandigarh	2	NA	15	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	23	19	23	*	0
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	1	1	1	0	0
	All India/Total	466	761	705	95	35

Notes:

NA: Not Available. N App: Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States /UTs

¹ One per each Community Health Centre as per IPHS norms

Table 62.

NURSING STAFF (STAFF NURSE) at PHCs Urban Areas						
(As on 31st March, 2020)						
S. No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	243	243	243	0	0
2	Arunachal Pradesh	5	NA	26	NA	*
3	Assam	56	61	99	*	*
4	Bihar	325	381	196	185	129
5	Chhattisgarh	45	138	138	0	*
6	Goa	4	9	12	*	*
7	Gujarat	318	516	359	157	*
8	Haryana	100	118	106	12	*
9	Himachal Pradesh	24	NA	6	NA	18
10	Jharkhand	60	116	46	70	14
11	Karnataka	358	498	584	*	*
12	Kerala	148	232	219	13	*
13	Madhya Pradesh	277	610	138	472	139
14	Maharashtra	846	1649	1469	180	*
15	Manipur	8	9	15	*	*
16	Meghalaya	24	7	18	*	6
17	Mizoram	8	NA	25	NA	*
18	Nagaland	7	14	14	0	*
19	Odisha	89	8	142	*	*
20	Punjab	100	258	191	67	*
21	Rajasthan	383	383	230	153	153
22	Sikkim	1	3	3	0	*
23	Tamil Nadu	464	1293	1108	185	*
24	Telangana	249	442	385	57	*
25	Tripura	5	NA	0	NA	5
26	Uttarakhand	38	36	36	0	2
27	Uttar Pradesh	593	892	857	35	*
28	West Bengal	456	456	172	284	284
29	Andaman & Nicobar Islands	5	1	4	*	1
30	Chandigarh	48	3	13	*	35
31	Dadra & Nagar Haveli and Daman & Diu	3	6	10	*	*
32	Delhi	541	1234	1412	*	*
33	Jammu & Kashmir	49	105	100	5	*
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	15	63	68	*	*
	All India/Total	5895	9784	8444	1875	786

Notes: NA: Not Available. N App - Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ One per Primary Health Centre as per IPHS norms

Table 63.

NURSING STAFF at CHCs in Urban Areas						
S. No.	State/UT	(As on 31st March, 2019)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	399	595	524	71	*
2	Arunachal Pradesh	0	N App	N App	N App	N App
3	Assam	14	NA	52	NA	*
4	Bihar	49	19	12	7	37
5	Chhattisgarh	28	20	12	8	16
6	Goa	0	N App	N App	N App	N App
7	Gujarat	98	269	86	183	12
8	Haryana	91	216	163	53	*
9	Himachal Pradesh	49	15	5	10	44
10	Jharkhand	42	24	4	20	38
11	Karnataka	133	196	184	12	*
12	Kerala	112	35	34	1	78
13	Madhya Pradesh	147	189	239	*	*
14	Maharashtra	980	3044	2929	115	*
15	Manipur	0	N App	N App	N App	N App
16	Meghalaya	0	N App	N App	N App	N App
17	Mizoram	0	N App	N App	N App	N App
18	Nagaland	0	N App	N App	N App	N App
19	Odisha	49	9	24	*	25
20	Punjab	84	100	108	*	*
21	Rajasthan	462	907	740	167	*
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	105	130	163	*	*
24	Telangana	70	197	113	84	*
25	Tripura	0	N App	N App	N App	N App
26	Uttarakhand	84	36	24	12	60
27	Uttar Pradesh	84	98	98	0	*
28	West Bengal	0	0	0	0	0
29	A& N Islands	0	N App	N App	N App	N App
30	Chandigarh	14	NA	72	NA	*
31	D & N Haveli and Daman & Diu	0	N App	N App	N App	N App
32	Delhi	161	301	282	19	*
33	Jammu & Kashmir	0	N App	N App	N App	N App
34	Ladakh	0	N App	N App	N App	N App
35	Lakshadweep	0	N App	N App	N App	N App
36	Puducherry	7	12	12	0	*
	All India²/ Total	3262	6412	5880	762	310

Notes:

NA: Not Available. N App: Not Applicable

*: Surplus.

All India figures for Vacancy and Shortfall are the totals of State-wise Vacancy and Shortfall ignoring surplus in some States / UTs

¹ Seven per Community Health Centre as per IPHS norms

SECTION VIII
RURAL HEALTHCARE - SOME
PARAMETERS OF ACHIEVEMENT

Table 64.

CLASSIFICATION OF STATES/UTs ACCORDING TO AVERAGE RURAL POPULATION COVERED BY A SUB CENTRE				
(As on 31st March, 2020)				
S. No.	Population Covered [Range]	Number of States/UTs	Name of States/UTs	Average Rural Population covered [mid-year population as on 1st July 2020]
1	Less than 3000	9	Lakshadweep	273
			Ladakh	882
			Mizoram	1,768
			Andaman & Nicobar Islands	1,847
			Goa	1,931
			Kerala	1,992
			Dadra & Nagar Haveli and Daman & Diu	2,447
			Sikkim	2,578
			Tripura	2,669
2	3000-5000	12	Himachal Pradesh	3,159
			Nagaland	3,197
			Arunachal Pradesh	3,205
			Jammu & Kashmir	3,788
			Gujarat	3,971
			Uttarakhand	4,020
			Karnataka	4,116
			Chhattisgarh	4,142
			Tamil Nadu	4,153
			Telangana	4,300
			Rajasthan	4,302
			Andhra Pradesh	4,606
3	5000-7000	9	Manipur	5,132
			Odisha	5,551
			Madhya Pradesh	5,840
			Meghalaya	5,893
			Punjab	6,050
			Maharashtra	6,063
			West Bengal	6,069
			Assam	6,330
			Haryana	6,639
4	7000 and Above	5	Jharkhand	7,358
			Uttar Pradesh	8,413
			Puducherry	8,830
			Bihar	11,763
			Delhi	12,333
	All India	35	All India	5,729

Note: Chandigarh UT has no Rural area

Table 65.

CLASSIFICATION OF STATES/UTs ACCORDING TO AVERAGE RURAL POPULATION COVERED BY A PRIMARY HEALTH CENTRE				
(As on 31st March, 2020)				
S. No.	Population Covered [Range]	Number of States/UTs	Name of States/UTs	Average Rural Population covered [mid-year population as on 1st July 2020]
1	Less than 10000	6	Lakshadweep	750
			Ladakh	6,563
			Goa	7,655
			Arunachal Pradesh	9,588
			Mizoram	9,649
			Nagaland	9,715
2	10000-20000	7	Jammu & Kashmir	10,138
			Andaman & Nicobar Islands	10,409
			Himachal Pradesh	11,716
			Kerala	13,746
			Sikkim	15,792
			Karnataka	17,378
			Puducherry	19,500
3	20000-30000	11	Meghalaya	21,790
			Dadra & Nagar Haveli and Daman & Diu	23,000
			Tripura	24,075
			Gujarat	24,631
			Manipur	25,235
			Tamil Nadu	25,480
			Chhattisgarh	27,218
			Rajasthan	27,691
			Uttarakhand	28,767
			Odisha	28,822
			Delhi	29,600
4	30000-40000	4	Andhra Pradesh	29,996
			Assam	31,175
			Telangana	32,077
			Maharashtra	35,295
5	40000-50000	3	Punjab	41,799
			Haryana	45,127
			Madhya Pradesh	49,807
6	Above 50000	4	Uttar Pradesh	60,696
			Bihar	62,977
			West Bengal	68,843
			Jharkhand	97,296
	All India	35	All India	35,730

Note: Chandigarh UT has no Rural area

Table 66.

CLASSIFICATION OF STATES/UTs ACCORDING TO AVERAGE RURAL POPULATION COVERED BY A COMMUNITY HEALTH CENTRE				
(As on 31st March, 2020)				
S. No.	Population Covered [Range]	Number of States/UTs	Name of States/UTs	Average Rural Population covered [mid-year population as on 1st July 2020]
1	Less than 1 lakh	13	Lakshadweep	1,000
			Arunachal Pradesh	19,017
			Ladakh	30,000
			Kerala	51,076
			Andaman & Nicobar Islands	57,250
			Dadra & Nagar Haveli and Daman & Diu	57,500
			Nagaland	60,143
			Mizoram	61,111
			Goa	70,167
			Himachal Pradesh	77,741
			Meghalaya	92,607
			Tamil Nadu	93,979
			Odisha	98,469
2	1 - 2 lakhs	16	Gujarat	1,04,540
			Rajasthan	1,05,814
			Tripura	1,17,091
			Jammu & Kashmir	1,21,519
			Punjab	1,24,811
			Manipur	1,26,176
			Chhattisgarh	1,26,806
			Uttarakhand	1,32,018
			Haryana	1,47,237
			Assam	1,55,221
			Puducherry	1,56,000
			Jharkhand	1,65,573
			West Bengal	1,80,615
			Sikkim	1,89,500
Madhya Pradesh	1,93,262			
2	2 - 5 lakhs	5	Karnataka	2,00,079
			Maharashtra	2,32,212
			Telangana	2,40,012
			Andhra Pradesh	2,42,950
			Uttar Pradesh	2,45,857
3	5 lakhs and above	1	Bihar	18,80,474
	All India	33	All India	1,71,779

Notes:

No CHC functioning in Delhi under rural areas

Chandigarh UT has no Rural area

Table 67.

AVERAGE RURAL POPULATION COVERED by SCs, PHCs and CHCs				
(As on 31st March, 2020)				
S. No.	State/UT	Average Rural Population [mid-year population as on 1st July 2020]		
		covered by a		
		Sub Centre	PHC	CHC
1	Andhra Pradesh	4,606	29,996	2,42,950
2	Arunachal Pradesh	3,205	9,588	19,017
3	Assam	6,330	31,175	1,55,221
4	Bihar	11,763	62,977	18,80,474
5	Chhattisgarh	4,142	27,218	1,26,806
6	Goa	1,931	7,655	70,167
7	Gujarat	3,971	24,631	1,04,540
8	Haryana	6,639	45,127	1,47,237
9	Himachal Pradesh	3,159	11,716	77,741
10	Jharkhand	7,358	97,296	1,65,573
11	Karnataka	4,116	17,378	2,00,079
12	Kerala	1,992	13,746	51,076
13	Madhya Pradesh	5,840	49,807	1,93,262
14	Maharashtra	6,063	35,295	2,32,212
15	Manipur	5,132	25,235	1,26,176
16	Meghalaya	5,893	21,790	92,607
17	Mizoram	1,768	9,649	61,111
18	Nagaland	3,197	9,715	60,143
19	Odisha	5,551	28,822	98,469
20	Punjab	6,050	41,799	1,24,811
21	Rajasthan	4,302	27,691	1,05,814
22	Sikkim	2,578	15,792	1,89,500
23	Tamil Nadu	4,153	25,480	93,979
24	Telangana	4,300	32,077	2,40,012
25	Tripura	2,669	24,075	1,17,091
26	Uttarakhand	4,020	28,767	1,32,018
27	Uttar Pradesh	8,413	60,696	2,45,857
28	West Bengal	6,069	68,843	1,80,615
29	Andaman & Nicobar Islands	1,847	10,409	57,250
30	Chandigarh	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2,447	23,000	57,500
32	Delhi	12,333	29,600	N App
33	Jammu & Kashmir	3,788	10,138	1,21,519
34	Ladakh	882	6,563	30,000
35	Lakshadweep	273	750	1,000
36	Puducherry	8,830	19,500	1,56,000
	All India	5,729	35,730	1,71,779

Notes:

No CHC functioning in Delhi under rural areas

Chandigarh UT has no Rural area

N App: Not applicable

Table 68.

AVERAGE RURAL AREA AND RADIAL DISTANCE COVERED BY HEALTH FACILITIES							
(As on 31st March, 2020)							
S. No.	State/UT	Average Rural Area [Sq. Km.]			Average Radial Distance [Kms]		
		covered by a			covered by a		
		Sub Centre	PHC	CHC	Sub Centre	PHC	CHC
1	Andhra Pradesh	21.36	139.10	1126.64	2.61	6.65	18.93
2	Arunachal Pradesh	NA	NA	NA	NA	NA	NA
3	Assam	16.57	81.58	406.20	2.30	5.09	11.37
4	Bihar	10.08	53.96	1611.20	1.79	4.14	22.64
5	Chhattisgarh	25.32	166.43	775.35	2.84	7.28	15.71
6	Goa	13.32	52.78	483.86	2.06	4.10	12.41
7	Gujarat	20.61	127.85	542.65	2.56	6.38	13.14
8	Haryana	16.14	109.70	357.93	2.27	5.91	10.67
9	Himachal Pradesh	26.48	98.23	651.79	2.90	5.59	14.40
10	Jharkhand	20.13	266.21	453.02	2.53	9.20	12.01
11	Karnataka	20.22	85.38	982.98	2.54	5.21	17.69
12	Kerala	5.78	39.86	148.12	1.36	3.56	6.87
13	Madhya Pradesh	29.39	250.63	972.51	3.06	8.93	17.59
14	Maharashtra	28.05	163.27	1074.20	2.99	7.21	18.49
15	Manipur	52.98	260.56	1302.79	4.11	9.11	20.36
16	Meghalaya	50.33	186.10	790.93	4.00	7.70	15.86
17	Mizoram	65.90	359.54	2277.11	4.58	10.70	26.92
18	Nagaland	41.36	125.66	777.88	3.63	6.32	15.73
19	Odisha	22.78	118.29	404.13	2.69	6.13	11.34
20	Punjab	16.22	112.05	334.60	2.27	5.97	10.32
21	Rajasthan	24.90	160.27	612.42	2.81	7.14	13.96
22	Sikkim	48.01	294.07	3528.88	3.91	9.67	33.51
23	Tamil Nadu	13.36	81.99	302.41	2.06	5.11	9.81
24	Telangana	20.01	149.29	1117.05	2.52	6.89	18.85
25	Tripura	10.46	94.34	458.82	1.82	5.48	12.08
26	Uttarakhand	28.59	204.60	938.95	3.02	8.07	17.28
27	Uttar Pradesh	11.23	81.03	328.22	1.89	5.08	10.22
28	West Bengal	8.07	91.60	240.32	1.60	5.40	8.74
29	Andaman & Nicobar Islands	66.22	373.23	2052.77	4.59	10.90	25.56
30	Chandigarh	N App	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	5.34	50.17	125.42	1.30	4.00	6.32
32	Delhi	27.20	65.29	N App	2.94	4.56	N App
33	Jammu & Kashmir	65.52	175.35	2101.87	4.57	7.47	25.86
34	Ladakh	248.51	1848.31	8449.43	8.89	24.25	51.85
35	Lakshadweep	0.73	2.01	2.68	0.48	0.80	0.92
36	Puducherry	6.33	13.98	111.81	1.42	2.11	5.96
	All India	19.87	123.93	595.82	2.51	6.28	13.77

Notes:

NA: Not Available.

N App: Not Applicable

No CHC functioning in Delhi

There is no rural area in Chandigarh.

Table 69.

AVERAGE NUMBER OF VILLAGES COVERED BY A SC, PHC & CHC AND NUMBER OF SCs PER PHC AND NUMBER OF PHCs PER CHC in Rural areas						
(As on 31st March, 2020)						
S. No.	State/UT	Average Number of Villages covered by a			Number of SCs per PHCs	Number of PHCs per CHC
		SC	PHC	CHC		
1	Andhra Pradesh	2	16	127	7	8
2	Arunachal Pradesh	16	47	92	3	2
3	Assam	6	30	147	5	5
4	Bihar	5	27	797	5	30
5	Chhattisgarh	4	26	121	7	5
6	Goa	2	7	68	4	9
7	Gujarat	2	13	55	6	4
8	Haryana	3	20	65	7	3
9	Himachal Pradesh	10	38	249	4	7
10	Jharkhand	9	112	191	13	2
11	Karnataka	4	16	182	4	12
12	Kerala	0	2	8	7	4
13	Madhya Pradesh	5	47	181	9	4
14	Maharashtra	4	24	160	6	7
15	Manipur	9	46	231	5	5
16	Meghalaya	16	59	249	4	4
17	Mizoram	3	15	96	5	6
18	Nagaland	4	13	77	3	6
19	Odisha	8	40	138	5	3
20	Punjab	4	30	91	7	3
21	Rajasthan	3	22	85	6	4
22	Sikkim	3	19	227	6	12
23	Tamil Nadu	2	13	48	6	4
24	Telangana	2	18	132	7	7
25	Tripura	1	8	41	9	5
26	Uttarakhand	9	66	305	7	5
27	Uttar Pradesh	5	37	151	7	4
28	West Bengal	4	45	118	11	3
29	Andaman & Nicobar Islands	5	25	140	6	6
30	Chandigarh	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	1	10	25	9	3
32	Delhi	19	44	N App	2	N App
33	Jammu & Kashmir	3	7	89	3	12
34	Ladakh	1	8	35	7	5
35	Lakshadweep	2	7	9	3	1
36	Puducherry	2	5	42	2	8
	All India	4	27	128	6	5

Notes:

*N App: Not Applicable**Number of villages as per the numbers available in the LGD portal*

Table 70.

AVERAGE NUMBER OF HW PER HEALTH ASSISTANT AND AVERAGE RURAL POPULATION COVERED BY A HW AT SUB-CENTERS and PHCs					
S No.	State/UT	(As on 31st March, 2020)			
		Number in Position		Number of Health Worker per Health Assistant	Average Rural Population [mid-year population as on 1st July 2020] covered by an Health Worker at SC & PHC
		Health Worker at SCs	Health Assistant at PHCs		
1	Andhra Pradesh	18675	0	NA	2176
2	Arunachal Pradesh	565	78	7	2423
3	Assam	10213	126	81	3424
4	Bihar	13645	167	82	6846
5	Chhattisgarh	9031	191	47	3641
6	Goa	350	2	175	1213
7	Gujarat	16037	2233	7	3803
8	Haryana	5643	206	27	3832
9	Himachal Pradesh	2232	34	66	3971
10	Jharkhand	7180	21	342	4711
11	Karnataka	11121	2914	4	2828
12	Kerala	9174	NA	NA	1821
13	Madhya Pradesh	11270	764	15	4941
14	Maharashtra	18507	3005	6	5042
15	Manipur	993	22	45	2141
16	Meghalaya	967	140	7	2491
17	Mizoram	560	0	NA	1590
18	Nagaland	848	40	21	1403
19	Odisha	11468	0	NA	4132
20	Punjab	5974	100	60	4820
21	Rajasthan	12983	1077	12	3887
22	Sikkim	296	22	13	1414
23	Tamil Nadu	10745	633	17	3450
24	Telangana	9165	0	NA	2568
25	Tripura	1324	0	NA	3772
26	Uttarakhand	1855	0	NA	3685
27	Uttar Pradesh	22290	475	47	7410
28	West Bengal	18882	0	NA	3381
29	Andaman & Nicobar Islands	177	2	89	1279
30	Chandigarh	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	212	1	212	1565
32	Delhi	13	15	NA	4353
33	Jammu & Kashmir	4659	138	34	2074
34	Ladakh	426	1	426	533
35	Lakshadweep	20	4	5	75
36	Puducherry	52	38	1	3933
	All India	237552	12449	19	4188

Notes:

*Health Worker: Male + Female**Health Assistant: Male + Female**NA: Not Available*

Table 71.

PHCs with AYUSH FACILITY (As on 31st March 2020)					
S.No.	State	Rural		Urban	
		No. of Rural PHCs functioning	No. of rural PHCs with AYUSH Facility	No. of Urban PHCs functioning	No. of urban PHCs with AYUSH Facility
1	Andhra Pradesh	7437	440	1142	71
2	Arunachal Pradesh	356	42	119	4
3	Assam	4659	445	946	7
4	Bihar	9112	952	1702	125
5	Chhattisgarh	5205	386	792	17
6	Goa	218	24	55	3
7	Gujarat	9162	1073	1477	154
8	Haryana	2617	143	385	14
9	Himachal Pradesh	2092	121	564	2
10	Jharkhand	3848	120	291	6
11	Karnataka	9188	1033	2176	97
12	Kerala	5410	276	784	22
13	Madhya Pradesh	10226	744	1199	58
14	Maharashtra	10647	1107	1829	109
15	Manipur	418	56	85	3
16	Meghalaya	440	72	119	1
17	Mizoram	311	9	57	0
18	Nagaland	395	10	130	0
19	Odisha	6688	1009	1288	19
20	Punjab	2950	258	427	24
21	Rajasthan	13480	971	2094	32
22	Sikkim	147	9	24	1
23	Tamil Nadu	8713	571	1420	69
24	Telangana	4744	368	636	36
25	Tripura	965	75	107	5
26	Uttarakhand	1839	112	257	1
27	Uttar Pradesh	20778	1395	2880	38
28	West Bengal	10357	269	913	37
29	Andaman & Nicobar Islands	124	18	22	1
30	Chandigarh	0	N App	0	17
31	Dadra & Nagar Haveli and Daman & Diu	94	9	10	0
32	Delhi	12	0	5	150
33	Jammu & Kashmir	2470	485	923	13
34	Ladakh	238	3	32	N App
35	Lakshadweep	11	4	4	N App
36	Puducherry	53	25	24	14
	All India/Total	155404	12634	24918	1150

Note:

N App: Not Applicable

SECTION IX
HEALTH INFRASTRUCTURE & MANPOWER
TRIBAL AREAS

Table 72.

NUMBER OF SUB-CENTRES, PHCs & CHCs FUNCTIONING in Tribal Areas				
S. No.	State/UT	(As on 31st March 2020)		
		Sub centre	PHCs	CHCs
1	Andhra Pradesh	816	158	21
2	Arunachal Pradesh #	363	124	60
3	Assam	786	185	32
4	Bihar	232	33	0
5	Chhattisgarh	2817	399	89
6	Goa *	N App	N App	N App
7	Gujarat	2757	424	94
8	Haryana *	N App	N App	N App
9	Himachal Pradesh	105	47	8
10	Jharkhand	2462	175	103
11	Karnataka	291	65	7
12	Kerala	272	150	35
13	Madhya Pradesh	2999	320	86
14	Maharashtra	2562	397	64
15	Manipur	232	44	6
16	Meghalaya #	444	111	26
17	Mizoram #	368	65	9
18	Nagaland #	415	137	21
19	Odisha	2701	444	134
20	Punjab *	N App	N App	N App
21	Rajasthan	2970	197	65
22	Sikkim	58	12	0
23	Tamil Nadu	543	94	21
24	Telangana	1489	202	19
25	Tripura	439	46	8
26	Uttarakhand	146	7	5
27	Uttar Pradesh *	N App	N App	N App
28	West Bengal	2889	283	105
29	A & N Islands	37	4	1
30	Chandigarh *	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	76	9	2
32	Delhi *	N App	N App	N App
33	Jammu & Kashmir	227	35	4
34	Ladakh #	238	32	7
35	Lakshadweep #	11	4	3
36	Puducherry *	N App	N App	N App
All India		29745	4203	1035

Notes:

N App - Not applicable

#: States are predominantly tribal areas

*: State / UT has no separate Tribal Area / Population

Table 73.

REQUIREMENT AND SHORTFALL OF SUB CENTRES, PHCs & CHCs IN TRIBAL AREAS											
S.No.	State/ UT	(As on 31st March, 2020)									
		Estimated mid-year Tribal Population on 1st July 2020 in Rural Areas	Sub Centres			PHCs			CHCs		
			R	P	S	R	P	S	R	P	S
1	Andhra Pradesh	2258788	752	816	**	112	158	**	28	21	7
2	Arunachal Pradesh#	845133	281	363	**	42	124	**	10	60	**
3	Assam	4032528	1344	786	558	201	185	16	50	32	18
4	Bihar	1475163	491	232	259	73	33	40	18	0	18
5	Chhattisgarh	7949854	2649	2817	**	397	399	**	99	89	10
6	Goa ⁽¹⁾	66873	22	N App	N App	3	N App	N App	0	N App	N App
7	Gujarat	8411532	2803	2757	46	420	424	**	105	94	11
8	Haryana *	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
9	Himachal Pradesh	400577	133	105	28	20	47	**	5	8	**
10	Jharkhand	8891251	2963	2462	501	444	175	269	111	103	8
11	Karnataka	3461432	1153	291	862	173	65	108	43	7	36
12	Kerala	267151	89	272	**	13	150	**	3	35	**
13	Madhya Pradesh	16222003	5407	2999	2408	811	320	491	202	86	116
14	Maharashtra	9444840	3148	2562	586	472	397	75	118	64	54
15	Manipur	839400	279	232	47	41	44	**	10	6	4
16	Meghalaya #	2336538	778	444	334	116	111	5	29	26	3
17	Mizoram #	531192	177	368	**	26	65	**	6	9	**
18	Nagaland #	1172642	390	415	**	58	137	**	14	21	**
19	Odisha	9548607	3182	2701	481	477	444	33	119	134	**
20	Punjab *	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
21	Rajasthan	9787883	3262	2970	292	489	197	292	122	65	57
22	Sikkim	138618	46	58	**	6	12	**	1	0	1
23	Tamil Nadu	641701	213	543	**	32	94	**	8	21	**
24	Telangana	2777773	925	1489	**	138	202	**	34	19	15
25	Tripura	1061341	353	439	**	53	46	7	13	8	5
26	Uttarakhand	278218	92	146	**	13	7	6	3	5	**
27	Uttar Pradesh *	1160439	386	N App	N App	58	N App	N App	14	N App	N App
28	West Bengal	4907496	1635	2889	**	245	283	**	61	105	**
29	A&N Islands ⁽¹⁾	25803	8	37	**	1	4	**	0	1	**
30	Chandigarh *	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	149753	49	76	**	7	9	**	1	2	**
32	Delhi *	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
33	Jammu & Kashmir	1281909	427	227	200	64	35	29	16	4	12
34	Ladakh #	210000	70	238	**	10	32	**	2	7	**
35	Lakshadweep ⁽¹⁾	2856	0	11	**	0	4	**	0	3	**
36	Puducherry *	N App	N App	N App	N App	N App	N App	N App	N App	N App	N App
All India/Total		100579297	33507	29745	6602	5015	4203	1371	1245	1035	375

Notes:

N App - Not applicable

N A - Data not available

The requirement is calculated using the prescribed norms on the basis of Tribal population. All India shortfall is derived by adding state-wise figures of shortfall ignoring the existing surplus in some of the states. Mid year Tribal population for the year 2020 calculated based on the percentages of Tribal population in the Rural areas in Census 2011

R: Required; P: In Position; S: Shortfall; **: Surplus; *: State / UT has no separate Tribal Area / Population;

#: States are predominantly tribal areas

⁽¹⁾ The population is less than the norm (CHC) of 80,000.

Table 74.

BUILDING POSITION OF SUB CENTRES IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Total Number of Sub Centres functioning	Sub Centres functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat/ Vol. Society Buildings	
1	Andhra Pradesh	816	379	410	27	437
2	Arunachal Pradesh #	363	286	14	63	77
3	Assam	786	586	98	102	200
4	Bihar	232	147	64	21	85
5	Chhattisgarh	2817	2216	312	289	601
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	2757	1828	443	486	929
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	105	82	9	14	23
10	Jharkhand	2462	1388	372	702	1074
11	Karnataka	291	156	48	87	135
12	Kerala	272	209	15	48	63
13	Madhya Pradesh	2999	2328	149	522	671
14	Maharashtra	2562	2352	210	0	210
15	Manipur	232	171	12	49	61
16	Meghalaya #	444	417	25	2	27
17	Mizoram #	368	357	11	0	11
18	Nagaland #	415	324	3	88	91
19	Odisha	2701	2312	357	32	389
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	2970	2210	314	446	760
22	Sikkim	58	56	2	0	2
23	Tamil Nadu	543	373	162	8	170
24	Telangana	1489	552	832	105	937
25	Tripura	439	363	14	62	76
26	Uttarakhand	146	112	8	26	34
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	2889	2183	398	308	706
29	A & N Islands	37	36	0	1	1
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	76	54	10	12	22
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	227	74	153	0	153
34	Ladakh #	238	210	28	0	28
35	Lakshadweep #	11	10	0	1	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

N App: Not applicable.

*: State / UT has no separate Tribal Area / Population

#: States are predominantly tribal areas

¹ Required Number = Total functioning - Govt. Buildings (ignoring excess)

Table 75.

BUILDING POSITION OF PHCs IN TRIBAL AREAS						
S.NO.	State/UT	(As on 31st March, 2020)				
		Total Number of PHCs functioning	PHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat/ Vol. Society Buildings	
1	Andhra Pradesh	158	143	4	11	15
2	Arunachal Pradesh #	124	106	0	18	18
3	Assam	185	177	3	5	8
4	Bihar	33	17	4	12	16
5	Chhattisgarh	399	365	33	1	34
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	320	50	54	104
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	38	2	9	9
10	Jharkhand	175	103	23	49	72
11	Karnataka	65	58	3	4	7
12	Kerala	150	138	0	12	12
13	Madhya Pradesh	320	309	9	2	11
14	Maharashtra	397	359	14	24	38
15	Manipur	44	39	1	4	5
16	Meghalaya #	111	114	0	0	0
17	Mizoram #	65	59	6	0	6
18	Nagaland #	137	128	2	7	9
19	Odisha	444	425	2	17	19
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	156	10	31	41
22	Sikkim	12	12	0	0	0
23	Tamil Nadu	94	83	6	5	11
24	Telangana	202	185	14	3	17
25	Tripura	46	45	0	1	1
26	Uttarakhand	7	5	1	1	2
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	283	280	3	0	3
29	A & N Islands	4	4	0	0	0
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	8	0	1	1
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	35	0	0	0
34	Ladakh #	32	6	0	0	26
35	Lakshadweep #	4	4	0	0	0
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

#: States with predominantly tribal areas

¹ Required Number = Total functioning - Govt. Buildings (ignoring excess)

Table 76.

BUILDING POSITION OF CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Total Number of CHCs functioning	CHCs functioning in			Buildings required ¹ to be constructed
			Govt. Buildings	Rented Buildings	Rent Free Panchayat/ Vol. Society Buildings	
1	Andhra Pradesh	21	21	0	0	0
2	Arunachal Pradesh #	60	60	0	0	0
3	Assam	32	32	0	0	0
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	89	0	0	0
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	85	0	9	9
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	8	0	0	0
10	Jharkhand	103	103	0	0	0
11	Karnataka	7	7	0	0	0
12	Kerala	35	35	0	0	0
13	Madhya Pradesh	86	86	0	0	0
14	Maharashtra	64	62	2	0	2
15	Manipur	6	6	0	0	0
16	Meghalaya #	26	26	0	0	0
17	Mizoram #	9	9	0	9	0
18	Nagaland #	21	21	0	0	0
19	Odisha	134	134	0	0	0
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	63	2	0	2
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	21	0	0	0
24	Telangana	19	19	0	0	0
25	Tripura	8	8	0	0	0
26	Uttarakhand	5	5	0	0	0
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	105	105	0	0	0
29	A & N Islands	1	1	0	0	0
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	2	0	0	0
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	4	0	0	0
34	Ladakh #	7	7	0	0	0
35	Lakshadweep #	3	3	0	0	0
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

#: States with predominantly tribal areas

¹ Required Number = Total functioning - Govt. Buildings (ignoring excess)

Table 77.

HEALTH WORKER [F] / ANM AT SUB CENTRE IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	816	1504	1421	83	**
2	Arunachal Pradesh #	363	135	437	**	**
3	Assam	786	679	1163	**	**
4	Bihar	232	219	106	113	126
5	Chhattisgarh	2817	3403	3111	292	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	2757	2502	2349	153	408
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	105	88	59	29	46
10	Jharkhand	2462	2005	2894	**	**
11	Karnataka	291	290	205	85	86
12	Kerala	272	267	251	16	21
13	Madhya Pradesh	2999	3512	2539	973	460
14	Maharashtra	2562	2922	2720	202	**
15	Manipur	232	178	322	**	**
16	Meghalaya #	444	375	757	**	**
17	Mizoram #	368	41	474	**	**
18	Nagaland #	415	206	717	**	**
19	Odisha	2701	2885	2872	13	**
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	2970	3211	2805	406	165
22	Sikkim	58	66	64	2	**
23	Tamil Nadu	543	524	455	69	88
24	Telangana	1489	2656	2235	421	**
25	Tripura	439	43	224	**	215
26	Uttarakhand	146	78	93	**	53
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	2889	4817	4744	73	**
29	A & N Islands	37	44	41	3	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	76	102	102	0	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	227	395	347	48	**
34	Ladakh #	238	337	381	**	**
35	Lakshadweep #	11	10	10	0	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

*N App - Not applicable***: State / UT has no separate Tribal Area / Population**** Surplus.**# States with predominantly tribal areas**¹ One per Sub Centre as per IPHS norms*

Table 78.

HEALTH WORKER [F] / ANM AT PHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	158	502	449	53	**
2	Arunachal Pradesh #	124	40	115	**	9
3	Assam	185	189	215	**	**
4	Bihar	33	22	12	10	21
5	Chhattisgarh	399	442	701	**	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	2095	1931	164	**
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	5	9	**	38
10	Jharkhand	175	167	228	**	**
11	Karnataka	65	297	204	93	**
12	Kerala	150	743	691	52	**
13	Madhya Pradesh	320	626	575	51	**
14	Maharashtra	397	274	188	86	209
15	Manipur	44	46	111	**	**
16	Meghalaya #	111	102	266	**	**
17	Mizoram #	65	1	57	**	8
18	Nagaland #	137	60	223	**	**
19	Odisha	444	344	319	25	125
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	223	195	28	2
22	Sikkim	12	24	36	**	**
23	Tamil Nadu	94	275	240	35	**
24	Telangana	202	854	727	127	**
25	Tripura	46	NA	30	NA	16
26	Uttarakhand	7	3	0	3	7
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	283	112	153	**	130
29	A & N Islands	4	9	8	1	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	28	29	**	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	34	20	14	15
34	Ladakh #	32	10	13	**	19
35	Lakshadweep #	4	28	28	**	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

*N App - Not applicable***: State / UT has no separate Tribal Area / Population**** Surplus.**# States with predominantly tribal areas**¹ One per PHC as per IPHS norms*

Table 79.

HEALTH WORKER [M] AT SUB CENTRE IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	816	656	569	87	247
2	Arunachal Pradesh #	363	45	210	**	153
3	Assam	786	198	274	**	512
4	Bihar	232	98	12	86	220
5	Chhattisgarh	2817	2584	1842	742	975
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	2757	2462	2171	291	586
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	105	82	41	41	64
10	Jharkhand	2462	854	783	71	1679
11	Karnataka	291	128	44	84	247
12	Kerala	272	234	224	10	48
13	Madhya Pradesh	2999	606	590	16	2409
14	Maharashtra	2562	2471	2028	443	534
15	Manipur	232	78	134	**	98
16	Meghalaya #	444	140	191	**	253
17	Mizoram #	368	29	330	**	38
18	Nagaland #	415	54	153	**	262
19	Odisha	2701	1750	1411	339	1290
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	2970	403	138	265	2832
22	Sikkim	58	47	43	4	15
23	Tamil Nadu	543	326	170	156	373
24	Telangana	1489	870	531	339	958
25	Tripura	439	60	377	**	62
26	Uttarakhand	146	30	19	11	127
27	Uttar Pradesh *	N App	N App	N App	N App	N App
28	West Bengal	2889	2070	373	1697	2516
29	A & N Islands	37	17	11	6	26
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	76	46	62	**	14
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	227	47	45	2	182
34	Ladakh #	238	114	45	69	193
35	Lakshadweep #	11	0	0	0	11
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

*N App - Not applicable***: State / UT has no separate Tribal Area / Population**** Surplus.**# States with predominantly tribal areas**¹ One per Sub Centre as per IPHS norms.*

Table 80.

HEALTH ASSISTANTS AT PHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	316	358	305	53	11
2	Arunachal Pradesh #	248	26	78	**	170
3	Assam	370	53	23	30	347
4	Bihar	66	17	2	15	64
5	Chhattisgarh	798	248	128	120	670
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	848	202	106	96	742
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	94	1	4	**	90
10	Jharkhand	350	53	16	37	334
11	Karnataka	130	101	45	56	85
12	Kerala	300	103	96	7	204
13	Madhya Pradesh	640	163	161	2	479
14	Maharashtra	794	734	643	91	151
15	Manipur	88	6	4	2	84
16	Meghalaya #	222	75	140	**	82
17	Mizoram #	130	NA	5	NA	125
18	Nagaland #	274	15	43	**	231
19	Odisha	888	18	6	12	882
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	394	51	16	35	378
22	Sikkim	24	8	12	**	12
23	Tamil Nadu	188	57	27	30	161
24	Telangana	404	425	273	152	131
25	Tripura	92	2	12	**	80
26	Uttarakhand	14	5	0	5	14
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	566	146	78	68	488
29	A & N Islands	8	1	0	1	8
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	18	1	1	0	17
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	70	10	7	3	63
34	Ladakh #	64	1	1	0	63
35	Lakshadweep #	8	8	8	0	0
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

NA: Data not Available.

** Surplus.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ Two per Primary Health Centre as per IPHS norms

Figures includes data of PHCs and HWC-PHCs at tribal areas

Health Assistant = Health Assistant (Male + Female)

Table 81.

DOCTORS ² AT PHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	158	299	270	29	**
2	Arunachal Pradesh #	124	58	139	**	**
3	Assam	185	231	295	**	**
4	Bihar	33	38	5	33	28
5	Chhattisgarh	399	451	217	234	182
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	603	441	162	**
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	49	39	10	8
10	Jharkhand	175	182	127	55	48
11	Karnataka	65	71	62	9	3
12	Kerala	150	243	227	16	**
13	Madhya Pradesh	320	365	254	111	66
14	Maharashtra	397	774	616	158	**
15	Manipur	44	86	151	**	**
16	Meghalaya #	111	91	162	**	**
17	Mizoram #	65	NA	69	NA	**
18	Nagaland #	137	53	118	**	19
19	Odisha	444	445	484	**	**
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	264	230	34	**
22	Sikkim	12	11	13	**	**
23	Tamil Nadu	94	194	181	13	**
24	Telangana	202	372	277	95	**
25	Tripura	46	4	108	**	**
26	Uttarakhand	7	4	3	1	4
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	283	389	332	57	**
29	A & N Islands	4	8	7	1	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	9	9	0	0
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	51	36	15	**
34	Ladakh #	32	23	10	13	22
35	Lakshadweep #	4	9	21	**	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

NA: Data not Available. ** Surplus. N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Primary Health Centre as per IPHS norms² Allopathic Doctors

Table 82.

AYUSH DOCTORS AT PHCs IN TRIBAL AREAS					
S.No.	State/UT	No. of functioning PHCs	(As on 31st March, 2020)		
			Sanctioned	In Position	Vacant
			[S]	[P]	[S-P]
1	Andhra Pradesh	158	35	21	14
2	Arunachal Pradesh #	124	17	32	**
3	Assam	185	63	61	2
4	Bihar	33	18	11	7
5	Chhattisgarh	399	269	190	79
6	Goa	N App	N App	N App	N App
7	Gujarat	424	346	318	28
8	Haryana *	N App	N App	N App	N App
9	Himachal Pradesh	47	1	1	0
10	Jharkhand	175	44	10	34
11	Karnataka	65	5	10	**
12	Kerala	150	0	0	0
13	Madhya Pradesh	320	55	55	0
14	Maharashtra	397	60	35	25
15	Manipur	44	11	19	**
16	Meghalaya #	111	27	62	**
17	Mizoram #	65	NA	6	NA
18	Nagaland #	137	5	8	**
19	Odisha	444	13	198	**
20	Punjab *	N App	N App	N App	N App
21	Rajasthan	197	60	39	21
22	Sikkim	12	2	1	1
23	Tamil Nadu	94	18	12	6
24	Telangana	202	78	61	17
25	Tripura	46	2	27	**
26	Uttarakhand	7	2	1	1
27	Uttar Pradesh	N App	N App	N App	N App
28	West Bengal	283	46	36	10
29	A & N Islands	4	2	2	0
30	Chandigarh *	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	7	8	**
32	Delhi *	N App	N App	N App	N App
33	Jammu & Kashmir	35	30	31	**
34	Ladakh #	32	6	6	0
35	Lakshadweep #	4	8	8	0
36	Puducherry *	N App	N App	N App	N App

Notes:

NA: Data not Available. ** Surplus.

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

N App - Not applicable

Table 83.

AYUSH DOCTOR (SPECIALIST AYUSH + GDMO AYUSH) AT COMMUNITY HEALTH CENTRES IN TRIBAL AREAS					
S.No.	State/UT	(As on 31st March, 2020)			
		No. of functional CHCs	Sanctioned	In Position	Vacant
		[R]	[S]	[P]	[S-P]
1	Andhra Pradesh	21	9	6	3
2	Arunachal Pradesh #	60	13	49	**
3	Assam	32	15	35	**
4	Bihar	0	N App	N App	N App
5	Chhattisgarh	89	112	64	48
6	Goa	N App	N App	N App	N App
7	Gujarat	94	5	3	2
8	Haryana *	N App	N App	N App	N App
9	Himachal Pradesh	8	1	3	**
10	Jharkhand	103	84	94	**
11	Karnataka	7	NA	1	NA
12	Kerala	35	2	2	0
13	Madhya Pradesh	86	2	2	0
14	Maharashtra	64	56	52	4
15	Manipur	6	2	4	**
16	Meghalaya #	26	8	24	**
17	Mizoram #	9	2	6	**
18	Nagaland #	21	3	21	**
19	Odisha	134	2	75	**
20	Punjab *	N App	N App	N App	N App
21	Rajasthan	65	27	16	11
22	Sikkim	0	N App	N App	N App
23	Tamil Nadu	21	18	16	2
24	Telangana	19	7	7	0
25	Tripura	8	3	7	**
26	Uttarakhand	5	2	2	0
27	Uttar Pradesh	N App	N App	N App	N App
28	West Bengal	105	127	96	31
29	A & N Islands	1	1	NA	NA
30	Chandigarh *	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	4	4	0
32	Delhi *	N App	N App	N App	N App
33	Jammu & Kashmir	4	NA	NA	NA
34	Ladakh #	7	3	0	3
35	Lakshadweep #	3	6	6	0
36	Puducherry *	N App	N App	N App	N App

Notes:

** Surplus NA: Data not Available.

N App - not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

Table 84.

SURGEONS AT CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	9	4	5	17
2	Arunachal Pradesh #	60	1	9	**	51
3	Assam	32	3	0	3	32
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	80	10	70	79
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	46	7	39	87
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	0	0	0	8
10	Jharkhand	103	40	17	23	86
11	Karnataka	7	6	2	4	5
12	Kerala	35	12	6	6	29
13	Madhya Pradesh	86	85	1	84	85
14	Maharashtra	64	21	9	12	55
15	Manipur	6	2	0	2	6
16	Meghalaya #	26	1	1	0	25
17	Mizoram #	9	0	0	0	9
18	Nagaland #	21	0	2	**	19
19	Odisha	134	138	16	122	118
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	51	6	45	59
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	10	9	1	12
24	Telangana	19	13	7	6	12
25	Tripura	8	4	4	0	4
26	Uttarakhand	5	2	1	1	4
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	25	2	23	103
29	A & N Islands	1	NA	NA	NA	NA
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	0	0	0	2
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	4	2	2	2
34	Ladakh #	7	3	1	2	6
35	Lakshadweep #	3	2	2	0	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

NA: Data not Available. ** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 85.

OBSTETRICIANS & GYNAECOLOGISTS AT CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	19	13	6	8
2	Arunachal Pradesh #	60	1	3	**	57
3	Assam	32	3	3	0	29
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	78	10	68	79
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	41	11	30	83
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	0	0	0	8
10	Jharkhand	103	36	48	**	55
11	Karnataka	7	7	2	5	5
12	Kerala	35	5	7	**	28
13	Madhya Pradesh	86	85	4	81	82
14	Maharashtra	64	32	21	11	43
15	Manipur	6	2	1	1	5
16	Meghalaya #	26	1	1	0	25
17	Mizoram #	9	0	0	0	9
18	Nagaland #	21	0	1	**	20
19	Odisha	134	135	31	104	103
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	34	5	29	60
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	6	4	2	17
24	Telangana	19	27	21	6	**
25	Tripura	8	0	1	**	7
26	Uttarakhand	5	3	0	3	5
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	49	16	33	89
29	A & N Islands	1	NA	NA	NA	NA
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	2	1	1	1
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	3	2	1	2
34	Ladakh #	7	3	2	1	5
35	Lakshadweep #	3	2	2	0	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus NA: Data not Available.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 86.

PHYSICIANS AT CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	7	1	6	20
2	Arunachal Pradesh #	60	2	10	**	50
3	Assam	32	4	14	**	18
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	71	4	67	85
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	34	4	30	90
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	0	0	0	8
10	Jharkhand	103	63	60	3	43
11	Karnataka	7	3	1	2	6
12	Kerala	35	7	6	1	29
13	Madhya Pradesh	86	85	4	81	82
14	Maharashtra	64	17	5	12	59
15	Manipur	6	2	0	2	6
16	Meghalaya #	26	2	8	**	18
17	Mizoram #	9	0	0	0	9
18	Nagaland #	21	0	0	0	21
19	Odisha	134	122	11	111	123
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	52	5	47	60
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	2	1	1	20
24	Telangana	19	9	6	3	13
25	Tripura	8	0	0	0	8
26	Uttarakhand	5	3	1	2	4
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	46	27	19	78
29	A & N Islands	1	NA	NA	NA	NA
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	0	0	0	2
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	4	1	3	3
34	Ladakh #	7	2	0	2	7
35	Lakshadweep #	3	2	2	0	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

NA: Data not Available. ** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 87.

PAEDIATRICIANS AT COMMUNITY HEALTH CENTRES IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	16	8	8	13
2	Arunachal Pradesh #	60	1	1	0	59
3	Assam	32	3	4	**	28
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	76	8	68	81
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	36	10	26	84
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	0	0	0	8
10	Jharkhand	103	33	10	23	93
11	Karnataka	7	7	1	6	6
12	Kerala	35	7	6	1	29
13	Madhya Pradesh	86	1	1	0	85
14	Maharashtra	64	38	21	17	43
15	Manipur	6	2	0	2	6
16	Meghalaya #	26	0	1	**	25
17	Mizoram #	9	0	0	0	9
18	Nagaland #	21	0	1	**	20
19	Odisha	134	134	17	117	117
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	37	11	26	54
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	3	1	2	20
24	Telangana	19	16	14	2	5
25	Tripura	8	NA	1	NA	7
26	Uttarakhand	5	2	1	1	4
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	43	10	33	95
29	A & N Islands	1	NA	NA	NA	NA
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	0	0	0	2
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	3	1	2	3
34	Ladakh #	7	3	2	1	5
35	Lakshadweep #	3	2	2	0	1
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

NA: Data not Available. ** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 88.

TOTAL SPECIALISTS AT COMMUNITY HEALTH CENTRES IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	84	51	26	25	58
2	Arunachal Pradesh #	240	5	23	**	217
3	Assam	128	13	21	**	107
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	356	305	32	273	324
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	376	157	32	125	344
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	32	0	0	0	32
10	Jharkhand	412	172	135	37	277
11	Karnataka	28	23	6	17	22
12	Kerala	140	31	25	6	115
13	Madhya Pradesh	344	256	10	246	334
14	Maharashtra	256	108	56	52	200
15	Manipur	24	8	1	7	23
16	Meghalaya #	104	4	11	**	93
17	Mizoram #	36	0	0	0	36
18	Nagaland #	84	0	4	**	80
19	Odisha	536	529	75	454	461
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	260	174	27	147	233
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	84	21	15	6	69
24	Telangana	76	65	48	17	28
25	Tripura	32	4	6	**	26
26	Uttarakhand	20	10	3	7	17
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	420	163	55	108	365
29	A & N Islands	4	NA	NA	NA	NA
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	8	2	1	1	7
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	16	14	6	8	10
34	Ladakh #	28	11	5	6	23
35	Lakshadweep #	12	8	8	0	4
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus NA: Data not Available.

N App - not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ Four per Community Health Centre as per IPHS norms

Table 89.

General Duty Medical Officers (GDMOs) AT COMMUNITY HEALTH CENTRES IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	42	42	36	6	6
2	Arunachal Pradesh #	120	22	135	**	**
3	Assam	64	36	91	**	**
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	178	267	292	**	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	188	311	259	52	**
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	16	17	18	**	**
10	Jharkhand	206	260	295	**	**
11	Karnataka	14	5	8	**	6
12	Kerala	70	109	96	13	**
13	Madhya Pradesh	172	206	164	42	8
14	Maharashtra	128	180	148	32	**
15	Manipur	12	12	32	**	**
16	Meghalaya #	52	29	83	**	**
17	Mizoram #	18	3	17	**	1
18	Nagaland #	42	5	36	**	6
19	Odisha	268	592	452	140	**
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	130	228	156	72	**
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	42	106	103	3	**
24	Telangana	38	59	53	6	**
25	Tripura	16	16	32	**	**
26	Uttarakhand	10	7	4	3	6
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	210	402	315	87	**
29	A & N Islands	2	4	4	0	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	4	4	4	0	0
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	8	34	18	16	**
34	Ladakh #	14	10	7	3	7
35	Lakshadweep #	6	11	12	**	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

N App - not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ Two per Community Health Centre as per IPHS norms

Table 90.

RADIOGRAPHERS AT COMMUNITY HEALTH CENTRES IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	15	3	12	18
2	Arunachal Pradesh #	60	3	13	**	47
3	Assam	32	11	22	**	10
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	85	76	9	13
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	40	20	20	74
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	4	4	0	4
10	Jharkhand	103	29	22	7	81
11	Karnataka	7	6	4	2	3
12	Kerala	35	7	3	4	32
13	Madhya Pradesh	86	89	54	35	32
14	Maharashtra	64	34	26	8	38
15	Manipur	6	2	1	1	5
16	Meghalaya #	26	10	21	**	5
17	Mizoram #	9	NA	9	NA	0
18	Nagaland #	21	1	5	**	16
19	Odisha	134	37	25	12	109
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	55	25	30	40
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	14	5	9	16
24	Telangana	19	14	7	7	12
25	Tripura	8	1	8	**	0
26	Uttarakhand	5	1	0	1	5
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	43	38	5	67
29	A & N Islands	1	1	1	0	0
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	2	2	0	0
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	20	17	3	**
34	Ladakh #	7	6	4	2	3
35	Lakshadweep #	3	7	6	1	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus NA: Data not Available.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 91.

PHARMACISTS AT PHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	158	161	142	19	16
2	Arunachal Pradesh #	124	23	52	**	72
3	Assam	185	136	194	**	**
4	Bihar	33	15	2	13	31
5	Chhattisgarh	399	391	288	103	111
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	392	354	38	70
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	26	11	15	36
10	Jharkhand	175	90	37	53	138
11	Karnataka	65	58	24	34	41
12	Kerala	150	169	159	10	**
13	Madhya Pradesh	320	365	223	142	97
14	Maharashtra	397	395	348	47	49
15	Manipur	44	28	53	**	**
16	Meghalaya #	111	63	122	**	**
17	Mizoram #	65	2	41	**	24
18	Nagaland #	137	40	115	**	22
19	Odisha	444	443	399	44	45
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	130	64	66	133
22	Sikkim	12	6	6	0	6
23	Tamil Nadu	94	93	83	10	11
24	Telangana	202	206	170	36	32
25	Tripura	46	NA	50	NA	**
26	Uttarakhand	7	3	3	0	4
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	283	250	251	**	32
29	A & N Islands	4	3	3	0	1
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	10	10	0	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	35	32	3	3
34	Ladakh #	32	15	13	2	19
35	Lakshadweep #	4	6	6	0	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus NA: Data not Available.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per PHC as per IPHS norms

Table 92.

PHARMACISTS AT CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	25	22	3	**
2	Arunachal Pradesh #	60	10	56	**	4
3	Assam	32	24	53	**	**
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	151	140	11	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	100	69	31	25
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	8	7	1	1
10	Jharkhand	103	77	81	**	22
11	Karnataka	7	12	4	8	3
12	Kerala	35	46	66	**	**
13	Madhya Pradesh	86	135	116	19	**
14	Maharashtra	64	90	84	6	**
15	Manipur	6	4	9	**	**
16	Meghalaya #	26	16	41	**	**
17	Mizoram #	9	1	9	**	0
18	Nagaland #	21	6	28	**	**
19	Odisha	134	218	220	**	**
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	67	43	24	22
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	22	19	3	2
24	Telangana	19	18	22	**	**
25	Tripura	8	2	14	**	**
26	Uttarakhand	5	4	4	0	1
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	175	153	22	**
29	A & N Islands	1	1	1	0	0
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	3	3	0	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	19	12	7	**
34	Ladakh #	7	9	9	0	**
35	Lakshadweep #	3	10	9	1	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 93.

LAB TECHNICIANS AT PHCs IN TRIBAL AREAS						
(As on 31st March, 2020)						
S.No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	158	174	138	36	20
2	Arunachal Pradesh #	124	20	45	**	79
3	Assam	185	132	176	**	9
4	Bihar	33	16	3	13	30
5	Chhattisgarh	399	387	264	123	135
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	380	357	23	67
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	19	4	15	43
10	Jharkhand	175	81	43	38	132
11	Karnataka	65	58	32	26	33
12	Kerala	150	75	67	8	83
13	Madhya Pradesh	320	333	92	241	228
14	Maharashtra	397	384	322	62	75
15	Manipur	44	17	33	**	11
16	Meghalaya #	111	55	138	**	**
17	Mizoram #	65	4	78	**	**
18	Nagaland #	137	32	93	**	44
19	Odisha	444	35	107	**	337
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	179	145	34	52
22	Sikkim	12	9	13	**	**
23	Tamil Nadu	94	82	62	20	32
24	Telangana	202	212	151	61	51
25	Tripura	46	NA	49	NA	**
26	Uttarakhand	7	2	1	1	6
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	283	110	73	37	210
29	A & N Islands	4	3	2	1	2
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	12	13	**	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	24	21	3	14
34	Ladakh #	32	10	10	0	22
35	Lakshadweep #	4	7	7	**	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

NA: Data not Available.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per PHC as per IPHS norms

Table 94.

LAB TECHNICIANS AT CHCs IN TRIBAL AREAS						
(As on 31st March, 2020)						
S.No.	State/UT	Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R]	[S]	[P]	[S-P]	[R-P]
1	Andhra Pradesh	21	26	25	1	**
2	Arunachal Pradesh #	60	15	75	**	**
3	Assam	32	18	57	**	**
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	89	177	164	13	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	94	88	77	11	17
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	8	6	6	0	2
10	Jharkhand	103	86	168	**	**
11	Karnataka	7	10	8	2	**
12	Kerala	35	45	41	4	**
13	Madhya Pradesh	86	176	167	9	**
14	Maharashtra	64	104	88	16	**
15	Manipur	6	3	13	**	**
16	Meghalaya #	26	20	49	**	**
17	Mizoram #	9	NA	17	NA	**
18	Nagaland #	21	6	56	**	**
19	Odisha	134	197	197	0	**
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	65	93	78	15	**
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	21	22	22	0	**
24	Telangana	19	19	17	2	2
25	Tripura	8	NA	13	NA	**
26	Uttarakhand	5	3	0	3	5
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	105	179	160	19	**
29	A & N Islands	1	1	1	0	0
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	2	4	4	0	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	4	18	14	4	**
34	Ladakh #	7	12	10	2	**
35	Lakshadweep #	3	10	9	1	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

NA: Data not Available.

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per Community Health Centre as per IPHS norms

Table 95.

NURSING STAFF (Staff Nurse) AT PHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	158	443	409	34	**
2	Arunachal Pradesh #	124	72	202	**	**
3	Assam	185	247	350	**	**
4	Bihar	33	60	29	31	4
5	Chhattisgarh	399	701	639	62	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	424	837	646	191	**
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	47	21	13	8	34
10	Jharkhand	175	142	117	25	58
11	Karnataka	65	70	92	**	**
12	Kerala	150	222	212	10	**
13	Madhya Pradesh	320	374	213	161	107
14	Maharashtra	397	274	188	86	209
15	Manipur	44	52	82	**	**
16	Meghalaya #	111	157	357	**	**
17	Mizoram #	65	18	227	**	**
18	Nagaland #	137	83	199	**	**
19	Odisha	444	202	188	14	256
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	197	514	457	57	**
22	Sikkim	12	27	35	**	**
23	Tamil Nadu	94	293	276	17	**
24	Telangana	202	431	400	31	**
25	Tripura	46	6	226	**	**
26	Uttarakhand	7	5	0	5	7
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	283	675	564	111	**
29	A & N Islands	4	21	18	3	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	9	33	34	**	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	35	32	25	7	10
34	Ladakh #	32	17	21	**	11
35	Lakshadweep #	4	15	15	0	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ One per PHC as per IPHS norms

Table 96.

NURSING STAFF AT CHCs IN TRIBAL AREAS						
S.No.	State/UT	(As on 31st March, 2020)				
		Required ¹	Sanctioned	In Position	Vacant	Shortfall
		[R1]	[S]	[P]	[S-P]	[R1-P]
1	Andhra Pradesh	147	172	158	14	**
2	Arunachal Pradesh #	420	76	478	**	**
3	Assam	224	138	277	**	**
4	Bihar	0	N App	N App	N App	N App
5	Chhattisgarh	623	1017	889	128	**
6	Goa	N App	N App	N App	N App	N App
7	Gujarat	658	693	622	71	36
8	Haryana *	N App	N App	N App	N App	N App
9	Himachal Pradesh	56	21	24	**	32
10	Jharkhand	721	553	919	**	**
11	Karnataka	49	56	61	**	**
12	Kerala	245	446	412	34	**
13	Madhya Pradesh	602	1168	1082	86	**
14	Maharashtra	448	552	467	85	**
15	Manipur	42	17	47	**	**
16	Meghalaya #	182	149	355	**	**
17	Mizoram #	63	5	47	**	16
18	Nagaland #	147	28	198	**	**
19	Odisha	938	532	740	**	198
20	Punjab *	N App	N App	N App	N App	N App
21	Rajasthan	455	728	654	74	**
22	Sikkim	0	N App	N App	N App	N App
23	Tamil Nadu	147	198	177	21	**
24	Telangana	133	151	145	6	**
25	Tripura	56	10	127	**	**
26	Uttarakhand	35	21	23	**	**
27	Uttar Pradesh	N App	N App	N App	N App	N App
28	West Bengal	735	1924	2079	**	**
29	A & N Islands	7	23	16	7	**
30	Chandigarh *	N App	N App	N App	N App	N App
31	Dadra & Nagar Haveli and Daman & Diu	14	16	16	0	**
32	Delhi *	N App	N App	N App	N App	N App
33	Jammu & Kashmir	28	51	24	27	4
34	Ladakh #	49	17	16	1	33
35	Lakshadweep #	21	67	65	2	**
36	Puducherry *	N App	N App	N App	N App	N App

Notes:

** Surplus

N App - Not applicable

*: State / UT has no separate Tribal Area / Population

States with predominantly tribal areas

¹ Seven per Community Health Centre as per IPHS norms



Ministry of Health & Family Welfare,
Government of India