

Human Resources

The delivery of quality healthcare services in hospitals depends, to a large extent, on adequate availability of manpower, especially in the cadres of Medical Officers (MOs)/Specialists, staff nurses and para-medical staff. Further, availability of adequate faculty is one of the most important criteria, to obtain recognition from MCI/ NMC, for running Under Graduate (UG) courses, as well as Post Graduate (PG) courses, in a medical college. State Government had also sanctioned MOs and supporting staff for AYUSH dispensaries and faculty for AYUSH educational institutions, with the aim of promoting alternative systems of medicine.

2.1 Shortage of Human Resources in the State

The State of Jharkhand is facing acute shortage of Medical Officers (MOs), staff nurses and paramedics in District Hospitals (DHs), Sub-divisional Hospitals (SDHs), Community Health Centres (CHCs), Primary Health Centres (PHCs) *etc.* Audit observed huge vacancies of MOs, staff nurses and paramedics as discussed in the succeeding paragraphs.

- **Status of availability of MO/Specialists in the State**

Against the sanctioned posts of 3,634 MOs/ Specialists in the State, 2,210 (61 *per cent*) posts were vacant, as shown in **Table 2.1** and **Chart 2.1**.

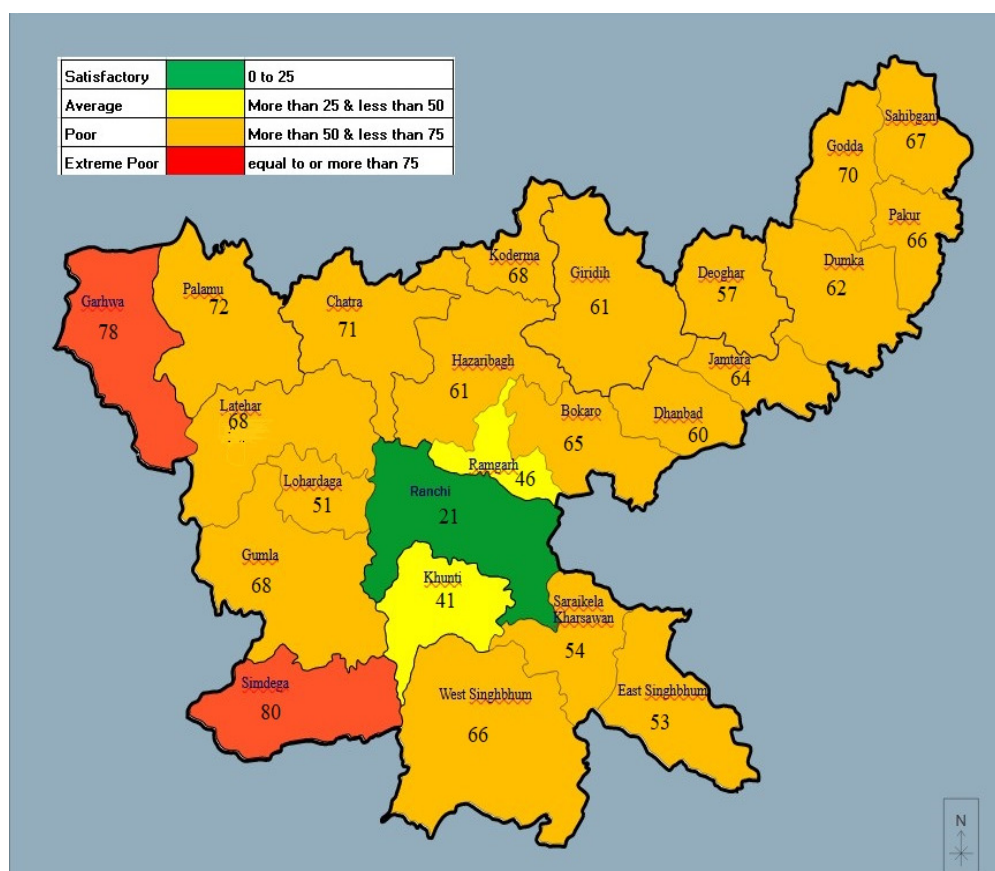
Table 2.1: District-wise sanctioned strength and persons-in-position of Medical Officers/ Specialists in the State as of March 2022

Sl. No.	Name of district	SS	PIP	Shortage	Shortage (per cent)
1	Bokaro	201	70	131	65
2	Chatra	129	38	91	71
3	Deoghar	137	59	78	57
4	Dhanbad	171	69	102	60
5	Dumka	194	73	121	62
6	East Singhbhum	154	72	82	53
7	Garhwa	191	42	149	78
8	Giridih	188	73	115	61
9	Godda	132	39	93	70
10	Gumla	151	49	102	68
11	Hazaribag	189	73	116	61
12	Jamtara	98	35	63	64
13	Khunti	96	57	39	41
14	Koderma	109	35	74	68
15	Latehar	111	35	76	68

Sl. No.	Name of district	SS	PIP	Shortage	Shortage (per cent)
16	Lohardaga	92	45	47	51
17	Pakur	103	35	68	66
18	Palamu	230	65	165	72
19	Ramgarh	94	51	43	46
20	Ranchi	260	206	54	21
21	Sahibganj	138	46	92	67
22	Saraikela Kharsawan	123	56	67	54
23	Simdega	119	24	95	80
24	West Singhbhum	224	77	147	66
	Total	3,634	1,424	2,210	61

(Source: Information provided by the Department)

Chart 2.1: District-wise shortage (percentage) of Medical Officers/ Specialists



- **Status of availability of staff nurses**

Against the sanctioned posts of 5,872 staff nurses in the State, 3,033 (52 per cent) posts were vacant, as shown in **Table 2.2**.

Table 2.2: District-wise sanctioned strength and persons-in-position of staff nurses in the State as of March 2022

Sl. No.	Name of district	SS	PIP	Shortage	Shortage (per cent)
1	Bokaro	219	99	120	55
2	Chatra	181	70	111	61
3	Deoghar	256	174	82	32
4	Dhanbad	278	145	133	48
5	Dumka	390	188	202	52
6	East Singhbhum	330	178	152	46
7	Garhwa	232	116	116	50
8	Giridih	304	115	189	62
9	Godda	197	47	150	76
10	Gumla	330	130	200	61
11	Hazaribag	206	107	99	48
12	Jamtara	188	97	91	48
13	Khunti	165	55	110	67
14	Koderma	124	47	77	62
15	Latehar	168	84	84	50
16	Lohardaga	127	50	77	61
17	Pakur	166	56	110	66
18	Palamu	270	128	142	53
19	Ramgarh	108	36	72	67
20	Ranchi	467	401	66	14
21	Sahibganj	217	99	118	54
22	Saraikela Kharsawan	242	109	133	55
23	Simdega	264	93	171	65
24	West Singhbhum	443	215	228	51
	Total	5,872	2,839	3,033	52

- **Status of availability of paramedics in the State**

Against the sanctioned posts of 1,080 paramedics in the State, 864 (80 per cent) posts were vacant, as shown in **Table 2.3**.

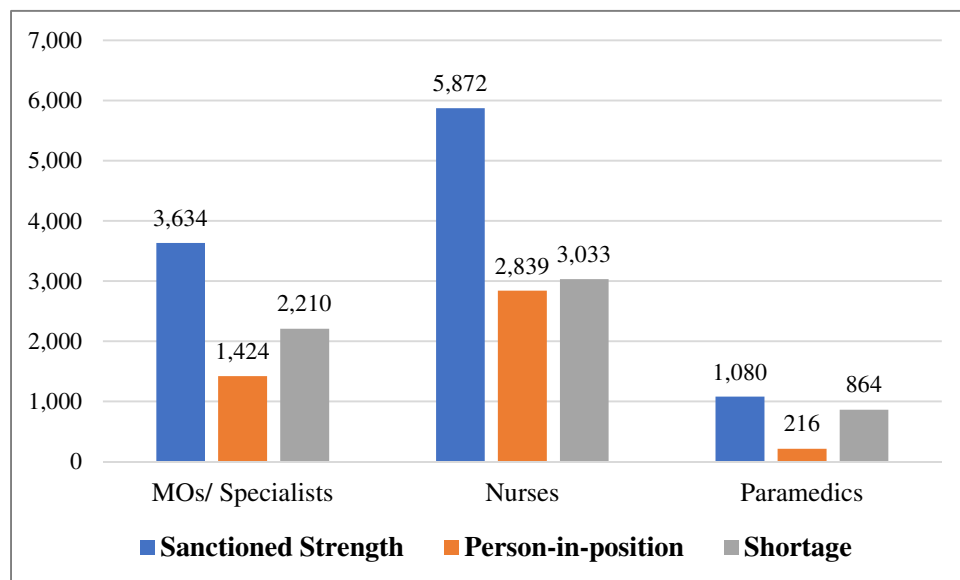
Table 2.3: District-wise sanctioned strength and persons-in-position of paramedics in the State as of March 2022

Sl. No.	District	SS	PIP	Vacancy	Shortage (per cent)
1	Bokaro	96	23	73	76
2	Chatra	30	0	30	100
3	Deoghar	58	20	38	66
4	Dhanbad	86	14	72	84
5	Dumka	47	5	42	89
6	East Singhbhum	37	0	37	100
7	Garhwa	39	0	39	100
8	Giridih	43	1	42	98
9	Godda	63	12	51	81
10	Gumla	34	6	28	82
11	Hazaribag	28	11	17	61
12	Jamtara	41	11	30	73
13	Khunti	34	7	27	79
14	Koderma	24	3	21	88
15	Latehar	24	0	24	100
16	Lohardaga	53	12	41	77

Sl. No.	District	SS	PIP	Vacancy	Shortage (per cent)
17	Pakur	33	6	27	82
18	Palamu	33	2	31	94
19	Ramgarh	14	1	13	93
20	Ranchi	94	47	47	50
21	Sahibganj	59	15	44	75
22	Saraikela Kharsawan	42	13	29	69
23	Simdega	28	6	22	79
24	West Singhbhum	40	1	39	98
	Total	1,080	216	864	80

It can be seen from **Table 2.1, 2.2** and **2.3** that shortages of MOs/ Specialists, staff nurses and paramedics ranged between 21 to 80 *per cent*, 14 to 76 *per cent* and 50 to 100 *per cent* respectively in the State. The details of sanctioned strength, person-in-position and shortage of MOs/ specialists, staff nurses and paramedics are given in the **Chart 2.2**.

Chart 2.2: District-wise sanctioned strength, person-in-position and shortage of Medical Officers/ Specialists, staff nurses and paramedics as of March 2022



2.2 Availability of human resources at DHs/CHCs/PHCs

IPHS provides that Doctors/ Specialists should be available round the clock, to provide due medical care to the patients. IPHS also prescribes norms for the posts of staff nurses and paramedics, in DHs/ CHCs/ PHCs.

Audit examination revealed significant shortages of MOs/ specialists, staff nurses and Paramedics in the DHs, CHCs and PHCs, ranging between 7 to 65 *per cent*, in the State, as shown in **Appendix 2.1**. The summarised position of shortage of MOs/Specialists, staff nurses and Paramedics in DHs/ CHCs/ PHCs are shown in **Table 2.4**.

Table 2.4: SS, PIP and shortage of MOs/ Specialists, staff nurses and paramedics in the State as of March 2022

Type of the post	Sanctioned Strength (SS)	Persons-in-position (PIP)	Vacancy (<i>per cent</i>)
DHs			
MOs/Specialists	735	317	418 (57)
Staff nurses	790	806	-
Paramedics	447	415	32 (7)
CHCs			
MOs/Specialists	1320	555	765(58)
Staff nurses	2069	1735	334 (16)
Paramedics	1071	573	498 (46)
PHCs			
MOs/Specialists	822	294	528 (64)
Staff nurses	734	530	204 (28)
Paramedics	780	271	509 (65)

(Source: Figures of the Department)

Colour code: Green- Good, Yellow =Poor (Vacancy < 40%), Red=Very Poor (Vacancy ≥ 40%).

It was also observed that the State Government had recruited 624 MOs/Specialists during FYs 2016-17 to 2021-22.

- Shortage of MOs/Specialists, paramedics and staff nurses, in the test-checked DHs, as of March 2022, is given in **Table 2.5**.

Table 2.5: SS, PIP and shortage of MOs/ Specialists, Paramedics and Staff Nurses

DH ¹⁰	Sanctioned beds	Strength required, as per IPHS			PIP, as of March 2022			Shortage, as per IPHS (<i>per cent</i>)		
		MOs/ specialists	Paramedics	Staff Nurses	MOs/ specialists	Paramedics	Staff Nurses	MOs/ specialists	Paramedics	Staff Nurses
Garhwa	100	32	31	45	11	19	23	21 (66)	12 (39)	22 (49)
Gumla	100	32	31	45	17	12	27	15 (47)	19 (61)	18 (40)
Saraikela Kharsawan	100	32	31	45	17	19	21	15 (47)	12 (39)	24 (53)
Simdega	100	32	31	45	13	8	27	19 (59)	23 (74)	18 (40)
Total	400	128	124	180	58	58	98			

(Source: Records of test-checked DHs)

Colour code: Red=Very Poor (Shortage ≥ 40%), Yellow= Poor (Shortage > 30 % but < 40%).

It can be seen from **Table 2.5** that there were shortages of 47 to 66 *per cent* of MOs/ Specialists and 39 to 74 *per cent* of paramedics and staff nurses, in the test-checked DHs.

- Shortages of doctors and paramedics ranged between 18 and 82 *per cent* in the 14 test-checked CHCs (**Appendix 2.2**). There were 11 to 45 staff nurses, in the seven test-checked CHCs, against the prescribed norm of 10 staff nurses, whereas the remaining seven test-checked CHCs had only two to nine staff nurses.

¹⁰ Details of DH, Dumka has been included in Paragraph 2.4.1 as it was upgraded to Phulo Jhano Medical College and Hospital (PJMCH) in 2019.

- Two doctors, as prescribed under the norms, were present only in two out of the 12 test-checked PHCs. One doctor each was available in seven PHCs, whereas there were no doctors in the remaining three PHCs. There were no paramedics in 10 PHCs, against the prescribed norm of five paramedics, whereas two PHCs had only one paramedic (**Appendix 2.2**). It was also noticed that three PHCs had four to five staff nurses, against the prescribed norm of three staff nurses, whereas the remaining nine test-checked PHCs had only one to two staff nurses.

Shortage of doctors, paramedics and nursing staff, besides asymmetric deployment of staff nurses, in the test-checked healthcare facilities, was expected to have had an adverse effect on the delivery of services. The Department accepted the facts and stated (March 2023) that requisitions for recruitment for Specialists were pending with the Jharkhand Public Service Commission (JPSC) for more than two years. It was also stated that frequent changes in the Recruitment Rules by the Government had also delayed recruitment of human resources.

2.3 Shortage of Specialists in DHs/CHCs

IPHS prescribed 21 posts of specialists for DHs on the basis of bed capacity. The status of specialists, as of March 2022, in the test-check DHs, is shown in **Table 2.6**.

Table 2.6: Details of Requirement, PIP and shortage of specialists in the test-checked DHs

DHs ¹¹	Number of Specialists required as per IPHS	Number of Specialists available (in per cent)	Details of shortages of different specialists (Number of specialists short)
Garhwa	21	03 (14)	Medicine (02), Surgery (01), Obstetrics and Gynaecology (02), Paediatrics (02), Anaesthesia (02), Ophthalmology (01), Orthopaedics (01), Radiology (01), Pathology (01), Dermatology (01), Psychiatry (01), Microbiology (01), Forensics (01), AYUSH (01) - Total shortage – 18
Gumla	21	11 (52)	Medicine (01), Obstetrics and Gynaecology (01), Paediatrics (01), Anaesthesia (02), Radiology (01), Dental (01), Microbiology (01), Forensics (01), AYUSH (01) - Total shortage – 10 Excess Orthopaedics (01) Total excess- 01
Saraikela Kharsawan	21	09 (43)	Shortage Medicine (02), Surgery (01), Paediatrics (01), Anesthesia (02), Orthopaedics (01), Dermatology (01), Psychiatry (01), Microbiology (01), Forensics (01), Ayush (01) Total Shortage-12 Excess Obstetrics & Gynaecology (01), Dental (01) Total excess- 02

¹¹ Details of DH, Dumka has been included in **Paragraph 2.4.1** as it was upgraded to Phulo Jhano Medical College and Hospital (PJMCH) in 2019.

DHs ¹¹	Number of Specialists required as per IPHS	Number of Specialists available (in per cent)	Details of shortages of different specialists (Number of specialists short)
Simdega	21	06 (29)	Shortage Medicine (02), Paediatrics (01), Anaesthesia (02), Ophthalmology (01), Radiology (01), Pathology (01), ENT (01), Dental (01), Dermatology (01), Psychiatry (01), Microbiology (01), Forensics (01), AYUSH (01) Total Shortage-15

Colour code: Red= Very Poor (Availability ≤ 60%)

It can be seen from **Table 2.6** that shortages of specialists ranged between 48 and 86 per cent, in the test-checked DHs. None of the test-checked DHs had specialists of Anaesthesia, Microbiology, Forensic science and AYUSH. Excess deployment of specialists was also seen in DHs, Gumla and Saraikela Kharsawan, despite shortages in other DHs.

Further, IPHS prescribes one post each, for five specialists¹², in CHCs. However, there was no specialists, in 12 out of the 14 test-checked CHCs, whereas only one specialist (Obstetrician & Gynaecologist) each was available in two CHCs.

Shortage/non-availability of specialists may adversely affect the delivery of specialised health care services in the test-checked DHs and CHCs as discussed in **Chapter 3**. The Department accepted the facts and stated (March 2023) that requisitions for recruitment for Specialists were pending with the JPSC for more than two years. It was also stated that frequent changes in the Recruitment Rules by the Government had also delayed recruitment of human resources.

- **Availability of Ophthalmologist/ Ophthalmic Assistant in DHs/CHCs**

IPHS 2012, prescribes the availability of one to two Ophthalmologists and Ophthalmic Assistants for DHs, as per the bed strength of the hospital, and one Ophthalmic Assistant for CHCs. Availability of manpower in the Ophthalmology wing, in the test-checked DHs, is given in **Table 2.7**.

Table 2.7: Availability of manpower in Ophthalmology as of March 2022

Sl. No.	Name of DHs	Ophthalmologist		Ophthalmic Assistant	
		Required, as per IPHS	Available	Required, as per IPHS	Available
1	Dumka	2	1	2	1
2	Garhwa	1	0	1	1
3	Gumla	1	1	1	2
4	Saraikela Kharsawan	1	1	1	1
5	Simdega	1	0	1	0

Colour code: Red = Very Poor (not available), Yellow= Poor (availability = 50%), Green = Good (Shortage = Nil)

¹² Medicine, Surgery, Paediatrics, Anaesthesia and Obstetrics & Gynaecology.

It can be seen from **Table 2.7** that only two of the test-checked DHs (Gumla and Saraikela Kharsawan) had the required manpower. Further, in DH, Dumka, only one Ophthalmologist and one Ophthalmic Assistant was available against the requirement of two each.

Further, Ophthalmic Assistants were not available in four¹³ out of the 14 test-checked CHCs.

- **Availability of Lab technician, pathologist, radiologist (doctor), x-ray technician/radiographer in test-checked DHs/CHCs/PHCs**

IPHS 2012, prescribes the availability of six to 12 lab technicians, one to three pathologists, one to two radiologists, two to five x-ray technicians/radiographers for DHs, as per the bed strength of the hospital. Further, IPHS, 2012 also prescribes availability of two lab technicians and one x-ray technician/radiographer for CHCs. One lab technician is required for PHCs. Availability of these personnel, in the test-checked DHs/CHCs/PHCs, is given in **Table 2.8**.

Table 2.8: Availability of Lab technician, pathologist, radiologist (doctor), X-ray technician and Radiographer as of March 2022

DHs (05)			
Particulars	Required	Available	Shortage (per cent)
Radiologist	06	01	05 (83)
Lab Technician	36	25	11 (31)
X-ray technician/ radiographer	13	09	04 (31)
Pathologist	07	02	05 (71)
CHCs (14)			
Lab Technician	28	27	01 (4)
X-ray technician/ radiographer	14	04	10 (71)
PHCs (12)			
Lab Technician	12	01	11 (92)

It can be seen from **Table 2.8** that shortage of radiologists, lab technicians, x-ray technicians, pathologists was 83, 31, 31 and 71 *per cent* respectively in the test-checked DHs. Further, shortage of lab-technicians and x-ray technicians was four and 71 *per cent* respectively in the test-checked CHCs. Shortage of lab technicians in PHCs was 92 *per cent* (**Appendix 2.3**).

- **Essential human resources in the maternity services**

The MNH Toolkit prescribes manpower for maternity services, based on an average of 100 to 500 deliveries per month in a hospital, for quality service delivery with dignity and privacy to clients, and for providing the best possible care during pregnancy, delivery and post-partum to the

¹³ CHC, Jarmundi; CHC, Saraiyahat; CHC, Bharno and CHC, Palkot.

patients. The manpower required under maternity services, as per the MNH Toolkit, is illustrated in **Table 2.8**.

Table 2.8: Manpower required under maternity services

Average deliveries per month	Doctors	Supporting personnel	Total
100-200	4	19	23
200-500	15	26	41

Availability of manpower *vis-à-vis* requirement, based on the average monthly deliveries, for maternity services in the five test-checked DHs, during FYs 2016-17 to 2021-22, was as shown in **Table 2.10**.

Table 2.10: Availability of manpower against requirement, in maternity IPDs

Particulars		Dumka	Garhwa	Gumla	Saraike Kharsawan	Simdega
Average monthly deliveries		252	433	343	100	124
Requirement of Doctors		15	15	15	4	4
Requirement of supporting staff		26	26	26	19	19
Total Requirement		41	41	41	23	23
Sl. No.	Particulars	Available Manpower (Percentage)				
1	Doctors	8 (53)	4 (27)	NA	4 (100)	3 (75)
2	Supporting personnel	25 (96)	10 (38)	NA	9 (47)	6 (32)
Total Available		33 (80)	14 (34)	NA	13 (57)	9 (39)

(Source: Records of the test-checked DHs)

Colour code: Red = Availability < 50%, Yellow = Availability 50% to 75%, Green = Availability 76% to 100% and Blue = Not available (NA)

Audit noticed that service-wise specific manpower had not been sanctioned in the five test-checked DHs. However, as per the information furnished by the DHs, it was noticed that DH, Saraike Kharsawan, had sufficient doctors in the maternity IPD. DH, Gumla, did not provide information on the availability of manpower in the maternity IPD. In the other three DHs, short deployment of doctors ranged between 25 to 73 per cent. It was further noticed that short deployment of supporting personnel ranged between 4 to 68 per cent, in four of the test-checked DHs.

Short deployment of manpower in the maternity wards of the test-checked DHs indicated that due care was not given to manage delivery related complications, ensure satisfactory newborn care and manage other maternal health emergencies.

2.4 Availability of Human Resources in Medical Colleges

2.4.1 Shortage of teaching and non-teaching staff

Deployment of adequate teaching and non-teaching staff is one of the most important criteria, in order to obtain recognition from MCI/ NMC, for running UG courses, as well as PG courses, in a Medical College.

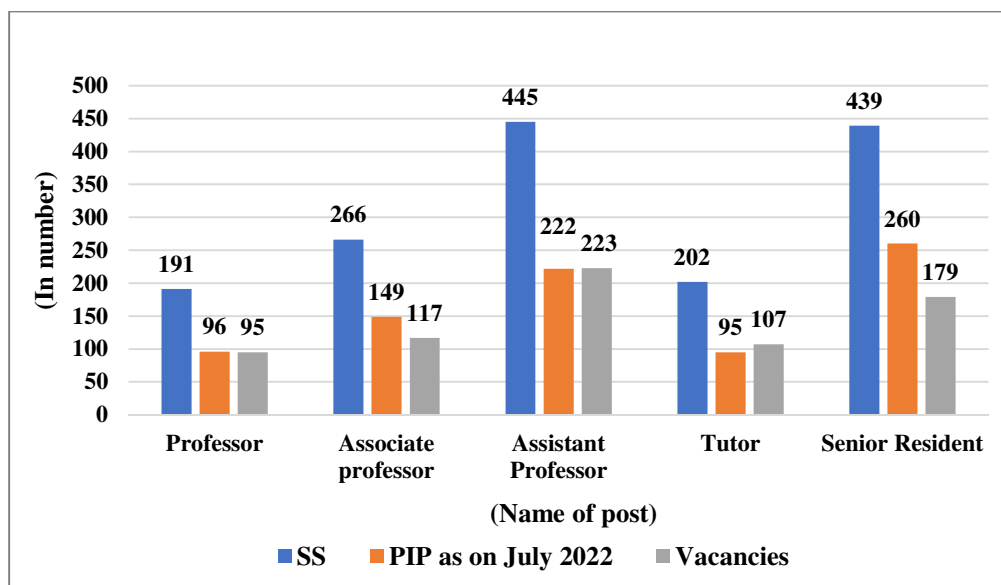
Details of sanctioned strength (SS) and persons-in-position (PIP) of teaching/non-teaching staff, as of July 2022, in the six¹⁴ MCHs in Jharkhand, is shown in **Appendix 2.4**. Summarised post-wise position of teaching and non-teaching staff is shown in **Table 2.11** and **Chart 2.3**.

Table 2.11: SS and PIP of teaching and non-teaching staff in six MCHs

Name of the post	SS	PIP, as on July 2022	Vacancies (per cent)
Teaching staff			
Professor	191	96	95(50)
Associate professor	266	149	117(44)
Assistant Professor	445	222	223(50)
Total	902	467	435(48)
Non-teaching staff			
Tutor	202	95	107 (53)
Senior Resident	439	260	179 (41)
Total	641	355	286 (45)

(Source: Information provided by the Department)

Chart 2.3: SS and PIP of teaching and non-teaching staff in 6 MCHs



It can be seen from **Table 2.11** and **Chart 2.3**, that vacancies against the sanctioned posts of teaching and non-teaching staff were 48 and 45 *per cent*, respectively. Audit also noticed significant vacancies, across all posts, in the test-checked MCHs (**Appendix 2.5**), during FYs 2016-17 to 2021-22, as shown in **Table 2.12**.

¹⁴ (1) SNMMCH, Dhanbad (2) PJMCH, Dumka (3) SBMCH, Hazaribag (4) MGMMCH, Jamshedpur (5) MRMCH, Palamu and (6) RIMS, Ranchi.

Table 2.12: Vacancies during FYs 2016-17 to 2021-22

Name of MCH	Vacancies in different cadres in <i>per cent</i>		
	Teaching (Professor, Associate Professor and Assistant Professor)	Non-teaching (Senior/ Junior Resident and Tutor)	Para-medics
SNMMCH, Dhanbad	54 to 69	26 to 56	54 to 94
PJMCH, Dumka (2019-22)	67 to 72	69 to 75	45 to 82
RIMS, Ranchi	34 to 51	17 to 38	45 to 53

It can be seen from **Table 2.12** that shortages of teaching staff, *viz.* Professors, Associate Professors and Assistant Professors, ranged between 34 and 72 *per cent*, in the three test-checked MCHs. Further, shortage of non-teaching staff, *viz.* Tutors and Senior Residents, ranged between 17 and 75 *per cent*, while shortage of paramedics ranged between 45 and 94 *per cent*.

Persistent vacancies, especially in faculty posts, are bound to not only adversely affect recognition of courses by MCI/NMC but also compromise the quality of medical education imparted in these institutions. This was one of the main reasons for non-recognition of courses, and non-renewal of seats, by MCI/NMC.

A mention of this was made in **Paragraph No. 2.1.10** of the Audit Report of the Comptroller and Auditor General of India for the year ended 31 March 2015 on Government of Jharkhand, regarding the MCI Undergraduate Working Group 2010 recommendations in its “Vision 2015 documents”, in which it had been noted that shortage of teaching staff in medical institutions could be removed by means of tapping into the pool of consultants, who had left Government Service, dual/ adjunct appointments, interdisciplinary appointments, faculty development programmes, well defined career paths, employment of retired teachers, increasing the age of superannuation and increasing the pool of young teachers by increasing the postgraduate output.

It was, however, seen that the State Government had acted belatedly on three recommendations of the Working Group, *viz.* enhancing the age of superannuation from 65 to 67 years (January 2018), appointment of faculty on contract basis (September 2021) and tapping of posts in government service departments (December 2021). Further, no initiative was found to have been taken by the Health Department, as of March 2022, on the remaining five recommendations of the MCI working group. As a result, the shortage of teaching staff continued to persist. The Department accepted the facts and stated (March 2023) that requisition for appointment of Asstt. Professors have been sent to JPSC. Due to promotion of Asstt. Professors to Associate Professors, vacancy had increased. Therefore, to fill up the posts, possibility of engagement of Asstt. Professors on

contractual basis was explored four times in 2021, but no candidates had come forward.

2.4.2 Excess deployment of teaching staff against sanctioned strength

It was seen that, during FYs 2016-17 to 2021-22, there was excess deployment of teaching staff, in five departments of SNMMCH, Dhanbad, as detailed in **Table 2.13**.

Table 2.13: Excess deployment of teaching staff

Year	Name of the Department	Post	SS	PIP	Excess
2016-17	Preventive and Social Medicine (PSM)	Professor	01	02	01
2018-19	Pathology	Professor	01	03	02
	Microbiology	Associate Professor	01	02	01
	Ophthalmology	Associate Professor	02	04	02
	General Surgery	Associate Professor	03	09	06
2019-20	General Surgery	Associate Professor	03	07	04
2020-21	General Surgery	Associate Professor	03	06	03
2021-22	General Surgery	Associate Professor	03	06	03

(Source: Records of test-checked MCHs)

Reasons/justification for excess deployment of teaching staff were not furnished. The Department also did not furnish reply to the audit observation.

Recommendation: State Government may take steps to implement all the recommendations of the MCI Working Group, so that shortage of teaching staff can be minimised.

2.5 Availability of human resources in AYUSH facilities

The delivery of quality healthcare services in healthcare facilities, to a large extent, depends on adequate availability of manpower, especially doctors, staff nurses, paramedical and other supporting staff.

Audit noticed State-wide shortage of doctors and other medical staff, in AYUSH facilities, as discussed in the succeeding paragraphs.

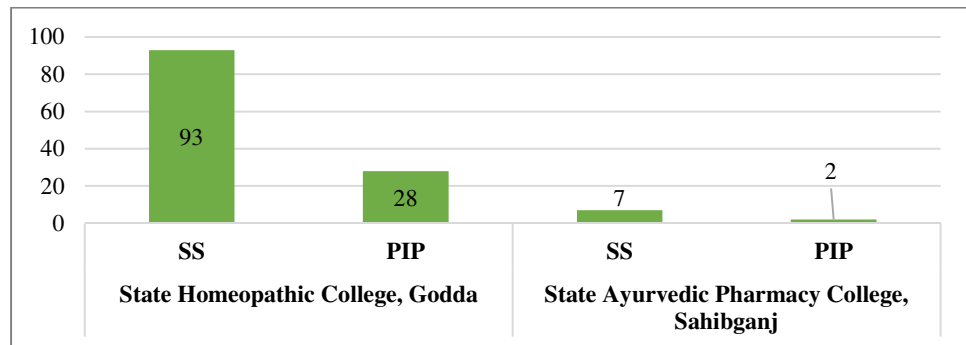
2.5.1 Shortage of teachers/staff in AYUSH institutions

The sanctioned strength (SS) and persons-in-position (PIP), in the two existing AYUSH institutions, as of March 2022, are detailed in **Table 2.14** and **Chart 2.4**.

Table 2.14: Status of persons-in-position (PIP) against sanctioned strength (SS), in AYUSH institutions

Cadre	State Homeopathic College, Godda			State Ayurvedic Pharmacy College, Sahibganj		
	SS	PIP	Shortage (per cent)	SS	PIP	Shortage (per cent)
Teachers	64	22	42 (66)	5	2	3(60)
Paramedics	14	04	10 (71)	2	00	2 (100)
Staff nurses	15	02	13 (87)	NA	NA	-
Total	93	28	65 (70)	7	2	5 (71)

(Source: Information furnished by the Directorate of AYUSH)

Chart 2.4 : Status of HR in AYUSH Institutions in Jharkhand

It can be seen from **Table 2.14** that the shortage of teachers ranged between 60 and 66 *per cent*. The shortage of paramedics and staff nurses was 71 and 87 *per cent*, respectively, in the Homeopathic College, whereas no paramedics were available in the Pharmacy College. The shortage of teachers and medical staff had an adverse impact on the functioning of these institutions. The Department, while confirming the facts, stated (March 2023) that action is being taken for recruitment of teaching staff, staff nurses and paramedics for functioning of AYUSH Colleges and Hospitals.

2.5.2 Shortage of MOs/staff in dispensaries

There were 24 District Joint AYUSH dispensaries in the districts and 267 dispensaries¹⁵ at the lower level, in the State. For each dispensary, there were sanctioned posts of Medical Officer (MO) and Compounder. Details of SS, PIP and vacancy, as of March 2022, are given in **Table 2.15**.

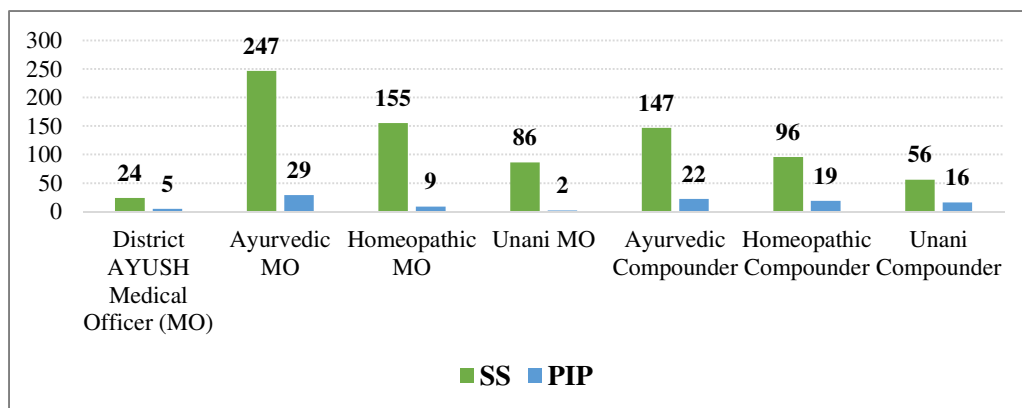
Table 2.15: SS and PIP of MO and supporting staff, in dispensaries

Posts	SS	PIP	Vacancy (per cent)
District AYUSH Medical Officer (MO)	24	5	19 (79)
Ayurvedic MO	247	29	218 (88)
Homeopathic MO	155	9	146 (94)
Unani MO	86	2	84 (98)
Ayurvedic Compounder	147	22	125 (85)
Homeopathic Compounder	96	19	77 (80)
Unani Compounder	56	16	40 (71)

(Source: Information furnished by the Directorate of AYUSH)

¹⁵ Ayurvedic: 163, Homeopathic: 72 and Unani: 32.

Chart 2.5: Status of HR in AYUSH dispensaries of Jharkhand



It can be seen from **Table 2.15** that the shortage of MOs and Compounders, in the AYUSH dispensaries, ranged between 71 and 98 per cent. This included shortage of 19 MOs (79 per cent) and 15 Compounders (83 per cent) in the test-checked districts, as detailed in **Table 2.16**.

Table 2.16: SS and PIP of MOs and Compounders in the test-checked District Joint AYUSH dispensaries as of March 2022

District	District AYUSH MO	Ayurvedic MO	Homeopathic MO	Unani MO	Compounder
Sanctioned	1	1	1	1	3
Dhanbad	0	0	0	0	2
Dumka	0	0	0	0	0
Garhwa	1	1	0	0	0
Gumla	0	0	0	0	0
Saraikela	0	1	1	0	1
Kharsawan	0	0	0	0	0
Simdega	1	0	0	0	0
Availability	2	2	1	0	3

(Source: Information furnished by the Directorate of AYUSH)

Colour code: Green = Available, Red = Not available

It may be seen from **Table 2.16** that Unani MOs were not available in any of the test-checked District Joint AYUSH dispensaries. The shortage of MOs and Compounders affected development of the AYUSH stream.

2.6 Availability of human resources in Health and Wellness Centres

The Operational Guidelines of Health and Wellness Centres stipulate that HWCs, upgraded from HSCs, were required to be well-equipped and staffed by trained Primary Health Care teams, comprising of Multi-Purpose Workers (MPWs), led by a Community Health Officer (CHO). Availability of manpower, in the test-checked HWCs, is shown in **Table 2.17** and **Chart 2.6**.

Table 2.17: Availability of manpower in the test-checked HWCs as of March 2022

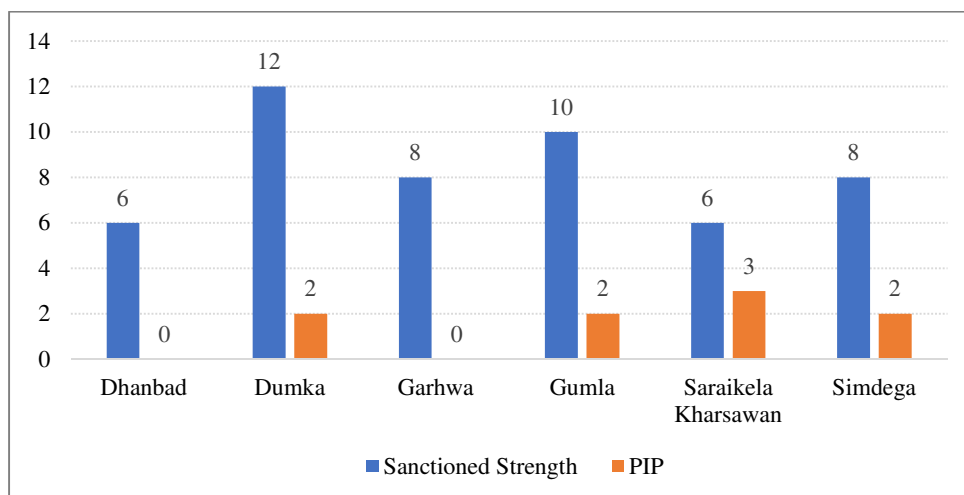
District	Number of test-checked HWCs	CHOs			MPWs		
		SS	PIP	Vacancy	SS	PIP	Vacancy
Dhanbad	3	3	3	00	6	0	6 (100)
Dumka	6	6	6	00	12	2	10 (83)

Garhwa	4	4	2	02	8	0	8 (100)
Gumla	5	5	5	00	10	2	8 (80)
Saraikela Kharsawan	3	3	3	00	06	3	3 (50)
Simdega	4	4	4	00	08	2	6 (75)
Total	25	25	23	02	50	9	41 (82)

(Source: Information furnished by the test checked HWCs)

Colour code: Red=Extremely Poor (Shortfall>60%), Yellow=Very poor (60%≤Shortfall≤40%), Green=Good (Shortfall<40%)

Chart 2.6: Position of MPWs at HWCs in the test-checked districts as of March 2022



It can be seen from **Table 2.17** that there was an overall vacancy of 82 per cent in the cadre of MPWs, in the test-checked HWCs. Non-availability of MPWs adversely impacted the delivery of diagnostic services at HWCs, as discussed in **Chapter 4**. The Department, while confirming the facts, stated (March 2023) that action is being taken for bringing about improvement in the functioning of the HWCs as per norms.

Recommendation: State Government may address the shortage of MOs/specialists, staff nurses and paramedics in all healthcare facilities.