

# Haryana Public Health Workforce study: Issues and Challenges

## I. OVERVIEW

The state of Haryana has a population of around 25.35 million with two-third (65.2%) of its population residing in rural milieu (as per Census 2011). State boasts of good connectivity It is bordered by Punjab and Himachal Pradesh to the north; Rajasthan to the west and south; and river Yamuna to the east defining its boundaries with Uttar Pradesh. It also surrounds Delhi from three sides.

Health infrastructure in its 21 districts is as follows:

S.no.	Health facilities	Existing	Required
1	District Hospitals	21	-
2	Sub Divisional Hospitals	33	253 (if taken per lakh population)
3	Community Health Centres	110	
4	Primary Health Centres	466	845 (if taken per 30000 population)
5	Sub centres	2630	5070 (if taken per 5000 population)

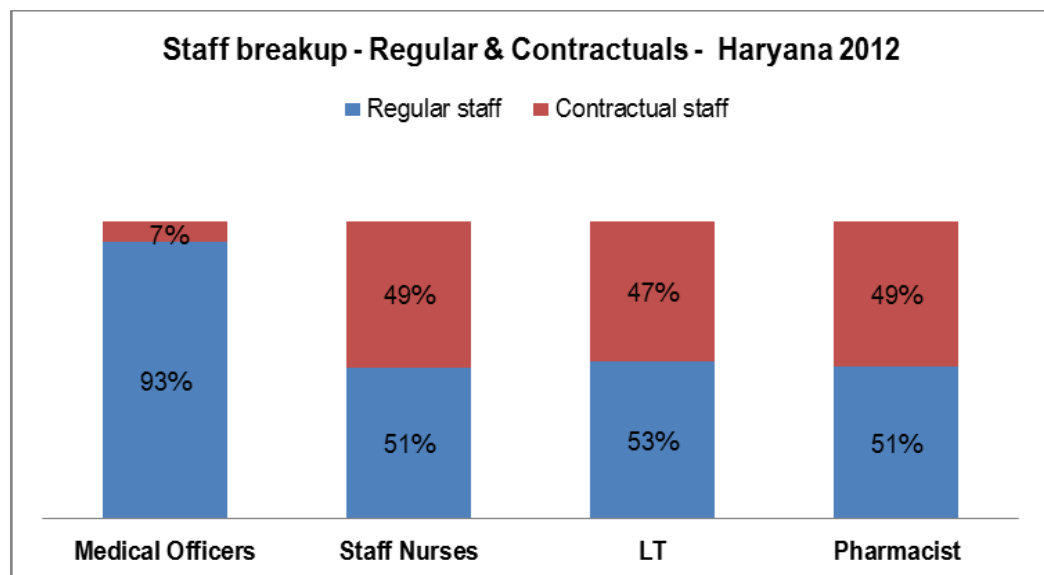
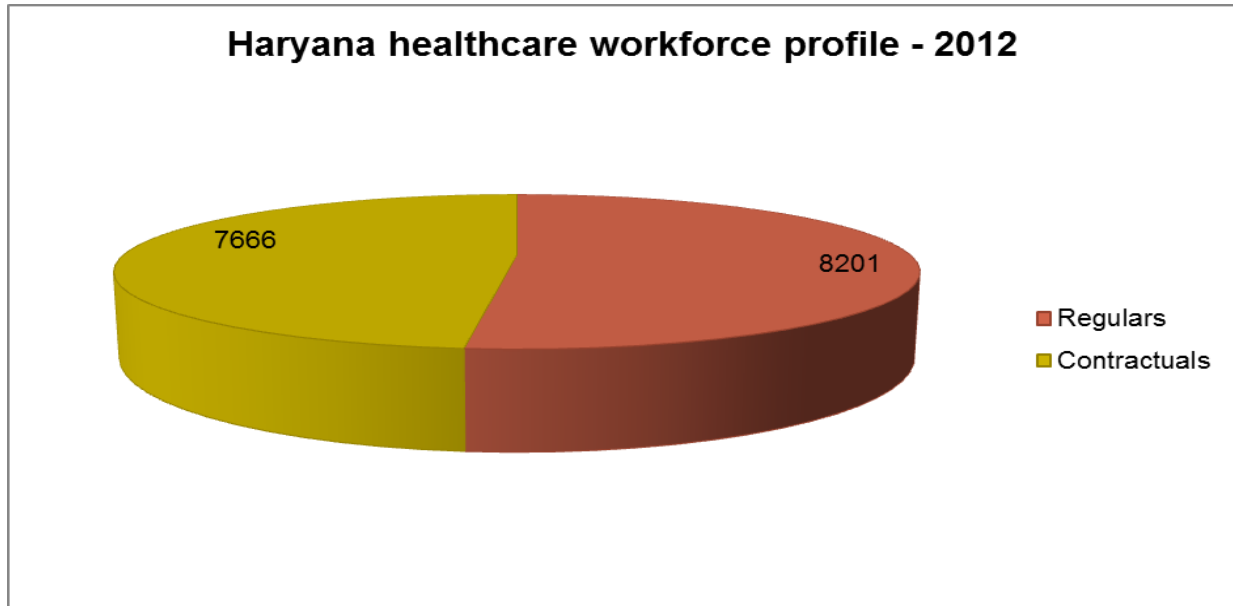
Out of total facilities, 21 District Hospitals, 11 SDHs, 7 CHCs are functioning as FRUs. Withal this, construction of 23 PHCs, 79 PHCs and 286 SHCs has been given administrative approval under NRHM, out of which 6 CHCs, 41 PHCs and 152 SHCs have been completed.

Healthcare workforce (Contractual staff) availability in the state is as follows:

S.no.	District name	MOs	Specialists	Staff Nurse	ANM	LTs	Pharmacist	Physiotherapists	Epidemiologist
1	Ambala	5	2	68	102	6	4		1
2	Bhiwani	5	1	110	194	6	5		1
3	Faridabad	26	9	84	105	22	20	2	1
4	Fatehabad	5	1	73	108	5	4		0
5	Gurgaon	10	0	71	80	16	8	2	0
6	Hisar	10	1	115	204	7	7		0
7	Jhajjar	6	3	80	122	10	5		1
8	Jind	4	1	97	160	6	4		1
9	Kurukshetra	4	1	84	142	5	3		1
10	Karnal	4	0	89	138	6	4		0
11	Kaithal	5	0	78	122	3	4		1
12	Mewat	0	0	47	81	4	4		1
13	Narnaul	1	2	43	101	9	4		0
14	Panchkula	5	1	35	75	7	4	1	0
15	Panipat	5	0	60	110	7	8		1
16	Palwal	10	1	43	62	9	7		1
17	Rohtak	7	1	48	101	6	4		1
18	Rewari	5	1	65	118	3	4		0

19	Sonepat	7	0	71	153	12	6	2	0
20	Sirsa	5	1	86	155	3	4		1
21	Yamunanagar	6	1	61	124	8	5		1
22	<b>Total</b>	<b>135</b>	<b>27</b>	<b>1508</b>	<b>2557</b>	<b>160</b>	<b>118</b>	<b>7</b>	<b>13</b>

As in many other states, there are two categories of health workforce in Haryana: Regulars and NRHM Contractuals. HR strength of regular staff slightly outweighs that of the NRHM contractual staff.



## II. HUMAN RESOURCE FOR HEALTH POLICY

Since 1978, Haryana has been following the policies laid in Haryana Civil Medical Service Rules for recruitment, promotion, remuneration, transfers and Punjab Civil Medical Rules disciplinary actions for Medical Officers (MOs) and Senior Medical Officers (SMOs). A fresh recruit gets entry into services at the position of MO and after 11 years of experience gets promoted to the SMO cadre. As per the posting policy, doctors with post graduate qualifications may not get posted in the PHCs but at the CHCs designated as FRUs in the first phase. And the specialists may not get posted at non-clinical posts upto district level.

In the revised Haryana Civil Services (Assured Career Progression) Rules, 2008, state has also made rural healthcare services mandatory for doctors to get promotions (ACP) post 31.08.2009.

ISSUE - There is no specialist cadre in the state. Due to this, the specialists find it difficult to get the posting areas of their relevance with respect to their expertise, which further leads to attrition.

Both, the Medical Officer and Paramedical cadre are managed by Directorate of Health Services. However, some matters like transfers and posting of MOs/SMOs need the nod of Finance Commissioner to take place.

In the NRHM unit, separate cells for different divisions are in place but no HR cell has been formed as yet.

## III. GENERATION OF HUMAN RESOURCES

The current availability of Medical and Nursing schools and colleges is as follows:

S.no.	Name of Institute	Annual Intake
<b>Medical Colleges (6)</b>		
1	Pt. B D Sharma Postgraduate Institute of Medical Sciences, Rohtak (Govt.)	200
2	Maharaja Agrasen Medical College, Agroha (Pvt)	50
3	Maharishi Markandeshwar Institute Of Medical Sciences & Research, Mullana, Ambala (Pvt)	150
4	Shree Guru Gobind Singh Tricentenary Medical College, Gurgaon (Pvt)	100
5	Gold Field Institute of Medical Sciences & Research, Ballabgarh, Faridabad (Pvt)	100
6	BPS Government Medical College for Women (Govt.)	100
<b>B.Sc. Nursing Colleges</b>		

1	Pt. B D Sharma Postgraduate Institute of Medical Sciences, Rohtak (Haryana)	60
<b>GNM Training Schools</b>		
1	General Nursing School, Bhiwani	20
2	General Nursing School, Hissar	20
3	General Nursing School, Karnal	20

To address the HR gaps, MBBS seats have been increased from 100 to 200 seats and PG seats have been increased from 92 to 143 in the state. There are 2 more Medical Colleges being established at Nalhar (Mewat) and Karnal.

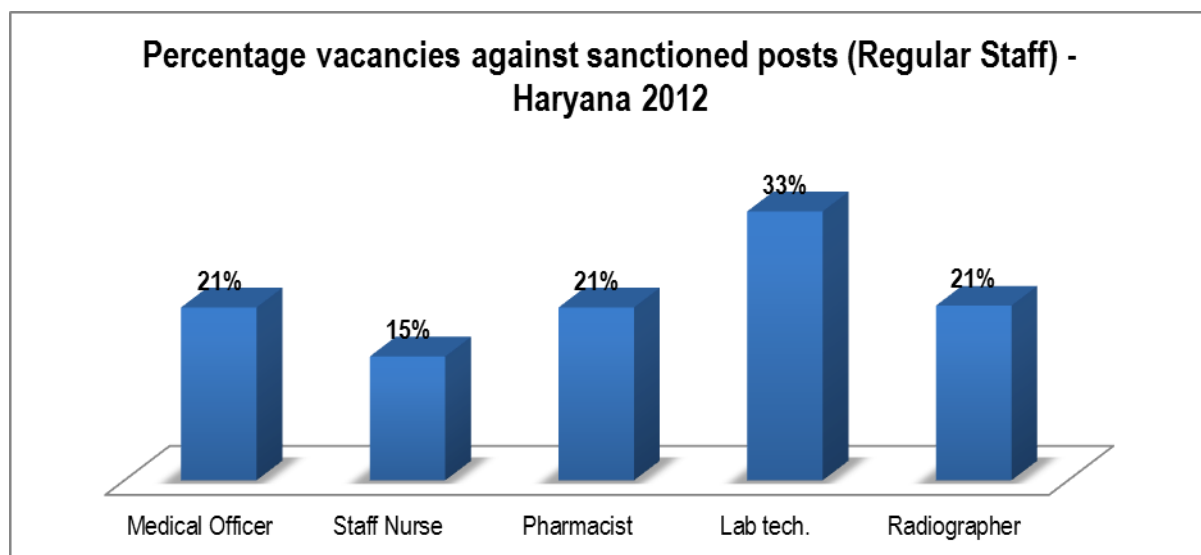
In the private sector, the availability of nursing colleges is as follows:

S.no.	Name of Institute	Annual Intake
<b>B.Sc. Nursing Colleges</b>		
1	KVM Nursing College, Ladhot Road, Rohtak	40
2	Lingay's Institute of Health Sciences (Nursing), Naharpar, Faridabad	40
3	Ved Nursing College, 98 Milestone, N.H.-1 G.T. Road Barauli, Panipat	50
4	Himalyen Institute of Nursing VPO Kala Amb., Sadhaura Road, Distt. Ambala	60
5	Swami Vivekanand Nursing College, Jagadhari, Distt. YamunaNagar	40
6	Shaheed Baba Deep Singh College Of Nursing, Ratia (Fatehabad)	30
7	Swami Devi Dayal College of Nursing Golpura Teh. Barwala Distt. Panchkula	60
8	Sharbati College of Nursing Gaushala Road, Mahedergarh	30
9	Shaheed Udham Singh College of Nursing, Ratia Fatehabad- 125051	40
10	Birender Singh Nursing College Uchana (Jind)	30
11	Dr. Jai Parkash Sharma Memorial College of Nursing, Near Yamuna Nagar	40
12	Haryana College of Nursing Ellenabad, Distt. Sirsa	50
13	National College of Nursing Dhani Garan Road Barwala, District Hisar	50
<b>GNM Training Schools</b>		
1	Philadelphia Hospital, Ambala City	50
2	Christian Hospital, Jagadhari, Distt. Yamuna Nagar	50
3	Maharaja Agarsen Nursing School, Agroha (Hisar)	50
4	Ved Nursing Institute, 98 Mile stone, Nh- 1 GT Road Baroli, Distt. Panipat	20
5	Baba Mastnath Arurveda Shri Krishan Institute, Asthal Bohar, Rohtak	50
6	Rajendra School of Nursing, Dabwali Road, Sirsa	50

7	Lord Shiva School of Nursing, Near Civil Hospital Sirsa	50
8	National School of Nursing, Ratia (Hisar)	50
9	R.R. School of Nursing, 979 Sector-31 Gurgaon	60
10	Shiva Education Society, Kailash Institute of Nursing Chandi Kotla, Panchkula	50
11	S.O.S. Nursing School, Village Anampur Distt Faridabad	30
12	Mahavir Education Society, Arya School Complex, Arya Chowk Ambala City	60
13	M.M. Education Trust, Mullana Distt Ambala City	60
14	Haryana School of Nursing, Main Bazaar, Ellenabad (Sirsa)	50
15	Everest School of Nursing, Kohli Everest School of Nursing, Kohli	30
16	Dr. S.S. Yadav Ram Bhagwan Charitable Meerpur Rewari	20
17	Lala Bahadur Shastri School, Sadhora Rd Marwa Kalan Bilaspur Yamuna Nagar	30
18	Saheed Udham Singh School of Nursing, Ratia (Fatehabad)	30
19	Swami Devidayal Hightech Education Society, Golpura, Barwala (Panchkula)	60
20	Bharat Nursing School, VPO Babain (Kurukshetra)	45
21	Haryana Technical Education Society, Sector-9 & 11, Delhi Road Hisar	60
22	Shri Shayam Siksha Samiti, Near Satnali Chowk, Mahendergarh.	60
23	Ansu Hospital Gopi Colony, Savodhya School of Nursing, Faridabad.	60
24	Gandhi College of Pharmacy, G.T. Karnal	50
25	Shaheed Baba Deep Singh Medical Sciences and welfare Society , Ratia (Fatehabad)	60
26	Rural Institute of Health & Paramedical Sciences, Sonapat.	60
27	Shaheed Bhagat Singh School of Nursing, Yamuna Nagar	60
28	Haryana Gramin Vikas Samaj Sewa Samiti, Florence School & College of Nursing, Faridabad	60
29	Tanriya Charitable Education Society for Dr. J.P. Memorial Hospital YamunaNagar	60
30	Sarbati Nursing School Dev Siksha	60
31	BDM Girls Sr. Sec. School of Nursing Village Chhuchakwas (Jhajjar)	60
32	Maina Education Society KVM Nursing College Ladhok Road Rohtak	60
33	Paramount Education Society, Chhuchakwas (Jhajjar)	60
34	Rama Education Society, Rama School of Nursing Kutubpur Distt. Kaithal	60
35	Shaheed Bhagat Singh Social WelfareTrust, Kalanwali (Sirsa)	60
36	Shanti Devi Education Trust, House No.315 L Modal Town, Rewari.	60
37	S.D. Educational Society, House No. 679, Sector-13 Hisar	60
38	Sant Ganganath Education Society, VPO Kitlana (Bhiwani), Sant Ganganath College of Nursing Kitlana (Bhiwani)	60

#### IV. RECRUITMENT, SANCTIONED POSTS & VACANCIES

In an attempt to address the human resource gaps in the state, recruitment process of Medical Officers has been taken out of purview of Haryana Public Service Commission. For this purpose, Haryana Public Service Commission (Limitation of Functions) Regulations, 1973 has been amended vide notification dated 04.04.2007 & 08.03.2009.



##### A. Regular employees:

- 1. Medical Officers & Specialists:** Post amendments in HPSC regulations, High Powered Selection Committee has been reconstituted for the recruitment of doctors which was earlier looked after by the HPSC. High Powered Selection Committee chaired by Director General Health Services Haryana, holds interviews and recommends the suitable candidates to the government.

*Web enabled process* is being followed for notifying the candidates about their interview date/time & venue and result of the selected candidates. All such announcements are displayed on the website, i.e. [www.haryanahealth.nic.in](http://www.haryanahealth.nic.in) to ensure accessibility of information to all candidates. *Waiting list* is also being kept after the selection process is over. If a candidate doesn't join within 15 days of receipt of application, the candidate next in the panel gets the call to join.

Erstwhile, recruitments used to happen once in a year or 2 years when HPSC was holding the charge. But after DGHS has taken charge in 2008, recruitments are more frequently done. In the beginning in 2008, walk-in interviews were being conducted on 10<sup>th</sup> of every month. But now the recruitments are scheduled twice in a year since 2011. Before DGHS took the charge, 1156 appointments were offered to MOs from 1999 to 2008. Whereas DGHS has already offered 2368 appointments to MOs within the small span of 4 years since 2008.

Even after these drastic reforms in recruitments, not much difference is visible in the backlog status of doctors. Out of the 2368 appointments offered since 2008, only 50% of MOs are retaining their services in the department.

S.no.	District name	Regular Medical Officers	
		Sanctioned	Vacant
1	Ambala	145	-
2	Bhiwani	220	98
3	Faridabad	120	19
4	Fatehabad	120	37
5	Gurgaon	137	9
6	Hisar	193	68
7	Jhajjar	165	44
8	Jind	140	64
9	Kurukshetra	122	12
10	Karnal	164	45
11	Kaithal	122	36
12	Mewat	116	57
13	Narnaul	132	32
14	Panchkula	137	-
15	Panipat	103	35
16	Palwal	101	47
17	Rohtak	163	51
18	Rewari	110	34
19	Sonepat	146	44
20	Sirsa	135	23
21	Yamunanagar	119	21
<b>Haryana Total</b>		<b>2910</b>	<b>776</b>

*Mewat has the most acute shortage of doctors with 33% vacant posts, followed by Palwal (32%), Bhiwani (31%) and Jind (31%)*

Upon visit to CHC Gohana, it was observed that against 7 sanctioned posts of MOs, only single one was filled. However, 3 specialists were selected in the recruitments conducted in last year but none among them joined the services. The facility was functioning without any LMO.

placement and posting is looked after by different Establishment wings of DGHS office.

Sanctioned (S) and Vacant (V) Paramedical regular staff (Haryana)															
S.no	District name	Pharmacist		Lab Technician		Ophthalmic Assistant		Radiographer		MPHS (F)		Staff Nurse		MPHW(F)	
		S	V	S	V	S	V	S	V	S	V	S	V	S	V
1	Ambala	50	13	35	13	2	2	12	6	24	1	128	36	109	4
2	Bhiwani	75	23	69	48	15	3	15	1	41	12	190	25	226	0
3	Faridabad	25	8	32	21	3	0	14	5	14	1	117	56	67	0
4	Fatehabad	31	7	21	10	4	1	11	7	18	14	76	5	109	9
5	Gurgaon	33	11	19	14	6	1	6	2	14	1	98	31	83	0
6	Hisar	63	9	55	24	9	1	8	1	37	10	171	6	207	7
7	Jind	45	2	36	4	7	0	7	3	29	7	93	15	163	0
8	Jhajjar	48	22	31	22	3	0	11	1	23	1	83	3	123	0
9	Karnal	57	11	60	16	3	1	11	6	28	10	116	7	149	19
10	Kurukshetra	33	5	26	7	1	1	4	1	23	1	72	3	113	18
11	Kaithal	36	9	26	2	4	0	13	2	29	4	63	11	143	48
12	Mewat	25	20	24	22	3	3	12	2	16	2	52	38	84	45
13	Narnaul	37	17	28	24	8	0	4	1	31	17	86	46	121	0
14	Panipat	26	3	22	2	2	0	6	1	17	1	50	0	98	0
15	Panchkula	50	8	53	19	1	0	8	2	16	1	54	0	51	6
16	Palwal	28	16	1	1	5	1	9	3	17	8	28	11	90	13
17	Rohtak	45	3	25	19	5	0	6	2	19	0	83	8	124	0
18	Rewari	34	14	28	13	4	0	10	0	22	4	56	22	113	0
19	Sirsa	46	16	36	30	5	2	3	1	35	14	88	13	150	20
20	Sonepat	48	1	38	16	3	0	7	2	22	0	103	1	164	0
21	Yamunanagar	39	15	27	10	3	2	8	1	23	1	68	18	118	37
	Total	874	233	692	337	96	18	185	50	498	110	1875	333	2605	226

*Mewat has the most acute shortage of Staff Nurses with 42% vacant posts, followed by Narnaul (35%), Faridabad (32%), Palwal (28%) and Rewari (28%).*

## B. Contractual employees

All contractual staff get one year contracts subject to renewal after performance appraisal. Recruitments for all service providers takes place at the district level.

1. **Doctors/Specialists:** All vacancies are communicated from the state but recruitments are conducted at district level. A district level committee chaired by Deputy Commissioner and comprising CMO and subject experts from Medical Colleges does recruitments for doctors and specialists.



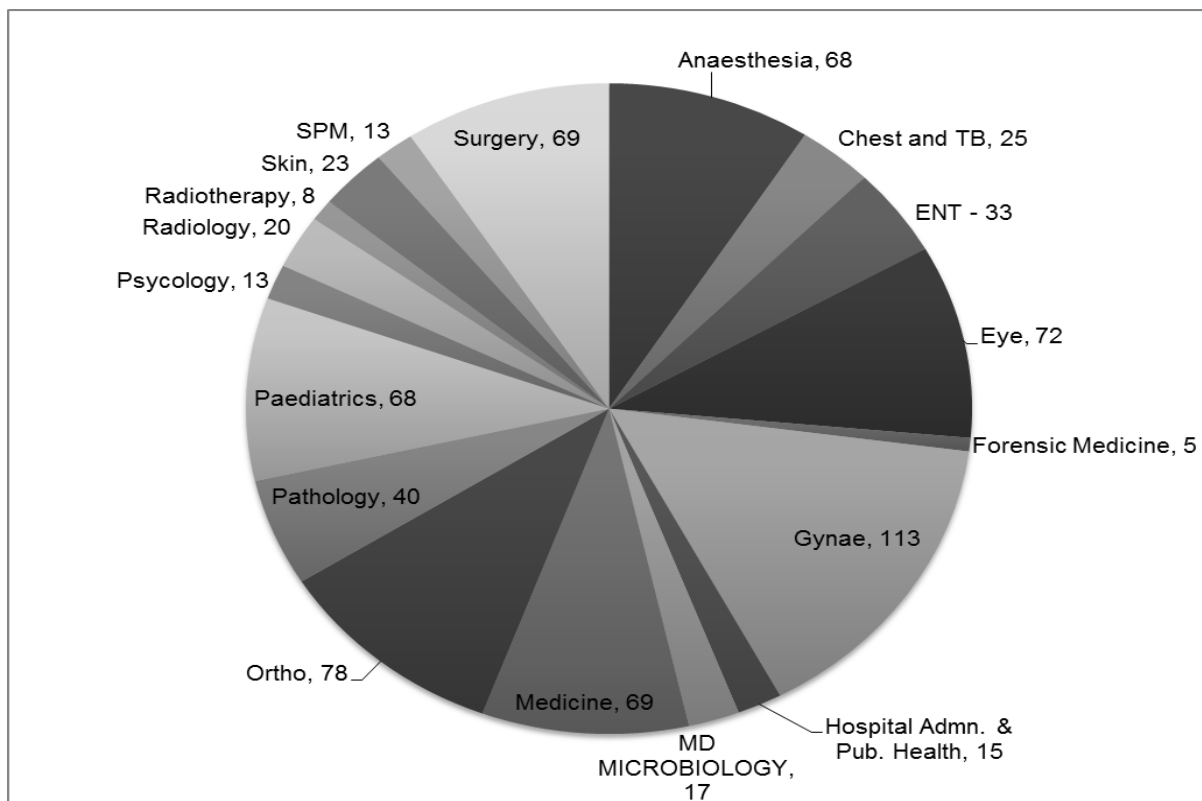
Contractual positions are announced at the places where chronic vacancies exist. Selection procedure involves Walk-in-interviews and the whole recruitment process takes 2 months from advertisement to joining.

2. **Nursing and Paramedical Staff:** District level selection committee headed by Deputy Commissioner does the recruitments. All vacancies are communicated from the state level. Entire process of recruitment (from advertisement to joining) takes place about 3 months. Nursing and paramedical staff gets preferential posting in their local area.

## V. DEPLOYMENT OF HUMAN RESOURCES

State has devised its own staffing norms for doctors, nurses and paramedical staff based on delivery case load. State also reckons HR gaps for FRUs and the other facilities on the basis of these norms.

### Speciality wise breakup of all specialists, Haryana 2012



There are 20 facilities currently functioning as FRUs in the state, out of which 6 are not conducting C-section deliveries. Following table shows the number of FRUs per district along with details pertaining to HR gaps for facilities not conducting C-section deliveries.

District name	Designated FRUs	FRU not conducting LSCS	Lacking specialist (Anaesthetist-A, Paediatricist-P, Obstretecian-OG)
Ambala	3	-	
Bhiwani	2	SDH Dadri	1-P, 1-OG
Faridabad	2		
Fatehabad	2		
Gurgaon	2	SDH Sohana	1-P
Hisar	2		
Jhajjar	2		
Jind	3		
Kaithal	1		
Karnal	2		
Kurukshetra	2		
Mewat	1	DH Mandikhera	No LMO
Narnaul	2	CHC Mahendergarh	1-A, 1-P, 1-OG
Palwal	1		
Panchkula	2		
Panipat	2	CHC Samalkha	1-A, 1-P, 1-OG
Rewari	2	CHC Bawal	1-A, 1-P, 1-OG
Rohtak	2		
Sirsa	2		
Sonepat	1		
Yamunanagar	2		

State has also proposed to deploy AYUSH LMOs in the facilities where it is finding difficult to retain MBBS MOs. Remuneration for AYUSH LMOs affixed at Rs 20000 per month. AYUSH LMOs are to conduct deliveries, provide RTI/STI and IUD insertion services at the facilities.

## VI. TRAINING AND CAPACITY BUILDING

State has a dedicated institute, i.e. State Institute of Health and Family Welfare to look after the coordination and monitoring of RCH training in the state.

Based on training need assessment, SIHFW prepares a training plan annually which covers all major heads under RCH. Table shown below comprises information on number trained so far against the targets:

S.No	Name of training	Category of personnel	Load Current year (2012-13)	Total trained in 2012-13	Cumulative achievement since 2005
1	SBA	ANM/ LHV	684	483	2872
2	SBA	SN	508	391	1779
3	RTI/STI	LTs	270	217	461
4	RTI/STI	MOs	210	159	546
5	RTI/STI	SNs/PHNs	330	283	561
6	EmOC	MO	48	26	122
7	LSAS	MO	20	11	50
8	IMNCI	MOs			163
9	IMNCI	ANMs/ LHVs	675	396	1455
10	Immunization				6435
11	F-IMNCI for IMNCI	Mos	160	51	1138
12	Trained	SN	768	412	1127
13	NSSK Trg	MO/SMO/Peadiatrician, Gynecologist etc.	896	452	3057
14	NSSK Trg	ANM	768	569	4116
15	Contraceptive Update	District RCH program officer, Gynecologists and 10 Gynecologists from private sector, Sister Tutor ANM TC and GNM TC & 1 IMA member	420	214	214

LSAS and EmOC trained doctors are well deployed by the state in the FRUs where there is lack of specialists.

## VII. REMUNERATION

Disparity between regular and contractual staff is seen higher in the Nursing and paramedical staff, with the regular staff getting more salaries than the contractual staff. In case of specialists, disparity was seen skewed towards the other side, i.e. contractual staff posted in difficult areas is getting twice as much salary as of regular MOs. In addition to getting higher salary, they (contractual staff) are allowed to do private practice also which the regular MOs are not allowed.

Format for Performance appraisal of regular staff is well in place.

Since the NRHM unit doesn't have any HR cell therefore no mechanism for performance evaluation of the contractual staff is being followed.

## **VIII. RETENTION STRATEGY**

As per the posting policy, a doctor once placed at a particular place shall have to serve there for at least 3 years. Even after that, s/he shall not get transferred, provided his work is satisfactory and s/he wishes to continue in the facility.

At the time of joining, promotion or transfer request, MOs are asked to fill three choices for posting. An attempt is then made to post them in their preferred area of posting. This also helps in attracting the doctors from the neighboring states.

State has good road connectivity linking the rural areas to the cities/towns, which is why people prefer to visit District Hospitals (DH), whenever in need. Considering DHs to be the most preferred facility for treatment by the people, state has increased the specialists posts at the DHs. This has served in the interests of specialists not willing to move to rural areas.

NRHM Haryana offers a remuneration of Rs 80,000 to the specialists posted in difficult areas and Rs 50,000 to the MOs posted at SNCUs. On the other hand, MOs as fresh recruits get a consolidated salary of around Rs 39,000.

In addition, State has made a credit marks system, according to which the MOs having served in rural areas get the weightage in PG examination.

In a wake to address gaps in health service delivery, state has also recommended extension of retirement age of doctors from 58 years to 60 years. State has also recommended engagement of specialists on contractual basis for 2 years after their recruitment.

## **IX. HEALTH HUMAN RESOURCE INFORMATION SYSTEM**

State has no computerized system of tracking real time information on Human Resource. However, as per the transfer policy of HCMS Doctors I & II, Civil Surgeon shall submit consolidated report of relieving/joining of doctors and engagement of contractual specialists to update computer records in Head Quarters on fortnightly basis.

ISSUE- Increased coherence between the DGHS and NRHM office is required in terms of information sharing.

## **X. WORKFORCE MANAGEMENT**

- A. Regular staff: Transfers & posting of Medical Officers are overseen by Directorate as a whole but need the nod of Finance Commissioner to take place. State has all policies for recruitment, transfers, posting and promotion. To get promotion, a Medical Officer is required to do at least 2 years of rural service in all phases of his/her ACP.
- B. Contractual Staff: Annual contracts are given to the contractual staff, which get renewed based on their performance appraisal at the district and state level. There is no scope for promotions. No transfers are done for contractual staff. Contractual staff is preferably employed at the facilities where the chronic vacancies exist. Terms of reference, job responsibilities for all categories of contractual staff are available in the state.

## **XI. MANAGEMENT CADRE**

- A. **Regular cadre:** At the state level, Director General of Health Services heads the directorate. There are different Establishment wings looking after establishment issues of different category of personnel, each headed by a Deputy/Addl/Joint Director. All positions in the DGHS office are filled either by the cadre of Medical Officers or Senior Medical Officers barring one post of Additional Director, which is filled by senior HCS officer.
- B. **Contractual cadre:** The state doesn't have State Programme Manager. Director (Admin & Procurement) and Director (MCH, BCC) report to Mission Director. Under the Directors, Joint directors have been assigned various subdivisions who get the support from the consultants of those respective subdivisions.

## **XII. PARA STALAS**

- 1. **State Institute of Health and Family Welfare:** SIHFW looks after coordination of all RCH training in the state. It is led by a Principal and assisted by a team of faculty and a

group of Consultants, viz. (Consultant RO, Consultant Medical and Consultant Management).

2. **State Health Systems Resource Centre:** SHSRC serves as a technical support unit to NRHM Haryana. It is headed by Executive Director and comprises a team of Junior Consultants, Consultants and Senior Consultants.

### **XIII. ACTION POINTS**

#### **SHORT TERM**

- Human Resource Information System (iHRIS) is required by the state to track real time information on HR tracking and proper deployment of trained and untrained staff.
- Increased coherence between DGHS Office and NRHM Office in terms of information sharing.
- Increase in seats in Govt Medical colleges with the compulsory rural service bond of some duration.
- SPMU should have a dedicated HR cell to look after the HR issues of the contractual staff.

#### **MEDIUM TERM**

- State should make a separate cadre for specialists.
- Lessen disparity between the salary of contractual and regular staff.
- Concept of Paying clinics, as mentioned in the Haryana Civil Medical Services Rules may be brought into the application. With this, the MOs will be able to do private practice for which they have to give a share to the government.

#### **LONG TERM**

- Creation of adequate number of regular posts for health facilities.
- Creation of adequate number health facilities.