Systematic Reforms in Strengthening of Human Resource for Health with special reference to Nursing Cadre in the State of Odisha

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Problem Statement

Health sector, more than any other sector, depends on people to carry out its mission. In this regard, the human resource scenario in health sector of Odisha is faced with a challenging job of providing optimum & effective services with limited workforce in clinical & non clinical facets. Currently, the State's Doctor/ Staff Nurse Ratio is 1:1.06 against the norm of 1:3. The ratio between Nurse (HW-F & Staff Nurse) & Population is as high as 1:3500. For a population of 5522 there is only one female worker at grass root level. The major Human Resource issues in public health care faced by govt. of Odisha includes, shortage of doctors and paramedics, reluctance to work in difficult areas, low salary/package, lack of promotional avenues as there are few positions at supervisory and top management levels. In order to overcome these issues various steps have been taken to improve & strengthen the existing human resource in the State through various reforms and innovative measures.

Programme Description: Human Resource Policy Reforms

Systematic Reforms have been made by Govt. of Odisha towards Strengthening the Human Resource in Health sector with special focus on restructuring of Nursing Cadre as outlined below:

(a) Strengthening of Nursing Cadre

- **Unified Structure nursing cadre** is now in place.A separate Nursing Directorate has been formed headed by a Director (based on seniority & competency) with defined management structure.
- GoO has created 10,301 additional paramedical posts, which includes 5164 HWF, 991 HWM, 2934 Staff Nurse, 954 Laboratory Technician and 258 Radiographer during 2013-2014, as per revised IPHS 2012 norms.
- In order to strengthen the nursing cadres, State has also created the post of 314 BPHNs, 62 Deputy PHNs, and 30 District Public Health Nurse (DPHN), who are to be promoted from ANM cadre.
- Scholarship scheme (funded under NRHM) is in place for ST/SC students of GNM & BSC Nursing.
- State Govt. has allowed recognition by INC & ONC to students who had passed out from Pvt. institutions for regular service
- Establishment of Training Centers: Four new ANM training centres and 7 new GNM centres have been proposed for saturating requirement in KBK+ districts. The existing 16 ANM & 7 GNM centres are also being strengthened through infrastructure provision from State budget & OHSP.

• Quality Nursing Education which includes mentoring support for capacity building of poor performing ANMs, Quality pre-service training, continued Nursing Education for the peripheral nurses on different issues of nursing through Video Conferences.

(b) Restructuring & Strengthening of Medical Cadre:

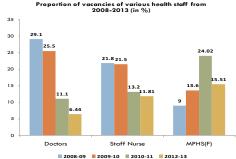
- Restructuring of Odisha medical Service Cadre: The post of Addl. Secretary has been upgraded to Special Secretary (Tech.). Eight selection grade posts have been created. Posts for Jt DHS (II) have been increased from 277 to 1445. Entry level doctors have been elevated from Jr Class II to Jr. Class I.
- Multiple strategies adopted for posting of doctors ad-hoc/contractual/ OPSC.
- Incentives: incentives for doctors working in KBK region (Rs. 8,000/- for periphery and Rs. 4000/-Dist. HQ). Specialist allowance of Rs. 3000/- has been introduced.
- Increase in intake capacity of Medical Colleges from 150 to 250 & proposal moved to GoI for establishment of 4 new Medical Colleges (2 in KBK+ districts)
- Setting up Medical Colleges in PPP mode is being encouraged- clearance issued for 13 proposals
- Mandatory rural posting for a period of 5 years.
- Public Health Cadre created with establishment of Directorate, Public Health
- Multi-skilling of health personnel for optimal utilization of the existing scarce health resources.

(c) HR Innovations & Initiatives under NRHM

NRHM Odisha is supporting the existing State health system by providing clinical (AYUSH doctors, Staff Nurse, 2nd ANM, LT and pharmacist), technical & management professionals looking after programme, finance, MIS/IT and civil. Besides this, various HR development initiatives have been taken which include, **Performance Review of staffs** using composite index, **Campus recruitments** from premier institute like IIHMR, **maintaining a** web based Human Resource Management Information System, providing **Closed User Group (CUG) SIM** to various Health Service Providers, **Career progression of the in-house employee, trainings and exposure** visits to consultants and staff of the Society and developing of **HR Manual** for NRHM personnel.

Outcome/Impact of HR reforms

- Decreased Vacancies of doctors & paramedics due to various reforms and restructuring measures.
- Improved Service delivery: Due to rational deployment of personnel at delivery points there has been substantial increase in IPD and OPD load. The IPD has increased by 17.48% & OPD by 9.80% from last year.
- Improving Health indicators: With these initiatives in place there has been a declining trend in IMR (18 point decline from 75 in 2005 to 57 in 2011) and MMR (100 point decline from 358 in 2003 to 258 in 2009) of the State as per SRS reports.



Scalability and Conclusion

The initiatives taken by govt. of Odisha towards bringing systematic reforms in medical, paramedical and managerial levels is an exemplar that can be replicated in other regions of States of the country for bringing down the gap in manpower as well as improving service delivery through focused interventions. The human resource reforms have lead to increase in manpower support to the State over the years and have contributed in reducing IMR, MMR, Under 5 mortality to a great extent.

Person to be contacted for future reference

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