



Amendment of Uttar Pradesh Medical and Health Service Rules

Direct recruitment of specialists at L2 level (Specialist cadre)

Background

Uttar Pradesh's public health system faced a critical shortage of specialist doctors, which had undermined its ability to deliver high-quality healthcare services. Out of the 8,074 specialist posts created in the Department of Medical Health in the year 2018, only 2,290 had been filled, leaving 5,784 positions vacant—a staggering 63.8% vacancy rate. This shortage had been particularly concerning as specialist doctors played a crucial role in managing complex cases and improving health outcomes, especially for maternal and child health. The lack of specialists had posed a significant barrier to achieving better health indicators and had disproportionately affected marginalized and underserved communities in the state.

The root cause of this crisis had stemmed from systemic issues related to the recruitment and retention of specialist doctors. Despite the urgent need, the then-existing recruitment rules for the Uttar Pradesh Medical and Health Services (PMHS) cadre had only required an MBBS degree, without differentiating between general practitioners and specialists. As per the existing rules, the specialist doctors were considered at the same level as MBBS doctors, without any differentiation of

seniority and lack of incentives. This significant policy flaw led to scant motivation among the specialist doctors to join government services in the state of UP.

The inability to fill specialist posts had cascading effects on health policy and planning. Unfilled vacancies reduced salary expenditures, weakening the health department's case for creating more positions and securing additional funding. This diminished resource allocation hindered the expansion of healthcare infrastructure, leaving the system ill-equipped to meet growing demands. Moreover, relying on MBBS doctors to pursue specializations on their own further complicated workforce planning, as their chosen specialties often failed to align with the state's health priorities, deepening the misalignment between workforce capabilities and public health needs.

To address this strategic challenge, the Government of Uttar Pradesh needed to revamp its recruitment policies to mandate post-graduate qualifications for specialist posts and establish targeted recruitment strategies that aligned with the state's healthcare needs.

Previous Efforts on supply side by GoUP

In its efforts to enhance the availability of specialist doctors in the public health system, the Government of Uttar Pradesh (GoUP) has explored multiple strategies. Initially, the "Walk-in Model" was introduced under the National Health Mission (NHM), targeting urban centers. While this approach helped urban areas, rural regions continued to face a shortage of specialists. To address this gap, the "Bidding Model" was implemented, which relies on funding from the Government of India. However, this model's financial sustainability remains uncertain for the state, and it fails to provide the job stability sought by specialist doctors. An "Empanelment of Specialists" approach was also tried, but the lack of available specialists in certain areas hindered its effectiveness. This model also could not guarantee the consistency of services compared to employing in-

house doctors.

To build capacity internally, GoUP focused on training MBBS doctors in Life Saving Anesthetic Skills (LSAS) and Emergency Obstetric Care (EmOC). Despite these efforts, only two centers in Uttar

Pradesh were accredited for EmOC training, with plans to accredit two more, which was insufficient given the scale of need. The translation of training into practice was suboptimal, reflecting a significant "know-do" gap. Additionally, the state offered preferential weightage in postgraduate admissions for in-service MBBS doctors. While this policy aimed to encourage specialization, its impact on the overall availability of specialists



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into practice was limited, as it was contingent on the individual motivations of doctors and did not align with public health needs.

Previous Efforts on demand side by GoUP



The Government of Uttar Pradesh (GoUP), in its strategic efforts to mitigate the shortage of medical specialists, has implemented several technology-driven substitution measures. By using video and tele-consultation services, the state connects patients with specialists in remote locations, ensuring access to critical care where physical presence isn't required. However, recognizing that certain specialties, like surgery, cannot be substituted through remote consultations, GoUP has also strengthened the demand side by offering free ambulance services. These ambulances transport patients to district hospitals and other centers where specialists are available, enhancing timely access to care for critical services.

Gaps Identified

The existing systemic approach to addressing the shortage of specialists in Uttar Pradesh has faced critical gaps, with temporary measures proving unsustainable and yielding limited results.



Video and tele-consultation initiatives created resentment among regular medical staff due to the bidding payment model.



Many specialists opted to stay in the general MBBS cadre instead of transitioning to specialized roles.



Free ambulance services are hampered by unreliable road conditions and connectivity.



Disparities in administrative posts allowed junior MBBS doctors to advance more quickly, causing resentment among specialists.



Past failures to establish a specialist sub-cadre stemmed from assigning sub-cadres based on personal financial gain rather than state healthcare needs.



Some administrative MBBS officers also served as specialists, leading to feelings of unfairness and resulting in litigation.

Given these past challenges, a more sustainable, systemic-level solution must consider the interests of all stakeholders while balancing the state's healthcare requirements. Addressing these concerns in a new model are crucial to ensure that the failures of the previous efforts are not repeated.

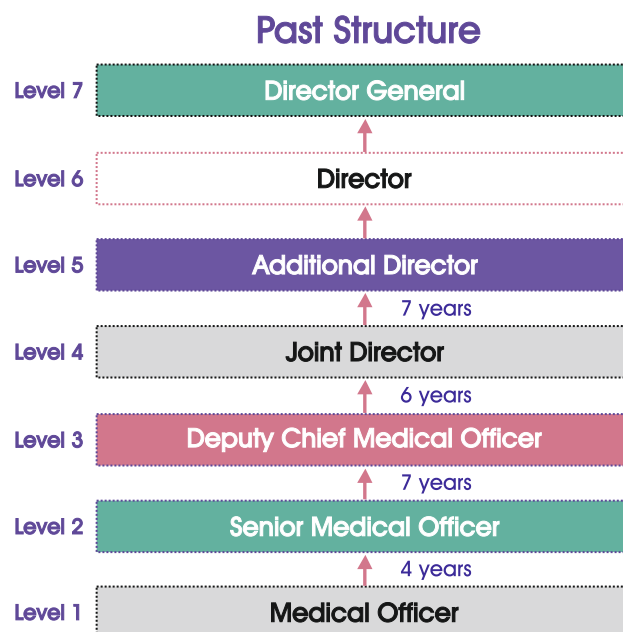
Amendment of UP medical health and service rules

In response to urgent healthcare challenges, and after extensive consultations with all relevant stakeholders, including health partners like UP-TSU, the UP government took a decisive step in December 2020 by approving new service regulations for the PMHS

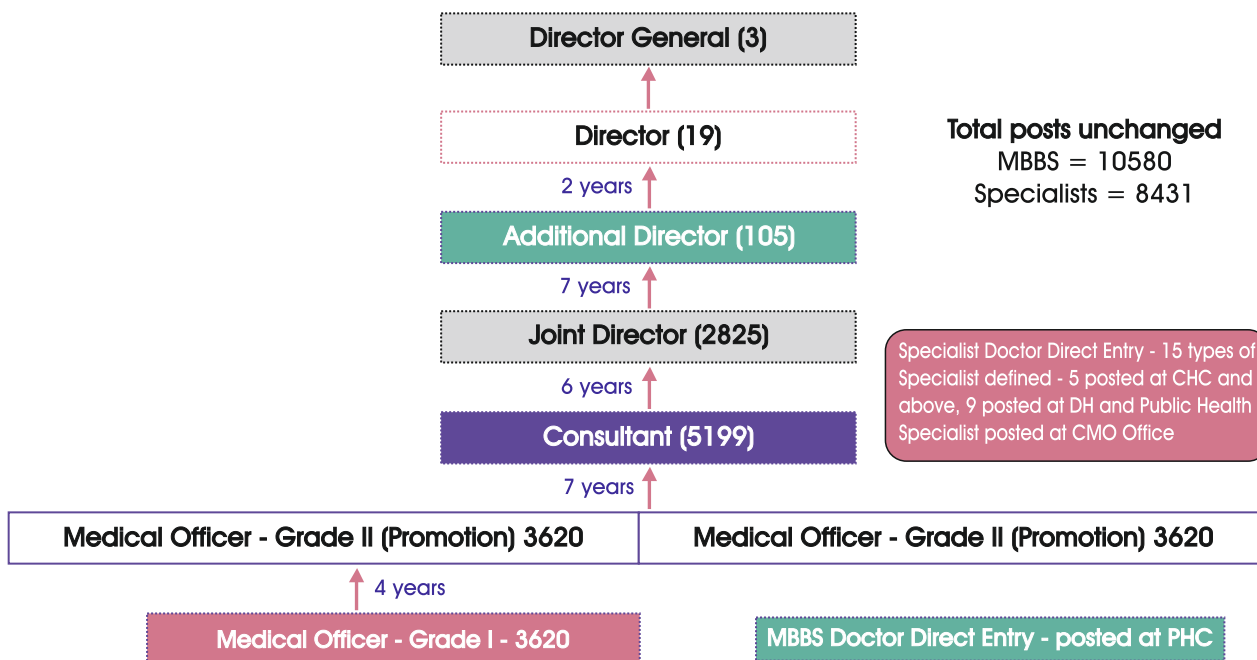
(Provincial Medical and Health Services) cadre. These regulations were strategically designed to ensure the direct and targeted recruitment of specialist doctors, addressing a critical gap in the state's healthcare system. Recognizing that specialists

undergo three additional years of training compared to MBBS doctors, the government introduced a provision to appoint these specialists at L2 level as compared to MBBS doctors which are at L1, thus clearly differentiating the seniority.

Doctor's Cadre Structure



Revised Structure



Impact

This strategic move successfully addressed concerns about attracting qualified professionals and led to a significant number of specialist doctors applying for the advertised positions. By 2020, there were 3,600 regular specialist doctors across the state. Following the amendment in the service rules, an additional 860 regular L2 specialist doctors have been recruited through transparent selection process conducted by

the Public Service Commission. Representing a 23.89% increase in the total number of specialist doctors by 2024.

This large-scale recruitment of specialist doctors into the PMHS cadre marked a transformational milestone in the state's healthcare system. Specialist doctors were given the opportunity to choose their posting locations based on merit through a well-organized counselling session.

In a landmark ceremony, the Honourable Chief Minister handed appointment letters to 310 specialist doctors in the first phase of the recruitment drive. This strategic intervention not only strengthened the healthcare infrastructure but also demonstrated the government's commitment to addressing critical gaps in specialist care across Uttar Pradesh.

