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PLANNING FOR HEALTH PERSONNEL IN PRIMARY HEALTH CENTRES OF DHADGAON TAHSIL IN NANDURBAR DISTRICT (MAHARASHTRA)

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Abstract:-The role of health personnel is very important in health care service system. All types of medical personnel are employed by the Government of Maharashtra to provide health care service to the rural and tribal areas. Generally there is a great shortage of proper health care personnel in all the tribal belts of Maharashtra. A Dhadgaon tahsil is not an exception. The shortage is due to the inaccessible nature of the area as well as the socio-cultural factors, lack of basic civil amenities, linguistic problem, lack of job satisfaction, etc. The role and service of health personal from nurses, compounders and ward boys to doctors is very important in treating the common people through PHC's. Adequate number of staff is very essential for making the health services and facilities available to the public. The study area Dhadgaon tahsil is extremely inaccessible and so most of the PHCs do not have adequate staff. So Govt. needs to give more attention to providing adequate staff to the health centres in Dhadgaon tahsil.

For the utilization of proposed health care facilities efficiently and effectively, here health personnel like doctors health assistants, compounders, health workers, dressers, ward boys are considered very essential.

Keywords:Health , socio-cultural factors , medical personnel , health workers,

AIMS & OBJECTIVES:-

In order to fulfill the aim of the study following objectives have been set:-

- 1) To assess the existing health Personnel and to propose adequate health Personal.
- 2) To suggest the future health personnel requirement.
- 3) To find out the problems of health Personnel.

HYPOTHESES:-

- 1) Physical and socio-cultural factors affect the Regularity of health Personnel.
- 2) According to the population norms health personnel are inadequately available in the study area.

RESEARCH METHODOLOGY:-

Source of Data: This study is based on primary and secondary data. Primary and secondary data regarding health care facilities will be obtained from the primary health centers. The data will be processed with the help of suitable statistical methods. That is population projection.

INTRODUCTION:-

The need for health care varies in space and time the organization of provision necessarily has a spatial component.

Health care is a public right and it is the responsibility of the government to provide the Health care facilities to all people in equal measures. Considering this principle, the Govt. of Maharashtra has established primary health centres in the rural and tribal areas for providing health services to surrounding villages. There were eight primary health centres in the Dhadgaon tahsil. All these primary health centres have got the status of tribal health service centre. In Dhadgaon tahsil the distribution of primary health centres is more or less uniform. Relief and inaccessibility of the region has influenced the distribution of primary health centres. In the eastern part of the tahsil, Toranmal is the only one primary health centre.

Dhadgaon Tahsil: - Existing and Required Number of Health Personnel

Sr.No.	Health Personnel	Existing 2001	Requirement				
			2001	2011	2021	2031	2041
1	Doctors	08	08	09	12	25	57
2	Health Assistant	16	16	18	24	50	114
3	Health Worker	58	92	112	170	320	766
4	Health Educators	08	08	09	12	25	57
5	Pharmacist	08	08	09	12	25	57
6	Staff Nurses	08	08	09	12	25	57
7	Lab Technicians	08	08	09	12	25	57
8	Dressers	07	08	09	12	25	57
9	Ward boys	08	08	08	08	11	27
10	Sweepers	08	08	09	12	25	57

Doctors:-

The national health plan has recommended one doctor per 20000 tribal populations. It means there should be minimum one doctor for every primary health centre for its proper functioning. At this rate minimum 8 doctors were essential for all the primary health centres in 2001. But as the tahsil is mountainous, this norm of one doctor per 20,000 populations can not be applied.

Taking in to consideration the projected population for the decennial years 2011, 2021, and 2031 the expected number of doctors is estimated 9, 12 and 25 respectively.

Health Assistant :-

The national health plan has recommended two health assistants. For the population of 20,000 in tribal area to work under the scheme of multipurpose workers. The assistants will consist of one male and one female person. These health assistants have to make domiciliary visits and provide preventive health care measures, maternal and child health care, immunization detection of communicable diseases, prevention of such diseases, health education for the prevention of diseases and sanitation and motivation for family planning. the health assistants can play a very important role in the tribal health care services.

The required number of health assistants in the years 2011, 2021, 2031 will be 18, 24 and 50 respectively.

Health Worker :-

The sub centres are the peripheral out post of the existing health care delivery system in the tribal areas. They are established on the basis of one sub centre per 3000 population. One male and one female multipurpose health workers are employed to run each sub – centre.

As per the projected population the number of health workers needed in 2011, 2021, and 2031 will be 112, 170 and 320 respectively.

Health Educators :-

The services of health educators are required in primary health centre for educating, informing, motivating and helping people about health lifestyle and hygiene practices. The health educators in the primary health centres are supposed to collect and maintain data about the fertility, morbidity and mortality of different diseases. The national health plan has recommended the services of health educators. They can play a very important role at the primary health centres.

During the year 2001, the required and existing number of health educators in the study area was 8. But as per the projected population in 2011, 2021 and 2031 the number of required health educators will be 9, 12, and 25 respectively.

Compounder Pharmacists:-

Pharmacists or compounders are the assistants to the doctors. They help the doctors in preparing medicines and mixtures. They are specially important in the tribal area, because there was no private medical stores in the areas. So the patients depend mostly on the medicines given at the Government Hospitals. The pharmacists can even treat minor ailments in the absence of the doctor.

During the year 2001, there were 8 required and existing pharmacists in Dhadgaon tahsil. And so they were adequate in number. But as per the population projections in the year 2011, 2021 and 2031 the required number of pharmacists will be 9, 12 and 25 respectively.

Staff Nurses:-

A number of nurses and midwives are employed besides doctor and other supporting staff in the primary health centres. Nurses play a very important role in looking after the patients. They establish good rapport with the patients and help them in healing earlier. Besides nurses are very important to provide round the clock and very emergency services in the tribal area.

During 2001, there were eight nurses required and also appointed. So they were sufficient as per the norms. But as per the population projection in the years 2011, 2021 and 2031 the number of required nurses in the study area will be 9, 12 and 25 respectively.

Lab Technicians :-

Dhadgaon tahsil is very inaccessible for the modern medical services, the people of the area can't avail themselves the services of private pathological laboratories. Hence the services of lab technicians are most important. Without their services doctors can't arrive at proper and accurate diagnosis of any disease. And in the absence of proper diagnosis, medical treatment remains ineffective.

The national health plan has recommended the services of one lab technician per P.H.C. And there were adequate number of lab technicians in the year 2001. They were eight in number in the years 2011, 2021 and 2031, the required number of lab technicians will be 9, 12 and 25 respectively.

Dressers :-

Dressers are very important for every primary health centre. Their service is very essential in treating the wounds and helping the doctor in minor and major surgeries. They can play very important role even in absence of doctors to treat minor injuries.

In the year 2001 the required number of dressers were 8 but only 7 were actually working. As per the health plan recommendations and the projected population in the years 2011, 2021 and 2031, the required number of dressers will be 9, 12 and 25 respectively.

Ward Boys :-

Ward boys are also very important for doing physical and manual work at every primary health centre. They help the doctor's nurses as well as the patients very much. They do all types of Sundry works. There is no specific qualification and training required for this post. Ward boys are usually underpaid servants in the medical service.

Every primary health centre must have a ward boy. The number of required and existing wardboys in the study area were 8 in 2001. As per the health plan recommendations and projected populations in the year 2011, 2021 and 2031, the required number of ward boys will be 8, 8 and 11 respectively.

Sweepers :-

Sweepers carry out all kinds of cleaning and swiping work. They are very important to maintain the atmosphere of the

health centre healthy and hygienic. Without their services health centres will become unhealthy and unhygienic. Hence to prevent The Spreading of any contagious diseases, sweepers can play a very important role.

During year 2001, the required number of sweepers were eight and the existing number were also eight. But as per the health plan recommendations and projected population in the year 2011, 2021 and 2031, the required number of sweepers will be 9, 12 and 25 respectively.

CONCLUSIONS:-

As the population of the area has low density and is spread over far flung hilly areas. The primary health centres like Talai and Toranmal are located in the inaccessible hilly areas. So due to the lack of basic civil amenities and other infrastructural facilities the doctors are most unwilling to stay there. Therefore, sufficient and adequately spacious residential quarters should be provided to the doctors and other personnel.

However, it is also noticed that sometimes the posts for health assistants remain vacant for months together and are not filled quickly by the health administration. Most of the health workers are very much unwilling to work in such Tahsils as these areas are far away from the district head quarters and there is a lack of basic amenities. Besides there is a lack of seriousness about the service.

In the year 2001, the required number of health workers were 92, but the actual number of health workers serving in the area was only 58. It means more than one third health workers were lacking in the entire system of the tahsil.

However, it is found that the services of the health educators are not used effectively and fruitfully. So only very skilled and motivated health educators should be employed in the tribal area.

The medical staff and particularly the nurses in the tribal area face great difficulties for their residences. Hence they should be provided proper residential quarters with minimum basic amenities like water, electricity toilets etc. so that they can stay there permanently and provide their best services.

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