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GROUP MEETING ON VITAL AND HEALTH STATISTICS

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STATISTICS ON HEALTH PERSONNEL

by

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In order to fight disease and improve public health, knowledge of the available resources is necessary. Out of the many pre-requisites for health planning, the knowledge of available health manpower comes first. For the purpose of the execution of various health projects, the knowledge of the ability of workers for a particular project is necessary. It can, therefore, be seen that, in addition to the total number of health workers, their sex, age, professional qualifications and experience must be known.

It may be easy to know the number of certain categories of health workers, such as doctors, nurses and health visitors, if they are registerable with the authorities concerned, however for other categories the question is not very simple.

In Pakistan doctors are registered with the Pakistan Medical Council, while nurses and health visitors are registered with the Nursing Councils, of which there are three, namely the East Pakistan Nursing Council, the West Pakistan Nursing Council and the Pakistan Nursing Council. In certain cases this results in duplication of registration.

The same difficulty was experienced in cases of doctors until 1962, as there were three registration authorities (Medical Councils) in the country. However, in 1962 the three Medical Councils were amalgamated and now there is only one authority for registration of doctors in the country.

These registration authorities try to keep the list up-to-date, yet the number supplied by them has certain fallacies. Their figures do not take into account those who are dead, those who have migrated from the country and those who are inactive.

Since it is not obligatory for specialists to inform the medical council of their additional qualifications, the medical council is not in a position to give the number of specialists in the country. Furthermore, the address available with these councils is that given at the time of registration, although it does not necessarily follow that this is the current address.

It is therefore obvious that the information available with registration authorities is insufficient for purposes of health planning. The necessity arises for a system by which the total number of health workers, their field of speciality, sex, employment record and latest address can be known.

With this objective the Government of Pakistan promulgated an ordinance entitled the Medical Qualifications "Information" Ordinance 1960. Under the provisions of this ordinance all medical and para-medical personnel, whether in the employment of the Government or not, were directed to furnish the information to the Director General Health in a given proforma. The ordinance also provided that persons who first qualify or add to their basic qualification after the promulgation of this ordinance should furnish such particulars to the Director General Health within one month of their first qualifying or adding to their basic qualification, as the case may be. This provided a good base and the information collected in 1960 was compiled, tabulated and printed in a book entitled "Health Personnel in Pakistan (as on 31 March 1960)". Thereafter, information relating to the period 1960-1963 has also been collected, compiled and published.

Also the Ministry of Health, Labour and Social Welfare in Islamabad decided to keep personal history cards of health workers and to follow them up every two years, in order to have up-to-date information. To start with, personal history cards for doctors are being prepared. Their addresses are obtained from teaching institutions as well as from the registration authority so as to contact them and obtain their particulars. This also helps in finding out the number of doctors being trained in the individual institution. It is proposed to contact them every two years to find out if there has been any change in their

employment/service record or any addition to their basic professional qualification, etc. The information on the personal history cards can easily be transferred to punch cards. Similarly, it is intended to keep information on nurses and health visitors up-to-date.

With regard to indexing the registration number of the individual, it has been found that the easiest method for tracing a particular history card is to give a reference to the serial number of the personal history card. The cards are thus arranged according to serial numbers.

Other health personnel, such as sanitarians, pharmacists, laboratory and X-ray technicians, are not registered with the Health Authority. Their number is obtained each year from the respective teaching institutions, so as to have an idea of the number in the country.

It may not be difficult to also have individual history cards for these health personnel, but the amount of work will require substantial statistical organization and expenditure, which in developing states may not be forthcoming.

It is suggested that this Group Meeting recommends that personal history cards of health personnel (to start with for doctors, nurses and health visitors) be kept by Member States.

DOCTOR'S PERSONAL HISTORY CARD

1. Seria Number
2. Year
3. Name
4. Domicile (i.e. East or West Pakistan)
5. Father's name
6. Home address
7. Present postal address
8. Date of birth
9. Religion
10. Sex
11. Nationality
12. Marital status (i.e. single, married, widow, divorced, etc.)
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13. Knowledge of foreign language other than English
14. Educational qualification (i.e. Matric, I.Sc., B.Sc., etc.)
-
15. (a) Professional Basic qualification
- (i.e. L.S.M.F., M.B.B.S., etc.)
-
- (b) Year of qualifying
-
- (c) Place and institution from where qualified
-

16. (a) Professional postgraduate qualification(s)

(b) Year of qualifying

(c) Place and institution from where qualified

17. Speciality (only for postgraduates).....

18. Present occupation:-

(a) If in Govt./semi-Govt. service,

Department/organization in which employed Date of joining

(b) If employed under local bodies, private firm, etc.,

Authority under whom employed Date of joining

(c) If in private practice,

(i) Address of the clinic

(ii) Special field of practice (if any)

i.e. General, paediatrics, dental

ophthalmology, maternity

gynaecology, etc.

(d) If not in employment or private practice

please state reasons

19. Registration number(s) Council(s) with which registered

(PRINTED ON THE BACK OF THE CARD)

Designation with address	From	To
.....
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