



Government of the People's Republic of Bangladesh  
Ministry of Health and Family Welfare

# Human Resources Report

## December 2018



## Directorate General of Nursing and Midwifery

DGNM-PMIS section

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In collaboration with  
Human Resources for Health (HRH) in Bangladesh



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**Director General, Directorate General of Nursing and Midwifery**  
Ministry of Health and Family Welfare  
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## MESSAGE

I am glad to present the sixth Human Resources (HR) report for Directorate General of Nursing and Midwifery (DGNM) in close collaboration with Human Resources for Health Project in Bangladesh. In this report, we are highlighting many, though certainly not all, of the DGNM's accomplishments and activities to advance our vision ensuring hundred percent data entry to the DGNM-PMIS software. PMIS software facilitates us to provide all related data of DGNM's employees. Health sectors of Bangladesh are gradually improving their service by approaching digitalization in everywhere. DGNM is also keeping in tune to go forward. PMIS software of DGNM is a reflection of total digitalization concept. As the end of December 2018 more than 27,000 thousands employee's data are entered into the PMIS software and others are on process.

DGNM will convert the current website to A2i designed website in March 2019. An official email-system has launched which helps all the district civil surgeon offices, district public health nurses, nursing Institute and colleges to connect with DGNM-HQ. In the development of IT sector in nursing and midwifery department different online service has started such as, application submission, promotion information, different leaves, important orders and notices.

More new nurses recruited in October 2018 helps DGNM to step forward for ensuring quality health services. I appreciate this initiative and I hope this new workforce will contribute more to the advancement of this sector. I hope this report gives DGNM employee further insight into the work and for other readers it will give at a glance image of present and future DGNM activities. Our employees are our greatest resources, and I am proud to say we have a team committed to working together for the advancement of future nursing services and education.

I thankfully acknowledged the technical support and financial support from the Global Affairs of Canada (GAC) through their Human Resources for Health project in Bangladesh implemented by CowaterSogema.

I congratulate members of the publication team of Directorate General of Nursing and Midwifery for their ingenious and persistent efforts to improve the quality of DGNM-PMIS and publish the report.



**Tandra Sikder**

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## Section 1: Introduction and overview

### Background:

For developing a digitalized nursing and midwifery sector, DGNM is progressively going forward. DGNM has already established different websites for nursing and midwifery related organization by the assistance of HRH project since 2012. Current government has given tremendous effort to digitalize the entire government's ministry especially Ministry of Health and Family welfare. Health is a basic human right. To improve the quality of health services, a large number of workforce is working together. Among them nurses are playing a crucial role to fulfill the goal of SDG's. DGNM staffs are working in nine special sections these are: Admin-1, Admin-2, Education, Finance and Budget, Coordination, Personnel Management Information System (PMIS), Discipline, Operational plan, Training and Foreign visit.

Human Resource for Health (HRH) project constantly assists DGNM to update their workforce information in PMIS software. With the help of ICT ministry HRH has established secured and sustainable information recording system through PMIS.

The report is targeted to policy makers, development partners, private sector entities, non-government and civil society entities, media, academia and the citizens to understand the current human resources information. DGNM took the initiative to publish HR report six-month interval based on data generated from DGNM-PMIS software with the support of HRH project.

This is the 6th HR report of DGNM. From 16 November 2016, Director of Nursing Services (DNS) started work as Directorate General of Nursing and Midwifery (DGNM).

### DGNM VISION:

To ensure the health service of the country through recruiting nursing manpower and posting of skilled and trained nursing personnel to provide the best possible support to the government by maintaining the quality of nursing and midwifery education and services.

### DGNM MISSION:

To improve the quality of health services, providing nursing related advice and assistance for ensuring implementation of plans and policy formulations adopted by government. Ensure implementation and formulation of various policies, tactics, recruitment and other rules related to nursing. Above all, by developing nursing and midwifery profession ensure quality standard nursing and midwifery education and services for all.

## Section 2: DGNM digital activities updates

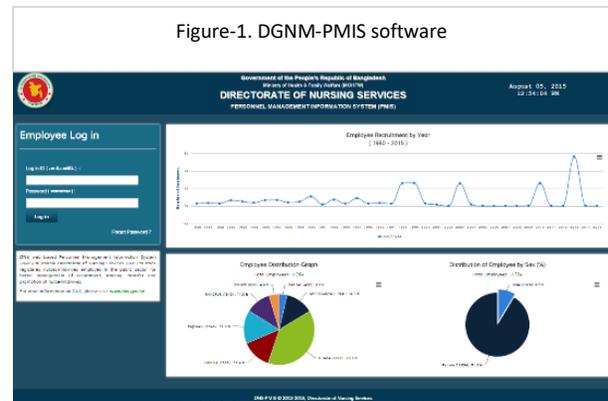
### Innovation status of DGNM:

Every developmental sector of Bangladesh government is moving forward to approach different innovations for being more developed and DGNM is not exceptional. DGNM authority is continuously upgrading their all sections especially on PMIS software. In order to accumulate the human resources information properly PMIS software is being more user friendly.

It is a matter of hope that, DGNM website is still under modification. To make the website more convenient some new service boxes added in the current website with the help of IT specialist of HRH project. The new website will be launched very soon. The new service boxes are: Integrity and service box, Annual Performance Agreement (APA), Law and Publications, Innovations, Report, Online services and grievance redress system.

### Current status of DGNM-PMIS:

DGNM-PMIS section plays a vital role to provide all nursing and midwifery related statistics. Approximately 80 % data are already entered into PMIS software. These data are includes personal, educational, service particulars, training information of the employee. DGNM staff has already started using official e-mail for any query and application, grievance redress system has established recently in website. By the direct supervision of directorate general, DGNM website is gradually upgrading their system and PMIS software has already being more user friendly than previous.



At present DGNM workforce has reached more than 35000 including nurses, midwives, non-nurses officers and other staffs with different category. Approximately more than 28,000 staffs have entered their personal data into PMIS software as of Dec 2018, rest of are entering everyday by their own or DGNM PMIS section. Newly recruited nurses are also getting Unique ID through entering their information in PMIS software. This unique ID can help DGNM to verify the employee information easily.

DGNM has already well performed website. A2i designed and developed a unique style website for all government official, which contains some new service boxes, such as, Innovations, Integrity, Annual performance Activity, online services, laws and regulation and reports.

### Digital road map implementation 2021:

The 'Vision 2021' aims at developing Bangladesh into a resourceful and modern economy through efficient use of information and communication technology. The Prime Minister as 'Digital Bangladesh' has eloquently described this goal. It is believed, that through the successful implementation of the ICT policy and its principles it would be possible to create a Digital Bangladesh by 2021 as promised by the current government.

DGNM is functioning to fulfill the government commitment by proving skilled, trained, and fully digitalized human resources in nursing and Midwifery sector. To ensure health services for all including e-health services, the government has recruited more 5100 nurses in October 2018. Massive workforce recruitment is also a reflection of digital Bangladesh. To ensure access of

health services for all more workforce needed in this field. To ensure the best use of new technologies to build excellent 21<sup>st</sup> century skill in health areas establishing PMIS software in DGNM website is a great innovation.

In recognition of the long -term development challenges, the Government under the leadership of Prime Minister Sheikh Hasina adopted the Vision 2021. The Vision 2021 and the associated Perspective Plan 2010-2021 have set solid development targets for Bangladesh by the end of 2021.

There are Eight e-Services identified for next work plan activities. These are: Nurse-Midwife Education Management System (NEMS), Nursing Service Management System, Midwives Service Management System, Training Management System, Digital Library Management System, E-filing system, Office Automation (GoB ERP) and Grievance Redress System (GRS). The report targeted to policy makers, development partners, private sector entities, non-government and civil society entities, media, academia and the citizens.

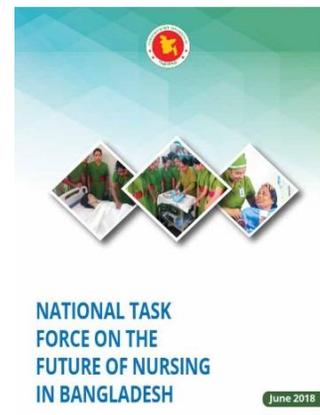


### **National Task Force (NTF) establishment for future nursing:**

In Bangladesh, as globally, nurses are increasingly seen as the cornerstone of health care. Utilized to their full potential they prevent illness, promote better health, increase access to care, and help deliver quality care while reducing costs. The present government, recognizing this potential, has placed an emphasis on strengthening nursing towards improved health care service delivery.

To build on the positive changes begun by this government, a number of issues and challenges need to address. To that end, and in keeping with Vision 2021 and the SDGs, the National Task Force on the Future of Nursing (NTF)<sup>1</sup> formed in 2016 to:

1. Review the status of nursing education and service in Bangladesh and identify the challenges and barriers to: a. improving the status of nursing education and service; and b. increasing access to nursing services.
2. Consider the long-term needs for and roles of nurses in ensuring access to quality services.
3. Recommend actions to address current deficits and plan for future needs.
4. Address the issues affecting nursing's image and the work environment.



<sup>1</sup>Government notification on the formation of National Task Force dated 14 August 2016, No. 380, by Nursing Wing, MOHFW.

To achieve the objectives efficiently and effectively, the Task Force formed a Technical Working Group to provide oversight in developing a recommendations document for the Task Force. Review of national and international documents, focus group discussions, key informant interviews, and stakeholder workshops were conducted to gather information to prepare the draft. The report contains detailed information on nursing (past and present) and the health care system.

Bangladesh faces the same nursing challenges as confront other countries, varying only in degree. It is taking steps to align with international trends such as more nurses with higher education and moving toward competency-based education and evidence-based practice. It shares with other nations many of the same nursing practice issues (e.g. workload, nurse: patient ratios, positive work environments) but works in more traditional modes and faces greater regulatory issues than many. While nurses in Bangladesh function alone in rural settings, there are no programs or recognition of advanced nursing practice as is increasingly common in Asian countries and globally.

### Nurse-Midwife Education Management System (NEMS):

HRH project assisted DGNM and Nursing Institutes (NIs) to develop an electronic NEMS, a web-based software to improve the education management in selected NIs. NEMS was designed to track records on: student admissions and registration, yearly performance of students, exam and marking tabulation, laboratory and library inventory management, and management of the residential hostels. About 18,000 nursing and midwifery students are admitted every year into approximately 300 nursing schools. BNMC maintains records of all students' info in their BNMC student's database. However, there is no existing system that follows up and tracks student's performance and drop-out information, if any. In addition, manual exam tabulation practiced in nursing institutes and colleges. Development of a computerized tabulation and result system would help to reduce the workload of the nurse instructors and foster transparency in result publication for nursing institutes and colleges.



Development work of NEMS started in 2016. Key steps undertaken during development process included: reviewed existing systems, database design, allocation of web space, WiFi setup at NIs for smooth operation of NEMS software, software development, demonstrated NEMS at DGNM-HQ and piloted it at Khulna, Cumilla, Bagura and Tangail Nursing Institutes, refined software based on lessons learned from piloting, and finalized NEMS software and hosted at [www.nems.bnmc.gov.bd](http://www.nems.bnmc.gov.bd)

HRH project renovated 15 nursing institutes and provide lot of T-L materials for nursing education development. In this connection, NEMS implemented in that selected 15 nursing institutes. HRH's IT Specialist visited every nursing institute during this year for conducting two

days training session on NEMS software. Before training start, WiFi installed in every nursing institute and keeping with connect local broadband connection. Ten persons are responsible for operate seven modules of NEMS software.

Nurse-Midwife Education Management System (NEMS) is now part of DGNM innovation activity and it is included in government digital road map 2021 implementation under the Ministry of Health and Family Welfare. HRH IT Specialist demonstrated NEMS in front of innovation team of Ministry and they appreciate it. Out of 43 public nursing institutes, 15 only covered by NEMS software. Rest of nursing institutes expected to implement by operation plan budget for DGNM.

### Bangladesh Nursing and Midwifery Council database (BNMCDB):

The Bangladesh Nursing and Midwifery Council is a Body Corporate Organization constituted by Chief Martial Law Administrator of People's Republic of Bangladesh under Ordinance No LXI on 28th September, 1983.

The Bangladesh Nursing and Midwifery Council Database (BNMCDB) is a tool to maintain current registration data for all Nurse-Midwives, Nursing Students and Community Skilled Birth Attendants (CSBAs). The BNMC Database is a secure system for authorized users only and is managed and maintained by the Bangladesh Nursing and Midwifery Council.

A manual paper-based system, outdated equipment, and no web access, all of which result in a huge workload, and limits on access to data/information in Bangladesh Nursing and Midwifery Council. The registration of nurse-midwife management of information was on a manual basis and totally based on demand. To address this, Department for Foreign Affairs, Trade and Development (DFATD) funded Human Resources for Health project assist BNMC to develop a web based Bangladesh Nursing and Midwifery Council Registration Database (BNMCDB) for the Bangladesh Nursing and Midwifery Council. The process of development of such kind of web based BNMCDB happened through a number of consultative meetings/workshops with the participants of different professionals from the MoHFW, DGNM, and BNMC. The HRH project has taken all possible steps to make the system secured and sustainable. The BNMCDB development process initiated in 2013 and officially inaugurated by honorable Minister, MoHFW in presence of His Excellency Canadian High Commissioner on 31 December 2015. Currently the project is working with BNMC to operationalize the BNMCDB software.



BNMC has transitioned from a manual paper-based system to digital nurse-midwives registration system. BNMC Registration Database (BNMCDB) software and dynamic web site is currently functional and real time Nurse-Midwife data management is possible. The web-based registration database with more elements provides greater opportunities to generate information that assists the nursing sector. Having a web-based platform means ease of access, higher data security and better personnel utilization and productivity.

The overall goal of the BNMCDB to build nursing registration portal that would help to access information of all nursing students and registered nurse-midwives. Recently, the new look of BNMCDB software has made for Bangladesh Nursing and Midwifery Council.



### **Nurses placement in Rohingya Camp:**

Rohinga issue is a great challenge of present government. Prime minister Sheikh Hasina has put a great importance on this issue. In order to ensure the health care of Rohingya camps in Cox's Bazar ministry of Health and Family Welfare started to send nurses and midwives for monitoring health care of refugees. Since 21<sup>st</sup> September 2017 nurses have been working every month. A total 341 officers (nurse-329, midwife-12) have worked in Rohingya camp in 12 batches and it will be running until further order. With the help of HRH project, Nursing Officers are gradually recruited at Rohingya camps in Ukhia, Baluchali, and Kutupalong, Teknaf of Cox's Bazar district under the overall supervision of the Department of Nursing and Midwifery. This initiative is being able to take only because of a large number of human resources of Directorate of Nursing and Midwifery.



### **National Institute Advance Nursing Education and Research (NIANER):**

In 2010, a request to advance the quality and standard of Bangladesh nursing was made to the President of South Korea by the Minister of Bangladesh, Sheikh Hasina. Shortly after, the project 'Establishment of National Institute of Advanced Nursing Education and Research' was launched in 2013 by the Korea International Cooperation Agency and Younsei University College of Nursing in partnership with the Bangladesh government.

The project 'Establishment of National Institute of Advanced Nursing Education and Research' began in 2013 as a request from the Prime Minister of Bangladesh, Sheikh Hasina to the

President of South Korea, MyungBak Lee in 2010. Being the largest project operated by KOICA, NIANER aims to advance the quality and standard of Bangladesh nursing.

Many experts from various backgrounds have offered their expertise in developing the Master of Science in Nursing Program. From countless stakeholder meetings and discussions to direct supervision of nursing faculty members on teaching and learning strategies, curriculum experts have played a crucial role in the curriculum development process.

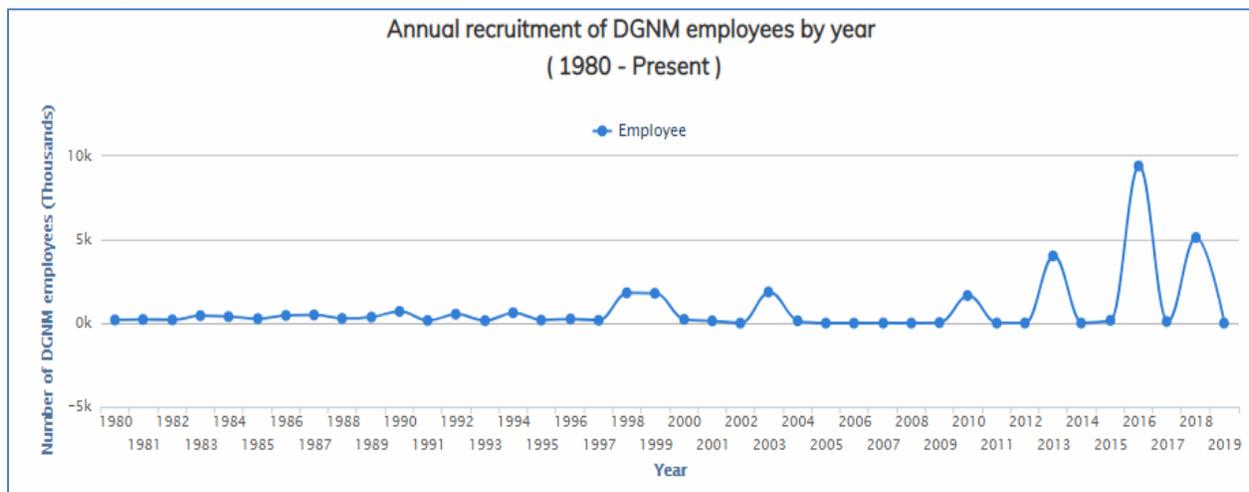
The MSN program aims to develop nurse leaders in the area of nursing practice, education, research, and management to promote health of all people in Bangladesh. Its vision is to make the school a “Center of Excellence” in post-graduate nursing education in the South-East Asian region. **As the country’s first postgraduate nursing program, NIANER is expected to contribute immensely to the advancement of Bangladesh nursing. Total 26 nursing personnel are working at NIANER with attachment.**

<b>Nursing Personnel</b>	<b>Number</b>	<b>Remark</b>
NIANER Faculty	16	Working on attachment from DGNM
Nursing Instructor	01	
Teaching Assistant	05	
CNC	04	
<b>Non Nursing Staff</b>		
UD	01	Attachment from DGNM
Office Assistant	01	
Assistant Account Officer	01	Form Project
Daily Labor	12	Daily basis
Security	01	Outsourcing from project
Support Staff	01	
<b>Total</b>	<b>43</b>	

### Section 3: Data tables, Charts and Graphs

In this report, only public sector nurses under the Directorate General of Nursing and Midwifery are considered for analysis. Analysis of report was done based on data as of December 2018. Three types (Nurse, Midwife and Non-nurse) of workforce are working under Directorate General of Nursing and Midwifery (DGNM). As per revised gazettes of GoB on 16 March 2017 employees divided in two divisions under DGNM. One is working for nursing service another working for nursing education. We are going to depicted service and education employee setup as well as midwives setup under the DGNM.

#### Employee setup analysis:



This figure depicts that DGNM workforces are gradually increasing in number. Maximum employees were appointed in 2016 and minimum were 1991 and others year were static. However, as per population projection done by different statistics population of Bangladesh will increase more in next few years. It is now an emerging issue to appoint more nurses to ensure quality health care for all.

In 2018 was a great year for job seeker senior staff nurses, staff nurses, public health nurses because, this is the last year where nurses maximum age limit was 36 years in case of direct recruitment.<sup>2</sup>

<sup>2</sup>সূত্র: বাংলাদেশ গেজেট, অতিরিক্ত সংখ্যা, কর্তৃপক্ষ কর্তৃক প্রকাশিত, বুধবার, অক্টোবর ২৫, ২০১৬, গণ প্রজাতন্ত্রী বাংলাদেশ সরকার, স্বাস্থ্য ও পরিবার কল্যাণ মন্ত্রণালয়, নার্সিং শাখা, প্রজ্ঞাপন, ৭। বিশেষ বিধান (গ) ১৫৪৬৭

**Employee distribution by Geographic locations:**

Divisions	DGNM employees (service)			
	Nurse <sup>3</sup>	Midwife	Non-Nurse <sup>4</sup>	Total
DHAKA	13,069	707	23	13,799
CHITTAGONG	4378	237	8	4622
BARISAL	2189	118	4	2311
SYLHET	1706	92	3	1801
RANGPUR	3122	169	6	3297
RAJSHAHI	4442	240	8	4690
KHULNA	3283	178	6	3467
<b>Total (Public)</b>	<b>32,189</b>	<b>1741</b>	<b>57</b>	<b>33,987</b>

Divisions	DGNM employees (Education)			
	Nurse <sup>5</sup>	Midwife	Non-Nurse <sup>6</sup>	Total
DHAKA	162	0	332	494
CHITTAGONG	55	0	113	169
BARISAL	28	0	57	84
SYLHET	20	0	40	60
RANGPUR	36	0	73	108
RAJSHAHI	55	0	113	169
KHULNA	40	0	81	121
<b>Total (Public)</b>	<b>396</b>	<b>0</b>	<b>809</b>	<b>1205</b>

In the above table-1 shows that in public service total 33,987 employees are working. Among them 32189 are nurses, 1741 are midwives and non-nurse staff are 57. Table-2 shows that total 1205 are working in education sector. Among them 396 are nurses and 809 are non-nurse. Here important thing is that there is no midwife working in education sector directly. Table-1 shows that in clinical service maximum number of employee working in Dhaka division and minimum number of employee working in Sylhet division.

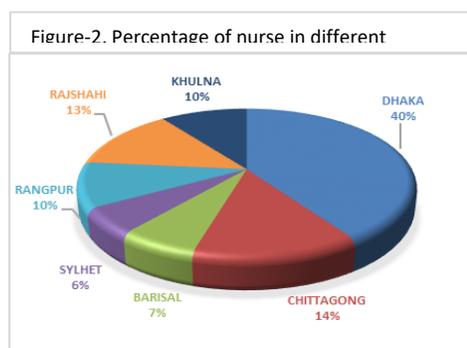
**Table-3: DGNM Employees (Service & Education)**

Divisions	Nurse	Midwives	Non-Nurse	Total	Population	Pop: Nurse
DHAKA	13230	707	352	14288	525,39,000	3971:1
CHITTAGONG	4497	240	120	4856	319,80,000	7112:1
BARISAL	2151	115	57	2323	914,50,000	4252:1
SYLHET	1857	99	49	2006	112,91,000	6079:1
RANGPUR	3226	172	86	3484	176,02,000	5456:1
RAJSHAHI	4366	233	116	4716	204,12,000	4674:1
KHULNA	3259	174	87	3519	172,52,000	5294:1
<b>Total (Public)</b>	<b>32,585</b>	<b>1741</b>	<b>866</b>	<b>35,192</b>	<b>*160,221,000</b>	<b>4917:1</b>
	<b>Total (Public &amp; Private Registered Nurse)</b>			<b>**54,601</b>		<b>2,934:1</b>

\* Projected population scenario as described in "Population Projection of Bangladesh: Dynamics and Trends 2011-2061", BBS<sup>7</sup>.

\*\*This number taken from BNMC data sheet, December 2018.

Above table shows DGNM total employee distribution by division in different govt. hospital. Total 35,192 nurses are working in different division under DGNM including nurse, midwives, non-nurse. This table also shows that population projection of Bangladesh in different division and also shows that the nurse proportion per population. Highest number of population are living in Dhaka division and there is 1 nurse working against 4794 people which is not international standard. In Chittagong division nurse population ratio is very low that is 1 nurse working against 8545 people.



<sup>3</sup>Nurses are includes DGNM-HQ staff, Senior Staff Nurse, Staff Nurse, District Public Health Nurse etc.

<sup>4</sup>Non-Nurses are includes DGNM-HQ staff, Admin/Accounts Officer, Upper Division Assistant, Office Assist. etc.

<sup>5</sup>Nurses are includes Principal, NI In-Charge, Professor, Assistant Professor, and Lecturer etc.

<sup>6</sup>Non-Nurses are includes Admin/Accounts Officer, Office Assistant, Mali, Machalchi, Driver at Nursing Institutes and Colleges etc.

<sup>7</sup>Ref. link: <http://203.112.218.65:8008/WebTestApplication/userfiles/Image/PopMonographs/PopulationProjection.pdf>

## Workforce demographic analysis:

**Table-4: Yearly demographic trends:**

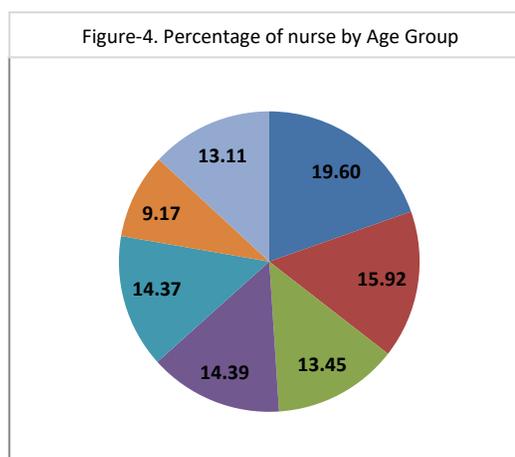
Workforce Demographics	2014	2015	2016	2017	2018	2019
Male (%)	10	10	10	10	10	10
Female (%)	89	90	90	90	90	90
Average Age	34	31	30	31	30	30

Above table shows that workforce demographic analysis. This table shows the average age variation of male female employee working under DGNM. It shows among all employee, the average age is shows 30 years. That means an energetic young workforce are working in nursing sector that is very important.

**Table-5: Analysis by Age Group:**

Age Group (AG)	# of Employee	% of AG
25-29	6898	19.60%
30-34	5603	15.92%
35-39	4733	13.45%
40-44	5064	14.39%
45-49	5057	14.37%
50-54	3227	9.17%
55-59	4614	13.11%
TOTAL	35,192	

Figure-4. Percentage of nurse by Age Group



The table depicts that maximum number of employee remain in the age group 30-34 years and minimum are in the age group 50-54 years.

**Table-6: Department wise demographic analysis:**

Departments	Total Staff	Male	Female	Average Age	% Total	% Male	% Female
Admin	385	186	199	46	1.09	11.62	88.39
Clinical Service	33662	2885	30,777	39	95.65	9.79	90.21
Teaching	529	389	227	45	1.50	17.61	82.44
Support Staff	616	60	469	47	1.75	10.18	89.82
Total	35,192	3519	31,673				

DGNM has four departments: **Administration** is refers to those employees who are involve with administrative and managerial work either nurse or non-nurse, **Clinical Service** is refer to those employees who are practicing nursing in the hospitals at different level. **Teaching** is refers to those employees who are Nurse instructor and Principal working into the Nursing Institutes or Colleges and **Support Staff** is refers to non-nurse staff like Driver, Cook, Mashalchi, etc.

Table-6 shows practicing nurse are highest in number that is 95.65 percent of total staffs. Highest average age of employee is in support staff that is 47.

**Table-7: Department in class wise demographic analysis:**

Departments	Total Employee	Class-I (Grade 3-9)		Class-II (Grade 10)		Class-III (Grade 11-16)		Class-IV (Grade 17-20)	
		Male	Female	Male	Female	Male	Female	Male	Female
Admin	385	0	81	31	148	14	112	0	0
Clinical Service	33662	0	89	3237	29,735	54	490	5	52
Teaching	529	0	32	93	404	0	0	0	0
Support Staff	616	0	0	0	0	11	104	51	450
<b>Total</b>	<b>35,192</b>	<b>0</b>	<b>202</b>	<b>3362</b>	<b>30,286</b>	<b>78</b>	<b>706</b>	<b>56</b>	<b>502</b>
<b>Total by Class</b>		<b>202</b>		<b>33,648</b>		<b>784</b>		<b>558</b>	

There are four types of classes under Directorate of Nursing Services such as Class I (Grade 3-9), Class, II (Grade 10), Class III (Grade 11-16), Class IV (Grade 17-20)

Table-7 shows lowest female are in teaching category under Class-I which is 32. Under Directorate General of Nursing and Midwifery there are 177 Class-I position. Rest of the posts are filled up by deployment of nurses in additional charge, current charge and own pay and deputation. Table-8 shows 12,744 employees are not in original post that is 36 percent of total employees which is 35,192.

Departments	Current Charge	Additional Charge	Own Pay	Deputation
Admin	0.14	0.01	0.18	0.04
Clinical Service	27.57	1.72	2.99	1.55
Support Staff	0.60	0.00	0.14	0.03
Teaching	0.13	0.01	0.74	0.36

## Workforce vacancy analysis:

**Table-9: Sanctioned, Filled and Vacant post by class:**

Class	Sanctioned Post				Filled in Post				Vacant Post			
	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total
<b>Class I(Grade 3-9)</b>	370	0	1	371	202	0	4	206	173	0	1	174
<b>Class II(Grade 10)</b>	32,515	2996	12	35,523	31,900	1741	7	33,648	615	1255	5	1875
<b>Class III(Grade 11-16)</b>	487	0	397	884	487	0	297	784	0	0	100	100
<b>Class IV(Grade 17-20)</b>	0	0	716	716	0	0	558	558	0	0	158	158
<b>Total</b>	<b>33,372</b>	<b>2996</b>	<b>1126</b>	<b>37,494</b>	<b>32,585</b>	<b>1741</b>	<b>866</b>	<b>35,192</b>	<b>787</b>	<b>1255</b>	<b>264</b>	<b>2306</b>

This above table shows that DGNM has 37,494 sanctioned post. Among all the sanctioned post 35,192 posts are filled and 2306 posts are still vacant. 4 posts are deputed/attachments under DGNM out of 5 sanctioned post.

**Table-10: Sanctioned, Filled and Vacant post by class (Service division):**

Class	Sanctioned Post				Filled in Post				Vacant Post			
	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total
Class I(Grade 3-9)	215	0	0	220	151	0	4	151	69	0	0	69
Class II(Grade 10)	32,159	2,996	1	35,156	31,555	1,741	1	33,297	604	1,255	0	1,859
Class III(Grade 11-16)	487		54	541	487	0	29	516	0	0	25	25
Class IV(Grade 17-20)	0	0	23	23	0	0	23	23	0	0	0	0
<b>Total</b>	<b>32,861</b>	<b>2,996</b>	<b>78</b>	<b>35,940</b>	<b>32,189</b>	<b>1,741</b>	<b>57</b>	<b>33,987</b>	<b>672</b>	<b>1,255</b>	<b>25</b>	<b>1,953</b>

**Table-11: Sanctioned, Filled and Vacant post by class (Education division):**

Class	Sanctioned Post				Filled in Post				Vacant Post			
	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total	Nurse	Midwife	Non-Nurse	Total
Class I(Grade 3-9)	155	0	1	156	51	0	0	51	104	0	1	105
Class II(Grade 10)	356	0	11	367	345	0	6	351	11	0	5	16
Class III(Grade 11-16)	0	0	343	343	0	0	268	268	0	0	75	75
Class IV(Grade 17-20)	0	0	693	693	0	0	535	535	0	0	158	158
<b>Total</b>	<b>511</b>	<b>0</b>	<b>1048</b>	<b>1559</b>	<b>396</b>	<b>0</b>	<b>809</b>	<b>1205</b>	<b>115</b>	<b>0</b>	<b>239</b>	<b>354</b>

Table-10 and 11 shows in service division total 32,189 nurses are working against 32,861 sanctioned posts. In education division 396 nurses are working against 511 sanctioned posts. At present 98.78percent, nurses are working in service division and in education division only 1.22 percent are working.

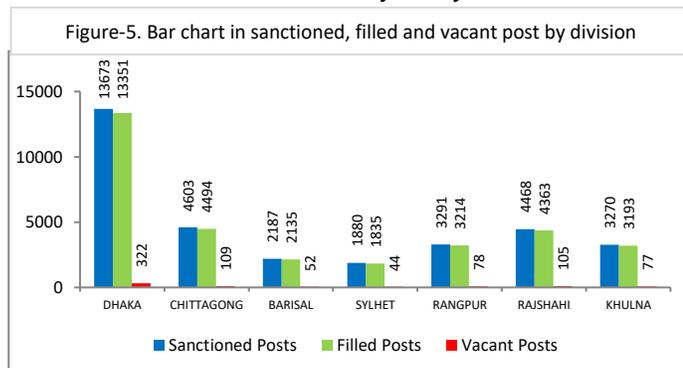
**Table-12: Vacancy by geographic locations (Only Nurse):**

Divisions	Sanctioned Posts	Filled Posts	Vacant Posts
DHAKA	13673	13351	322
CHITTAGONG	4603	4494	109
BARISAL	2187	2135	52
SYLHET	1880	1835	44
RANGPUR	3291	3214	78
RAJSHAHI	4468	4363	105
KHULNA	3270	3193	77
<b>Total</b>	<b>33,372</b>	<b>32,585</b>	<b>787</b>

Table-12 shows the total nurse vacancy is 787. Vacant position is lowest in Sylhet and Barisal division that is 44 and 52.

Figure-5 shows highest vacancy is at Dhaka division and lowest vacancy in Sylhet division.

This vacant position as shown in Table-9,10, 11, 12 and Figure-5 are not actually real vacancy because some of these positions are occupied by staffs who may be in current charge, additional charge, own pay or on deputation. Real vacancy should be higher than the shown figure.

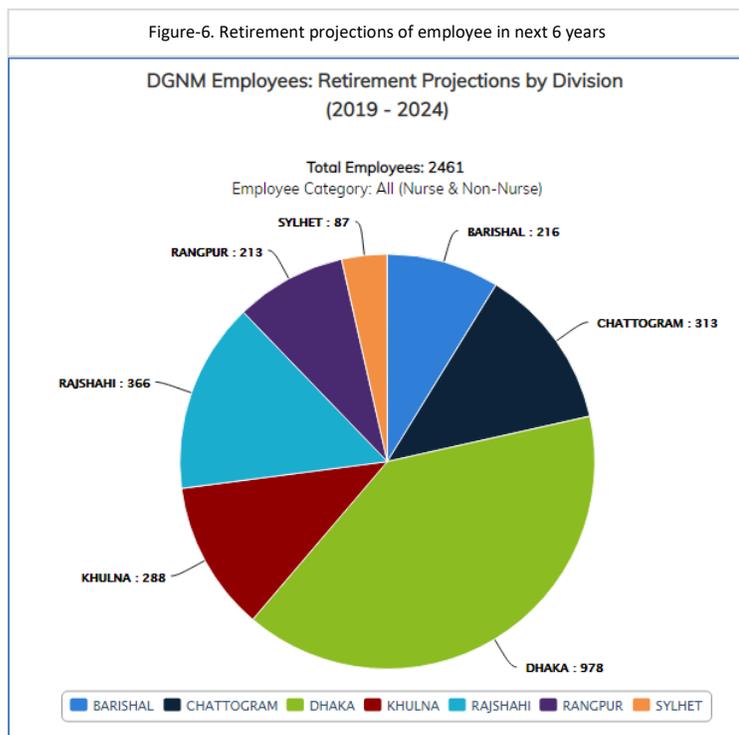


### Workforce retirement projections:

Table-13: Retirement projection nurse and non-nurse in next six years by GEO location:

Divisions	Total Employees	Retirement in the next 6 years (2019-2024)	% of Retirement
DHAKA	14,288	978	2.78
CHITTAGONG	4856	313	0.89
BARISAL	2323	216	0.61
SYLHET	2006	87	0.25
RANGPUR	3484	213	0.61
RAJSHAHI	4716	366	1.04
KHULNA	3519	288	0.82
<b>Total</b>	<b>35,192</b>	<b>2461</b>	<b>6.99</b>

A number of employees will be in Pre-retirement Leave (PRL) during next six years. Table-13 and Figure-6 shows in next six years 2,461 employees that is 6.99 percent of total employee will retire. Highest number of employees will be retired in Dhaka division which is 2.78 percent and lowest in Sylhet division that is 0.25 percent.



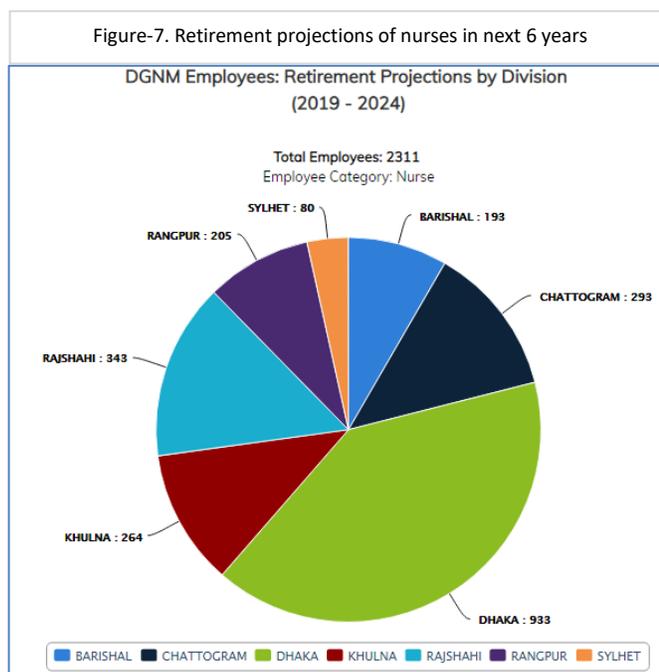
**Table-14: Retirement projection only nurse in next six years by division:**

Divisions	Total Nurses	Retirement in the next 6 years (2019-2024)	% of Retirement
DHAKA	13,230	933	2.86
CHITTAGONG	4497	293	0.90
BARISAL	2151	193	0.59
SYLHET	1857	80	0.25
RANGPUR	3226	205	0.63
RAJSHAHI	4366	343	1.05
KHULNA	3259	264	0.81
<b>Total</b>	<b>32,585</b>	<b>2311</b>	<b>7.09</b>

Total 2,311 nurses will be on Pre-retirement Leave (PRL) in next six years. Table-14 and Figure-7 shows in next six years 7.09

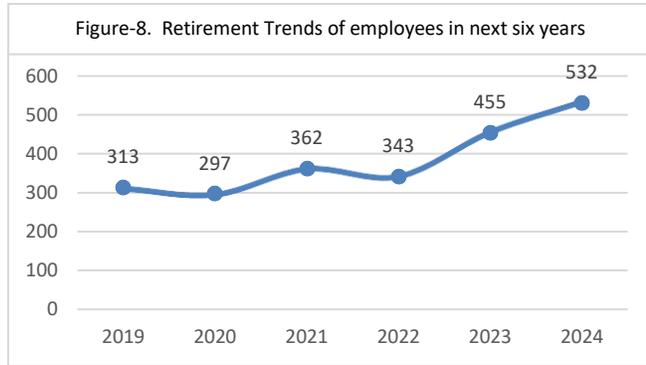
percent of nurse employee will retire. Highest number of nurse will retire in Dhaka division that is 2.86 percent and lowest in Sylhet division that is 0.25 percent.

Figure-7. Retirement projections of nurses in next 6 years

**Table-15: Trends of nurse retirement projections, selected year**

Division	Nurse Employees	2019	2020	2021	2022	2023	2024
DHAKA	13,230	131	120	152	142	182	224
CHITTAGONG	4497	50	45	41	42	52	49
BARISAL	2151	20	36	42	33	34	37
SYLHET	1857	11	10	17	7	13	22
RANGPUR	3226	28	21	22	31	51	40
RAJSHAHI	4366	40	40	39	55	67	99
KHULNA	3259	33	25	49	33	56	61
<b>Total</b>	<b>32,585</b>	<b>313</b>	<b>297</b>	<b>362</b>	<b>343</b>	<b>455</b>	<b>532</b>
<b>Yearly retirement ratio against total nurse</b>							<b>1.63</b>

Table-15 and Figure-8 shows nurses eligible for retirement from year 2019 to year 2024. In the year 2024 the highest number of nurses will be PRL which is 532.



### Bed: Nurse ratio analysis:

**Table-16: Bed ratio analysis of nurses in health facilities:**

	Public****	Private/Others	Total
Nurses and Midwives	34,326	22,016	56,342
Hospitals Bed	49,414	87,610	137,024
<b>Total</b>	<b>83,740</b>	<b>109,626</b>	<b>193,366</b>

\*\*\*Source: Health Bulletin-2017, DGHS and DGNM-PMIS software, DGNM

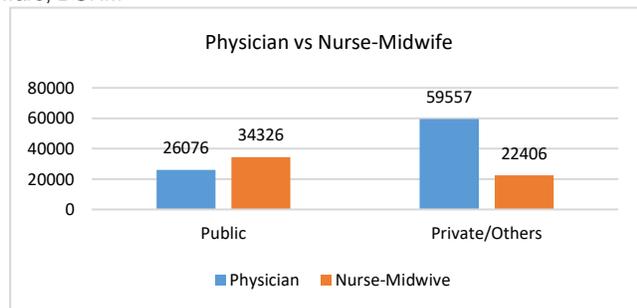
Table-16 shows hospital bed per nurse in different health tier under Directorate General of Nursing and Midwifery. Bed per nurse is 2.43:1. This should be mentioned here that this picture only depicts for single shift only not covering the three shifts in 24 hours. In addition the bed occupancy rate is generally higher than the actual bed number.

### Nurse-Physician ratio analysis:

	Public***	Private/Others	Total
Physician	26,076	59,557	85,633
Nurse-Midwife	34,326	22,406	56,732
<b>Total (Nurse-Midwife Physician)</b>	<b>60,402</b>	<b>81,963</b>	<b>142,365</b>

\*\*\*Source: Health Bulletin-2017, DGHS and DGNM-PMIS software, DGNM

Standard ratio of Nurse : Physician is 3:1 in current context of world. In above table depict that the Nurse : Physician ratio is 1:2 that reverse of international standard.



## Workforce education qualification:

**Table-17: Education qualification for nurses under Directorate of Nursing Services**

Graduate (Professional)	Number of employee
Administration	6
Community Health	8
Masters in International Health	9
Masters in Nursing	124
MCH	9
MEd for PHC	13
Medical & Surgical Nursing	7
Midwifery	69
MPH	1687
Pediatric	6
Others	86
MBA	1
Masters in Gerontology and Geriatric	56
Masters of Nutritional Science and Food Technology (MNSFT)	32
Master's of Philosophy	1
M-Phil	2
Master in Sexual & Reproductive Health & Rights	7
Master of Science in Nursing (MSN)	16
Masters in Mental Health and Psychiatric Nursing	2
Master of Social Science With Specialization in Gerontology and Geriatric welfare (MSS in GGW)	30
Master of Social Science with Specialization in Clinical Social Work (MSS in CSW)	20
<b>PhD</b>	
PhD in Public Health	10
PhD in Community Medicine	1
Others	6
PhD in Nursing	18
<b>Graduation (Professional)</b>	
B.Sc. in Nursing (Basic)	1028
B.Sc. in Nursing (Post-basic)	2476
B.Sc. in Public Health Nursing	1090
<b>Others</b>	
Diploma in I.C.U Nursing	22
Assistance Nurse	272
Others	112

As per Bangladesh nursing and midwifery council (Dec 2018) 54,601 nurses are registered in public and private sector. In Bangladesh minimum requirement of nursing recruitment is diploma in nursing and midwifery degree or basic B.Sc. degree. As basic B.Sc. course was started from 2008, so maximum have diploma degree. Gradually all nurses are doing B.Sc. course for higher education. Total 4592 nurses have completed graduation degree (Basic B.Sc.1028, Post B.Sc.2476, B. Sc. in public health 1090). All the data are analyzed only based on the data entered into the PMIS but the actual picture is more than that. Total 2149 nurses have completed masters degree (including M.Sc. in nursing, MSS in GGW, CSW, MPH, Psychiatric and mental, Reproductive and child health etc.

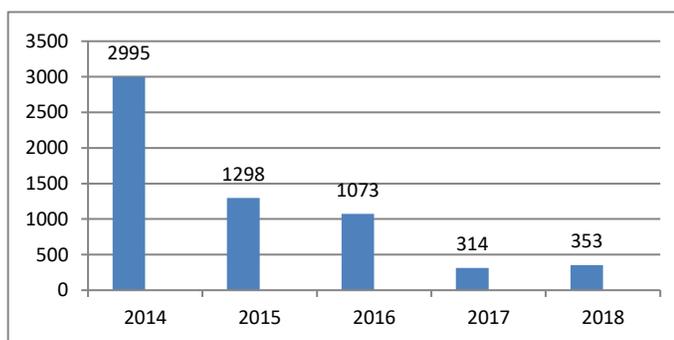
## Workforce capacity building:

Nursing is an art and science. In nursing technical competency is very important for capacity building. Training in service plays a vital role to inspire and energize a nurse, midwife and other staff in their working sector. Training also helps in brainstorming and builds confidence among the employee. Training provided by operational plan done by ministry of health and family welfare. There are two types of training organized for the nurses in every year one is locally arranged in service and other foreign training arranged by enlisted training consultant, national, international NGO's as planned.

Local training		Foreign training	
Center	Number of training	Name of Training	Country
Nursing Teachers training Center	Preceptor ship training – 5 batch Teachers Development training -3 batch	1.Nursing Leadership Training for 11 high officials (from 28 November to 4 December - 2018)	South Korea
Nursing Research Center	IRB training -1	2.Capacity building training for 02 NIANER Faculties	South Korea
Nursing Simulation training	1.Simulation training for Nursing Faculties (2) Batch		
CNC	1.School Health program Batch 2.Program on Metabolic Syndrome 3.Breastfeeding Healthy baby contest (1 <sup>st</sup> & 2 <sup>nd</sup> )		

## In-service training:

Figure shows that last five years training trends in DGNM. Highest number of training conducted 2014 and. In June 2018, total 353 employees got different types of training up to June 2018. There is no training held after June 2018 up to December 2018.



## Foreign training as planned in operation plan of DGNM

In the current NESOP foreign training are included in 2017-18 fiscal years. But this year no foreign training held under DGNM. But there is plan of foreign and local training in the next year. Training plan should be undertaken for the advancement of nursing profession. The selection for the training should be fair and the opportunity should be equal for all. Current NMEOSP included different types of training for capacity building of nurses and midwives under Directorate General of Nursing and Midwifery.

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**Orientation training of newly recruited nurses:**

Total no of 1230 senior staff nurses got orientation training up to 31 Dec 2018. There are 13 venue selected for orientation training for newly recruited senior staff nurses those are joined year 2016 & 2018. This training is implemented by DGNM-HQ and conducted under operational plan titled nursing and midwifery education and services. In addition, some other GoB organizations are providing orientation training such as NIPORT, Azimpur, Dhaka. Next year another batch of newly recruited nurses who have joined in 2018 they will also get the same opportunity. This training helps the newly recruited nurses to know the GoB recruitment rules, job description, to gather information about DGNM activities that is directly related to their working place.

**Limitations:**

This report is based on web based DGNM-PMIS software of Directorate General of Nursing and Midwifery. This is the sixth HR report published by DGNM. Day to day PMIS team is working hard to get DGNM-PMIS more functional with valid and reliable data. There may be some unintentional error in this report which we expect reader's kind consideration. Hope this Human Resources (HR) report will be an effective reference in a better informative way that helps the policy makers.

### DGNM Canvas:

DGNM canvas is for sharing the current activities of Directorate General of Nursing and Midwifery on pictorial presentation.

A gathering of Midwives for joining was held in 30 August 2018 at Krishibid Institute Bangladesh.



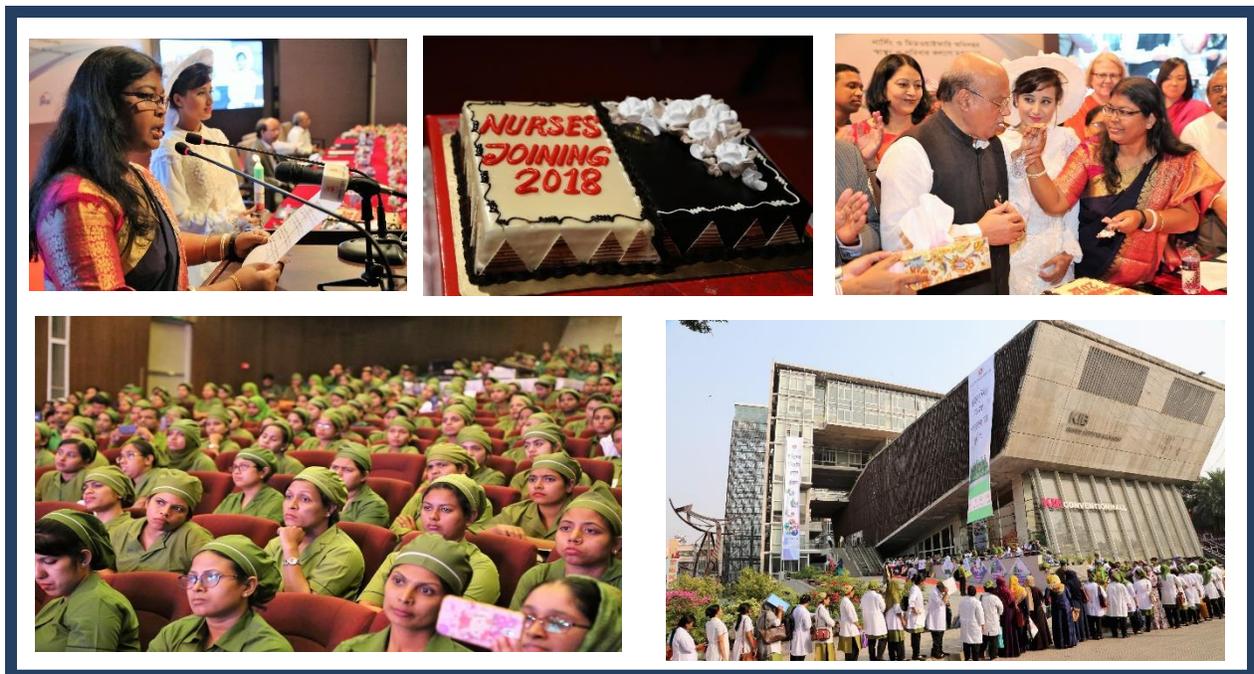
A workshop on action plan development for National Task Force (NTF) was held in 30-31 October 2018.



Digital road map designing for DGNM was held in 05November 2018 at Ministry conference room.



A gathering of Nurses for joining was held in 08November 2018 at Krishibid Institute Bangladesh.



**Conclusion:**

In December 2018, DGNM-HR report has published in electronic version with the support of HRH project on data generated from DGNM-PMIS software. Now DGNM-PMIS has strong separate section and there are working 4 (four) of DGNM-HQ staff including 8 divisional super users who are working day to day for fulfill the PMIS objective. Total 32,585 nurses and 1741 Midwives are working as practicing nurse and Midwives in different health facilities and 396 nurses are working in education sector at nursing institutes and colleges. Total 57 non-nurses are working at DGNM and 809 non-nurses are working in different nursing institute and College. Total 32,585 nurses are working against 33,372 sanctioned posts. In education division 396 nurses are working against 511 sectioned posts and total 2,306 posts are vacant. 2,311 nurse will employees retire in next six years. The PMIS will help DGNM for generating updated ongoing report that should benefited in different areas and component of DGNM structured workforce. After all that would be assist for upcoming plans as per Annual Performance Agreement (APA).