

GOVERNMENT OF NATIONAL CAPITAL TERRITORY OF DELHI
HEALTH & FAMILY WELFARE DEPARTMENT
9TH LEVEL, A - WING, DELHI SECRETARIAT, I P ESTATE, NEW DELHI - 110 002
Ph: 23392017; Fax: 23392464, e-mail: pshealth@nic.in

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**GUIDELINES FOR TRANSFER & POSTING OF SPECIALISTS (NON TEACHING)
AND GENERAL DUTY MEDICAL OFFICERS (GDMO) IN THE DELHI HEALTH
SERVICES (ALLOPATHY)**

1. GUIDING PRINCIPLE:

The matter regarding the transfer and posting of Doctors is required to be handled with due care as these posts carry important responsibilities. While effecting transfer of Doctors equitable distribution of Doctors shall be maintained across all locations to ensure efficient functioning of the organization and enhance professional satisfaction amongst Doctors. All Doctors are liable to be transferred anywhere in NCT of Delhi at any point in time and transfer to a desired location cannot be claimed as a matter of right. While effecting transfers, organizational and public interest shall be given the uppermost consideration.

2. GENERAL GUIDELINES FOR TRANSFER AND POSTING OF DOCTORS:

- 2.1 All Doctors would continue to be liable for posting anywhere in NCT of Delhi.
- 2.2 The new recruits in the Delhi Health Service (Allopathy) will be allotted to various Hospitals and Dispensaries as per exigencies of work, and no preference with regard to the place of postings shall be considered.
- 2.3 Specialists will be posted in respective specialties against sanctioned posts in various Hospitals.
- 2.4 Medical Officers with PG Degree/Diploma/Specialization in Public Health/ PSM/ hospital Administration may be posted in the department of their respective field of specialization to utilize their expertise.
- 2.5 Transfers would normally be made in the month of May every year.
- 2.6 As far as possible attempts will be made to post the husband and wife (if they are both in the Delhi Health Service) at the same or nearby location, subject to availability of posts and their suitability.
- 2.7 A Doctor in the last year of service would not normally be transferred from where he/she is posted except on his/her request. However, if exigencies of service require such a transfer, orders thereof will be issued by the Competent Authority after recording the reasons thereof.

- 2.8 All requests for transfer should be sent, strictly through proper channel, before 31st January every year. Applications not routed through proper channel shall not be considered.
- 2.9 Seniority, performance and integrity will be the criteria to post NFSG and SAG Doctors on senior administrative posts.
- 2.10 In order to ensure manpower development and to equip them to handle senior assignments, all the Doctors will be suitably rotated among various assignments, both clinical and administrative.
- 2.11 Once a transfer order of a Doctor has been issued by the Competent Authority, the Doctor concerned will not be granted leave of any kind by his controlling authority. All requests for leave of any kind thereafter will be sent through proper channel to the authority who has issued the orders of transfer.
- 2.12 On administrative grounds and in exigencies or public interest, the Competent Authority may make specific exceptions for transfers by recording the reasons in writing on the file.

3. SPECIFIC POLICIES:

- 3.1 Posts in health facilities are classified into four categories for the purpose of these guidelines:

- I. Secondary/Tertiary Care Centres – Hospitals with over 250 beds.
- II. Secondary Care Centres – Hospitals with up to 250 beds.
- III. Primary Health Care Centres.
- IV. Directorates and Programmes

I. DELHI GOVT. HOSPITALS WITH MORE THAN 250 BEDS			
S.NO.	HOSPITAL	LOCATION	BEDS
1	Lok Nayak Hospital	Jawahar Lal Nehru Marg, New Delhi	1800
2	GTB Hospital	Shahdra	1600
3	Govind Ballabh Pant Hospital	Jawahar Lal Nehru Marg, New Delhi	650
4	Deen Dayal Upadhyay Hospital	Hari Nagar	640
5	Dr. Baba Saheb Ambedkar Hospital	Rohini	500
6	Sanjay Gandhi Memorial Hospital	Mangolpuri	300

II. DELHI GOVT. HOSPITALS WITH UPTO 250 BEDS			
Sl. NO	NAME OF HOSPITAL	LOCATION	NO. OF BEDS
1.	Bhagwan Mahavir Hospital	Pitampura	250
2.	* Maharishi Balmiki Hospital	Pooth Khurd	250
3.	Guru Nanak Eye Centre	Maharaja Ranjit Singh Marg	224
4.	Dr. Hedgewar Arogya Sansthan	Karkardooma	200
5.	* Satyawadi Raja Harish Chandra Hospital	Narela	200
6.	Jag Parvesh Chandra Hospital	Shastri Park	200
7.	Deep Chand Bandhu Hospital	Kokiwala Bagh, Ashok Vihar	200
8.	Central Jail * Hospital	Jail Road	150
9.	Aruna Asaf Ali Govt. Hospital	Rajpur Road	100
10.	Acharyashree Bhikshu Hospital	Moti Nagar	100
11.	Babu Jagjivan Ram * Hospital	Jahangir Puri	100
12.	Guru Govind Singh Govt. Hospital	Raghubir Nagar	100
13.	Lal Bahadur Shastri Hospital	Khichripur	100
14.	Pt. Madan Mohan Malviya Hospital	Malviya Nagar	100
15.	* Rao Tula Ram Memorial Hospital	Jaffar Pur	100
16.	Dada Dev Mother and Child Hospital	Nasirpur, Near Janakpuri	64
17.	Dr. N C Joshi Hospital	Karol Bagh	60
18.	Sewa Kutir Hospital *	Beggars Home, GTB Nagar	60
19.			
20.	Sardar Vallabh Bhai Patel Hospital	Patel Nagar	60
21.	Health Centre cum Maternity Hospital	Kanti Nagar	30

* These hospitals are to be considered as Peripheral Hospitals. Any new hospital which is commissioned hereinafter will also be considered initially as Peripheral Hospital.

III. PRIMARY HEALTH CARE CENTRES (under Directorate of Health Services)
Dispensaries including PUHC & Seed PUHC
Mobile Health Scheme
School Health Scheme
Asha Kiran Home

IV. **Directorates & Programmes**
DHS, DFW, DSHM, CATS and DSACS

**4. CRITERIA REGARDING TRANSFER:
SPECIALISTS (NON TEACHING)**

4.1.1 Initial appointments should be in Category - II (peripheral) and should move to Category -II (non-peripheral) and Category-I on seniority & vacancy basis.

4.1.2 Senior most Non teaching Specialist should be posted in DDUH, BSAH or SGMH being the largest non teaching hospitals. However, the officer can be considered for posting at LNH, GBPH, GTB and GNEC, depending on availability of vacant posts.

4.1.3 Transfers normally to be once in five years from one hospital to other.

4.1.4 Notwithstanding the above, postings at Peripheral Hospitals should not be more than three years at a stretch.

4.2 MEDICAL OFFICERS:

4.2.1 Initial appointments should be in Category - III but, if no post is available there, posting shall be in Category-II; however, on availability of vacancy in Category-III, he would be liable to be posted in Category-III subject to the aforesaid, movement should follow from Category-III to Category-II to Category-I, on seniority basis.

4.2.2 GDMOs with Post Graduate qualifications would initially be in Category - II peripheral hospitals thereafter in Category-II non-peripheral hospitals and after that in Category-I hospitals.

4.2.3 Transfers to be once in five years from one hospital to other in case of Post Graduate Medical Officers and from one district to other district or to other schemes in case of Medical Officers posted in Primary Health Care facilities.

4.2.4 Postings in Peripheral Hospitals/Mobile Health Scheme and Central Jail should not be more than three years at a stretch, notwithstanding 4.2.3 above.

- 4.2.5 The Medical Officer who completes the required tenure in a particular category shall have the option to give choice for 2-3 hospitals/districts in next category in order of preference (through proper channel).
- 4.2.6 Doctors transferred and not relieved within 1 month of such transfer orders may be treated as “stands delivered” on expiry of 1 month from the order. In case the Doctor still does not join at new place posting, or gives leave applications, he shall be treated as being willfully absent from duty and will be liable for disciplinary action.
- 4.2.7 A Committee with minimum three senior officers from the Department as members, under the chairmanship of Special Secretary (Medical) may be formulated to recommend transfers, in accordance with the transfer policy, for consideration of the Competent Authority.

5. TYPES OF TRANSFER

Transfers may broadly be classified into two types viz., administrative transfer which the Department of Health orders suo moto in the exigencies of service and administration and in public interest, and request transfer which is effected based on the request of a Doctor.

6. ADMINISTRATIVE TRANSFER OF DOCTORS

After the completion of tenure, a Doctor shall be liable for transfer except where a Doctor's retention after the completion of tenure or a Doctor's exit before the completion of the tenure is necessary in the organizational interest. Efforts will be made to consider bulk of such transfers post-wise at an opportune time during the year. Transfer/posting to a desired station shall not be claimed as a matter of right. Some crucial determinants and relevant factors for such transfers, to be considered to the extent possible, are as under:

(i) Crucial determinants:

- a) Inherent strength/weakness of a Doctor to cope with the responsibility.
- b) Domain expertise of a Doctor
- c) Policy of transfer will be same for specialists/GDMO working on sanctioned posts in their respective cadre in Teaching or Non-teaching Hospitals
- d) Redeploy surplus staff in excess of sanctioned strength at a location to other location against sanctioned vacancies.
- e) Doctors involved as supervisor/guide of DNB students should normally not be transferred.

(ii) **Relevant factors:**

- a) Factors such as due for retirement, medical problems faced by a Doctor or family members, spouse working at nearby place.
- b) Post Doctors in various categories of Hospitals on rotation.
- c) Displacement of a Doctor from a location to accommodate the request of a needy Doctor.

7. METHOD FOR ADMINISTRATIVE TRANSFER

- 7.1. Transfer will be considered only against vacancy.
- 7.2. Provided, exemption can be given to a Doctor or group of Doctors from displacement for such period owing to circumstances or such other administrative exigencies justifying such exemption.
- 7.3. Provided, a Doctor can be transferred from a location if the Doctors' stay has become prejudicial to the interest of the organization.
- 7.4. Provided further, a Doctor can be transferred to a location in administrative exigencies.
- 7.5. As a general rule, physically challenged Doctors shall be posted near their place of residence.

8. REQUEST TRANSFER OF DOCTORS

Applications for transfer requests received within stipulated period will be considered by the Health Department and in doing so the organizational interest will be the uppermost consideration. Some crucial determinants for effecting such transfers shall be as follows:

- a) Request of Doctor factoring in such components as due for retirement, medical problems faced by a Doctor or family members, spouse working at a nearby Hospital.
- b) Suitability of a Doctor for the sought Hospital.
- c) Number of years spent in a Hospital/place.
- d) On compassionate ground: -
 - Handicapped (80% and above), serious ailments like Cancer, Thallassemia, etc., single female (unmarried, widow & legal divorced).
 - Doctors having less than 2 yrs. of service before superannuation may be considered for posting at a place of their choice subject to availability.
 - In case a doctor requests for retention of a particular hospital on the ground that his/her child is in class X to XII.

9. SELECTION & POSTING OF DIRECTOR/MEDICAL SUPERINTENDENTS OF HOSPITALS

To facilitate proper and professional selection for senior positions in the Department H&FW, a Screening Committee comprising of Special Secretary (Medical); Dean, MAMC; DHS and with 2 - 3 other members as may be nominated by Secretary (H&FW) will be constituted to suggest a panel of names for the post of Director/Medical Superintendents of Hospitals. The relevant criteria will include:

1. Seniority of the Officer
2. Integrity, work and conduct
3. Professional standing of the officer
4. Managerial experience and capability
5. Leadership quality and co-ordination ability
6. Status regarding vigilance clearance, suspension, disciplinary proceedings
7. Due representation of the various sub-cadres and categories of officers

10. AUTHORITY COMPETENT TO EFFECT TRANSFER

The Competent Authority in the Department of Health & Family Welfare may transfer, post and assign any duties to all officers and staff at the Headquarter, Hospitals as well as DHS. This shall be without derogation of powers exercisable by Directors and Medical Superintendents in their respective jurisdiction.

11. POWER OF RELAXATION OR GUIDELINES

Notwithstanding anything contained in the guidelines, the Competent Authority in the H&FW Department may transfer any Doctor to any place in relaxation of any of the above provisions, for reasons to be recorded in writing.

12. INTERPRETATION OF GUIDELINES

Secretary (H&FW), in consultation with Secretary (Services), shall be the competent authority to interpret above provisions and pass such other order(s) as deemed appropriate and essential to facilitate the implementation of the guidelines for the purpose of effective administration of the Department of Health & FW as a whole.

13. REDRESSAL OF GRIEVANCES & TRANSPARENCY

- a) There will be a Human Resources Grievances Redressal Committee with the Pr. Secretary/Secretary (Health &FW) as the Chairperson which will include two/three more senior doctors and an officer from the Services department as members. All representations relating to the postings of GDMOs/Specialists, up to and including those in the SAG scale will be referred to this Committee which will meet as frequently as the need arises.

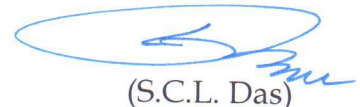
- b) The above Committee will also consider requests for inter-hospital and inter-zonal transfers of GDMOs/Specialists. Representation relating to posting of Senior Administrative Grade GDMOs/Specialist will also be dealt by the above Committee.
- c) Any transfer of Doctors in the Senior Administrative Grade (SAG) before the normal tenure, if required to be done for administrative reasons or in the public interest, will have to be cleared by the above Committee, and reasons thereof recorded on file.
- d) All file notings pertaining to transfer and posting of Doctors will be admissible and accessible under the Right to Information Act.

14. SAFEGUARD AGAINST EXTRANEOUS INFLUENCE

Doctors shall not bring in any outside influence; if such influence from extraneous source espousing the case of a Doctor is received it shall be presumed that the same has been brought in by the Doctor. The request of such a Doctor shall not be considered. Action may also be initiated against such a Doctor under relevant service rules.

15. DATE OF EFFECT

These guidelines will become effective from the date of their issue. All requests of transfers, received during the past six months, if not acted upon earlier, will be treated as having been submitted under these guidelines and will be acted upon as such.



(S.C.L. Das)

Secretary (Health &FW)

Tel: 23392017

e-mail: pshealth@nic.in

To

- 1) All Spl. Secretaries/ Addl. Secy./Jt. Secretary, Department of Health & FW
- 2) All HODs of Hospitals/Institutions of Department Health &FW for wide circulation.

Copy for information:

- i) Pr. Secretary to Lt. Governor
- ii) OSD to Chief Secretary
- iii) PS to Pr. Secretary (Finance/Planning)
- iv) PS to Pr. Secretary (Services)
- v) PS to Secretary (AR)



(S.C.L. Das)

Secretary (Health &FW)