

**POLICY TO REGULATE TRANSFERS AND POSTINGS OF DOCTORS
(HEALTH DEPARTMENT)**

The Government of Haryana is committed to the provision of adequate, equitable, easily accessible, patient friendly and prompt health care throughout the state.

A well-considered and well-structured transfer Policy is a critical and basic ingredient in the efforts to achieve this objective. Transfer Policy should ensure equitable distribution of Doctors, thereby enhancing efficiency of the Health services delivered and also providing Doctors with an easily interpretable document concerning their transfer and postings and should also instill professional satisfaction amongst the Doctors.

A meeting was held in the Directorate General of Health Services alongwith NHM Officers where issue was deliberated upon with a view to provide better health services to the people of Haryana especially in rural and far flung remote areas. The transfer policy of the department issued vide Government memo no. 25/8/08-6HBI of 2008 (**Flag-A**), the guidelines regarding transfer policy issued by Chief Secretary, Haryana vide no. 45/32/2004-5GSI dated 06.10.2004 (**Flag-B**) and the proposal of NHM, Haryana ((**Flag-C**) was reviewed.

It has come to the notice of the Committee that the Government of Punjab has carried out an exercise in 2011 (**Flag-D**) by which the health institutions in the State of Punjab were graded as normal, difficult and more difficult for the purpose of "In service PG policy of that state".

An elaborate process was followed by the Government of Punjab wherein specific criteria were fixed to classify the health institutions and the

classification was widely publicized to invite comments and suggestions from various stake holders including the Doctors in the purview of that policy and also the general public regarding the classification of the health institutions of that state.

The Committee feels that a similar exercise may be undertaken in the state of Haryana and specific incentives/privileges may be accorded to those officers who work in the more difficult stations thereby incentivizing the services of such Doctors.

The Health Department, Government of Haryana intends to use, for the first time, IT tools to aid administrative decisions regarding transfers and postings of Doctors and also to provide the department with the real time situation regarding availability of Doctors at different health institutions of the state. In this relation, a tool by the name of Human Resource Information System (HRIS) Application has been developed by NHM, Haryana and the same is proposed to be used on a trial basis for one year.

Brief overview of HRIS: To ensure smooth working of transfer policy NHM, Haryana has developed the Human Resource Information System (HRIS) application. The database of all the Doctors shall be maintained in the system which will have details of place of posting, specialization, tenure, stay etc. The HRIS system will support the transfer process as per the transfer policy. All transfer requests shall be made online in the application. All orders will be generated online with automatic updating of place of posting.

Vision of transfer policy- To ensure streamlined, equitable and demand based distribution of Doctors to maintain the efficiency and effectiveness of the health

delivery system and to ensure job satisfaction amongst its employees in a fair and transparent manner.

Objectives of the transfer policy-

- To ensure rational deployment of Doctors across all the health facilities in Haryana.
- To facilitate the presence of Doctors (with specialization) at the Civil Hospital, First Referral Units, CHC's.
- To ensure that adequate number of Doctors are posted at each facility.
- To bring greater transparency and enhancing job satisfaction amongst the Doctors covered by this policy.

The transfers of Doctor in Haryana shall be regulated strictly in accordance with the following guidelines.

1. This transfer policy will be applicable to Medical Officers, Dental Surgeons, Senior Medical Officers and Senior Dental Surgeons only. Posting and transfers of Civil Surgeons and higher ranks will not come under the purview of this policy, since this job is mainly administrative/Managerial in nature.
2. Claiming transfer/ posting will not be treated as a right of the Doctors covered under this policy.
3. No doctor would be posted in excess to the sanctioned posted for that particular institution.
4. Normal tenure of a Doctor at any place of posting shall be a minimum of 3 years before he/she can apply for transfer.
5. On completion of ten years of tenure in the same health institution, the Doctor will be automatically considered for transfer. In exceptional cases tenure may be further extended beyond ten years on the ground of excellence.

However, such cases need to be justified on file recording.

6. A Doctor can be transferred at any point of time after seeking prior orders of the State Government on account of compelling administrative reasons. However, the specific administrative ground on which a Doctor is sought to be transferred shall be cited in the noting of the file. Usually, an administrative ground for transfer to a Doctor shall be of the nature as given below:-

- a) A complaint established through a preliminary enquiry.
- b) Failure to comply with the specific direction issued by the Govt. /Directorate.
- c) Doctors whose performance is found to be unsatisfactory/poor in respect of OPD, IPD, Implementation of National Programmes or who are prima-facie guilty of malpractices such as charging of personal fee from patients, private practice, pilferage of sale of Govt. medicines, prescriptions to favour certain specific brands, indiscriminate prescription of diagnostics test which are not available in Govt. Health facility etc. would be liable to be transferred on administrative grounds.

The above stated administrative grounds should be based on a specific report of the concerned Civil Surgeon detailing specific acts of omission or commission.

7. On first appointment and in case of promotion, the Doctors shall give three choices of vacant health institutions and the department will try to accommodate them in order of merit/seniority. However, they will have to serve at the allocated

station for at least 3 years. For this purpose, they will have to submit an undertaking along with their request stating that they (including their family, friends and well wishers) will not make any request for transfer if they are accommodated in one of the three preferred stations. Any such request received for transfer during three years period will be considered as malpractice and liable for disciplinary action.

8. In District Hospitals, PHCs, CHCs and sub divisional Hospital, Specialist and other Doctors would be posted strictly in accordance with staffing norms.
9. A Doctor with Postgraduate qualifications and those who have been trained in LSA/EMOC/USG training will not be posted in PHCs.
10. A specialist cannot be transferred unless a Doctor with the same specialty is posted as a replacement simultaneously.
11. There shall be a rational deployment of specialist Doctors taking into account the vacancies, sanctioned versus filled posts, availability of infrastructure and logistics as also the patient load of the health institution he/she is already working in as well as the proposed posting place.
12. Adequate number of MBBS Doctors or those having specialization which cannot be directly utilized in the health institutions of the department shall be posted in Health Institutions providing 24 hours Emergency/Casualty and/or Post Mortem facilities.
13. Specialists should not invariably be posted as Deputy Civil Surgeons at district level.
14. Those Doctors who are retiring within the next one year will not be transferred except on their own request, subject to vacancy or on account of

compelling administrative grounds to be recorded in writing.

15. If both, the husband and the wife are in the service of the Haryana State Government/ organizations aided by the Government of Haryana, efforts will be made to adjust them as near as possible. Preference would be given to those both of whom are serving in the Health Department. However, where both husband and wife work in the Health Department of Govt. of Haryana, efforts will be made to adjust them in stations as near as possible. However, this cannot be claimed as a matter of rights in view of the public interest involved with Medical Services. Similarly specialist doctors in view of public interest involved, will not be considered under the couple case policy. However, their spouses, if they are non specialists will be considered.
16. Efforts may also be made to post unmarried girls, divorced ladies and widows, as far as possible, at stations opted by them. Such girls and widows would get preference over couple cases in the matter of transfers at stations opted by them.
17. No TA/DA will be given if the transfer is done at the request of the Doctor himself/herself or through the request made through his family, friends or public representatives or if he/she is being given the posting of his own choice. In case the doctor says that such request was made on his behalf without his consent, he has to give in writing that he is not willing to avail the benefit of said transfer.
18. Transfer orders would be implemented within one week of issue or the applicable joining time whichever is less. DDOs would ensure relieving/joining of respective Doctors within

stipulated time. No salary can be drawn in cases of noncompliance of transfer orders after stipulated period of one week. DDO will be personally held responsible for any neglect in this regard and payment of such salary will be recoverable from them.

19. Civil Surgeon shall submit consolidated report of relieving/joining of Doctors and engagement of contractual specialist appointed under various programmes of GOI to update the computer data within a fortnight.
20. Transfers and Deputations outside the Cadre will not be permissible in view of shortage of doctors in HCMS cadre. However, the Haryana Govt. posts in UT Chandigarh will be filled by deputation in State's interest.
21. Guidelines for making request for transfers:-
 - a) All Doctors will be provided with user names and secure access.
 - b) The Doctors can make an online request for transfer during the month of January each year giving three preferred places of posting.
 - c) All requests shall be made online only.
 - d) It would be mandatory to indicate three choices. Any application with less than three choices will be rejected straight away.
 - e) The doctors may alter their request within the month of January after which the request shall be deemed as final.
 - f) The Doctors will be at liberty to withdraw their request for transfers within the first fortnight of February.
 - g) The department shall process the transfer/posting proposals so that the transfer orders can be issued in the first week of April each year.

- h) If no vacancy becomes available as per the policy in the three requested health institutions, the transfer will not be done till a vacancy becomes available, for which the applicant would have the first right.
- i) The request shall be valid for one year only after which it will stand cancelled. There after a fresh request has to be made.
- j) In case of clash of choice of more than one doctor for a particular health facility, The following order shall be considered while transferring-
- 1.The Doctor having station seniority shall be preferred.
 - 2.The doctor who spent more number of years in service shall be given preference.
 - 3.Older in age will be given preference.
- Provided further that other conditions of the policy regarding preferential posting to stations of choice with respect to certain specified conditions shall be taken into account while deciding such cases.
- k) Transfer of Doctors with specialization and Dental Surgeons in a particular facility shall only be made if the logistics pertaining to their specialty is available in that facility. Also specialist or Dental Surgeon would be shifted to a new station unless a specialist/Dental Surgeon is replaced simultaneously at that station.
- l) Vacancies created due to promotion/retirement/resignation/death etc. would firstly be filled from amongst doctors, who have given the choice of that particular institution in the prescribed performa at the time when they are

asked to submit their requests. If no such regular doctor is available then the post shall be filled up through contractual appointments **as per Chief Secretary policy** under the various programmes of GOI.

- m) Any transfer orders approved by the State Govt. after 1st May would be implemented only in April next year so that contractual arrangements are not discontinued midyear and health care to the patients is not disrupted.
22. All grievances arising out of the implementation of this transfer and posting policy will be submitted in writing and will be examined by the Directorate.
23. The department will after one year of trial run of HRIS will assess the suitability of the HRIS and recommend such amendments as may be needed in the transfer policy or in HRIS so that the twin objective of this transfer policy i.e. providing healthcare to the public and having a satisfied work force can be accessed.
24. The policy will not cover the postings at the headquarter.
25. This policy shall have precedence over any other policies of the Govt. with respect to doctors of Health Department so far as the posting, transfer and placement is concerned.