# Government of India Ministry Of Home Affairs PERS-II

Policy regarding posting/transfer of DIsG (Med) and Subject: IsG (Med) in Central Armed Police Forces (CAPFs),

Reference ADG (Med)'s note No.1/2006/ADG(Med)/CPF/ Poisting Policy/24 dated 06.01.2011, on the subject noted above.

Policy regarding posting/transfer of DIsG (Med) and IsG (Med) of Central Armed Police Forces (CAPFs), NSG and ARs has been framed in consultation with CAPFs, NSG, ARs and ADG (Med) and a copy of the approved policy is enclosed for necessary action.

Encl: As above.

(Ajay K. Singh) Director (Pers) 至23092956

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# Sub:- POLICY REGARDING POSTING /TRANSFER OF DISG(MED) AND ISG(MED) IN CAPES, NSG AND ARS

#### INTRODUCTION

- 1. Medical set up of CAPFs, NSG and ARs has been restructured on composite hospital pattern and various CPF hospitals have been upgraded to 32 fifty bedded, six 100 bedded and one 200 BeddedReferral Hospital vide GOI Order no.27012/33/2003-PF.III, dated 02.09.04. In this regard kindly refer Para 3(iv) of the above mentioned letter as per which, the administrative matters, management of medical set up to the level of CMO(SG) will be with the respective forces but administrative matters related to the post at the level of DIG (Med) and above rests with ADG(Med). Total 35 posts DIsG(Med), 11 posts of IsG(Med) and one post of ADG(Med) have been sanctioned in the medical cadre of CAMFs, NSG and ARs.
- 2. Location wise details of 35 Posts of DIsG(Med) are as under:-

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<u>1</u>	DIG(Med), 50 Bedded, CH Assam Rifles, Shukhovi, Dimapur (Nagaland)
2.	DIG(Med), 50 Bedded,CH BSF Humama, Srinagar(J & K)
3.	DIG(Med), 50 Bedded,CH BSF Jalandhar Cantt(Punjab)
4.	DIG(Med), 50 Bedded,CH BSF Salbagan, Agartala, Tripura
5.	DIG(Med), 50 Bedded,CH BSFTC & S Hazaribagh, Jharkhand
6	DIG(Med), 50 Bedded,CH BSF Kolkata, West Bengal
7.	DIG(Med), 50 Bedded,CH BSF Aizawl, Mizoram
8.	DIG(Med), 50 Bedded,CH BSF Shillong, Meghalaya
9.	DIG(Med), 50 Bedded,CH BSF Jodhpur, Rajasthan
10.	DIG(Med), 50 Bedded,CH CRPF Muzaffarpur, Bihar
11.	DIG(Med), 50 Bedded,CH CRPF Sindri, Jharkhand
12.	DIG(Med), 50 Bedded,CH CRPF Allahabad, UP
13.	DIG(Med), 50 Bedded,CH CRPF Bhubaneswar, Orissa
14.	DIG(Med), 50 Bedded,CH CRPF Avadi, Chennai, Tamilnadu
15.	DIG(Med), 50 Bedded,CH CRPF Pallipuram, Kerala
16.	DIG(Med), 50 Bedded, CH CRPF Bangalore, Karnataka
17.	DIG(Med), 50 Bedded,CH CRPF Neemuch, M P
18.	DIG(Med), 50 Bedded, CH CRPF Bhopal, M P
19.	DIG(Med), 50 Bedded, CH CRPF Nagpur, Maharastra
20.	DIG(Med), 50 Bedded,CH CRPF Talegaon, Pune, Maharastra
21.	DIG(Med), 50 Bedded,CH CRPF Rampur, UP
22.	DIG(Med), 50 Bedded,CH CRPF Ajmer, Rajasthan
23.	DIG(Med), 50 Bedded,CH CRPF Silchar, Assam
24.	DIG(Med), 50 Bedded,CH CRPF Imphal, Manipur
25.	DIG(Med), 50 Bedded, CH CRPF Bilaspur, Chhatisgarh
26.	DIG(Med), 50 Bedded, CH CRPF Ahemedabad, Gujrat
27.	DIG(Med), 50 Bedded,CH ITBP Chandigarh, U T
28.	DIG(Med), 50 Bedded,CH ITBP Itanagar, Agartala
29.	DIG(Med), 50 Bedded,CH SSB Gorakhpur, U P
30.	DIG(Med), 50 Bedded,CH SSB Purnea, Bihar
31.	DIG(Med), 50 Bedded,CH SSB Tezpur, Assam
32.	DIG(Med), 50 Bedded,CH NSG& Director(Med) NSG,Manesar, Haryana
33.	DIG/Director(Medical) Assam Rifles, Shillong, Meghalaya
34.	DIG/Director(Medical) CISF, New Delhi
35.	DIG(Med), Staff Officer to ADG(Med), CAPFs, NSG and ARs, New Delhi
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- 3. It is evident that out of 35 posts DIsG(Med), 31 DIsG(Med) are commanding 50 bedded Composite Hospitals as Medical Superintendent. One DIG(Med) is commanding 50 bedded Composite Hospital as Medical Superintendent and he is also Director(Medical) of NSG. Two DIsG(Med) are posted as Director(Medical) of Assam Rifles and CISF respectively and one DIG(Med) is posted as Staff officer to ADG(Medical) CAPFs. NSG and ARs.
- 4. Location wise details of 11 Posts of IsG(Med) are as under:-

Ser No	Details
1.	IG/Director(Medical) BSF, New Delhi
2.	IG/Director(Medical) CRPF, New Delhi
3.	IG/Director (medical) ITBP, New Delhi
4.	IG/Director(Med: i) SSB, New Delhi
5.	IG(Med), 200 Bedded Referral Hospital ITBP &Sr Staff Officer to ADG(Med)
<u> </u>	CAMFs, NSG and ARs, ITBP, New Delhi
6.	IG(Med), 100 Bedded,CH BSF Tekanpur, M P
7.	IG(Med), 100 Bedded,CH BSF Kadamtala, West Bengal
8.	IG(Med), 100 Bedded, CH CRPF Jharoda Kalan, New Delhi
9.	IG(Med), 100 Bedded,CH CRPF Hyderabad, AP
10.	IG(Med), 100 Bedded,CH CRPF Guwahati, Assam
11.	IG(Med), 100 Bedded,CH CRPF Jammu. J & K

5. It is evident that out of 11 IsG(Med), four IsG(Med) are posted as Directors (Medical), one as Medical Superintendent cum Sr staff officer to ADG(Med), CAPFs, NSG and ARs and six IsG(Med) as Medical Superintendent of six 100 bedded Composite Hospitals.

#### PRESENT SYSTEM

- 6. Office of the ADG (Med), CAPFs, NSG and AR is the nodal agency to carry out DPC of the post of DIG(Med) and IG(Med) of CAPFs, NSG and ARs. This office also used to sent proposals to MHA for approval of CA for posting on promotion of DIsG(Med) & IsG(Med) as well as transfers of DIsG(Med) & IsG(Med) on the basis of arising of vacancies and on the basis of merits of the cases. On receipt of approval from MHA, promotion order / posting order are issued by the Office of the ADG(Med) in respect of DIsG(Med) and IsG(Med). So far senior most IsG(Med) are posted/readjusted as Directors(Med) of BSF/CRPF/ITBP/SSB. IG(Med), 200 Bedded Referral Hospital is being posted keeping in mind his suitability to as Senior Staff Officer to ADG(Med), CAPFs, NSG and ARs also. Remaining six IsG(Med) are posted as Medical Superintendent of six 100 bedded Composite Hospitals of BSF/CRPF.
- 7. (i) The post of Directors(Medical), Assam Rifles/Central Industrial Security Force & NSG are of DIG level posts, therefore, three DIsG(Med) having middle level seniority out of 35 posts of DIsG(Med) are to be posted as Directors (Medical) AR/CISF/NSG.
- (ii) New promotees from CMO(SG) to DIG(Med) and DIsG(Med) having very high seniority were not being posted as Director(Med) in these forces as per practice prevalent so far.
- (iii) Newly promoted DIsG(Med) were also not posted as Dirs(Med)of these three forces because, they do not have sufficient experience to be Medical chief of these forces and very senior DIsG(Med) were also not being posted as Directors (Med) of these three forces, as they are likely to be promoted as IG(Med) and transferred to 100/200 bedded Composite Hospitals.



#### **TENURE**

8. Tenures in North East, J & K (Except Jammu ) and Naxal-affected areas will be of maximum of 2 years and normal tenure will be of 3 years, at the remaining places, as per administrative requirement.

### TERMINAL POSTING

 Terminal posting i.e. last two years of service as far as possible officer should be given the choice posting.

# POSTING ON EXTREME COMPOSIONATE GROUND

10. As far as possible the posting on compassionate ground will be considered on merit basis depending upon genuineness of the case as well as availability of the place.

# POSTING ON ADMINISTRATIVE GROUND

11. The officers can be transferred at any time overlooking the normal tenure due to administrative reasons.

# DETERMINATION OF SUITABILITY ISG(Med)

12. Four senior most IsG(Med) should be posted as Directors (Med) of BSF/CRPF/ITBP/SSB. ADG(Med) CAPFs, NSG and ARs enjoy the privilege to select one IG(Med) of his choice from among 07 junior IsG(Med) to be selected as IG(Med) of 200 bedded Referral Hospital, ITBP, since this IG(Med) will also perform duties of senior staff officer of ADG(Med) in addition to performing the duties of Medical Superintendent of 200 Bedded Referral Hospital, ITBP. Remaining 06 IsG(Med) are to be posted in six 100 Bedded Composite Hospitals of BSF/CRPF till their seniority become within four among 11 IsG(Med). In exceptional administrative grounds, if any junior IsG(Med) required to be posted as Director(Med) of a force, then it should be ensured that, no IsG(Med) of 100 Bedded CH / 200 Bedded RH is senior to him in that force, if so the same may be re-adjusted.

## DETERMINATION OF SUITABILITY DISG(Med)

13. The post of Directors(Medical). Assam Rifles/Central Industrial Security Force & NSG are of DIG level posts, therefore, three DIsG(Med) having middle level seniority out of 35 posts of DIsG(Med) are to be posted as Directors (Medical) AR/CISF/NSG. New promotees from CMO(SG) to DIG(Med) and DIsG(Med) having very high seniority are normally not to be posted as Director(Med) in these forces. DIsG(Med) who are already empanelled for promotion as IG(Med) for a particular vacancy year should not be posted as Director (Med) of AR/CISF/NSG. ADG(Med) CAPFs, NSG and ARs enjoy the privilege to select any one DIG(Med) of his choice from among DIsG(Med) for performing staff officer job for him.

#### ROTATION

14. All IsG/DIsG (Med) can be posted to any CAPFs, NSG and ARs irrespective of the parent force affiliation. These officers will be transferred after completion of their normal tenure as above.



#### **EXPERIENCE**

15. All DIsG/IsG(Med) are already experienced officers and as such no specific experience is required for the purpose of posting. However, for selection of DIG/Director(Med) of AR/CISF/NSG has already been indicated in para 13 above. Selection of IG/Directors(Med) of BSF/CRPF/ITBP/SSB has been indicated in para 12 above. DIG(Med) level and IG(Med) level staff officer to the ADG(Med) CAPFs, NSG and ARs will be of the choice of ADG(Med) CAPFs, NSG and ARs; these two officers should be well versed with the functioning of the CAPFs, NSG and ARs medical cadre, capable to perform staff jobs, and capable to co-ordinate with different CAPFs, NSG and ARs and MHA etc.

#### SPECIFIC REQUIREMENT OF THE FORCE

16. For posting purpose specific requirement of Forces cannot be considered as the basic requirement of a Medical Officer at DIG/IG (Med) level as these posts are basically for health cadre administration and Management where they perform the duties either of Medical Supdts or of Directors(Med). ADG(Med) post has been sanctioned in the ITBP force, therefore, for the smooth functioning of the office of the ADG(Med), the IG/Director(Med) who is likely to be promoted as ADG(Med) should preferably be posted as Director(Med) ITBP. On genuine administrative grounds the request of CAPEs, NSG and ARs may be examined in MHA for its merits.

#### TRANSFERS AGAINST THE VACANT POSTS

17. Medical set up of CAPFs, NSG and ARs has been restructured on composite hospital pattern and in this situation no Force is in a position to assess requirements of other Forces nor DG of any force can transfer/attach or post any DIG/IG (Med) to other Force. Therefore it is suggested that vacancies may be filled up on the recommendation of ADG (Med). CAPFs, NSG and ARs by MHA only.

#### POSTING OF DISG/ISG(MED) HAVING PG QUALIFICATION (SPECIALISTS)

18. All DIsG/IsG (Med), whether having PG Qualification (Specialists) or otherwise are posted to 50/100/200 bedded Composite Hospitals as Med Supdts or Directors (Med) which are administrative posts by nature. At all CHs, infrastructure for specialized services are already available hence posting of DIsG(Med) and IsG (Med) cannot be linked to area of his/her specialization.

#### **COUPLE CASES**

19. In terms of Ministry of Personnel, Public Grievances and Pensions ( DOP&T) Office Memo No, 28034/2/97-Estt(A) dated 12<sup>th</sup> June, 1997 transfer of a member of the Force and his/her spouse to the same location shall be considered as far as possible subject to operational necessity and administrative feasibility. Couples will also be liable to serve separately due to exigencies of service.

#### EDUCATION OF THE CHILDREN/ACADEMIC YEAR

20. Academic year of the school/college going children as per practice prevalent so far will be kept in mind, while considering transfer of medical officers.



## POSTING ON MUTUALLY AGREED AND TRANSFER ON REQUEST GROUND

21. Mutually agreed transfers can be decided on extreme compassionate grounds, case to case merit and such cases if any, will be treated as transfer on own request. No transfer allowances will be admissible to these categories of transfers.

#### LMC OFFICERS

22. Since only SHAPE-I, absolutely fit doctors are eligible for promotion as DIG(Med) and IG(Med), however, if some DIsG(Med) & IsG(Med) become LMC after his/her promotion the same will be adjusted keeping in view the recommendations of the Medical Board and availability of the place.

## USE OF EXTERNAL PRESSURE IN POSTING AND TRANSFERS

23. As per rules 20 of CCS conduct rules 1964 no Govt, servant shall bring or attempt to bring any political or other outside influence to bear upon any superior authority to further his/her interest in respect of matters pertaining to his/her service under the Govt. A Govt servant violating the above provisions would be liable to be dealt with in accordance with the procedure laid down under Rule 20 of CCS conduct rule.

#### **GENERAL**

This policy will be effective from the date of its issue. For the purpose of calculating tenure, the cut off date will be 01 April of the year. The office of the ADG(Med) will be the nodal agency for timely conducting the DPC in every year for vacancies—for the promotion of DIG(Med) and IG(Med). After preparation of the draft proposal of the DPC, office of the ADG(Med) will submit the same to MHA for further necessary action and for further obtaining the approval of ACC by the MTA. As and when vacancies arises during the year, every time proposal will be submitted by the ADG(Med) for promotion, posting/transfer of empanelled DIsG(Med) & IsG(Med) atleast one month in advance for approval of the MHA and after obtaining the approval, ADG(Med) will issue promotion, posting/transfer orders of DIsG(Med) & IsG(Med) to concerned CAPFs, NSG and ARs for its implementation.