

DELHI ADMINISTRATION DOCTORS' WELFARE ASSOCIATION (REGD.)

(REGISTRATION NO. S-12851)

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Our Ref. No.DADWA/2015-02/SecyHFW/

Dated: 20-6-2015

To

The Secretary (H&FW)
Govt. of NCT of Delhi
Level 9, Delhi Secretariat, New Delhi-2

Sub: ISSUES REG. SERVICE DOCTORS IN DELHI

Sir,

I am directed to bring to your notice that service doctors are one of the important human resource and backbone of the public health system of Delhi but this resource is not being managed professionally by Health and Family Welfare Department for want of effective HR polices and HR infrastructure to manage their professional and career needs. The red-tape has so far prevented professional cadre management and induction and in-service trainings.

Our association nicknamed 'DADWA' represents service doctors of Delhi deployed in its health-system. At present they belong mainly to two organized group 'A' services or cadres viz. Delhi Health Service (DHS) and Central Health Service (CHS). The first batch of doctors who joined Delhi Health Service were the ones from CHS who opted to work in DHS. Later contractual doctors appointed before 2006 were regularized in May 2015 in DHS in relaxation of rules at the time of formation of DHS as a new service.

These doctors work in different capacities in various fields/departments and health institutions including Hospitals, Dispensaries, Societies, autonomous bodies, Directorates of Health Services and Family Welfare etc. Members of DADWA are health-service providers, specialists, medical officers, health-administrators, health-planners, teachers and public health specialists belonging to four subgroups or sub-cadres of DHS/CHS viz. General Duty Medical Officers' (GDMO), Non-teaching specialists, Teaching Specialist and Public health specialists in order of their percentage numbers in these services. Despite their contribution Human Resource Management remains a distant dream. The fact that the draft National Health Policy 2015 still emphasizes need for having sound institutional mechanisms for Human Resource Management is proof-enough that successive governments have not been able to do so despite their intent; Para 5.1 of the said draft policy states that,

"The need of the day is not a headlong (market-driven) expansion of the pool of professional and technical human resources for health, but a planned increase that creates human resources that meet the specific requirements for professional and technical skills that are needed most. The key principle around which we build a policy on human resources for health is that workforce performance of the system would be best when we have the most appropriate person, in terms of both skills and motivation, for the right job in the right place, working within the right professional and incentive environment."

Out of the four streams mentioned above the General Duty Officers' sub-cadre or in short GDMO's are the largest group who perform both medical and health management functions. About ¼ of them hold PG qualifications acquired either before joining service or during the service. They are visible in every health institution playing role of service providers, area in-charges, managers, specialists, heads of departments Medical Superintendents and even Director of Health Services etc. Their service conditions, career-progression, deployment/posting, transfers and safety in work environment have been our concerns.

DADWA has collaborated in the past with Delhi Govt. as member of several committees constituted on matters like formation of Delhi Health Service Rules and other cadre related issues like promotion to HAG. On its behalf, I am directed to bring to your notice some important issues that need your kind attention and remedial measures through appropriate policy initiatives in consonance with commitment of your government to give a clean and efficient administration to Delhi. These are,

1. **Contractual appointments against regular posts:** Delhi Government has been appointing doctors on contract against regular duty posts since 1996 onwards. But instead of filling up these posts through regular appointments, these doctors were made to continue on contract and approach courts. Finally those who were appointed on contract before 2006 were regularized since May 2012 but those appointed thereafter have left out for no fault of theirs.

We request that contractual appointments should be stopped forthwith and all duty-posts be filled up on regular appointees giving concession of age-relaxation to those still on contract.

2. **Modern Staffing Norms, Professional Cadre Management and Speedy time-bound disposal of personal matters:** Health & FW Department is the cadre-control authority for doctors of Delhi Health Service but lacks requisite infrastructure and professional HR Managers for cadre-management. Staffing norms for health institutions are primitive and not in consonance to needs of a modern health institution. Their career-needs, training needs (induction and in-service) are not properly addressed **and even time-bound promotions are not being taken up on a regular basis.** Even though DHS has been constituted, it still lacks a civil list in order of seniority. Principle of seniority for posting on higher posts is not being followed as in other services. Frivolous complaints against doctors are allowed to pile up and there is no mechanism for their speedy disposal. The transfer policy for doctors declared as late as 2014 has remained on paper till a recent OM of the department dated 29-4-15. Please ensure that there is no chaos, confusion and nepotism during such mass transfers in one go. The MIS system of H&FW Dept. is not being updated due to which salaries of doctors transferred doctors gets delayed.

We request that HR professionals be engaged for Cadre-management of doctors in the H&FW Department. Transfers/postings may be done in a transparent manner by a empowered committee with representatives from all stake holders. Similarly there should be a sound grievance-redressal mechanism for doctors. Management Information System (MIS) of H&FW department should be accessible by service doctors to see their service details and/or progress on their applications till disposal with right to appeal etc. All complaints against officers should be efficiently looked into and appropriately dealt in a time bound manner including inquiry if any.

Please direct the H&FW Department to issue orders for time-bound promotion for all eligible doctors up to SAG level at the earliest and also release a civil list/seniority list of DHS doctors.

3. **Amends in DHS Rules:** DHS Rules framed in 2009 have not been revised and two sub-cadres viz. Teaching and Public Health Specialists are not included in DHS till date. The duty posts in DHS have not been rationalized and hospitals and health institutions continue to be under pressure to cope with the demand of work on them. Doctors of GDMO sub-cadres who hold PG qualification are being discriminated in some hospitals by not recognizing them as part of the specialty they work in. Similarly non-teaching specialists in teaching hospitals are discriminated despite their teaching abilities and experience. This unfairness leads to frustration and demotivation and should be addressed.

We request that relevant schedules of Delhi Health Service Rules 2009 may be looked into again for revision so as to identify and add more duty posts for the 4 sub-cadres at various levels up to SAG in various institutions according to needs. Officers of GDMO sub-cadre holding PG qualification should be suitably placed to work as specialists and permitted to move horizontally from GDMO sub-cadre to other sub-cadres if they so aspire and if they are found suitable for the post. Teaching should be considered as part and parcel of functions of any medical professional and the policy should allow teaching for suitable doctors irrespective of their sub-cadre affiliations to deal with scarcity of teaching personnel.

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4. **Help Desk for Doctors and Portal of Grievance-redressal:** Doctors are made to run from pillar to post for personal matters like NOC for passport, vigilance and other clearances for visits abroad, sanction of study leave etc. Instances of violence against doctors and frivolous complaints are becoming frequent. These should be looked into and dealt promptly in a time-bound manner including completion of inquiry into such complaints.

We request that a designated cell in H&FW Department under a senior officer with requisite authority and responsibility be made functional to help doctors follow their personal matters and pending issues if any for quick disposal. An institutional mechanism like a portal for service doctors and health personnel also be started for enabling them to file their complaints/grievance on same lines as has been done for general public.

5. **Training Infrastructure and Reserves:** Most states in India except Delhi have their own State Institutes of Health & FW for training of doctors and other health personnel. Thus there is no institutional mechanism for regular induction and in-service training of service doctor nor is there a training reserve in DHS (unlike IAS and IPS) to ensure that 5-10 % of the DHS/CHS doctors can be on training at any given point without aggravating the existing shortage of doctors. There is a provision for training and deputation reserve in Delhi Health Service but it is not implemented till date by adding as many duty posts.

We request that a model Delhi State Health Training Institute under a senior doctor be commissioned in Delhi that undertakes regular training of DHS doctors and other health personnel besides taking on the leadership role in this field besides gives thrust to training policy.

6. **Deputation Allowance to those CHS Doctors still working against DHS duty posts:** A number of CHS doctors are still working in Delhi against DHS posts but none has been given deputation allowance and even recognition to this effect.

We request that all CHS doctors working against DHS posts be permitted to be treated as on deputation as permissible under rules. Later, if required, some duty posts in DHS may be treated as deputation posts from CHS or other state health services to take the benefit of a larger pool of senior and experienced doctors.

7. **Fairness and Equity - Uniform Retirement Age and Prevention of stagnation through DACP/NFU up to Higher Administrative Grade (HAG) :** Health system of Delhi continues to treat similarly qualified doctors differently. It ignores seniority, discriminates among officers with qualification in postings and retirement. For example, there are situations when seniors with equal qualifications are made to work under their juniors. Sir, this was show-cased to you a few weeks back by doctors of a particular hospital. Similarly various sub-cadres of DHS have different retirement ages despite being part of the same service: 60 years for GDMO's, 62 for non-teaching and public health specialists and 65 for teaching-specialists despite being a part of same seniority queue at Senior Administrative Grade (S.A.G.) level.

We request that such unfairness should be removed forthwith and all service doctors should be able to reach up to H.A.G. like their counterparts in other civil services. Earlier the MOHFW GOI had denied giving N.F.U. till HAG but Hon'ble High Court of Delhi in its judgement dated 13-10-2014 in W.P.(C) 4073/2014 filed by us against Union of India has ruled that this benefit granted by 6th PC be given to service doctors. Its implementation in GNCTD is awaited and we look forward to its early implementation under your leadership.

We also request you allow a common retirement age for all four sub-cadres of DHS to 65 years or more in view of increasing life expectancy in the country and shortage of doctors in the health system of Delhi.

Sir, we will be grateful if you could take note of above submissions and issue necessary directions for their implementation in a time-bound manner. We hope this would be in consonance to the vision of Delhi government to provide a model cadre for doctors in public service with excellent career opportunities and is able to draw the best talent in the country.

Yours faithfully,

(Dr. Vijay Rai)
Secretary