

**National Institute of Public Cooperation and Child Development
5, Siri Institutional Area, Hauz Khas, New Delhi-110016**

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OFFICE MEMORANDUM

01 MAR 2016

Please find enclosed herewith the Transfer Guidelines for the employees of NIPCCD duly approved by Minister, MWCD-cum-Chairperson, NIPCCD for circulation among the staff working under them for information.

2. This issues with the approval of competent authority.



(A S Mehta)
Deputy Director (Admn.)

Distribution:-

- i) PS to Director
- ii) PA to AD (TC)
- iii) All Joint Directors/Regional Directors
- iv) Deputy Director (Admn./Accts.)
- v) Publication Officer/Editor
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- vii) *Coordination Cell*

g/c

**National Institute of Public Cooperation and Child Development
5, Siri Institutional Area, Hauz Khas, New Delhi-110 016**

TRANSFER GUIDELINES FOR EMPLOYEES OF NIPCCD

1. OBJECTIVE

(a) NIPCCD shall strive to maintain equitable distribution of its employees, through its transfer policy, in a transparent way to ensure efficient functioning of the organization, with special regard to protect academic interest of Child Development and Child Protection Functionaries and optimize job satisfaction amongst employees.

(b) Employees are liable to be transferred anywhere in India at any point of time and transfer to a desired location cannot be claimed as a matter of right. While effecting transfers, the organizational interest shall be given uppermost consideration and that the problems and constraints of employee shall remain subservient.

2. GUIDING/BASIC PRINCIPLES

(a) An employee on initial posting after recruitment/promotion will not be considered for request transfer before he completes the prescribed mandatory tenure/normal tenure at his initial place of posting. The period of posting of direct recruits at Regional Centres of NIPCCD will not be counted towards mandatory period.

(b) Transfer/posting to a choice place/desired station shall not be claimed as a matter of right. Some crucial determinants for such transfers are as under:

- i) Availability of a clear-cut vacancy.
- ii) Subject matter expertise of an employee.
- iii) Performance of an employee against tangible parameters wherever possible, for example, APAR Grading in the last five years, or such other parameters as may be prescribed from time to time for different posts.
- iv) Factors such as: due for retirement, medical problems faced by an employee or family members (spouse and children only) spouse working at a station etc.

v) Redeployment of surplus staff in excess of sanctioned strength at a location to other location against sanctioned vacancies.

(c) Request of direct recruited for transfer from the place of their first posting shall not be considered, before completion of three years or after successful completion of their probation period, whichever is later. The leave taken for 30 days or more will not be counted for the purpose of calculating three years.

(d) Request transfer of persons posted on promotion will not be considered before completion of their normal tenure of three years

(e) Transfers on request will normally be made at the commencement of academic session i.e. between April to August of the year. However, transfers on account of serious illness, when it is not practicable to defer the transfer till next year without causing serious danger to the life of the employee, his spouse or his ailing son/daughter, may be effected by competent authority at any time during the year against available vacancy.

(f) Attempt to bring any political or other outside influence for transfer on any superior authority of the NIPCCD shall be treated as misconduct and would be liable for disciplinary action under CCS(CCA) Rules.

(g) The applications for request transfer shall be routed through proper channel without endorsing its copy to any higher authorities of the NIPCCD No action will be taken on the applications, if any, sent by the employees in violation of prescribed channel of submission.

(h) All employees who are less than 50 years of age will be posted on their next promotion to any other NIPCCD Regional Centre against the available vacancies.

(i) Employees due for retirement within two years as on 1st January will not be normally considered for transfer except in case of re-deployment of surplus staff in excess of sanctioned strength at a location to other location against sanctioned vacancies and also except in case of displacing an employees whose continuous at particular station is not conducive from administrative point of view.

(j) Efforts will be made to ensure that physically challenged employees are posted closer to their home town subject to availability of vacancies and other provisions of these guidelines.

(k) These guidelines regarding transfer are meant essentially for the internal use of the NIPCCD and do not vest any employee with any right.

3. DEFINITION

Sl. No.	Terms	Explanations
1	Mandatory Tenure	The term shall be applicable only either tenure of 3 years in respect of NIPCCD Regional Centre, Guwahati or tenure of 5 years in respect of other NIPCCD Regional Centres as on 1 st January of the year
2	Normal Tenure	As prescribed under Clause 4, as on 1 st January of the year.
3	Transfer	Movement of an employee from a station to another station after completion of prescribed tenure or on account of public exigency/interest/administrative grounds.
4	Displacement	Displacement means to transfer an employee from the present place of posting to a new station/place for the purpose of accommodating another employee in his/her place. This is applicable for (i) unifying the couple in NIPCCD, or (ii) giving choice place of posting to the employee coming from NER after completion of mandatory tenure
6	Physically challenged employee	Those who are in receipt of conveyance allowance from NIPCCD at double the rate prescribed for other employees.
7	APAR	Annual Performance Appraisal Report of the employee
9	Location/Station	NIPCCD's Headquarters and its Regional Centres in a place
10	MG	Medical Ground cases of Self, Spouse and dependent children separately defined in Annexure-I

4. TENURE

The normal tenure of stay at particular station prescribed for certain posts in NIPCCD will be, as specified below:-

Sl. No.	Post	Normal tenure prescribed at one station (in years)
1.	Joint Director (Programme Division)/ Regional Director	05 years (03 years in case of North East Region)
2.	Deputy Director/Assistant Director	07 years (03 years in case of North East Region)
2.	Assistant Administrative Officer/ Accounts Officer	04 years(03 years in case of North East Region)
3.	Assistant /Research Assistants	10 years (03 years in case of North East Region)
4.	Staff holding a post having Grade Pay less than Rs.4200/- and upto Grade Pay Rs.1900/-.	10 years(03 years in case of North East Region)

5. TYPES OF TRANSFER

Transfer may broadly be classified in two type viz., (i) administrative transfer, which the NIPCCD orders suo motto in the exigencies of service and

administration and in public interest, and (ii) request transfer which is affected based on the request of an employee.

6. ADMINISTRATIVE TRANSFER OF EMPLOYEES

Through such transfer NIPCCD shall ordinarily:

- (a) Redeploy surplus staff in excess of sanctioned strength at a location to other location against sanctioned vacancies.
- (b) Displace an employee whose continuance at particular station is not conducive from administrative point of view.
- (c) Post employees in NER.

7. Method for effecting administrative transfers

- a) Administrative transfer under clause 6 (a) shall be effected in the very first instance against the available vacancies in NIPCCD Headquarters and its Regional Centre through options of surplus staff. If no option is exercised by the employee despite the vacancy being notified & persons asked to exercise their option, then NIPCCD shall go ahead with the posting in the manner as it may deem fit. In such circumstances, no representation from the employee or on his behalf, if any, shall be entertained.
- b) As regards administrative transfer of employees covered under clause 6 (b), NIPCCD may transfer the employee to its headquarters/Regional Centres as found appropriate after recording reasons of such transfers. Transfers will not be used as a punitive measure.
- c) Administrative transfer under 6(c) shall be effected as stated in Para 8 below.

8. CRITERIA FOR EFFECTING TRANSFERS INTO AND OUT OF NER:

- (I) One mandatory tenure of posting either in Regional Centre, Guwahati or any other Regional Centre of NIPCCD will be compulsory for the following employees of NIPCCD:

- a) Assistant Director, Research Assistant
- b) Assistant Administrative Officer, Accounts Officer, Assistant,

Leave of more than 30 days in a single span, availed by the official, will not be counted for determining total period of stay in NER/Regional Centres for transfer purpose.

(II) One of the priorities of the NIPCCD is to fill up the vacancies of faculty in NER/Regional Centres. This is required to be filled up in two ways (a) by posting the employees who are willing to serve there, and (b) by displacing the employees working at other stations who have not been posted in NER/Regional Centres earlier and also have not given their willingness to serve there.

(III) Willingness will be invited from the employees desirous to serve in NER/Regional Centres after displaying the vacancy position on NIPCCD website. Based on the willingness given by the employees, posting orders will be straightway issued for filling up of vacancies by March/April. Left over vacancies, shall be filled up invoking the displacement count.

9. Method for Request Transfer basing on Transfer count

(a) Request Transfer for a post at a location/station shall be accommodated as per the date of request.

(b) In case of a tie in the transfer count of two or more employees competing for a location the female employee shall be preferred first.

(c) In case of tie in two or more employees of the same gender an employee with an earlier date of joining in present post in present station shall be accommodated and in case, if the date of joining in present post in present station also coincides then the older employee shall be first accommodated.

10. AUTHORITIES COMPETENT TO EFFECT TRANSFER

Director, NIPCCD shall have full powers to transfer employees of the NIPCCD holding posts having Grade Pay upto Rs.6600/-. Secretary(WCD)-cum-First Vice Chairperson shall full have full powers to transfer employees of NIPCCD having Grade pay above Rs.6600.

11. ADMISSIBILITY OF TRANSFER TA

Transfer TA as per Rules will be admissible in case of transfer on administrative grounds including transfers in Public Interest.

12. POWER OF RELAXATION OF GUIDELINES

Notwithstanding anything contained in the guidelines, the Director, NIPCCD with the prior approval of the First Vice Chairperson, NIPCCD shall be competent to transfer any employee to any place in relaxation of any or all of the above provisions after recording reasons justifying such relaxation.

13. INTERPRETATION OF GUIDELINES

Director, NIPCCD shall be the sole competent authority to interpret above provisions and pass such order(s) as deemed appropriate and essential to facilitate the implementation of the guidelines for the purpose of effective control and administration of the NIPCCD as a whole.

14. SAFEGUARD AGAINST EXTRANEOUS INFLUENCE

Employees shall not bring in any outside influence. If such an influence from whichever source espousing the cause of an employee is received it shall be presumed that the same has been brought in by the employee. The request of such an employee shall not be considered. Action may also be initiated against such an employee under relevant service rules.

Type of Diseases Prescribed as Valid for Transfer on Medical Grounds. TYPE OF DISEASE

1. CANCER
2. PARALYTIC STROKE
3. RENAL FAILURE
4. CORONARY ARTERY DISEASE AS EXPLAINED BELOW
5. THALASSAEMIA
6. PAKINSONS' DISEASE
7. MOTOR-NEURON DISEASE

Brief description of illness will be considered as medical grounds for the purpose of transfer, in terms of transfer guidelines is as under. Medical terms referred herein will bear meaning as given in the Butterworth's Medical Dictionary.

(i) Cancer

It is the presence of uncontrolled growth and spread of malignant cells. The definition of cancer includes leukemia, lymphomas and Hodgkin's disease.

Exclusions:

This excludes non-invasive carcinoma(s) in-Situ, localized non-invasive tumour(s) revealing early malignant changes and tumour(s) in presence of HIV infection or AIDS; any skin cancer excepting malignant melanoma(s) are also to be excluded.

(ii) Paralytic Stroke

(Cerebro-vascular accidents) Death of portion of the brain due to vascular causes such as (a) Hemorrhage (cerebral), (b) Thrombosis (cerebral), (c) Embolism (cerebral) causing total permanent disability of two or more limbs persisting for 3 months after the illness.

Exclusions:

- i) Transient/Ischemic attacks.
- ii) Stroke-like syndromes resulting from
 - a) Head Injury
 - b) Intracranial space occupying lesions like abscess, traumatic hemorrhage and tumour.
 - c) Tuberculosis meningitis, Pyogenic meningitis and meningococcal meningitis.

(iii) Renal failure

It is the final renal failure stage due to chronic irreversible failure of both the kidneys. It must be well documented. The employee must evidence of undergoing regular haemodialysis and other relevant laboratory investigations and doctor certification.

(iv) Coronary artery Disease

1. Cases involving surgery on the advice of a consultant cardiologist to correct narrowing or blockage of one or more coronary arteries or valve replacements/reconstructions shall be considered MG cases up to three years from the date of actual open heart surgery
2. Cases involving non-surgical techniques e. g. Angioplasty through the arterial system. Such cases will be considered MG Cases for a period of one year from the date of procedure.

(v) THALASSAEMIA.

It is an inherited disorder and it is diagnosed on clinical and various laboratory parameters. Patient with Thalassemia, who is anemic and is dependent upon regular blood transfusion for maintaining the hemoglobin level. In addition he is on chelating agent and other supportive care.

Inclusions:

Thalassemia major: History of blood transfusion/ replacement at less than three months interval. It must be well supported by all medical documents. The history should include the periodicity/duration of blood transfusion/ replacement required by the patient/Chelation therapy.

Exclusion:

(a) Patient may have Thalassemia minor. His anemia may become severe because of concurrent infection or stress. Anemia may become severe because of nutritional deficiency or other associated factor.

(b) Blood transfusion is not required and these patients do not require chelation therapy.

(vi) PARKINSONS' DISEASE

Slowly progressive degenerative disease of nervous system causing tremor, rigidity, slowness and disturbance of balance.

Must be confirmed by a neurologist.

Inclusion:

Involuntary tremulous motion with lessened muscular power, in parts not in action and even when supported; with a propensity to bend the trunk forward and to pass from a waling to a running pace, the senses and intellects being uninjured. **Exclusion:**

(i) Patients who are stable with the support of medicine.

(ii) Detection of Parkinson disease within the duration of 5 years.

Requirement:

Date of detection of the disease, hospitalization extent of involvement, duration of treatment along with discharge summary should be furnished. Mention should be made about the progressiveness of the disease, and summary of inception of the patient must be confirmed by Neurologist.

(vii) MOTOR-NEURON DISEASE:

Slowly progressive degeneration of motor neuron cells of brain and spinal cord causing weakness, wasting and twitching in limbs and difficulty in speaking and swallowing.

Must be confirmed by neurologist.

Inclusions:

Irreversible/ progressive motor neuron disease with presence of weakness wasting and fasciculation of limbs with/without brisk tendon jerks and extension painter response.

Exclusion:

Weakness of muscle due to other causes like infections, neuropathy traumatation, idiopathic, motor-neuron disease involving less than 02 limbs and the muscle power is more than 3 grades.

Requirement: It should be duly supported by MRI, EMG and nerve conduction test.

(viii) "Any other disease with more than 50% mental disability duly examined by and recommended by the respective Regional Medical Board with latest records/ reports (within three months).
