GOVERNMENT OF INDIA
MINISTRY OF HEALTH AND FAMILY WELFARE
DEPARTMENT OF HEALTH AND FAMILY WELFARE

RAJYA SABHA
UNSTARRED QUESTION NO. 2645
TO BE ANSWERED ON 11.08.2026

REFERRAL SYSTEM IN GOVERNMENT HOSPITALS AND ACCOUNTABILITY OF MEDICAL OFFICERS

2645 SHRI SANT BALBIR SINGH:

Will the **Minister of HEALTH AND FAMILY WELFARE** be pleased to state:

(a) whether Government hospitals frequently refer emergency and critical patients to higher medical institutions or private hospitals instead of providing treatment at the available level, Government's assessment of this issue and the steps being taken to prevent unnecessary referrals;
(b) whether Government proposes to introduce a transparent accountability mechanism under which the referring medical officer or hospital administration is required to record written clinical reasons for every referral and be held responsible for avoidable or unjustified referrals; and
(c) whether the Ministry maintain data regarding referrals?

ANSWER
THE MINISTER OF STATE IN THE MINISTRY OF HEALTH AND FAMILY WELFARE
(SHRI PRATAPRAO JADHAV)

(a) to (c): Health is a State subject. Under the National Health Mission (NHM), the Ministry of Health and Family Welfare provides technical and financial support to the States/Union Territories for strengthening public health systems to reduce avoidable referrals, ensure timely referral of patients requiring higher levels of care and improve the availability of quality clinical services at appropriate levels.

To strengthen emergency and secondary healthcare services, the Government supports implementation of the Indian Public Health Standards (IPHS), strengthening of First Referral Units (FRUs), operationalization of High Dependency Units (HDUs), Intensive Care Units (ICUs), Maternal and Child Health (MCH) Wings and Emergency Care Units under NHM.

Further, under the Pradhan Mantri Ayushman Bharat Health Infrastructure Mission (PM-ABHIM), approval has been accorded for establishment of 631 Critical Care Blocks (CCBs) across districts to augment critical care capacity. Financial assistance is also provided under NHM for procurement, operationalization and maintenance of Basic Life Support (BLS) and Advanced Life Support (ALS) ambulances linked with centralized command-and-control centres to facilitate protocol-based referral of patients, wherever clinically required.

The Ministry promotes standardized referral practices and institutional accountability across public health facilities. Standardized referral slips/forms require documentation of the patient's clinical condition, provisional diagnosis, treatment provided, clinical justification for referral and advance communication with the receiving facility. Referral practices are also reviewed under institutional quality assurance mechanisms, including the National Quality Assurance Standards (NQAS), hospital management committees and Rogi Kalyan Samitis (RKS). In addition, Grievance Redressal Systems established by the States/Union Territories provide a mechanism for addressing complaints relating to patient care, including referrals.

Individual treatment records and referral logs are maintained at the health facility level by the respective State/UT health departments.

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