

REGULATIONS

GOVERNMENT OF KHYBER PAKHTUNKHWA HEALTH DEPARTMENT

Khyber Pakhtunkhwa Province *PUBLISHED BY AUTHORITY* *PESHAWAR.*

NOTIFICATION

In pursuance of Section 24 of Khyber Pakhtunkhwa Province Medical Teaching Institutions Act, 2015, the competent authority is pleased to make the following regulations, namely:-

MEDICAL TEACHING INSTITUTION - HMC REGULATIONS

Short title, application and commencement.

1. These regulations will be called the Medical Teaching Institution-HMC Regulations.
2. They shall apply to Medical Teaching Institution - HMC to which the Khyber Pakhtunkhwa Province Medical Teaching Institutions Act, 2015 applies.
3. They shall come into force at once.

REGULATIONS

1. BOARD OF GOVERNORS

- a. The Board of Governors will be selected as prescribed in section 8 of the Act, with the membership as detailed in Section 5 of the Act and conduct their business as detailed in section 6 of the Act, with the functions and authority defined in section 7 of the Act.
- b. The Board will have overall authority and responsibility for the Institution and will report to Government as prescribed.
- c. The Board will meet at least every 3 months and more frequently if the Board deems necessary to carry out its responsibilities and duties.
- d. The date and venue of the Board meeting will be widely publicized to the relevant employees of the Institution by written notice and electronic means at least 10 days before the meeting.
- e. Each Board meeting will continue until all necessary agenda items have been satisfactorily resolved.
- f. Board meetings will be attended by the Hospital and Medical Directors, the Dean and the Nursing Director, as invited guests to make presentations to the Board as required. These attendees may leave the Board meeting after their individual presentations unless otherwise required by the Board.
- g. The Finance director will make a presentation of the Annual Financial Report to the Board once a year, and will also attend the budget meetings of the Board; the Finance Director may also be required to attend other meetings as deemed necessary by the Board,

- h. An excused absence from the Board meeting will require prior approval of the Board, with a written explanation sent to the Board at least 7 days prior to the meeting.
- i. Employees of the Institution may address the Board after having given prior notice to do so at least 1 week before any Board meeting. Employees may address the Board for a maximum of 3 minutes and no discussion will be permitted, except at the discretion of the Board.
- j. The Board will complete review of the annual Institutional budget and forward the same to government by March 31st of each year.
- k. The Board will delegate to the Medical Director, Hospital Director, Nursing Director, and Dean the recruitment of all personnel under their respective authorities, except that the Rules and Regulations will be followed in these appointments and the principles of transparency, fairness, and equity will be followed.
- l. Final approval of all medical faculty positions and all Hospital positions at or above managerial level will rest with the Board to whom the relevant authority will present the candidate's file for approval. However the Board may delegate these powers to Dean, Hospital Director or Medical Director for due consideration and notification.
- m. Notwithstanding anything above, the Board may choose to review selected appointments below managerial level if they see fit.
- n. The Board may constitute an Executive Committee, Finance Committee, Recruitment Committee and such other committees or sub-committees as it may deem appropriate, as noted in Section 7 of the Act.
- o. The Board will name the Chairperson and membership of such committees. The Dean, Hospital Director or Medical Director (as the case may be) will be authorized to affect necessary changes to the committees such as nominating the chairperson or any member of these committees in case of non-availability of the designated individuals.
- p. Each committee, at its first meeting, shall confirm membership and appoint a Secretary who shall take Minutes and keep a record of each meeting.
- q. The Chair of the committee shall call meetings of the committee as required in the specific terms of reference for that committee. The committee may also meet at the request of the Board.
- r. The Minutes of each meeting shall be forwarded to the the competent authority (Dean, HD, MD) or the Board.

2. GENERAL REGULATIONS FOR ALL EMPLOYEES OF THE MEDICAL TEACHING INSTITUTION.

- a. The general conduct expected of an employee is detailed in the Employee Handbook which will be given to each employee on joining service with the Institution.
- b. Employees are expected to uphold the highest standards of integrity, honesty, compassion and goodwill towards patients and their coworkers.

- c. Employees will, upon joining the Institution receive an Orientation to the Institution, its functions and the expected Code of Conduct.
- d. All employees, upon joining the Institution will sign a document indicating their full understanding and acceptance of the Institutional Code of Conduct, receipt of a copy of the Employee Handbook, and their understanding of the same.
- e. For all new appointments there will be a probationary period as determined by the competent authority.

3. BOARD /COMMITTEE MEETINGS

- a. All members attending Board or Institutional Committee meetings must sign into document their attendance.
- b. Written minutes will be kept of each Board and committee meeting by the Chairman or his designee.

4. HOSPITAL DIRECTOR

The Board will appoint a Hospital Director as described in Section 10 (1) of the Act.

- a. The qualifications and experience for the post of Hospital Director shall be as in Section 10 (2) of the Act. The Hospital director will have a minimum experience at management level positions of 7 years, except that the Board may relax this condition in the case of an outstanding candidate, provided that the Board specifically documents the reasoning for the exception. Moreover in the absence of a regular appointee with the said qualifications and experience the board will have the authority to nominate an interim Hospital Director on additional charge basis, to run the affairs of the institute till the appointment of a regular incumbent.
- b. The Hospital Director will be selected and appointed by the Board for a term of 3 years, renewable for two further terms of three years at the discretion of the Board based upon performance and so documented by the Board. No person may serve as Hospital director for more than three terms.
- c. The method of appointment will be as described in Section 10 (1) of the Act. The Board may hire the services of any reputable recruitment firm to assist with part or whole of the scrutiny and short listing process. A selection committee will be appointed by the Board consisting of appropriately qualified individuals including a senior and a junior medical consultant representing the hospital as well as a senior representative from the Nursing department and a head of a non-medical department from the finance, or other hospital administrative unit. The Selection Committee will also include a reputable lay person who may be a retired senior civil servant or senior retired armed services officer or a recognized philanthropist or reputable member of civil society. The Board will select a chairman of the committee from amongst the members of the selection committee.

- d. The Committee will make its selection and recommendation based entirely on merit, and in a fair and transparent manner after fulfilling the prescribed procedure as laid down hereunder:
- e. The vacancies shall be advertised in at least three leading national Newspapers (two English and two Urdu) specifying therein the prescribed qualifications, experience and other academic/technical requirements, etc.; the selection committee may also advertise in international journals/media if it so desires.
- f. The selection committee will draw up a short list of candidates to interview: at least three candidates will be interviewed. In the event of insufficient candidates, all candidates may be interviewed.
- g. Any member of the selection committee who has a conflict of interest in any form, either with a specific candidate or the position, or for any other reason, will withdraw himself from the process and inform the Board accordingly
- h. The Board may then choose to appoint another person meeting the criteria in (c) above.
- i. The selected individual will be presented for approval to the Board. The Board may accept or reject the nominee: in the case of rejection, the Board will provide written reasons for the rejection to the selection committee. The Board may then select an alternative applicant from the list of candidates, keeping in view the listed order of preference of the selection committee. Alternatively, the Board may ask the selection committee to reevaluate the candidates and select another individual from the applicants or begin the whole selection process again as in (d) to (h) above.
- j. The functions, responsibilities and requirements of the Hospital Director will be as detailed in Section 11 a-f of the Act and further elaborated hereunder
- k. The maximum age limit for the post of Hospital Director MTI HMC will be 55 years, subject to all other pre requisites described above. Only in exceptional circumstances may the board grant any relaxation in this context which shall be reflected in the advertisement for the post of HD.

5. MEDICAL DIRECTOR

- a. The Medical Director will be selected and appointed by the Board for a period of three years, renewable for two further terms of three years at the discretion of the Board based upon performance and so documented by the Board. No person may serve as Medical Director for more than three terms.

- b. Candidates will have a record of excellence in clinical care, and have at least three years experience in leading a major hospital clinical unit in any clinical discipline, including medicine and its subspecialties, surgery and its subspecialties, paediatrics and its subspecialties, obstetric/gynaecology and its subspecialties, radiology and imaging services, pathology, and any other major clinical units. Moreover in the absence of a regular appointee with the said qualifications and experience the board will have the authority to nominate an interim Medical Director on additional charge basis, to run the affairs of the institute till the appointment of a regular incumbent.
The selected candidate may be allowed to continue with his/her clinical practice for 20% of the time reserved during working hours. The Medical Director will be expected to take part in Institutional Based Practice.
- c. The Board may hire the services of any reputable recruitment firm to assist with part or whole of the scrutiny and short listing process. A selection committee will be appointed by the Board consisting of appropriately qualified individuals including:
- i) 2 senior and 2 junior medical consultants representing different specialties in the hospital
 - ii) a senior representative from the Nursing department,
 - iii) a head of a non-medical department from the finance, or other hospital administrative unit.
- d. A reputable lay person who may be a retired senior civil servant or senior retired armed services officer or a recognized philanthropist or reputable member of civil society. The Board will select a chairman of the committee from amongst the members of the selection committee.
- e. The Committee will make its selection and recommendation based entirely on merit, and in a fair and transparent manner after fulfilling the prescribed procedure as laid down hereunder:
- f. The vacancies shall be advertised in at least three leading national Newspapers (two English and two Urdu) specifying therein the prescribed qualifications, experience and other academic/technical requirements etc; the selection committee may also advertise in international journals/media if it so desires.
- g. The selection committee will draw up a short list of candidates to interview: at least three candidates will be interviewed. In the event of insufficient candidates, all candidates may be interviewed.
- h. Any member of the selection committee who has a conflict of interest in any form, either with a specific candidate or the position, or for any other reason, will withdraw himself from the process and inform the Board accordingly

- i. The Board may then choose to appoint another person meeting the criteria in (c) above
- j. The selected individual will be presented for approval to the Board. The Board may accept or reject the nominee: in the case of rejection, the Board will provide written reasons for the rejection to the selection committee. The Board may then select an alternative applicant from the list of candidates, keeping in view the listed order of preference of the selection committee. Alternatively, the Board may ask the selection committee to reevaluate the candidates and select another individual from the applicants or begin the whole selection process again as in (e) to (i) above.
- k. The functions, responsibilities and requirements of the Medical Director will be as detailed in Section 13 a-f of the Act and further elaborated in the Regulations.

5A. AFFILIATE INSTITUTES(KICH/IKD/PICO/BTC) AND RESPECTIVE DIRECTORS

- a. Dean MTI HMC shall be the Dean for HMC/KGMC as well as all other affiliated institutes including IKD, PICO, KICH and BTC. The academic council functioning under the Dean will have due representation from each institute.
- b. KGMC shall act as the teaching body / academic institute not only for HMC but its Affiliate institutes as well.
- c. The entire faculty of affiliate institutes will function as faculty of MTI HMC/KGMC.
- d. The Board shall appoint one Affiliate Director each from amongst the faculty members of MTI-HMC and its Affiliates ,as the head of the concerned Institution.
- e. The Affiliate Director shall be selected and appointed, as provided herein, for a term not exceeding three years and shall be eligible for renewal for two further consecutive terms of three years each at the discretion of the Board.
- f. The Affiliate Director shall be accountable to the Board and shall submit such reports and meets such performance indicators as determined by the Board from time to time.
- g. The Board shall be at liberty to remove the Affiliated Director with simple majority.
- h. The selection of the affiliate director shall be based totally on merit and competency for which applications will be invited from amongst the faculty members and after due scrutiny the shortlisted candidates will be invited for an interview by the board.
- i. The Affiliate director would work in his own pay scale.
- j. Affiliate Director, subject to the overall control and supervision of the Board, shall enjoy complete administrative and financial autonomy (ie act as Principal Accounting Officer) in respect of his respective affiliated Institution. He would exercise powers as are conferred on hospital director and medical director respectively, of HMC, and would seek approval of BOG in matters that were referred to erstwhile IMC in previous dispensation.

- k. The affiliate director may not necessarily be the Chairman of his / her respective clinical department.

6. DEAN/PRINCIPAL

The Board shall appoint a Dean/Principal for the Medical School/college.

- a. The Dean/Principal will be a medical academic with either a Ph.D degree or a medical qualification such as MB,BS or equivalent, plus a higher Diploma, such as a FCPS, FRCP, FRCS, or a US Board certification or equivalent. The Dean/Principal will be of National and, preferably, International reputation in his/her field, which may be in the basic or clinical sciences, with at least 7 years administrative experience as head of a department, unit, program, or institution, with recognized leadership qualities, a track record in teaching, and a commitment to medical education and research. Moreover in the absence of a regular appointee with the said qualifications and experience the board will have the authority to nominate an interim Dean on additional charge basis, to run the affairs of the institute till the appointment of a regular incumbent.
- b. The Board may hire the services of any reputable recruitment firm to assist with part or whole of the scrutiny and short listing process The Board will constitute a Selection Committee of at least 7 members, consisting of:
- at least four representatives at associate professor or higher level from at least 2 clinical and 2 basic science departments,
 - a representative from the medical student body chosen by the Board based on academic achievement, a non-clinical representative from the Hospital, designated by the Hospital Director, and
 - a representative of the Nursing Department.
 - The Board may co-opt two further members if it feels that further expertise is necessary and will designate a Chairman of the committee from amongst the members of the selection committee.
- c. The selection committee will follow the procedure as in Regulation 4 (d) to (i) above for selection of the Dean/Principal
- d. Simultaneously with his appointment as Dean/Principal, the selectee will also receive a faculty appointment at the appropriate level (associate professor or full professor) in a department appropriate to his specialty, which shall hold effect till the validity of this contract appointment.

7. FUNCTIONS AND DUTIES OF THE DEAN/PRINCIPAL

- a. The Dean/Principal will be head of the Medical school/college and all its affiliate institutes. He will be responsible for all undergraduate and postgraduate medical teaching and research, and will report to the Board
- b. He will be responsible for all budgetary and financial matters relating to the medical school and its functions
- c. The Dean/Principal will select from the faculty an Associate Dean for undergraduate education, and an Associate Dean for postgraduate education, to be approved by the Board and designated as such, provided that the Dean may not simultaneously hold the position of Dean and Associate Dean.
- d. The Dean may delegate administrative, academic and financial responsibilities of the postgraduate trainees to the Associate Dean for postgraduate medical education.
- e. The Dean/Principal will select an Associate Dean for Research for approval by the Board, provided that the Dean may not simultaneously hold the position of Dean and Associate dean.
- f. The Dean/Principal will be advised by an **Academic Council**, of which he will be Chairman; the Academic Council will consist of the Heads of all the Medical School departments, Medical director MTI HMC, Associate Deans and due representation from each affiliate institute.
- g. The Dean/principal will act in all clinical matters in close liaison with the Hospital and Medical Directors.

8. NURSING DIRECTOR

- a. The Nursing Director will be appointed by the Board for a term of 3 years which may be renewed by the Board at their discretion, for a further term of three years. The renewal will be based upon the performance of the incumbent, and the Board will document a written explanation for such an action.
No person may serve as Nursing Director for more than three terms.
- b. The Nursing Director will be a qualified nurse (RN), with an advanced degree in Nursing (BScN), preferably MScN/MA with at least 7 years administrative and teaching experience, and Current Nursing Registration.
- c. The Board will constitute a selection committee, with the Medical Director as chairman, and including the Hospital Director, a representative of the Dean, plus one Medical consultant, to recruit

and recommend a suitable candidate to the Board for the position of Nursing Director.

- d. The Selection Committee will follow the same procedure as in 4 (d) to (i) above.

9. FUNCTIONS AND DUTIES OF THE NURSING DIRECTOR

- a. The Nursing director will report to the Board through the Medical Director as noted in Section 14 (4).
- b. The responsibilities of the Nursing Director will be as noted in Section 14 of the Act and section 18 of these Regulations.

10. FINANCE DIRECTOR

- a. The Board will appoint a selection committee with the Hospital Director as Chairman, and including the Medical Director, the Dean and a reputable lay person with experience in financial matters, to recruit a Finance Director to head the Finance Department of the institution.
- b. The Finance Director shall be a reputable individual with a Masters degree in finance or accounts and ten years experience in finance and/or accounts in a major private or public company/institution or a Chartered Accountant with a minimum professional experience of seven years. The Board may also appoint a CA finalist/ACCA finalist who will act as Chief Finance Officer with all the powers designated to Director Finance, provided that he may be elevated to the post of Director Finance upon achieving due qualification and experience subject to satisfactory progress.
- c. Recruitment will be by a transparent process of public advertisement and evaluation as described in 4 (d)-(i) above
- d. Functions and Duties of the Director Finance.
 - i) Coordinate and supervise all financial accounting matters of the institution;
 - ii) Prepare the detailed regulations and procedures for the financial management of the institution for approval by the Management Committee (see section 21, below) and the Board.
 - iii) Advise the Hospital and Medical Directors and the Dean on all financial matters, ensuring transparency and fiscal probity,
 - iv) Ensure all the accounts are kept according to rules and regulations approved by the Board
 - v) Assist in the development of the Medical College/school and

Hospital budgets by the Dean and the Hospital and Medical Directors, respectively, ensuring that the financial projections and financial accounts are accurate.

- vi) Prepare an Annual Financial Report for approval of the Hospital and Medical Directors and the Dean, and present the approved annual financial report to the Board.
- vii) Ensure facilitation of any external audit of the accounts instituted by the Board or Government and implement the recommendations of the audit.
- viii) Any differences arising on financial issues between the Hospital Director/ Dean/Medical Director and the Finance Director, shall be placed before the Board for a final decision.

11. INSTITUTIONAL MANAGEMENT COMMITTEE

An Institutional management committee will be formed for the overall coordination of the Institution. The Institutional management committee will be chaired by the Dean and include the Hospital and Medical Directors, the Finance Director and the Nursing Director. The secretary to the Dean/Medical Director will act as secretary to the committee.

- a. The committee will report to the Board.
- b. The committee will meet every 3 months or more frequently if the committee or the Board deem necessary.
- c. The committee will review the overall performance of the Institution and implement processes to streamline functions across departments, preventing duplication and ensuring the most efficient and cost effective function.

12. HOSPITAL APPOINTMENTS

For all other appointments in the Hospital, apart from the Hospital and Medical Directors, the Finance Director and the Nursing Director, the Board will delegate authority to the Hospital Director (for non-clinical appointments) and Medical Directors (for clinical appointments).

13. MEDICAL CONSULTANTS

- a. Medical consultants will be qualified physicians with MB,BS or BDS degrees from recognized institutions or equivalent degrees and a higher diploma, such as FCPS, MRCP, FRCS, or a USA subspecialty Board diploma or equivalent and be licensed to practice medicine by the Pakistan Medical & Dental Council (PMDC).
- b. Medical consultants will be designated as junior, mid-level, and senior consultants as follows:

- i) A junior level consultant will have had at least 2 years of clinical experience after postgraduate qualification,
 - ii) A mid-level consultant will have more than 5 years but less than 10 years of clinical experience after postgraduate qualification
 - iii) A senior consultant will have 10 years or more of clinical experience after postgraduate qualification.
- c. At the initiation of the Act, all medical consultants working at the Hospital will continue in their current positions.
 - d. Over the next several months up to one year, all medical consultant positions will be reviewed and their clinical privileges will be assessed by the Clinical Privileges Committee (see Section 10 (h) and Medical Staff Bylaws, Section 7.4) and duties may be assigned accordingly by the Medical Director in consultation with the Dean and Department Chairman.
 - e. New appointments to the Consultant Medical Staff will be on recommendation by the Dean and the relevant department chairman to the Medical Director. Candidates will be clinical medical faculty appointed to the Medical College/School at senior Registrar or higher level.
 - f. The Medical Director will submit the application to the Clinical Privileges Committee (CPC) for approval and assignment.
 - g. In the case of rejection of a candidate by the CPC, a full written report indicating the rationale for the rejection will be provided to the Medical director who will forward it to the Dean.
 - h. In the event of disagreement between the Medical Director and the Dean, the matter may be referred to the Board for a final decision.

14. SPECIALIST REGISTRARS (SpR), TRAINEE REGISTRARS (TR), INSTITUTIONAL MEDICAL OFFICERS

- a. The need for SpR, TRs and institutional Medical Officers will be generated by the relevant department and communicated to the Medical Director for approval. The Medical Director may also initiate this process after assessing the need of the institution. The positions will then be advertised in three leading newspapers.
- b. All applications will be forwarded to the concerned department by the Medical Director for consideration by the respective scrutiny and selection committee (in case of SpRs and TRs) and to the hospital scrutiny and selection committee in case of institutional Medical Officers.
- c. The Medical Director will submit a list of proposed candidates (SpRs and TRs) to the Clinical Privileges Committee for due

approval. Medical Director will grant final approval for selection of SpRs, TRs and IMOs.

- d. In the case of rejection of a candidate by the CPC, a full written report indicating the rationale for the rejection will be provided to the Medical Director.

15. CLINICAL EXECUTIVE BOARD

- a. A clinical executive board will be formed to advise the Medical Director on all clinical matters,
- b. It will consist of the Medical Director, Medical Department heads, Director of Nursing and with the Hospital Director and QA coordinator as ex-officio members.
- c. It will review any current clinical hospital wide clinical problems,
- d. Monitor and ensure the highest quality of medical care at the Hospital
- e. Advise and develop clinical performance metrics
- f. Plan future clinical development and programs for the hospital
- g. Recommend corrective actions for individuals and departments
- h. a Clinical Privileges Committee will be appointed by the CEB as noted in Section 7.4 of the Medical Staff Bylaws (Appendix 8) with the membership and functions delineated therein.

16. CIVIL SERVANTS

In light of the provisions of the MTI Reforms Act and subsequent recommendations by the Board of Governors promotions of the civil servants will be subject to the same rules and regulations as determined by the institution for all its employees. After being promoted by the institution the civil servant will still retain the status of civil servant unless he has opted to be absorbed by the institution.

17. GOVERNANCE STRUCTURE OF HOSPITAL

The Hospital will have an administrative structure under the Hospital Director (see Appendix 1) and an administrative structure under the Medical Director (see Appendix 2)

18. HOSPITAL MANAGEMENT COMMITTEE

- a. The Hospital Director will have a management committee consisting of the Heads of all the departments under his authority, including Nursing (see Appendix 1).
- b. The Management Committee will meet on a monthly basis under the Chairmanship of the Hospital Director to discuss and resolve issues with Hospital non-clinical functions such as space, building maintenance, information services, procurement and materials management, patient flows, parking, etc

19. NURSING DEPARTMENT

- a. The nursing department organizational structure is shown in appendix 3.
- b. A nursing advisory board, consisting of all nurse managers will meet on a monthly basis, under the chairmanship of the nursing director, to review and discuss current nursing functions and plan future nursing programs and expansions.

20. MEDICAL COLLEGE/SCHOOL

The Medical college and faculty will function under the Dean, as shown schematically in Appendix 4.

- a. The Associate Deans will be selected by the Dean for approval by the Board. The Dean may assign due powers and responsibilities to the Associate Deans from time to time as deemed necessary.
- b. PGME: The Associate dean for postgraduate medical education will
 - i) Oversee postgraduate medical education in the Institution and provide regular reports at 3 months intervals to the Academic Council,
 - ii) Assist in the recruitment of trainee housestaff for the Institution and other institutions in Khyber Pakhtunkhwa
 - iii) Perform such other functions as prescribed by the Dean and Academic council.
 - iv) The Dean at the recommendation of the academic council may abolish or add any functions to the PGME cell and Associate Dean for post graduate education as they deem fit.
- c. RECRUITMENT OF HOUSESTAFF

The PGMI may oversee the recruitment and training of trainee Housestaff for the province of Khyber Pakhtunkhwa.

 - i) A joint induction Committee comprised of Associate Deans postgraduate education of all MTIs and headed by the Chief Executive Officer who will be responsible for all central inductions.
 - ii) All candidates will complete and submit a standard application form to the central induction committee PGMI
 - iii) Candidates must indicate the specialty of their choice; only one specialty may be listed on the application form. In addition, candidates must submit, in order of preference, a list of their preferred Institutions.
 - iv) Applications for trainee posts will be invited by advertisements in newspapers, on the PGMI web site, and in MTIs for receipt on a uniform set date for all specialties.

- v) Teaching Institutions will have the right to designate the number of posts available for trainees in any specialty up to the maximum number approved by the College of Physicians and Surgeons for that specialty for that institution.
- vi) Candidates will be graded according to criteria set by the joint induction committee. The criteria may include candidate interviews with faculty from the chosen specialty. The merit list based on the grading criteria will be posted at the PGMI and on the web site of each MTI. Based on these criteria and their preferences, candidates will be selected and assigned to the appropriate MTI.
- vii) Individual institutional departments will shortlist the candidates applying to them and may invite them for interview
- viii) At the end of the selection process, applicants who remain unmatched may apply for any posts left vacant in any specialty

21. FACULTY

- a. The Board will delegate all authority for recruitment and appointment of Medical faculty, both basic science and clinical, to the Dean.
- b. All appointments will be made solely on merit in a transparent and fair manner.
- c. At the initiation of the Act all existing faculty will continue in their current positions.
- d. FACULTY RECRUITMENT
 - i) The need for new faculty will be generated by the concerned department chairman, with full justification and job description, indicating the level of the post (assistant professor, associate professor etc), along with the required qualifications/training/expertise if any, equivalent to or over and above those laid down for each level by the Pakistan and Medical and Dental Council, Khyber Medical University or College of Physicians and Surgeons of Pakistan.
 - ii) This will be discussed by the Academic Council and Dean and approved or disapproved.
 - iii) For an approved post, the Human resources department will arrange to advertise
 - iv) The Dean will constitute a scrutiny committee which will prepare a list of eligible candidates and make an appropriate pre-interview merit list to be displayed on the official web page.
 - v) The Dean will notify a selection committee comprising of five senior members of faculty such that two of these are from the concerned department to act as subject specialists, one from allied departments and two members from any other

departments of the institution. Special invitation may be extended to members outside the institution to act as part of this committee (example for the post of Assistant Professor Cardiology two members will be from cardiology department acting as subject experts one member from general medicine and two members from other departments e.g medical education etc.).

- vi) The Dean will nominate one member as a chairman, provided that all members including the chairman will have equal marks.
- vii) The scrutiny and selection committees may be re-constituted by the Dean ensuring availability of appropriate faculty members every time the appointment process is undertaken.
- viii) On receiving the recommendations of the above committee the Dean will inform the Board and issue due appointment letters.
- ix) In case of any disagreement the Dean may send the case back to the selection committee with a written request for reconsideration or rejection of the candidate and may start the process afresh if deemed necessary.

e) FACULTY PROMOTION

i) Faculty at assistant professor or associate professor level must be considered for promotion to the next level at 8 years or less from the time of initial appointment in the post.

ii) The promotion policy and criteria approved by the Board of Governors and amended from time to time will be followed, whilst ensuring that it falls within the ambit of rules and regulations prescribed by PM&DC which sets the minimum standards to be followed for such appointment/promotion.

iii) The Dean will constitute a scrutiny and promotion committee comprising of five available senior faculty members who are well versed with the promotion policy.

iv) The Dean will nominate one member as a chairman, provided that all members including the chairman will have equal say in the promotion process.

v) The scrutiny and promotion committees may be re-constituted by the Dean ensuring availability of appropriate faculty members every time the promotion process is undertaken.

vi) On receiving the recommendations of the above committee the Dean will inform the Board and issue due promotion letters.

vii) In case of any disagreement the Dean may send the case back to the scrutiny and promotion committee with a written request for reconsideration or rejection of the candidate and may start the process afresh if deemed necessary.

f) APPOINTMENT OF DEPARTMENT CHAIRMEN

The Dean/Principal will form a search and selection committee to recommend candidates for the post of each Department Chairman.

The committee will consist of one faculty member from the concerned department and four faculty members from different departments, ensuring that the clinical and basic science departments are each represented by at least one member, The committee will also include the Medical Director of the Hospital or his nominee. The Dean/Principal will appoint a chairman from amongst the members of the committee. The search and selection committee will invite applications through internal circulations or advertisement.

The committee will make its recommendation to the Dean who may accept or reject it. In the event of rejection, the Dean will provide a written explanation for his action to the search and selection committee, which will then proceed to recommend another candidate following the procedure noted above.

Department Chairman will serve for a term of 3 years renewable for two further terms of three years each at the discretion of the Dean and the advice of the Academic Council based upon performance and so documented by the Dean. No person may serve as Department Chairman for more than three terms.

g. FACULTY GRIEVANCE PROCEDURE

Medical Faculty members may appeal adverse actions, provided that this does not apply to the procedure or the outcome for promotion of a Medical Faculty member, which is not subject to appeal.

Definitions:

- "Parties" means the Medical Faculty member who requested the hearing or appeal and the individual, body or bodies initiating or recommending the adverse action.
- "Hearing" means and includes hearing of the Medical faculty member against any adverse action mentioned in this Article.
- "Adverse action" means an action taken because of an adverse recommendation and/or the placement of an adverse recommendation in the record of that medical faculty member

Every effort shall be made to give any Medical Faculty member full opportunity before an adverse action is taken against him/her.

A. Request for hearing

i. If the Medical Faculty member decides to request a hearing, such request shall be sent by an e-mail or a written application, to the Dean, within 15 days of receipt of the adverse recommendation by the Medical Faculty member.

ii. If the Medical Faculty member fails, without reasonable cause, to submit a proper or timely request, it shall constitute a waiver of the right to a hearing and to any appeal to which the Medical Faculty member may otherwise have been entitled;

iii. Failure without good cause to personally appear at a scheduled hearing shall be deemed to constitute voluntary

acceptance of the recommendations involved, and waiver of the right to a hearing. If the Medical Faculty member waives his rights to a hearing against an adverse recommendation made that impugned decision shall become final.

B. Notice of Hearing

- i. After receipt of a request for a hearing from a Medical Faculty member, an adhoc Review Committee from the Medical faculty shall be appointed by the Dean, which shall schedule and arrange for a hearing and shall notify the Parties of the date, time and place by e-mail or a written notice. The hearing date shall be not more than thirty (30) days from the date that the request for hearing from the Medical Faculty member was received.
- ii. The Review Committee, comprising of three (3) faculty members, will be constituted by the Dean on a case by case basis, and should be acceptable to the appellant. One of the three members would be designated as Chair of the Committee.

C. Conduct of Hearing

- i. The Committee Chairman shall determine the order of proceedings during the hearing to assure that all participants have a reasonable opportunity to present relevant oral and documentary evidence, rule on all motions and evidentiary matters, and maintain decorum.
- iii. The Medical Faculty member shall be entitled to have access to any records or reports provided to the Committee.
- iv. A record of the hearing shall be made in the manner chosen by the Committee.
- v. The personal presence of the Medical Faculty member at the hearing is required. No legal practitioner shall be allowed to appear on behalf of any party during any of these proceedings.
- vi. If the Medical Faculty member fails without good cause to appear and participate in the hearing, the Medical Faculty member shall be deemed to have waived all procedural rights under this Regulation, with the same effect as a waiver as defined above and to have accepted the adverse decision or recommendation.
- vii. The Medical Faculty member shall have the burden of proving, by clear and convincing evidence, that the adverse recommendation or decision lacks, totally or partially, factual

basis or that such factual basis or the conclusions reached there from were arbitrary, unreasonable or capricious.

- viii. The Review Committee may, without special notice, recess the hearing and reconvene the same for the convenience of the participants or for the purpose of obtaining new or additional evidence or consultation.
- ix. After the hearing is closed, the Review Committee shall at a time deemed convenient by the chair, conduct its deliberations in the absence of the Medical Faculty member for whom the hearing was convened. At the completion of their deliberations, the hearing shall be deemed to be finally adjourned.
- x. Within three (03) business days of the final adjournment of the hearing, the committee shall issue a written report of its findings, including a recommendation that the original adverse recommendation or decision be affirmed, rejected or modified, to the Academic Council and the parties.
- xi. The Academic Council after reviewing the Review Committee findings may make a final recommendation which will not be subject to appeal.

22. BUDGETARY PROCESS

The annual budgetary process is shown in Appendix 5

- a) Annual Budgets will be prepared separately by the Medical School/College and by the affiliated teaching Hospital.
- b) These budgets will be prepared by a process whereby every department and division will submit an annual budget, to include capital equipment and expenses, to the Chief Financial Officer /Director Finance of each Institution.
- c) These will be reviewed, adjusted and forwarded to the Finance Committee of the Institution for approval and submission to the Dean and Academic Council in the case of the Medical School, and to the Hospital & Medical Directors in the case of the Teaching Hospital.
- d) These approved budgets will be submitted by the Dean and the Hospital Director to the Board of Governors for final approval.
- e) The Board of Governors will ask the Finance and Accounts subcommittee of the Board to review the budgets and recommend approval or revision. The Board of Governors will then approve the final budgets.

f) Once the budgets are approved by the Board of Governors, each Institution (Medical School/College and Teaching Hospital) will proceed to utilize their funds according to the approved budget - no further approvals will be required, so long as the expenditure is according to the approved budgetary plan. In case of any urgent need for re appropriation within the budgetary limit, the Dean or Hospital Director may liaise with the board (through its chairman) and proceed to make the necessary utility.

g) At the end of each fiscal year, the financial performance of each Institution will be reviewed and audited by the Board of Governors to ensure that budgetary recommendations were followed and the approved budget allocations were appropriately followed and the budget was not exceeded, as well as to ensure that all financial processes were transparent and ethical.

h) The Health department may audit the Board of Governors and all fiscal activity at any time, as noted in Section 7 (2) of the Act.

23. WORKING HOURS

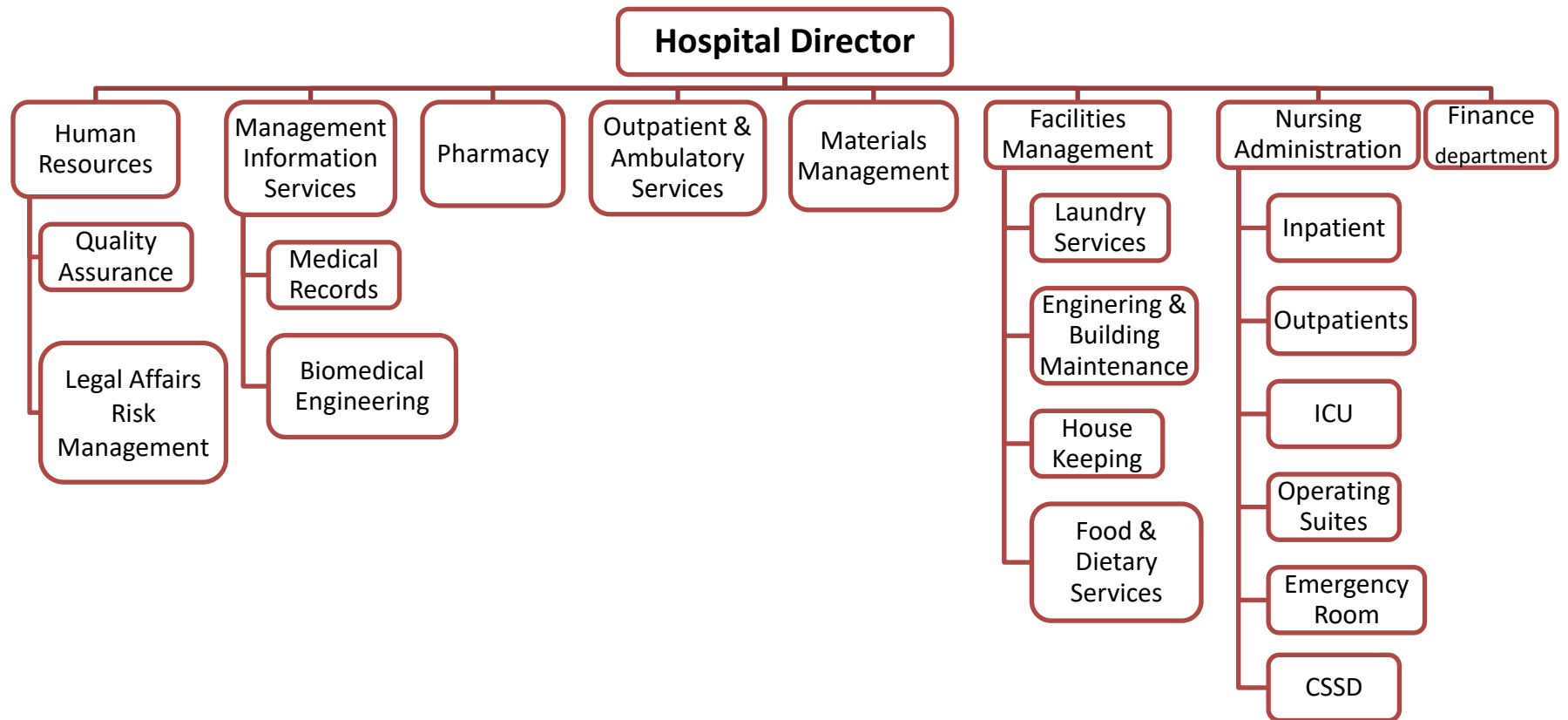
Regular working hours for employees are from 8:00 am to 2:30 pm, six days a week.

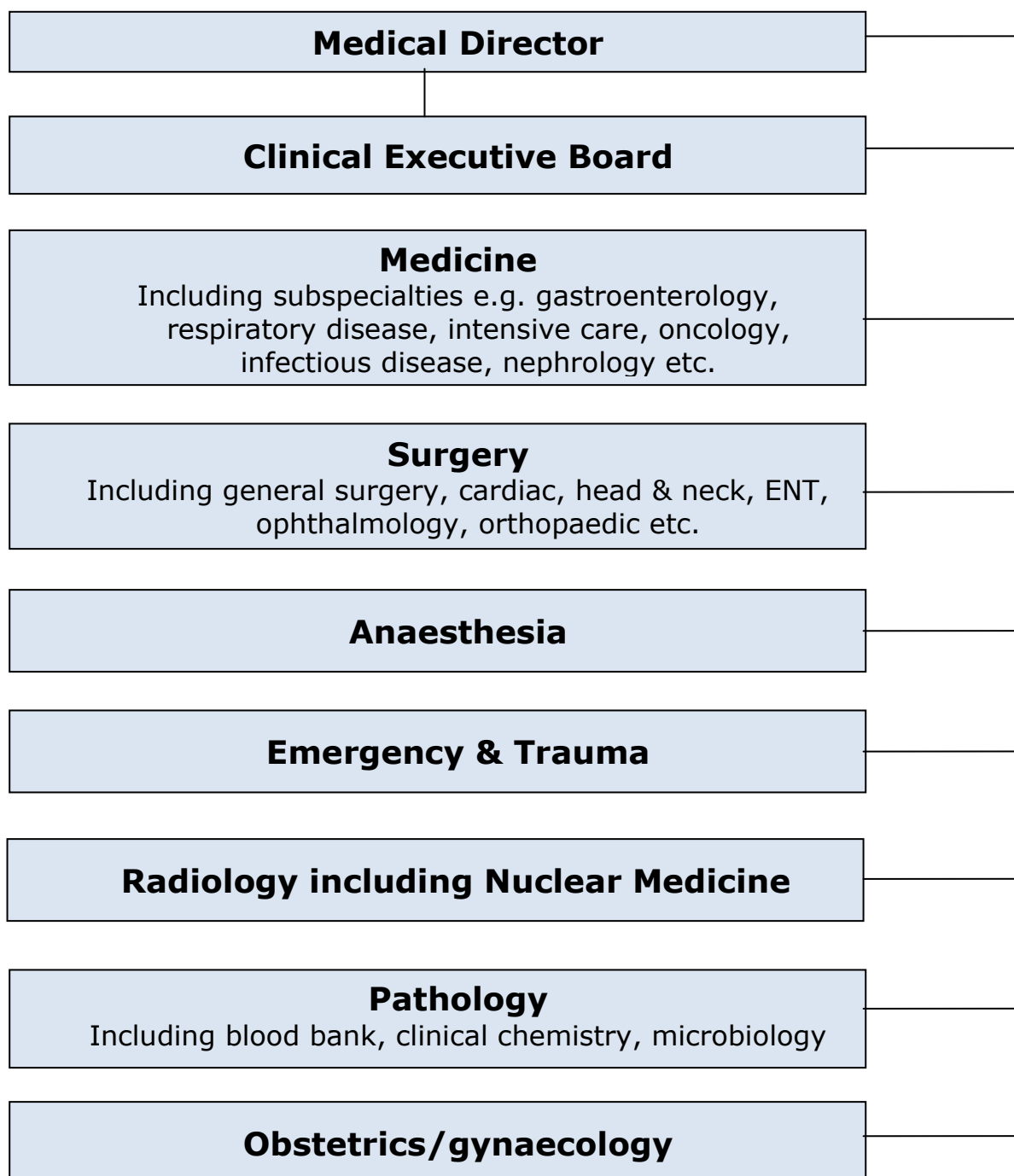
However, timings may vary for employees working in shift-based departments as the Hospital works in three shifts. Shift timings are:

SHIFT TIMINGS	
Regular Shift	08:00 am to 02:30 pm
Morning Shift	08:00 am to 02:00 pm
Evening Shift	02:00 pm to 08:00 pm
Night Shift	8:00 pm to 8:00 am

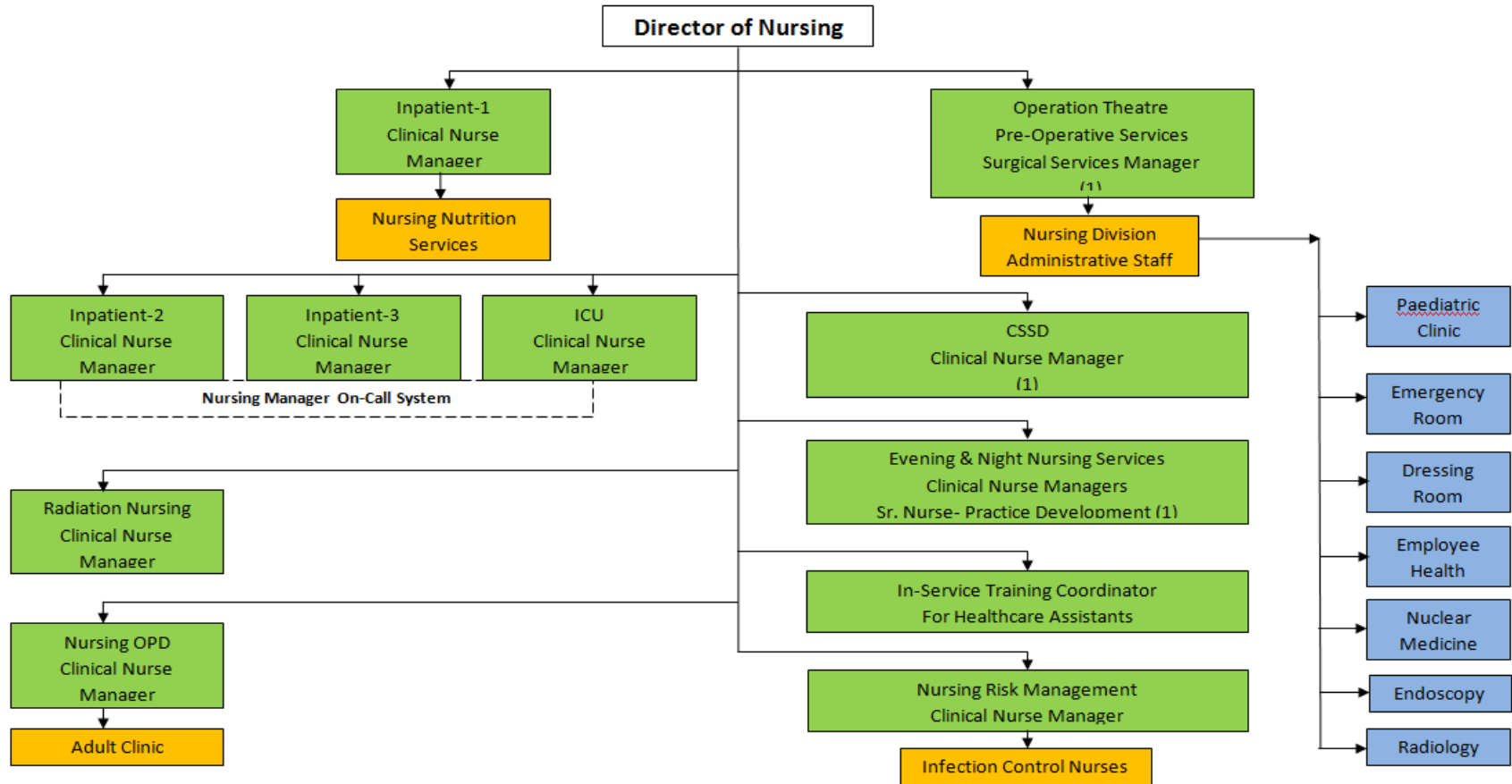
Employees are required to observe working hours as determined by their departmental manager or supervisor.

Provided that medical staff, including consultants, and house staff, and essential staff may be required to attend at weekends and nights as determined by the department head and the Medical director, in order to provide complete medical service to patients at all times. Such attendance would be on a roster basis, ensuring that each medical staff member is treated equitably and sufficient consideration given to avoid excessive overwork.

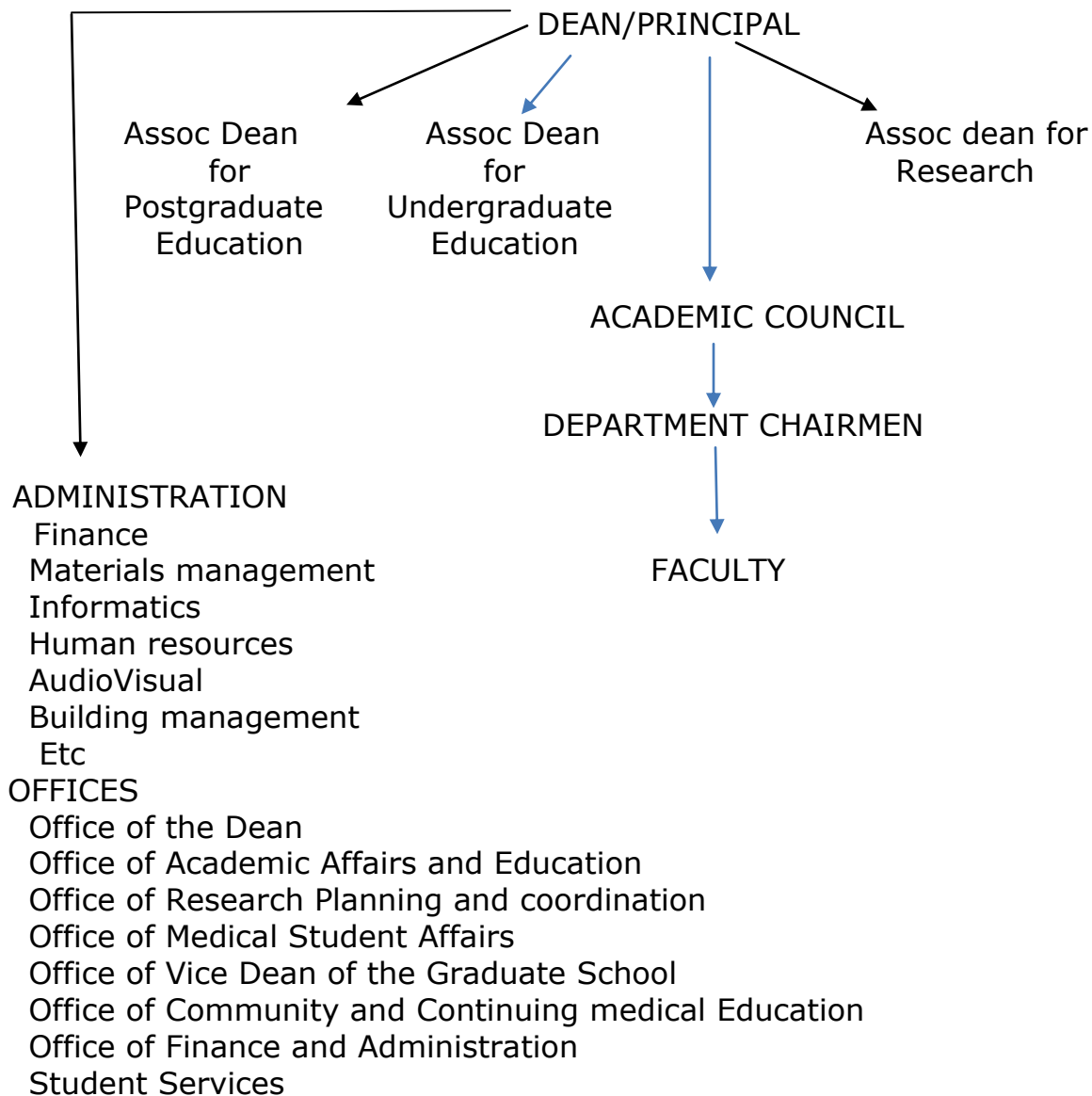
APPENDIX 1

APPENDIX 2

APPENDIX 3



APPENDIX 4
ORGANISATIONAL STRUCTURE OF MEDICAL SCHOOL



APPENDIX 5

ANNUAL BUDGETARY PROCESS

