

MEDICAL TEACHING INSTITUTION ABBOTTABAD.

PUBLISHED BY AUTHORITY OF THE BOARD OF GOVERNORS

v2, revised 19th January, 2019.

NOTIFICATION

No. AMC-360/2019, In pursuance of section 24 of Khyber Pakhtunkhwa Medical Teaching Institutions Act 2015 (Act IV of 2015), and the powers vested in the Board of Governors of the Institution, the Board of Governors hereby make these regulations.

MEDICAL TEACHING INSTITUTION ABBOTTABAD REGULATIONS 2016, revised January 2019.

SHORT TITLE, APPLICATION AND COMMENCEMENT.

- (1) These regulations will be called the Medical Teaching Institution Abbottabad Regulations, 2016, revised 2019.
- (2) These 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 three months and more frequently if the Board deems necessary to carry out its responsibilities and duties.
- d) Each Board meeting will continue until all agenda items have been satisfactorily resolved,
- e) 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.
- f) 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.

- g) An excused absence from the Board meeting will require prior approval of the Board, with a written explanation sent to the Board at least seven days prior to the meeting.
- h) Employees of the Institution may meet the Board after having given prior notice to do so at least one week before any Board meeting.
- i) The Board will complete review of the annual Institutional budget and forward the same to government by March 31st of each year.
- j) 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.
- k) 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 choose to review selected appointments below managerial level if they deem fit.
- l) The Board may constitute an Executive Committee, Finance Committee and such other committees or sub-committees as it may deem appropriate, as provided in Section 7 of the Act.
- m) The Board will name the Chairperson and membership of such committees
- n) Each committee, at its first meeting, shall confirm membership and appoint a Secretary who shall take Minutes and keep a record of each meeting
- o) The Chairperson 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.
- p) The Board may adopt Government Rules presently in vogue at the MTI till formulation of the institution's regulations.
- q) The Minutes of each meeting shall be forwarded to 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 (Appendix 6) 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 co-workers.
- 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 six month probationary period which will be extendable by three months.

3. BOARD /COMMITTEE MEETINGS

- a) All members attending Board or Institutional Committee meetings must sign in to 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 four 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.
- b) The Hospital Director will be selected and appointed by the Board for a term of five years, renewable for two further terms of five 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 will form a committee consisting of its own members, to select the Hospital Director, or the Board may, as a whole, fulfill this function.
- d) The Board will make its selection 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 two leading national newspapers (one English and one 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 Board 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 Board 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 functions, responsibilities and requirements of the Hospital Director will be as detailed in Section 11 of the Act and further in the Regulations.

5. MEDICAL DIRECTOR

- a) The Medical Director will be selected and appointed by the Board for a period of five years, renewable for two further terms of five 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 a major leading hospital or clinical unit in any clinical discipline, including medicine and its subspecialties, surgery and its subspecialties, pediatrics and its subspecialties, obstetrics/gynecology and its subspecialties, radiology and imaging services, pathology, and any other major clinical units.
- (c) The Board will form a committee consisting of its own members, to select the Medical Director, or the Board may, as a whole, fulfill this function.
- e) The Board 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 one Urdu) [all editions] 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 Board 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 Board 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 functions, responsibilities and requirements of the Medical Director will be as detailed in Section 13 of the Act and further elaborated in the Regulations.
- j) The Medical Director will be required to practice only on the premises of the Hospital. No outside consulting practice will be allowed.

6. DEAN

The Board shall appoint a Dean for the Medical College, for a five-year term.

- a) The Dean will be a medical academic with either a Ph.D degree or a medical qualification such as MBBS 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.
- b) Preference will be given to candidates with the following
 - i. At least three years administrative experience as head of a department, unit, program, or institution, with recognized leadership qualities.
 - ii. A track record in teaching
 - iii. A commitment to medical education and research, as evidenced by at least fifteen publications in peer-reviewed Pubmed-indexed journals.
 - iv. Additional qualifications in research, education, public health or hospital administration will be an advantage.
- c) The Board will form a committee consisting of its own members, to select the Dean, or the Board may, as a whole, fulfill this function.
- d) The Board may choose to renew the appointment of an existing Dean for a further term of five years at their discretion based upon the performance of the Dean. In this case the Board will document a written explanation for such an action. No person may serve as Dean for more than two terms.
- e) Simultaneously with appointment to the position of Dean, the selectee will also receive a faculty appointment at the appropriate level (associate professor or full professor) in a department appropriate to his/her specialty.
- f) The Dean will be required to practice only on the premises of the Hospital. No outside consulting practice will be allowed.

7. FUNCTIONS AND DUTIES OF THE DEAN

- i) The Dean will function as the Chief Executive Officer (CEO) of the Medical Teaching Institution, a term which will encompass the medical school as well as its associated hospitals, departments, institutes and so forth.
- ii) As head of the Medical school/college, the Dean will be responsible for all undergraduate and postgraduate medical teaching and research, and will report to the Board
- iii) The Dean will be responsible for all budgetary and financial matters relating to the medical school and its functions
- iv) The Dean will select from the faculty Associate Deans for undergraduate education, for

postgraduate education and for research, 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.

- v) **ACADEMIC COUNCIL:** The Dean will be advised by an Academic Council, of which he/she will be Chairman; the Academic Council will consist of the Heads of all the Medical School departments plus two faculty members elected by the faculty – one each from the basic and clinical science faculties – plus the Associate Dean.

vi) The Dean 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 five years which may be renewed by the Board at their discretion, for a further term of five 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 such as a BScN, at a minimum, but preferably with an MScN/MA in nursing with at least seven years administrative and teaching experience, and current nursing registration.
- c) The Board will form a committee consisting of its own members, to select the Nursing Director, or the Board may, as a whole, fulfill this function.
- d) The Selection Committee will follow the same procedure as in Regulation 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 provided in Section 14 (4) of the Act.
- b) The responsibilities of the Nursing Director will be as noted in Section 14 of the Act.

10. FINANCE DIRECTOR

- a) The Board will form a committee consisting of its own members, to select the Finance Director, or the Board may, as a whole, fulfill this function.

- b) The Finance Director shall be a reputable individual with a Master Degree in commerce, finance or accounts or a Chartered Accountant having ten years post qualification experience in finance and/or accounts in a major private or public company/institution. The Finance Director will serve for a three year term, renewable for two further terms of three years each. No one may serve more than three terms.
- c) Recruitment will be by a transparent process of public advertisement and evaluation as described in Regulation 4 (d) and 4(i) of these Regulations.
- d) Functions and Duties of the Finance Director.
 - (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 Institutional Management Committee 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 the regulations approved by the Board.
 - (v) Assist in the development of the Medical College 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

- (a) An Institutional Management Committee (IMC), headed by the Dean, will be formed for the overall coordination of the Institution. The Committee will include the Hospital and Medical Directors, the Finance Director, the Nursing Director and two persons nominated by the Board on the recommendation of the Dean.

- (b) The committee will meet at least once a month, and 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.
- (d) Subject to delegation of powers from the Board, the IMC may appoint or terminate any and all employees of the MTI in accordance with the rules and regulations framed under the MTI Act.
- (e) The IMC may recommend creation, or closure, of a department, facility or post at the MTI.
- (f) The IMC will review and recommend for approval to the Board the annual budget of the MTI.
- (g) The committee will report to the Board at least quarterly.

12. HOSPITAL APPOINTMENTS

For all other appointments in the Hospital, the Board will delegate authority to the Hospital and Medical Directors.

13. MEDICAL CONSULTANTS

- a) Medical consultants will be qualified physicians with MBBS 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) They will be designated as junior, mid-level, and senior consultants as follows:
 - i) A junior level consultant will have had at least five year or less out of training and postgraduate qualification,
 - ii) A mid-level consultant will have more than five years but less than ten years out of training and postgraduate qualification
 - iii) A senior consultant will have ten years or more of training and 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, bylaw No 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. 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 Co-ordinator as ex-officio members.
- c) It will review any current clinical hospital wide clinical problems,
- d) It will monitor and ensure the highest quality of medical care at the Hospital
- e) It will advise and develop clinical performance metrics
- f) It will plan future clinical development and programs for the hospital
- g) It will recommend corrective actions for individuals and departments
- h) It will appoint a Clinical Privileges Committee as noted in bylaw No. 7.4 of the Medical Staff Bylaws (Appendix 8) with the membership and functions delineated therein.

15. CIVIL SERVANTS

- a) For promotions of civil servants, the Board will constitute a subcommittee to prepare a working paper according to the prescribed rules and model working paper of the Government.
- b) The Board will constitute subcommittees as appropriate to make recommendations as to the suitability or otherwise of the civil servants for promotion in relation to the posts specified for promotion, based on the working papers and prescribed procedures and the criteria prescribed by Government from time to time shall *mutatis mutandis* apply.
- c) The principle of no conflict of interest will apply and a member of the Board cannot be a member of such committees or sub-committees

16. 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). Both positions will report to the Dean, as CEO.

17. 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.

18. NURSING DEPARTMENT

- a) The nursing department organisational structure will be as given 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.

19. MEDICAL COLLEGE

- a) The Medical college and faculty will function under the Dean, as shown schematically in Appendix 4
- b) The Associate Deans will be selected by the Dean for approval by the Board.

20. 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, over and above those laid down for each level by the University and the College of Physicians and Surgeons of Pakistan.

- ii) This will be discussed by the Academic Council and Dean and approved or disapproved.
 - (1) For an approved post, the Human Resources Department will arrange to advertise as noted in Regulation 2 (e) above.
 - (2) Suitable candidates will be invited for interviews within the department and by the Dean and one faculty member from a different department.
 - (3) All reviewers will provide written comments on a prescribed standardized form.
 - (4) The department chairman will select the candidate with advice from all departmental faculty members and the faculty member from the other department.
 - (5) The department chairman will present his written recommendation along with the candidate's file to the Academic Council and Dean for approval. At the same time the Chairman will provide a list of all applicants and the reasons for their rejection by the chairman.
 - (6) The Dean will inform the Board and send the appointment letter to the candidate.
 - (7) In the case of rejection of the candidate by the Academic Council and /or Dean, the Dean will provide a written explanation to the department chairman for the basis of the rejection

e) **FACULTY PROMOTION**

- (i) Faculty at assistant professor or associate professor level will be considered for promotion to the next level at eight years or less from the time of initial appointment in the post.
- (ii) The promotion requirements at each level will be as recommended for that level by the Higher Education Commission or as decided by the Academic Council and the Board, provided that all promotions will be based entirely on merit.
- (iii) The initial decision to proceed with promotion is to be made by the chairman at the departmental level, by the Departmental Promotions Committee, except at the 8th year when the promotion process must proceed regardless, provided that those assistant and associate professors who have already served five or more years in the post as of January 19, 2015 will have a maximum of three years from August 01, 2015 to be considered for promotion as in sub-regulation (1) above.
- (iv) The candidate's dossier, if approved by the Departmental Promotions Committee, will be presented to the Medical College Promotions Committee.
- (v) If approved, the candidate will be promoted and the Board is so informed.
- (vi) If disapproved, the candidate may apply again in the subsequent year; however if disapproval occurs at the 8th year, the candidate's service will end, effective in six months provided that a candidate for promotion from Associate Professor to full Professor who is unsuccessful may continue in his post and apply again within three years. In the event of disapproval for a second time, the candidate's service will end effective in six months.

(vii) DEPARTMENTAL PROMOTIONS COMMITTEE.

The faculty members in each department will form a departmental promotions committee, chaired by the department chairman and consisting of all departmental faculty members above the rank of the individual being considered for promotion. Thus for a candidate for promotion from assistant to associate professor, all departmental faculty who are associate or full professors will form the committee, whereas for a candidate for promotion from Associate to Full Professor, only faculty members who are full professors will form the committee. The committee will consist of at least three members, including the department chairman. In the event that there are insufficient requisite faculty members in a Department, the department chairman will invite faculty members of appropriate rank from other departments to complete the minimum requirement of three members.

(viii) MEDICAL COLLEGE PROMOTIONS COMMITTEE.

The Dean will appoint a Medical College promotions committee consisting of seven members of the faculty at Professor level and appoint a chairman of the committee from amongst the members. The tenure of members of the committee will be three years, at the end of which period the Dean will appoint new members, provided that an existing member's term may be renewed for one more term. No member may be appointed to the committee for more than two successive terms. The committee will receive the promotion recommendation from the departmental promotions committee and make a final decision which will be provided in writing detailing the reasons for the decision to the chairman of the candidates department. The decision of the Medical College Promotions Committee will be final and no appeal of the decision will be accepted.

(ix) APPOINTMENT OF DEPARTMENT CHAIRMEN

The Dean will form a search 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 will appoint a chairman from amongst the members of the committee. The search committee will invite applications and proceed as in Regulation 4 (d) to (f) of these Regulations.

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 committee, which will then proceed to recommend another candidate following the procedure mentioned above.

- (x) Department Chairmen will serve for a term of three (03) 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.

f) **FACULTY GRIEVANCE REMOVAL 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 noted in E, above, which is not subject to appeal.

Definitions:

- a) "Parties" means the Medical Faculty member who requested the hearing or appeal and the individual, body or bodies initiating or recommending the adverse action.
- b) "Hearing" means and includes hearing of the Medical Faculty member against any adverse action mentioned in this regulation.
- c) "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

Medical Faculty member will be given full opportunity of hearing 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 Chairperson 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.
- (ii) The Medical Faculty member shall be entitled to have access to any records or reports provided to the Committee.
- (iii) A record of the hearing shall be made in the manner chosen by the Committee.
- (iv) 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.
- (v) 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 in these Regulations and to have accepted the adverse decision or recommendation.
- (vi) 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.
- (vii) 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.
- (viii) 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.
- (ix) Within three (3) 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.

- (x) The Academic Council after reviewing the Review Committee findings may make a final recommendation which will not be subject to appeal.

21. ANNUAL BUDGET MAKING

The annual budget making process is given in Appendix 5

- (i) Annual Budgets will be prepared separately by the Medical College and by the affiliated Teaching Hospital.
- (ii) 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 of each Institution.
- (iii) These budgets 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 College, and to the Hospital & Medical Directors in the case of the Teaching Hospital.
- (iv) These approved budgets will be submitted by the Dean and the Hospital Director to the Board of Governors for final approval.
- (v) 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.
- (vi) Once the budgets are approved by the Board of Governors, each Institution (Medical 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.
- (vii) 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.

22. WORKING HOURS FOR EMPLOYEES

Regular working hours for employees will be from 8:00 am to 4:30 pm, including a 30 minute lunch break, five days a week.

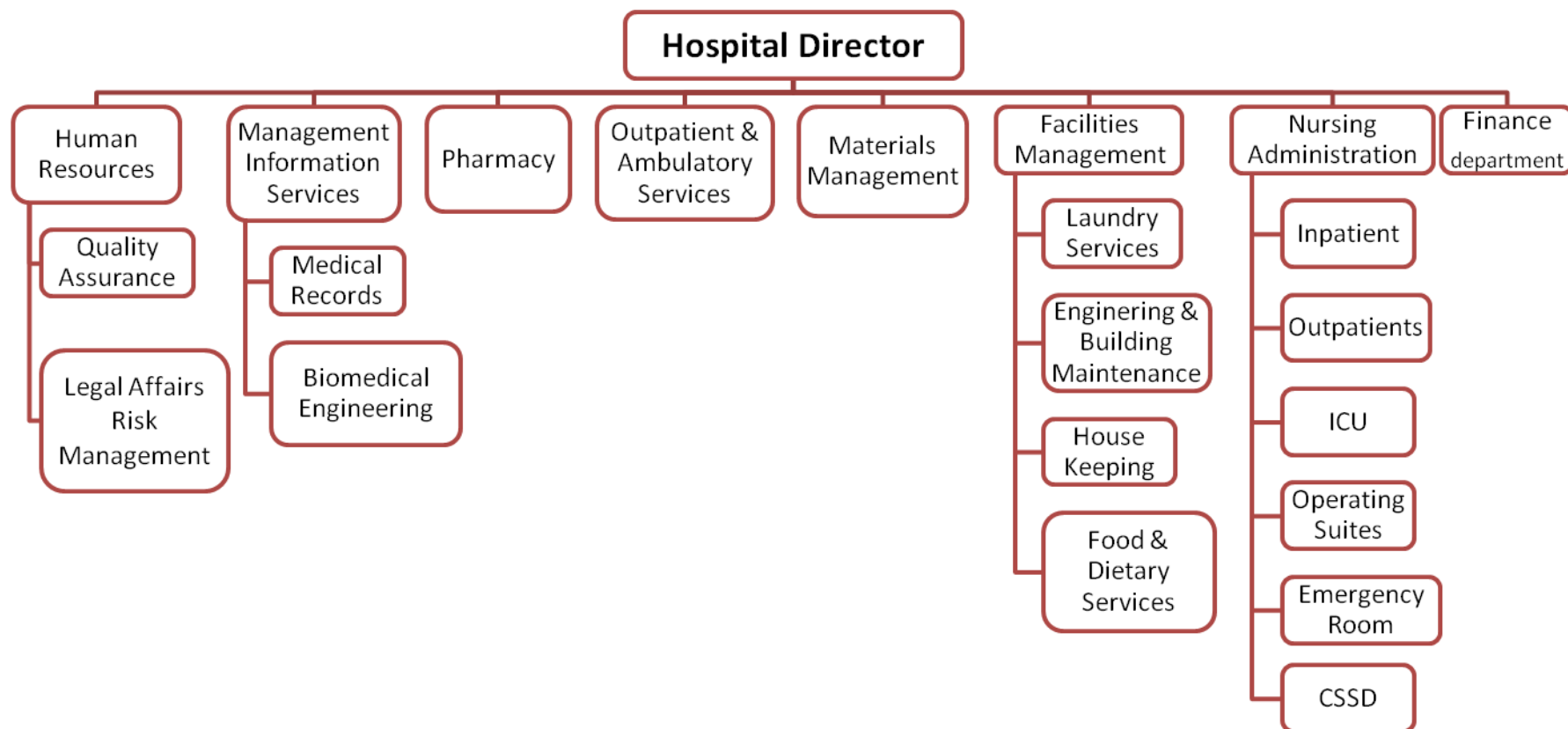
However, timings may vary for employees working in shift-based departments as the Hospital works in three shifts. Shift timing shall be as follows:

SHIFT TIMINGS	
Regular Shift	08:00 am to 04:30pm
Morning Shift	08:00 am to 4:30 pm
Evening shift	04:00 pm to 12.:30 am
Night Shift	12.00 am to 08.30 am

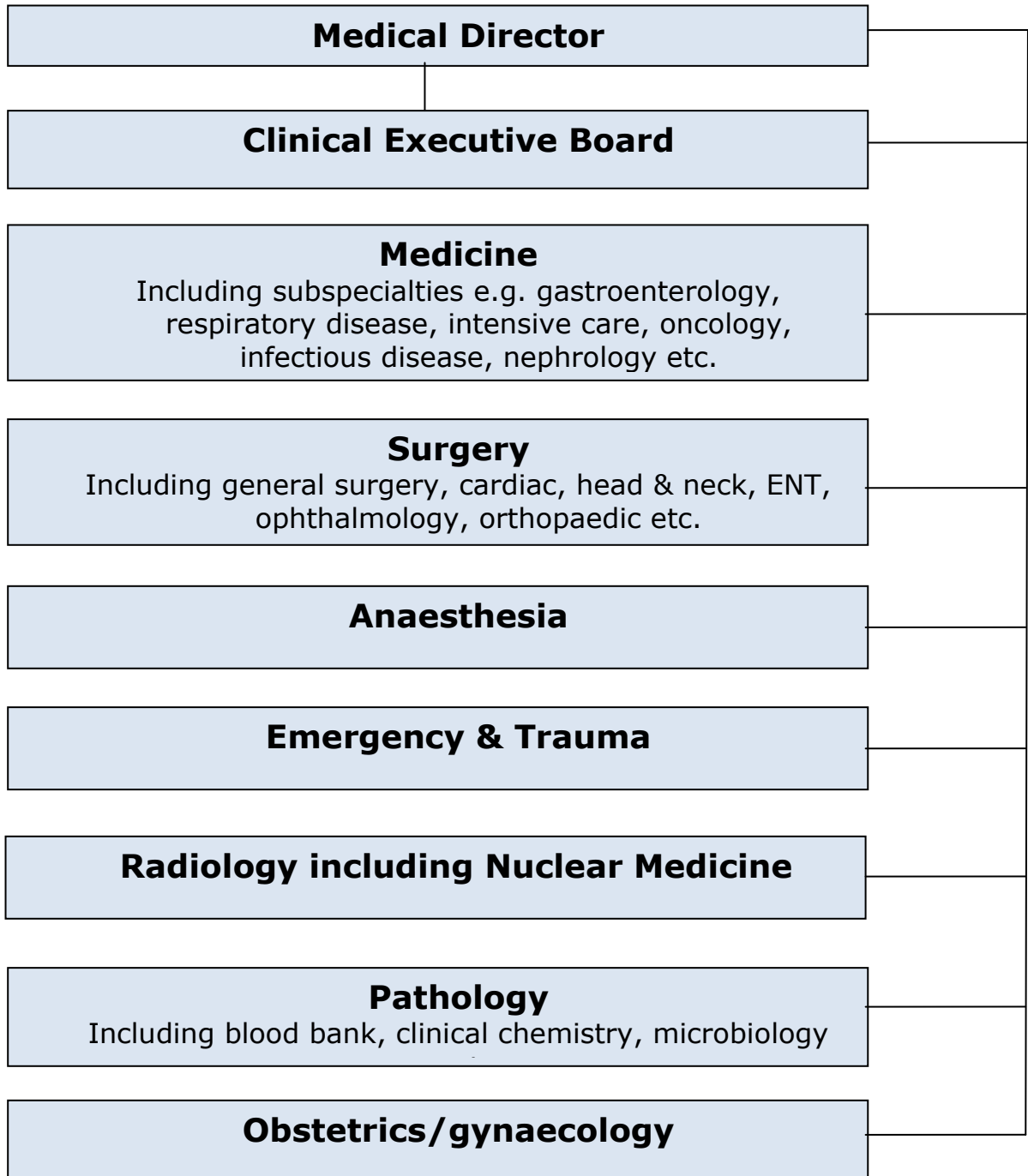
Employees shall observe working hours as determined by their departmental manager or supervisor.

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.

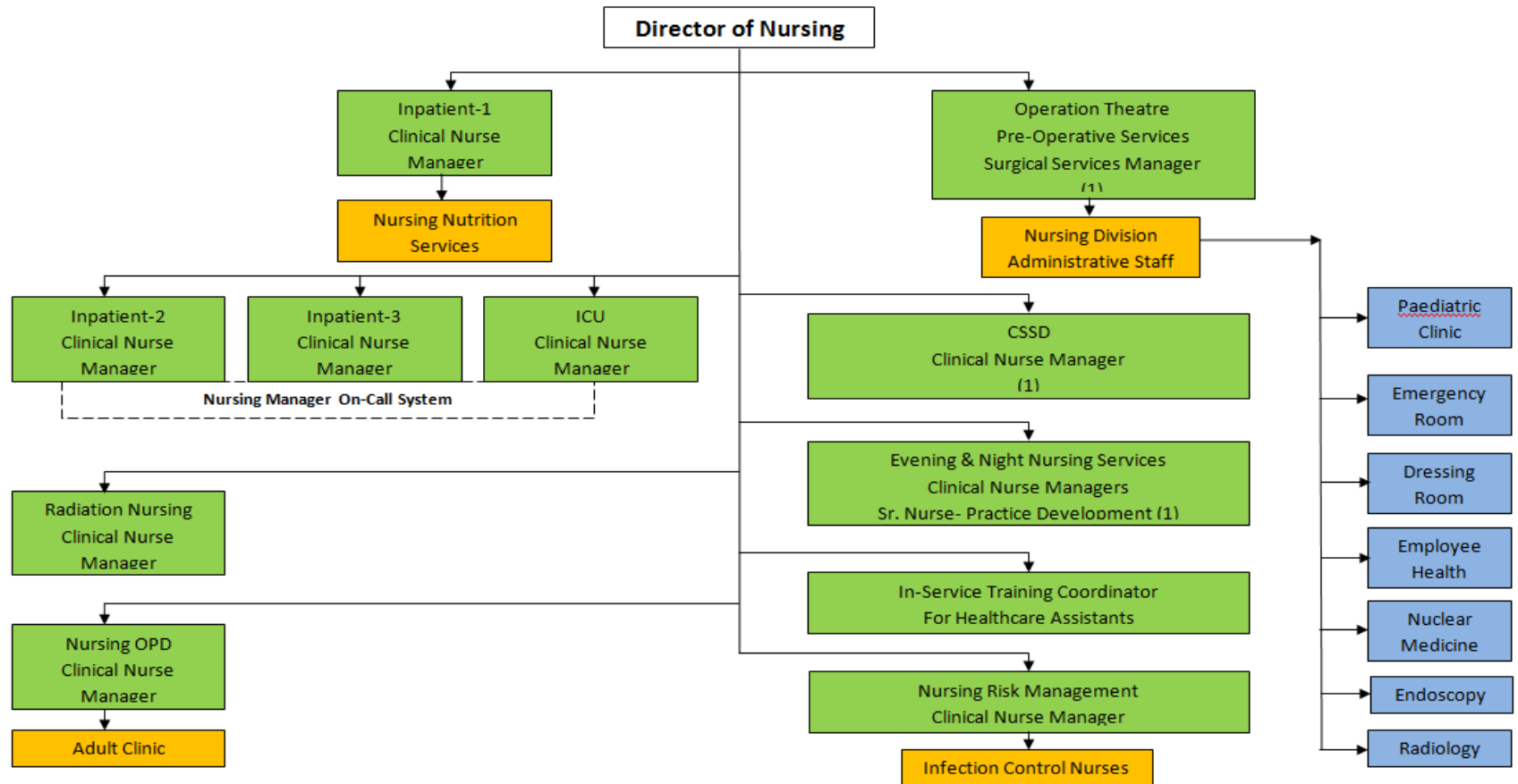
**By order of the
Board of Governors**



APPENDIX 2

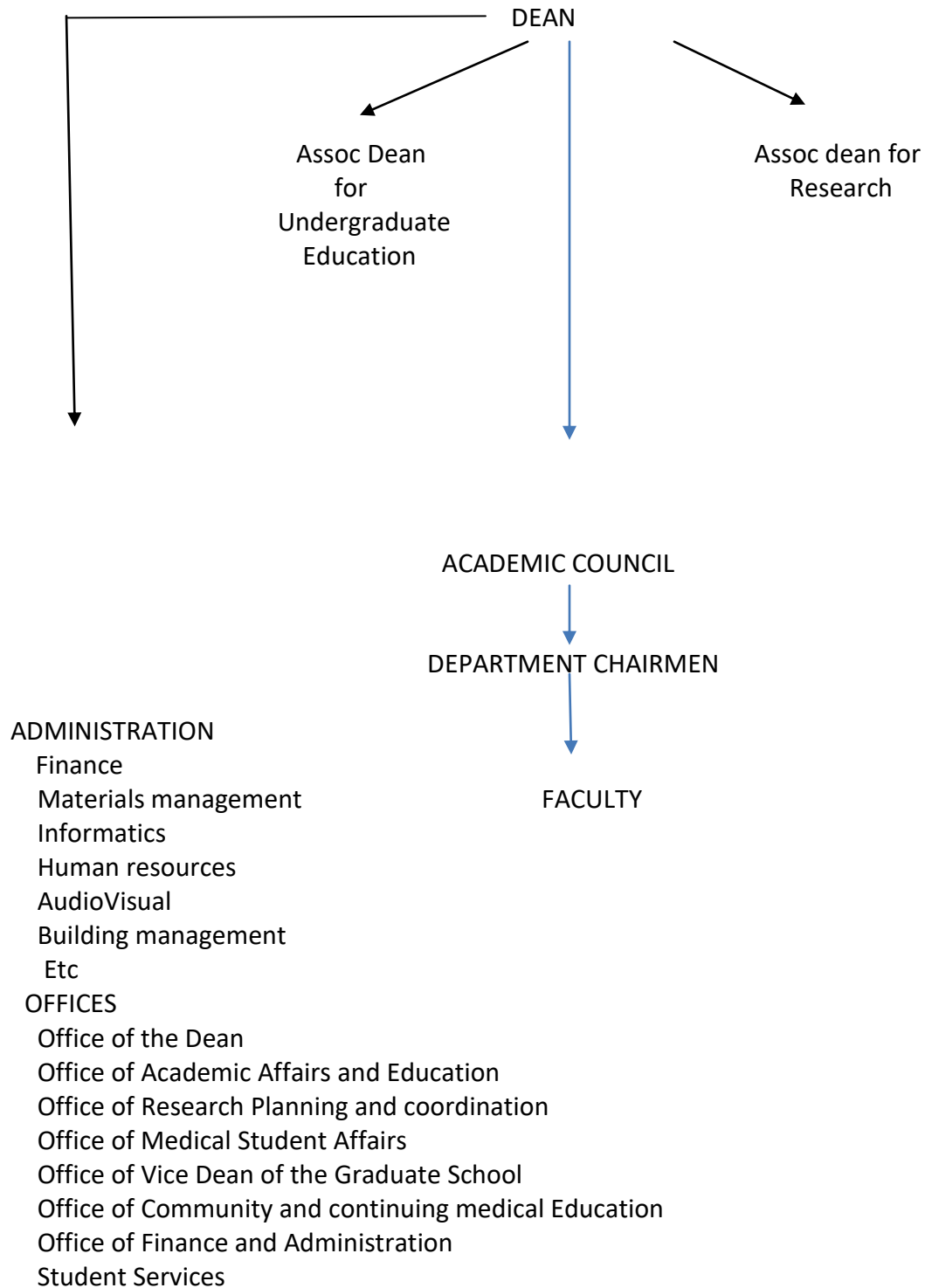


APPENDIX 3



APPENDIX 4

ORGANISATIONAL STRUCTURE OF MEDICAL COLLEGE



Note: The Academic Council consists of all the Heads of Departments plus two faculty representatives elected by the faculty – one each from the basic science and clinical departments – who are not Department Chairmen. The Associate Deans serve on the Academic Council. The post of Associate Dean and Department Chairman cannot be held simultaneously. The Dean acts as Chairman of the Academic Council.

APPENDIX 5

ANNUAL BUDGET MAKING PROCESS

