

REGULATIONS

PESHAWAR INSTITUTE OF CARDIOLOGY MEDICAL TEACHING INSTITUTION

NOTIFICATION

Peshawar dated March 10, 2016.

No. LRH MTI (March 10/2016, In pursuance of Section 24 of the Khyber Pakhtunkhwa Province Medical Teaching Institutions Act 2015 (Act IV of 2015), and the Khyber Pakhtunkhwa Medical Teaching Institutions (Amendment) Act (KPK Act XXXIII of 2015), notified 24th August 2015, and the powers vested in the Board of Governors of the Institution under Section 24(2) of the said act, the Board of Governors approved the following Regulations at a Board meeting on December 18, 2017. These Regulations amend and supersede the Regulations previously notified by the Government of Khyber Pakhtunkhwa on August 23rd, 2015.

PESHAWAR INSTITUTE OF CARDIOLOGY REGULATIONS, 2017

Short title, application and commencement.

These regulations will be called the Peshawar Institute of Cardiology regulations, 2017

(1) 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 all 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 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 seven 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) Employees may request a meeting with the Board, at a separate time from the Board meeting; the Board may approve or disapprove the request.
- k) The Board will complete review of the annual Institutional budget and forward the same to government by March 31st of each year.
- l) 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 observed.
- m) 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.
- 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 provided in Section 7 of the Act.
- o) The Board will name the Chairperson and membership of such committees
- 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 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.

r) 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 three month probationary period; however, in individual cases the probationary period may be extended as deemed fit by the relevant authority, i.e. the Hospital, Medical, or Nursing Director or the Dean or the Board of Governors.

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 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.
- 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: 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. Except that for the initial appointment and until such time as appointments are made to fill the posts described above for the selection committee, the Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as a lay person and outside experts knowledgeable in the field.
- 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 four 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 qualified 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

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, radiology and imaging services, pathology, and any other major clinical units.
- c) 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.
 - iv) 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.

Except that for the initial appointment and until such time as appointments are made to fill the posts described above for the selection committee, the Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as a lay person and outside experts knowledgeable in the field.

- 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 four 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 qualified 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 (b) 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 Medical Director will be as detailed in Section 13 of the Act and further elaborated in the Regulations.

6. DEAN

The Board shall appoint a Dean for the Institution.

- a) The Dean 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 in the field of cardiology and allied sciences. The Dean will be of National and, preferably, International reputation in any field of cardiology and the cardiac sciences, 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.

b) The Board will constitute a Selection Committee of at least 8 members, consisting of:

- at least four representatives at associate professor or higher level
- an individual representing the house staff, trainee medical officers, and junior registrars will be chosen by the Board based on performance and academic achievement
- a non-clinical representative from the Hospital, designated by the Hospital Director, and
- a representative of the Nursing Department.
- Except that for the initial appointment and until such time as appointments are made to fill the posts described above for the selection committee, the Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as a lay person and outside experts knowledgeable in the field.

The Board will designate a Chairman of the committee from the members of the selection committee and the committee may co-opt 2 further members if it feels that further expertise is necessary.

Provided that the Board may choose to renew the appointment of an existing Dean for a further term of three 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.

- c) the selection committee will follow the procedure as in Regulation 4 (d) to (i) above for selection of the Dean.
- d) Simultaneously with his appointment as Dean, the selectee will also receive a faculty appointment at the appropriate level (associate professor or full professor) in a department appropriate to his specialty.

7. FUNCTIONS AND DUTIES OF THE DEAN

- i) The Dean will be the academic head of the Institution and be responsible for all undergraduate and postgraduate medical teaching and research, and will report to the Board
- ii) He will be responsible for all budgetary and financial matters relating to teaching, faculty development and research

- iii) The Dean may 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.
- iv) The Dean may 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.
- v) ACADEMIC COUNCIL: The Dean will be advised by an Academic Council, of which he will be Chairman; the Academic Council will consist of the Heads of all the clinical and basic science departments plus 2 faculty members elected by the faculty plus the Associate Deans.
- 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 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 seven years administrative and teaching experience in a reputable health care facility, and Current Nursing Council 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. Except that for the initial appointment and until such time as appointments are made to fill the posts described above for the selection committee, the Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as a lay person and outside experts knowledgeable in the field.
- 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 noted 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 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. Except that for the initial appointment and until such time as appointments are made to fill the posts described above for the selection committee, the Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as a lay person with experience in financial matters and outside experts knowledgeable in the field.
- b) The Finance Director shall be a chartered accountant or have ICMAP certification or have a Masters degree in finance or accounts. Candidates must have ten years post qualification experience in finance and/or accounts in a major private or public company/institution.
- 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 Finance Director.
 - (a) Coordinate and supervise all financial accounting matters of the institution;
 - (b) Prepare the detailed regulations and procedures for the financial management of the institution for approval by the Management Committee (see Regulation 12, below) and the Board.
 - (c) Advise the Hospital and Medical Directors and the Dean on all financial matters, ensuring transparency and fiscal probity,
 - (d) Ensure all the accounts are kept according to rules and

regulations approved by the Board

- (e) 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.
- (f) 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.
- (g) Ensure facilitation of any external audit of the accounts instituted by the Board or Government and implement the recommendations of the audit.
- (h) 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.

12. 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 will act as secretary to the committee.

- a) The committee will report to the Board.
- b) The committee will meet every three 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.
- d) The Institutional Management Committee will have authority to approve all payments above Rupees two million and five hundred thousand, so long as they are within the approved budget for the Institution, and ensuring that all Institutional rules and procedures have been documented and followed in a transparent and fair manner.
- e) Payments equal to or less than Rupees two million and five hundred thousand may be approved respectively by the Hospital Director for Hospital expenditures, and by the Dean for teaching, research and faculty development expenditures, so long as they are within the approved budget for the Institution, and ensuring that all

Institutional rules and procedures have been documented and followed in a transparent and fair manner.

13. 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 and Medical Directors.

14. MEDICAL CONSULTANTS

- a) Medical consultants will be qualified physicians with MB,BS 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) All medical consultant positions will be reviewed every two years and their clinical privileges will be assessed by the Clinical Privileges Committee (see Section 10 (h) of the Act and Medical Staff Bylaw, No. 7.4) and duties may be assigned accordingly by the Medical Director in consultation with the Dean and Department Chairman.
- c) 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 Institution at senior Registrar or higher level.
- d) The Medical Director will submit the application to the Clinical Privileges Committee (CPC) for approval and assignment (see Regulation 15).
- e) 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.
- f) In the event of disagreement between the Medical Director and the Dean, the matter may be referred to the Board for a final decision.
- g) The Board will also constitute a Clinical Privileges Committee until such time as posts are filled for appointment to that committee, and this committee will function as noted in Regulation 15.

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) 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 Medical Staff Bylaw No. 7.4 (Appendix 8) with the membership and functions delineated therein.

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)

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 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.

19. TEACHING & RESEARCH The institutional faculty will function under the Dean, as shown schematically in Appendix 4.

- a) The Dean may appoint Associate Deans to assist with his functions, as noted above (see 7 (iv) and (v).
- b) The Dean will:
 - ii) Oversee postgraduate medical education in the Institution and provide regular reports at 3 month intervals to the Academic Council,
 - iii) Be responsible for the recruitment of trainee housestaff for the Institution through the Postgraduate Medical Institution (PGMI).
 - iv) The Dean will be responsible for the academic development of the faculty.
- c) The Dean will support and oversee research activities at the Institution and report on a six monthly basis to the Board on these activities.
- d) RECRUITMENT OF HOUSESTAFF

The PGMI may oversee the recruitment and training of trainee Housestaff for the province of Khyber Pakhtunkhwa. The recruitment of trainee housestaff will be based on merit through a transparent and fair process organized by the PGMI.

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) FACULTY RECRUITMENT

In the initial phase, and in the absence of any existing faculty, the Board will decide the number of faculty required and their specialities. The Board may constitute a selection committee of not less than 4 persons which may include members of the Board as well as outside medical and/or surgical experts knowledgeable in the field in which the consultant is to be appointed. The membership of these committees may differ, depending on the specialty for which recruitment is occurring. The selection committee(s) will submit their recommendations to the full Board of Governors for final approval. Once a sufficient number of faculty have been recruited and departments become functional, the following procedure for faculty recruitment will be followed:

- 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 Regulations 4 (e).

2. Suitable candidates will be invited for interviews within the department by a selection committee constituted by the Chairman consisting of the Chairman and at least two thirds of the departmental faculty members to include equal numbers of both junior and senior faculty and one faculty member from a different department nominated by the Dean. The Dean may also nominate an additional expert member if he deems it necessary.

3. All reviewers will provide written comments on a prescribed standardized form.

4. The department chairman will select the candidate with advice of the selection committee.

5. The department chairman will present his written recommendation along with the candidate's file to the Dean for approval. At the same time the Chairman will provide a list of all applicants and the reasons for their rejection.

6. The Dean will inform the Board and the academic council and send the appointment letter to the candidate.

7. In the case of rejection of the candidate by the Dean, the Dean will provide a written explanation to the department chairman for the basis of the rejection.

e) FACULTY PROMOTION

- i) Faculty at senior registrar, 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

iv) The candidates 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 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 3 years. In the event of disapproval for a second time, the candidate's service will end effective in 6 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) INSTITUTIONAL PROMOTIONS COMMITTEE.

The Dean will appoint an Institutional promotions committee consisting of seven members of the faculty and the Medical Director, *excluding department chairmen*, and appoint a chairman of the committee from amongst the members. *The Dean may not nominate himself nor be a member of this committee.* The tenure of members of the committee will be 5 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. 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 4 (d) to (f) of the 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 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 REMOVAL GRIEVANCE PROCEDURE

Medical Faculty members may appeal adverse actions, including dismissal from service, 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

Every effort shall be made to give a Medical Faculty member full opportunity of a 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 a 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 Chairperson, 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 (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.

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

21. BUDGETARY PROCESS

The annual budget development process is shown 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 HOSPITAL EMPLOYEES

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

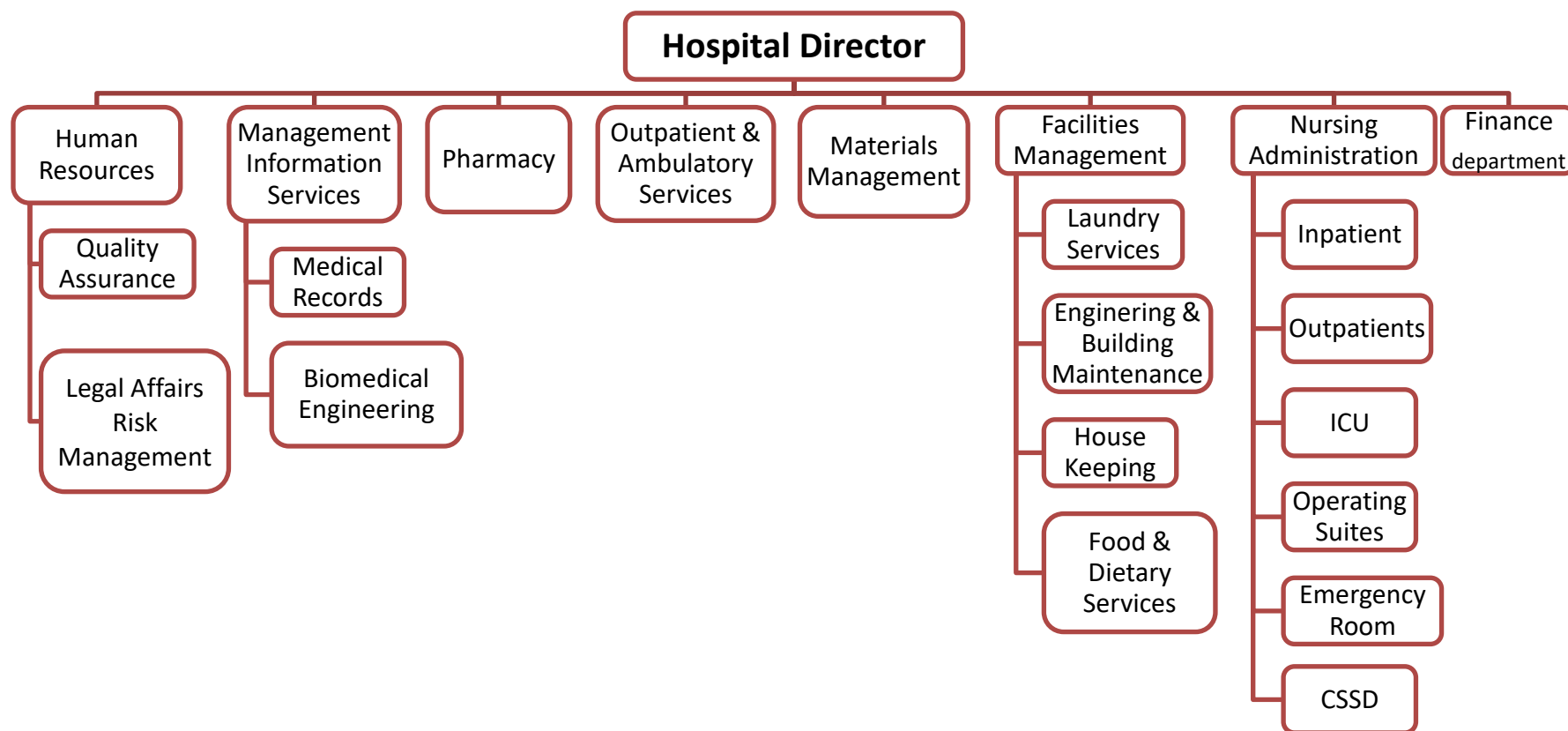
However, timings may vary for employees working in shift-based departments as the Hospital works in three shifts. Shift timings are:

SHIFT TIMINGS	
Regular Shift	08:00 am to 04:30 pm
Morning Shift	07:00 am to 07:30 pm
Evening Shift	07:00 pm to 07:30 am

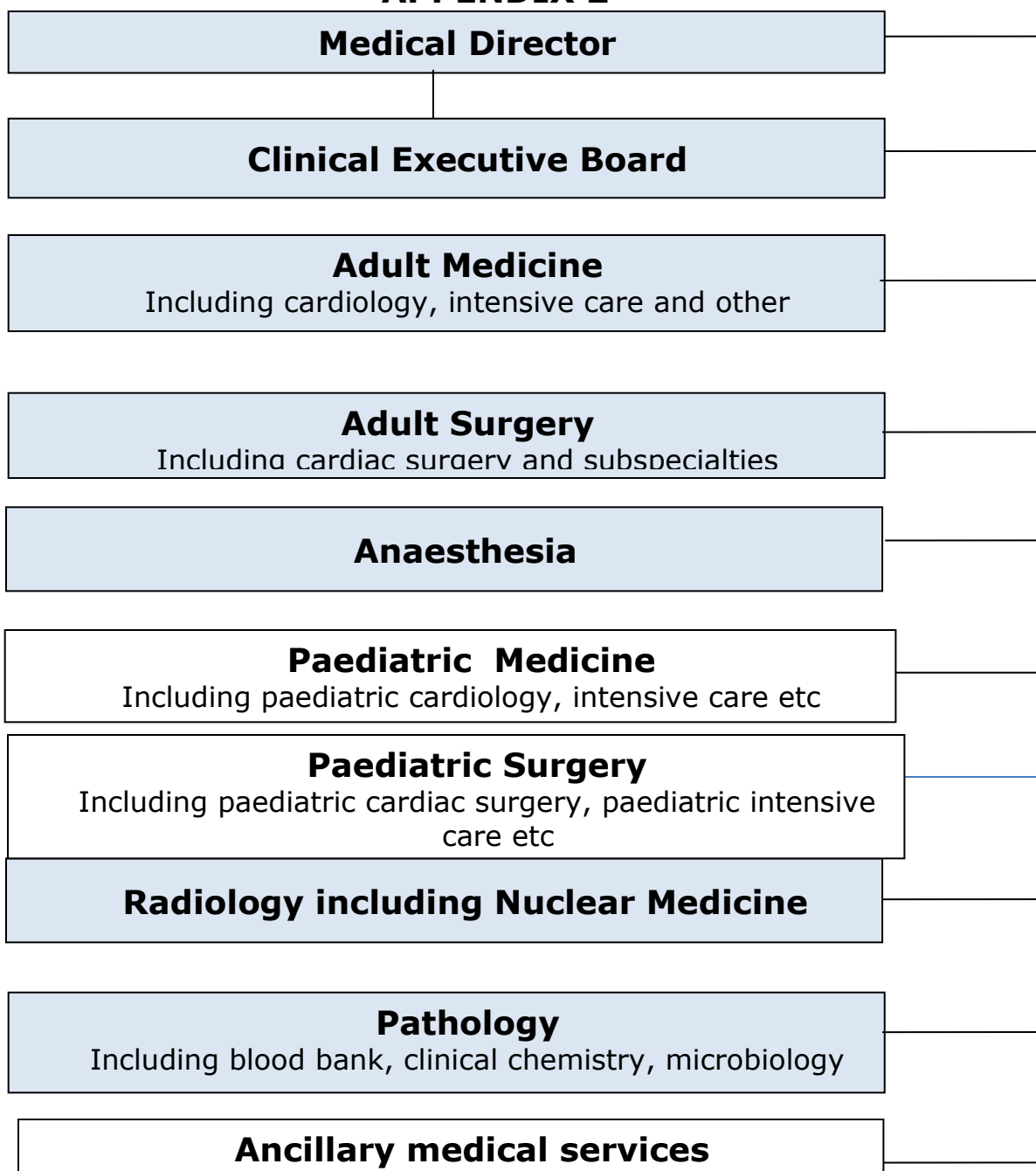
Employees shall observe working hours as determined by their departmental manager or supervisor.

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.

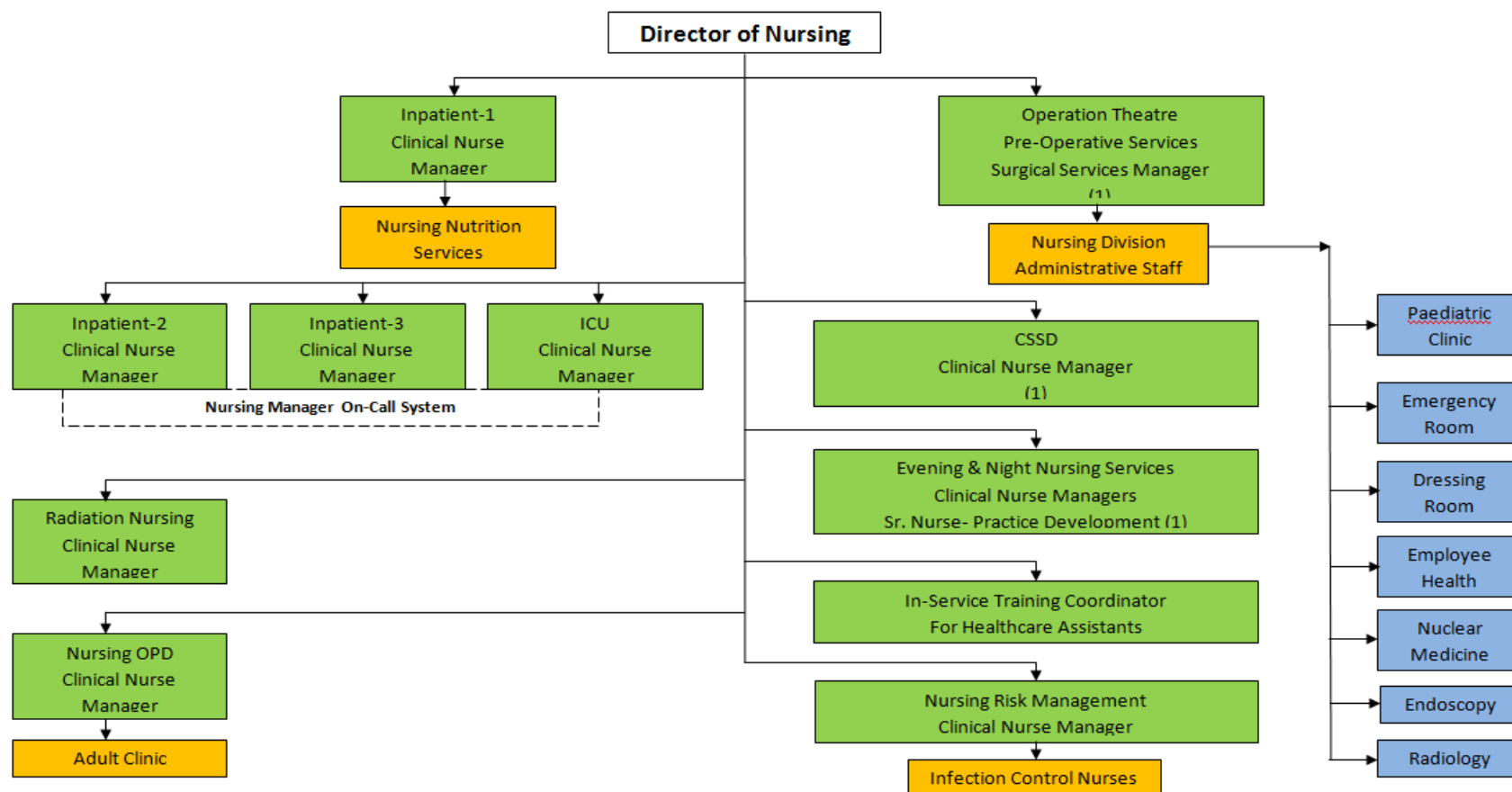
APPENDIX 1



APPENDIX 2

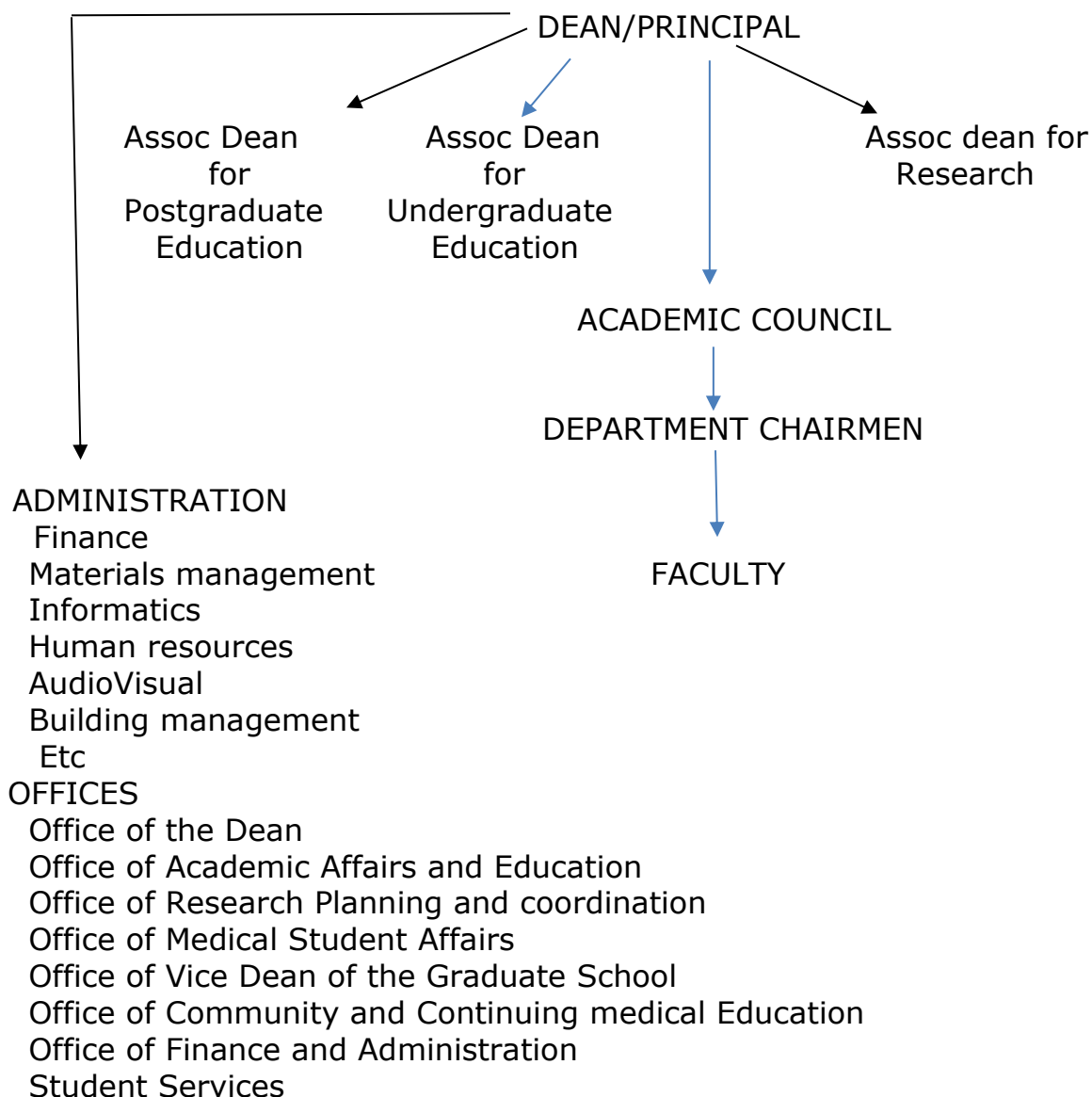


APPENDIX 3



APPENDIX 4

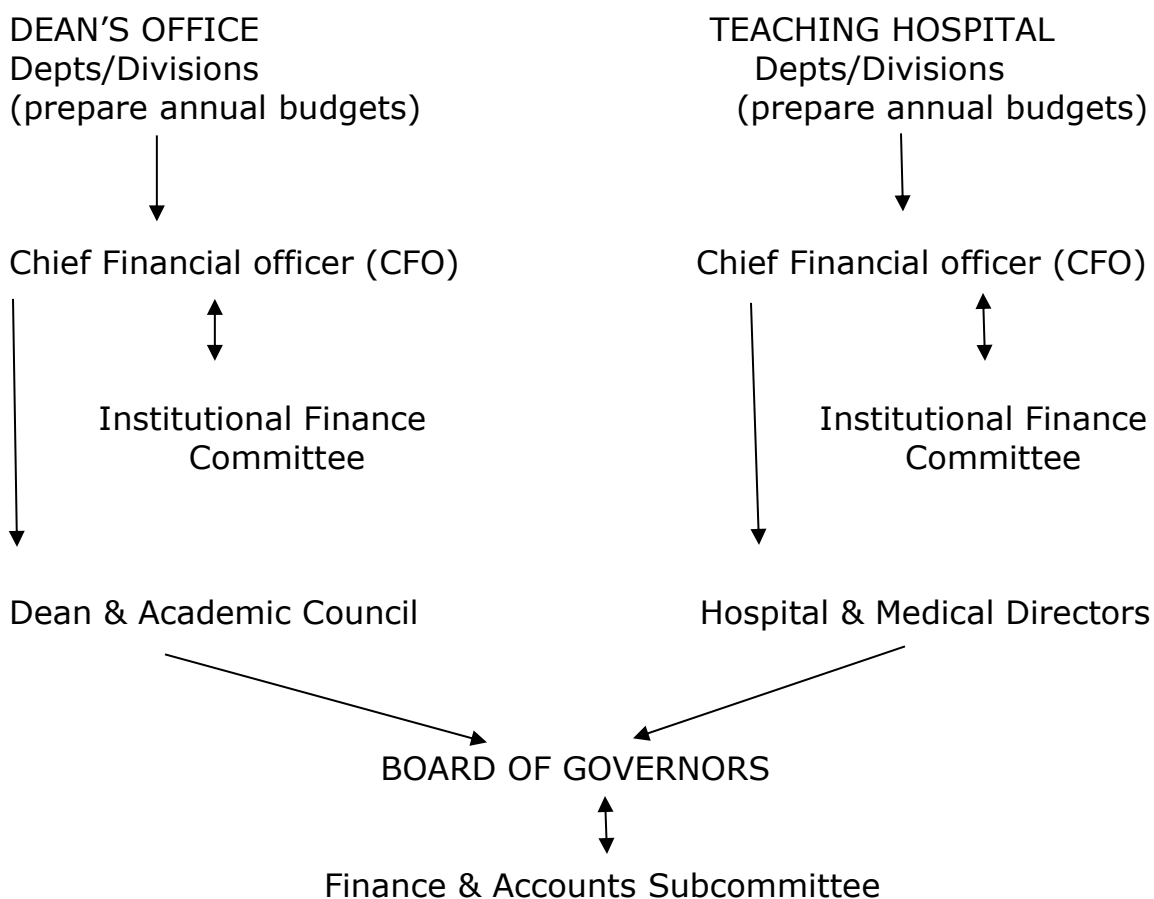
ORGANISATIONAL STRUCTURE OF DEAN'S OFFICE



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 BUDGETARY PROCESS



APPENDIX 6: EMPLOYEE HANDBOOK – SEE ATTACHMENT

APPENDIX 8: MEDICAL STAFF BY-LAWS – SEE ATTACHMENT