



O/C

MEDICAL TEACHING INSTITUTION ABBOTTABAD
[AYUB MEDICAL COLLEGE-AYUB TEACHING HOSPITAL]
BOG SECRETARIAT



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No. BOG/MTI/2024/6720

Dated: 16-08-2024

NOTIFICATION

In pursuance of MTI Reformed Act 2015 Section 24 "Power to make regulations.---(1) s[Subject to clause (d) of sub-section (4) of section 4A,]" and 101st Board of Governors meeting dated 9-8-2024, next to Agenda item no. 02 "Draft MTI Regulations 2024 for review and approval".

The Board approved the MTI Regulations Aug-2024 with amendments to the draft with immediate effect. The approved regulations may be shared with the Policy Board for review and inputs.

The MTI Regulations (amended) Aug-2024 are to be replaced with the earlier MTI Regulations.

Secretary BoG
MTI(AMC/ATH)
Abbottabad

Copy to:

- Board of Governors MTI (AMC/ACD,ATH) Abbottabad
- Dean/CEO MTI Abbottabad
- Hospital Director MTI Abbottabad
- Medical Director, MTI Abbottabad
- Finance Director MTI Abbottabad
- Nursing Director MTI Abbottabad
- HR Manager AMC MTI Abbottabad
- HR Manager ATH-MTI Abbottabad
- In charge IT, ATH -MTI Abbottabad (for display at Official Website)
- In charge IT, AMC-MTI Abbottabad (for display at Official Website)

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REGULATIONS FOR MTI ABBOTTABAD
APPROVED BY THE BOARD OF GOVERNORS

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REGULATIONS FOR MTI ABBOTTABAD

THE BOARD OF GOVERNORS

Medical Teaching Institutions Act 2015, as Amended, 2024

Short title, application and commencement.

- (1) These regulations will be called the Medical Teaching Institutions Regulations, 2020, amended 9th of August, 2024.
- (2) They shall come into force at once.

REGULATIONS

1. BOARD OF GOVERNORS

- a) There will be a Board of Governors as per section 5(1) of the MTI act 2015 shall administer and manage its affair and shall have overall superintendence and control over the functions and all matters of the Medical Teaching Institution.
- b) The conduct of business of Board of Governors shall be as prescribed and as given under section 6 of the MTI Act 2015, E&D regulations 2023 in line with Conduct of business Regulations 2024 and similar the functions and power of the Board are as prescribed under MTI Act 2015 section 7 (a) (b) (c) (c-i) (d) (e) (f) (g) (h) (i) (j) (k) (l) (2) (2A) (3) (4) (5).
- c) All the decisions of the Board shall be taken by consensus in case of divided opinion the decision will be taken by majority of vote. However, in case of equality of votes the Chairman BoG shall have a second or casting vote, that is either the Chairman will cast his vote in favor or otherwise.
- d) The Board will ensure adherence to the minimum qualification standards for all posts in the Medical Teaching Institutions as prescribed under the law and under the MTI Act 2015, rules, regulations, Policy Board advise; provided that the Board may enhance such minimum qualification of merit at their discretion.
- e) The Board will meet at least every 3 months and more frequently if the Board deems necessary to carry out its responsibilities and duties.

- f) That each Board meeting will continue until all essential agenda items have been satisfactorily resolved.
- g) That Board meetings will be attended by the Hospital and Medical Directors, the Dean/CEO, Finance Director 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.
- h) That the Finance Director will make a presentation of the Annual Financial Report to the Board once a year or as and when require, and will also attend the budget meetings of the Board.
- i) That any executive or any other co-opted member who, under compelling circumstances, cannot attend any meeting of the Board will require prior approval of the Board, with a written explanation sent to the Board at least five days prior to the meeting.
- j) That any employee of the Institution may submit application to the Board in writing with evidence with a cogent reason through the respective executive only. The Board may approve or disapprove the request
- k) The Board will complete the review of the annual Institutional budget and forward the same to Government by 31st March of each year.
- l) The Board may delegate to the Medical Director, Hospital Director, Nursing Director, and Dean the recruitment of all personnel under their respective authorities under the prescribed regulations made there under and approved by the BOG and all Rules and Regulations will be followed in all the said appointments and the principles of transparency, fairness, and equity and seniority cum fitness will be followed.
- m) That all appointments made thereafter by the Dean, Hospital Director, Medical Director, Nursing Director will be finalized after approval of the BOG and all such faculty will be subject to review by the Board.

- n) The Board may constitute an Executive Committee, Finance Committee, and such other committees or sub-committees as it may deem appropriate, as provided under MTI Act 2015.
- 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.
- s) The Board will review, grant approval and oversee the implementation of annual work plans of Dean/CEO for AMC, Hospital Director (non-clinical), Medical Director (clinical), Nursing Director (nursing division) & Finance Director (Finance Department both AMC & ATH).
- t) The Board will review performance of each Executives against their functions and responsibilities by the end of each quarter and its progress will be assessed as per targets specified by the Board as mentioned in his contract agreement and his progress report will be part of his/her personal file.
- u) The Board will specify targets for all Executives whose progress will be assessed regularly and achievements of Executive will be recorded in file.
- v) Annual Performance Evaluation Report of Executives will be done by the Board.
- w) Officiating Executive will be appointed for a period of three (03) months amongst AMC/ACD, ATH employees/academic faculty staff as per Section 7(4) of MTI Act-2015.
- x) That in case no appointment of Executive is made with in prescribed period of 03 months due to any reason what so ever then the Board has the power to extend the period of officiating appointment for Three (03) months or till the appointment of full time executive.

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 of acceptance indicating their full understanding of Institutional Code of Conduct, rules and regulations of Institution and MTI Act/Rules/Regulations, receipt of a copy of the Employee Handbook, and their understanding of the same and abiding by these.
- e) All employees shall ensure adherence to the MTI Act 2015, as well as any rules, regulations, and staff guidelines established therein.
- f) All employees will be handled in accordance with the Efficiency & Disciplinary Regulations - 2023 in the event of inefficiency, misconduct, abuse of authority, fraud, corruption, or other disciplinary matter.
- g) For all new appointments there will be a probationary period from 01 year and extendable till decision made otherwise.
- h) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts until and unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.
- i) That in case a candidate does not join within the prescribed given time of at least seven days then the next candidate will be called for appointment and in case he / she does not also join then the next on merit list will be called for interview and in case none of the said candidates join within the prescribed time or due to any other reason then candidates from within the waiting list as per merit will be

called and in case there are no candidates on the waiting list then the said post will be re-advertised.

- j) **Age limit for Executive position:** The maximum age limit to apply for an Executive position is 65 years as at the last date of application mentioned in the advertisement. Institutional employees who have at least 5 years of service remaining until their retirement date may apply for any Executive post
- k) **Aged limit for recruitment:** Professor (BPS-21, IPS-9) 50yrs, Associate Professor (BPS-20, IPS-8) 45yrs, Assistant Professor (BPS-19, IPS-7) 45yrs, Lecturer (BPS-17, IPS-5) 40yrs, Doctors (BPS17 -IPS-5) 35 yrs, Specialty/Senior Registrar (BPS-18, IPS-6) 40yrs, Nurses (BPS-16, IPS-4) 35 yrs, Paramedics (BPS-12, IPS-2) 30yrs, Senior Manager HR & Senior Manager Maintenance (BPS-19, IPS-7) 45 yrs, all Managers positions (BPS-18, IPS-6) 35 to 45yrs, Manager Quality Assurance (BPS-18, IPS-6) 35 to 50 yrs, Assistant Manager HR (BPS-17, IPS-5) 30-35 yrs, HR Officer (BPS-16, IPS-4) 35-40yrs, DD F&P (BPS-18, IPS-6) 32-40yrs, IT position above (BPS-16, IPS-4) 35yrs, IT positions below (BPS-16, IPS-4) 30yrs, Maintenance staff (BPS-7, IPS-2) 30yrs, Clerical staff (BPS-11, IPS-2) 30yrs, Biochemist (BPS-17, IPS-5) 32yrs, Health Educator (BPS-17, IPS-5) 32 yrs, Pharmaceuticals Chemist (BPS-17, IPS-5) 32yrs, Bacteriologist (BPS-17, IPS-5) 32 yrs, Security Officer (BPS-18, IPS-6) 50yrs, Accounts Officer (BPS-17, IPS-5) 32 yrs, Librarian (BPS-17, IPS-5) 32yrs, Warden (BPS-17, IPS-5) 32yrs, Clinical Technologist (BPS-17, IPS-5) 35 yrs, Director Physical Education (BPS-17, IPS-5) 32 yrs, Electro medical Supervisor (BPS-16, IPS-4) 32 yrs, Procurement Officer (BPS-17, IPS-5) 40 yrs, Civil Engineer (BPS-17, IPS-5) 35 yrs, Office Assistant (BPS-16, IPS-4) 32 yrs, Video Operator (BPS-16, IPS-4) 32 yrs, Hygienist (BPS-14, IPS-3) 32 yrs, Clinical Technician (BPS-12, IPS-2) 32 yrs, Photographer (BPS-11, IPS-2) 32 yrs, Electro medical Technician (BPS-11, IPS-2) 32 yrs, PET (BPS-11, IPS-2) 32 yrs, Sub-Engineer (BPS-11, IPS-2) 32 yrs, Store Keeper (BPS-11, IPS-2) 32 yrs, Hostel Superintendent (BPS-11, IPS-2) 32 yrs, Security Supervisor (BPS-11, IPS-2) 45 yrs, Artist (BPS-11, IPS-2) 32 yrs, House Keeper (BPS-11, IPS-2) 30yrs , Imam Masjid (BPS-9, IPS-2) 45yrs, Projectionist (BPS-8, IPS-2) 35 yrs, Telephone Operator (BPS-7, IPS-2) 30 yrs, Class-IV (IPS-1) 40 yrs

Positions listed in this section shall be subjected to criteria approvals granted by BoG,

- i. The Management Committee (MC) has the discretion to request the Board to fix specific age limits for any position as per the institution's needs and requirements as the case may come from time to time.
 - ii. The age of superannuation for all positions regular and contractual are fixed at 60 years.
- l) The Appointing Authority (i.e. Executive) has the discretion to grant age relaxation of up to 2 years based on the candidate's experience, qualifications, performance during the interview or test, the importance of the position in question, or shortage of human resources.
- m) The Board of Governors has full authority to grant age relaxation in accordance with the Policy of the Government of Khyber Pakhtunkhwa.
- n) After appointment, if it comes to the knowledge of Board/ respective competent authority, that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.
- o) MTI Employee on acting/officiating charge on a position will not be eligible to apply for any advertized position until and unless he/she resigns from the position before applying.

3. BOARD/COMMITTEE MEETINGS

- a) All members attending Board or Management 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 prescribed under section 10 (1) (2) of the Act *ibid*.

- a) The qualifications and experience for the post of Hospital Director shall be as prescribed under Section 10 (2) of the Act *ibid*. The Hospital director will have a

minimum experience at management level positions of at least 5 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) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts. Until or unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.
- c) After appointment if it comes to the knowledge of Board/ respective competent authority that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.
- d) The Hospital Director will be selected and appointed by the Board for a term of 5 years through a Selection Board, and shall be eligible for reappointment at the discretion of the Board based upon its overall performance and so documented by the Board, provided that no Board member shall be appointed as Hospital Director, no person may serve as Hospital Director for more than two terms.
- e) The minimum qualification for the appointment of Hospital Director will be at least Level-I Qualification with a Master Degree in Public Health, or any other Post Graduate Degree in Health Management Sciences or Hospital Management recognized by PM&DC or HEC.
- f) The method of appointment will be as prescribed under Section 10 (1) of the Act: A selection committee of six members will be appointed by the Board consisting of appropriately qualified individuals including
 - (i) Two senior level consultants or professors from within the Medical Teaching Institution and as special case one senior retired professors from the medical profession.

- (ii) Two heads of a non-medical department from the finance, or other hospital administrative units.
 - (iii) One reputable person who may be a member from the civil society.
 - (iv) The Board will select a chairman of the committee from amongst the members of the selection committee.
- g) The Committee will make its selection and recommendation based on merit, and in a fair and transparent manner after fulfilling the prescribed procedure as laid down hereunder:
- h) 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 Board may direct to advertise the said position of Hospital Director in International journals / media if it so required.
- i) The selection committee will draw up a short list of candidates as per merit for interview; at least three candidates will be interviewed. In case there are lesser number of candidates than three than in that case the said post will be re-advertised.
- j) 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
- k) The Board may then choose to appoint another person meeting the criteria in (c) above.
- l) That the selection Board / committee will then present a list of three short listed candidates in order of preference to the Board for final approval.
- m) Hospital Director shall have no right to do private practice.
- n) The functions, responsibilities and requirements of the Hospital Director will be as prescribed under section 11 (a) (b) (c) (d) (e) (f) of the Act *ibid* and further elaborated hereunder:

- o) The Hospital Director is responsible for reviewing, creating, supervising and monitoring the annual work plans and activity schedules of non-clinical departments, ensure that they are adhered to.
- p) Hospital Director can be removed from the office by the Board, before the expiration period of FIVE years, at any time on any grounds which falls within the E&D Regulations 2023 or any other ground of misconduct, or not achieving targets set by the Board or such grounds as may be prescribed. That further the Board may also remove the Hospital Director without assigning any reasons by giving him one month notice or one month pay thereof.
- q) The hospital director is responsible for creating the Ayub Teaching Hospital's annual work plan for each fiscal year and submitting it to the board for approval.
- r) The hospital director will make sure that all administrative and HR tasks for the staff are carried out in accordance with Section 2 of these regulations.

Pre-interview Mark Sheet - Hospital Director

Criteria	Scoring Guide	Max. Score	Candidates Score
PRE-INTERVIEW INFORMATION			
1- QUALIFICATION			
A) Educational requirements	Level -I MBBS along with recognized Master's Degree in Hospital Management, Health Services Management, Business Management, Public Health, Public Administration or Hospital Management or any other relevant management qualification- minimum requirement so no score		
B) Post graduate medical qualification	Candidates having Post graduate medical qualification or Master's degree specific to hospital management or hospital administration will get 05marks	05	
C) Additional Education or qualification	Must be a recognized additional qualification which is pertinent to the professional role such as human resource management, financial management and budgeting, procurement and material management, facilities management. Qualification must be recognized by PMDC or HEC.	05	
2. EXPERIENCE			
	A minimum of five years' experience at management level positions in health care will be required- minimum requirement so no score		
	Experience of working as head of a tertiary care and/or teaching hospital with 500+ beds such as Hospital Director, Medical Superintendent, CEO, Commandant 3 marks each year up to a maximum of 30marks		
	Experience of working on a second in command position such as Deputy Hospital Director, Deputy Commandant, Deputy Medical Superintendent of a tertiary care and/or teaching hospital with at least 500 beds 1.5 marks each year up to a maximum of 15 marks		

Total Experience marks are 30 ,a candidate may score varying marks in each category as per defined criteria and maximum score limits		30	
3. RECOGNITION OF EXCELLENCE	Awards from Professional Societies		
a) National		2	
b) International		3	
4.Presentations	Presentations pertaining to hospital functions in an international forum (3 marks per presentation) or in a national forum (0.5 marks per presentation). Proof of invitation and presentations must be provided	05	
SUB Total of Pre-interview		50	

5. MEDICAL DIRECTOR

- a) The Medical Director will be selected and appointed by the Board for a period of five years, renewable for 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 two terms.
- b) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts. Until or unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.
- c) After appointment if it comes to the knowledge of Board/ respective competent authority that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.
- d) The Medical Director, on appointment, shall simultaneously receive a faculty appointment at a level commensurate with his qualifications and the prescribed Institutional requirements for the faculty post, which appointment shall not be limited to the term applicable to the office of the Medical Director.

- e) The Medical Director shall possess a recognized Medical Degree with management or administrative experience in management positions in a Health institution or organization as may be prescribed by the Board & having level III qualification as per PM&DC criteria.
- f) Candidates will have a record of excellence in clinical care, and have a minimum of five years and maximum seven years experience in leading a major hospital clinical unit or any other 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.
- g) A selection committee comprising of 04 members will be appointed by the Board consisting of appropriately qualified individuals including:
 - (i) One senior level consultant or professors from within the Medical Teaching Institution and in special case one senior retired professors from the medical profession.
 - (ii) One head of a non-medical department from the finance, or other hospital administrative unit.
 - (iii) One reputable person who may be a member from the civil society
 - (iv) Board will select a chairman of the committee from amongst the members of the selection committee.
- h) The Committee will make its selection and recommendation based on merit, and in a fair and transparent manner after fulfilling the prescribed procedure as laid down hereunder:
 - i) 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.
 - j) That at least three candidates will be short listed as per merit from amongst the candidates for interview, and thereafter the said short listed candidates after interview will be sent for final approval to the Board of Governors.

- k) That in case a candidate does not join within the prescribed given time of at least seven days then the next candidate will be called for appointment and in case he / she does not also joined then the next on merit list will be called for interview and in case none of the said candidates join within the prescribed time or due to any other reason than candidates from within the waiting list as per merit will be called and in case there are no candidates on the waiting list then the said post will be re-advertised.
- l) 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
- m) The Board may then choose to appoint another person meeting the criteria in (b) above
- n) The short listed candidates will then be presented for final approval from amongst the said three candidates as per merit 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.
- o) Medical Director can be removed from the office by the Board, before the expiration period of FIVE years, at any time on any grounds which falls within the E&D Regulations 2023 or any other ground of misconduct, or not achieving targets set by the Board or such grounds as may be prescribed by the Board. That further the Board may also remove the Medical Director without assigning any reasons by giving him one month notice or one month pay thereof.
- p) The functions, responsibilities and requirements of the Medical Director will be as prescribed under section 13 of the Act and further elaborated in the Regulations.

- q) The Medical Director is responsible for reviewing, creating, supervising, and monitoring the annual work plans and activity plans of the clinical departments, as well as ensuring adherence to them.
- r) The Medical Director is responsible for creating the Ayub Teaching Hospital's Annual Work Plan for Clinical Activities for each fiscal year and submitting it to the Board for approval.
- s) Medical Director must do Institutional based private practice.

Pre- Interview Mark Sheet-Medical Director

Criteria	Scoring Guide	Maximum Score	Candidate's Score
PRE INTERVIEW INFORMATION			
EDUCATION & QUALIFICATION			
A) Basic medical education	MBBS in minimum requirement, so no score for MBBS		
B) Post graduate medical qualification	Recognized level III or equivalent by PMC, minimum requirement so no score for this		
C) Additional Education or qualification	Must be a recognized additional qualification or training which is pertinent to the professional role 03 Marks for any Level III additional qualification	6	
2. EXPERIENCE	Experience has to be for leading a unit (division, department or program) in a recognized teaching hospital, up to five years in minimum requirement, so no score is given up to five years		
	1 mark for each full year above the baseline requirement of 5 years	20	
3. Research			
D) Publications	Credit for 1 st /corresponding author only, as below a) 5 marks for papers in recognized journals with impact factor more than 1.0 b) 2 marks for journals with impact factor between 0.5 and 1.0 c) 0.5 marks for journals with impact factor between 0.5-1.0 d) 0.25 marks for journals in the PMDC or HEC list, excluding the ones noted above.	12	
E) Presentation	At national or international professional society meeting	1	
F) Journal editor	Journals	1	
4. TEACHING			
a) Undergraduate	If candidate is a teacher of undergraduate students	2	
b) Post graduate	If candidate is a teacher of postgraduate students	3	
c) CPSP Supervisor	Must provide CPSP Supervisor Certificate	3	
5. RECOGNITION OF EXCELLENCE	Membership or awards from Professional Societies		
d) National		1	
e) International		1	

SUB Total of Pre-interview		50	
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6. DEAN/CEO

The Board shall appoint a Dean for the Medical College for a period of five years, renewable for 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 Dean for more than two terms.

- a) The Dean will be a medical academic.
- b) That the minimum criteria for the appointment of Dean will be as prescribed by the PM&DC which is as follows;
 - i. MBBS or equivalent qualification.
 - ii. Level-III qualification like FCPS or other equivalent qualification in clinical subjects and PhD in Basic Science Subjects.
 - iii. Should have been a professor for at least seven years in a recognized medical institution.
 - iv. Should have at least seven years administrative experience as head of department, unit program or institution with recognized leadership qualities, a track record in teaching, and a commitment to medical education and research.
 - v. Should have at least twenty publications in PM&DC and HEC recognized journal, out of the total twenty publications five should be during his tenure as professor.
- c) The Board will constitute a Selection Committee for the appointment of Dean of at least 8 members, consisting of;
 - (i) at least four from amongst the senior professors 2 from clinical site and 2 from basic sciences.
 - (ii) a non-clinical senior representative of at least Grade 20 from the Hospital, designated by the Hospital Director or the Hospital Director himself.

- (iii) Nursing Director.
 - (iv) Two reputable person's who may be a retired senior civil servant or senior retired armed services officer or a recognized philanthropist or reputable member of civil society and one member of legal fraternity., as per the directions of BOG MTI.
 - (v) 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.
 - (vi) 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.
- d) The method of appointment will be as prescribed under Section 10 (1) of the Act: A selection committee will be appointed by the Board consisting of appropriately qualified individuals including
- e) A senior level consultant or professors from within the Medical Teaching Institution or in special case senior retired professors from the medical profession.
 - f) The head of a non-medical department from the finance, or other hospital administrative unit.
 - g) A reputable 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.
 - h) The Board will select a chairman of the committee from amongst the members of the selection committee.
 - i) 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:

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 Board may direct to advertise the said position of Dean in International journals / media if it so required.

- j) The selection committee will draw up a short list of candidates as per merit for interview; at least three candidates will be interviewed. In case there are lesser number of candidates than three than in that case the said post will be re-advertised.
- k) 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
- l) The Board may then choose to appoint another person meeting the criteria in (c) above.
- m) That the selection Board / committee will then present a list of three short listed candidates in order of preference to the Board for final approval.
- n) Simultaneously with his appointment as Dean, the selectee will also receive a faculty appointment at the appropriate level (full professor) in a department appropriate to his specialty, which appointment shall not be limited to the term applicable to the office of the Dean/CEO.
- o) Dean/CEO can be removed from the office by the Board, before the expiration period of FIVE years, at any time on any grounds which falls within the E&D Regulations 2023 or any other ground of misconduct, or not achieving targets set by the Board or other such grounds as may be prescribed by the Board. That further the Board may also remove the Dean/CEO without assigning any reasons by giving him one month notice or one month pay thereof.
- p) The selection of the Dean should be based on recommendation of majority members of the Selection committee as per merit.

- q) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts. Until or unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.
- r) After appointment if it comes to the knowledge of Board/ respective competent authority that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.

7. FUNCTIONS AND DUTIES OF THE DEAN

- i) The Dean will be Head of the Medical College and will also under section 9-A of the MTI Act 2015 will be Head of the Management Committee and will also 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 the medical school and its functions as Principal Accounting Officer for AMC.
- iii) That as per section 9-B (7) the Board from amongst the chairperson shall appoint a Vice Dean to perform the functions of the Dean in the absence of the Dean.
- iv) The Dean will also 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 or Vice Dean or Associate Dean.
- v) That Vice Dean in absence of Dean will act as a Dean and will have all the powers necessary to run day to day affairs of the medical college and institute and will also be the Associate Head of administration and will look after all the problems related to administration.

- vi) The Associate Dean for Postgraduate Medical Education will represent the Institution at the Postgraduate Medical Education Institute (PGMD) and will look after the affairs of postgraduate Medical education in consultation and approval of Dean and in his absence from the Vice Dean.
- vii) The Dean will select an Associate Dean for Research and final approval of the same will be given by the Board.
- viii) **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 Medical School departments plus 2 faculty members elected by the faculty one each from the basic and clinical science faculties - plus the Vice Dean & Associate Deans. In MTIS with affiliated Institutes, the head of the relevant Institute, by whatever title, will be a member of the academic council.
- ix) The Dean will act in all clinical matters in close liaison with the Hospital and Medical Directors.
- x) **The Dean as Chief Executive Officer:** Notwithstanding anything contrary to provisions of the act, the Dean as Chief executive Officer will act as the deciding authority on matters referred by the respective HD, MD, DN, DF or directors of affiliate Institutes. He/ she will also ensure resolution of any disputes amongst the directors of the concerned Institute.
- xi) That as per section 9-B(4) The chairpersons of various departments for Medical Institutions shall be appointed by the Dean, from amongst the medical faculty on such terms and conditions and in such a manner as may be prescribed by the Board. A chairperson may be removed by the Board on the recommendation of the Dean and similarly under section 9-B(5) the Dean may be removed from the office by the Board, before the expiration of the period of five (5) years, at any time on such grounds as may be prescribed including failure to achieve targets set by the Board and similarly vide 9-B(6) in the performance of functions, the Dean shall be responsible to the Board and the

chairpersons of the department shall be responsible to the Dean and Academic Council.

- xii) That the Board on any count can remove the Dean by giving him one month notice or one month pay thereof.
- xiii) The Dean/CEO is responsible for reviewing, creating, supervising, and monitoring the annual work plans and activity plans of the departments, as well as ensuring adherence to them for Ayub Medical College.
- xiv) The Dean/CEO is responsible for creating the Ayub Medical College's Annual Work Plan for each fiscal year and submitting it to the Board for approval.

Pre- Interview Mark Sheet Dean/CEO

Criteria	Scoring Guide	Maximum Score	Candidates Score
PRE-INTERVIEW INFORMATION			
EDUCATION & QUALIFICATION			
A) Basic medical education	MBBS in minimum requirement, so no score for MBBS		
B) Post graduate medical qualification	Recognized level III or equivalent by PMC, minimum requirement so no score for this		
C) Additional Education or qualification	Must be a recognized additional qualification or training which is pertinent to the professional role 03 Marks for any Level III additional qualification	6	
2. EXPERIENCE	Experience has to be for leading a unit (division, department or program) in a recognized teaching hospital, at least seven years is minimum requirement.		
	1 mark for each 1st seven years 1.5 marks for each full year above the baseline requirement of 07 years' experience.	25	
3. Research			
D) Publications	Credit for 1 st /corresponding author only, as below a) 3 marks for papers in recognized journals with impact factor more than 1.0 (total not more than 15) b) 2 marks for journals with impact factor between 0.5 and 1.0 c) 3 marks for journals with impact factor between 0.5-1.0 d) 3 marks for journals in the PMDC or HEC list, excluding the ones noted above.	10	
D) Presentation	At national or international professional society meeting (must produce invitation to present and presentation).	2	
E) Journal Reviewer	Journal must be indexed or recognized by HEC, PMDC or CPSP	1	
4. TEACHING			
a) Post graduate	If candidate is a teacher of postgraduate students	3	

b) CPSP Supervisor	Must provide CPSP Supervisor Certificate	3	
SUB Total of Pre-interview		50	

8. NURSING DIRECTOR

- a) The Nursing Director will be appointed by the Board for a term of 5 years which may be renewed by the Board at their discretion, for a further term, provided that no Board member shall be appointed as such. 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 two terms.
- b) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts. Until or unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.
- c) After appointment if it comes to the knowledge of Board/ respective competent authority that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.
- d) 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.
- e) The Board will constitute a selection committee, with the Medical Director as chairman, Including the Hospital Director, a representative of the Dean, not less than the level of Associate Professor plus one Medical Consultant

of Grade-20 and one reputable person from civil society or legal fraternity, to recruit and recommend a suitable candidate to the Board for the position of Nursing Director.

- f) Nursing Director can be removed from the office by the Board, before the expiration of contract period, at any time on any grounds which falls within the E&D Regulations 2023 or any other ground of misconduct, or not achieving targets set by the Board. That further the Board may also remove the Nursing Director without assigning any reasons by giving him one month notice or one month pay thereof.
- g) The Selection Committee will follow the same procedure as given under section 14 (1, 2, 3, 4, 5, 6, 7, 8) of the MTI Act 2015.

9. FUNCTIONS AND DUTIES OF THE NURSING DIRECTOR

- a) The Nursing director will report to the Board as prescribed under section 14 (5) (6) (7) (8) of the MTI Act 2015.
- b) The responsibilities of the Nursing Director will be as prescribed under section 14 (7) of the MTI Act 2015.
- c) The Nursing Director is responsible for reviewing, creating, supervising, and monitoring the annual work plans and activity plans of the Nursing Division, as well as ensuring adherence to them.
- d) The Nursing Director is responsible for creating the Nursing Division's Annual Work Plan for each fiscal year and submitting it to the Board for approval.

Pre- Interview Mark Sheet - Nursing Director

Criteria	Scoring Guide	Maximum Score	Candidate's Score
PRE-INTERVIEW INFORMATION			
EDUCATION & QUALIFICATION			
A) Basic Nursing Education	Diploma in Nursing is a minimum requirement, so no score		
B) Bachelor's Degree in Nursing	Nursing (BScN),	5	

C) Master's degree in nursing	MScN/MA	10	
2. EXPERIENCE	Experience has to be for heading a unit (division, department or program) in a recognized hospital Up to seven years administrative and teaching experience, and Current Nursing Registration		
	1 mark for each full year above the baseline requirement of 7 years, up to a maximum of 10 years	10	
3. Research			
D) Publications	Credit for 1 st /corresponding author only, as below a)5 marks for papers in recognized journals with impact factor >1.0 b)2 marks for journals with impact factor >0.3 <1.0 c) 0.5 marks for journals with impact factor >0.1 <0.3 d)0.25 marks for journals in the PMDC or HEC list, excluding the ones noted above.	10	
E) Presentation	At national or international professional society meeting	2	
F) Journal editor	Journals must be indexed or recognized by HEC, PMDC or CPSP	2	
G) Journal Reviewer	Journal must be indexed or recognized by HEC , PMDC or CPSP	2	
4. TEACHING			
a) Undergraduate	If candidate is a teacher of undergraduate students	1	
b) Post graduate	If candidate is a teacher of postgraduate students	2	
c) Teaching awards	To be counted, the award must be based on documented formal student feedback	3	
5. RECOGNITION OF EXCELLENCE	Membership or awards from Professional Societies		
d) National		1	
e) International		2	
SUB Total of Pre-interview		50	

10. FINANCE DIRECTOR

- a) A Finance Director will be appointed for a term of 3 years and shall be eligible for re-appointment at the discretion of the Board.
- b) No candidate will be considered against whom any departmental proceedings, criminal proceedings are pending or he has been convicted or he is found involved in corrupt practices, concealment of facts. Until or unless he has been cleared from the appropriate forum as per law, rules and regulations applicable there in.

- c) After appointment if it comes to the knowledge of Board/ respective competent authority that appointee has concealed relevant facts/major facts and manipulated his appointment by concealing these facts or any employee found disobedience of BoG decisions/rules/regulations/law, then the Board/ respective competent authority will review his appointment and act as per MTI E&D regulations.
- d) The Board will appoint a selection committee headed by a chairman, who will be appointed by the Board, and will include, Medical Director, the Dean and a reputable person with experience in financial matters and one reputable person from civil society or legal fraternity, to recruit a Finance Director to head the Finance Department of the institution.
- e) The Finance Director shall be:
 - i. A chartered accountant with 5 years' post qualification experience in major private or public finance and/or accounts in a company/institution OR
 - ii. Or 8 years of ICMAP certification or a master's degree in finance or accounts, recognized by the HEC with 08 years' post qualification experience in finance and/or accounts in a major private or public company/institution.
- f) Recruitment will be by a transparent process of public advertisement and evaluation as prescribed under MTI Act 2015 and rules regulations.
- g) Finance Director can be removed from the office by the Board, before the expiration period of FIVE years, at any time on any grounds which falls within the E&D Regulations 2023 or any other ground of misconduct, or not achieving targets set by the Board. That further the Board may also remove the Finance Director without assigning any reasons by giving him one month notice or one month pay thereof.

11. 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 Management Committee see Regulation 12, 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.
- (ix) The Finance Director is responsible for reviewing, creating, supervising, and monitoring the annual work plans and activity plans of the Finance departments of AMC & ATH, as well as ensuring adherence to them.
- (x) The Finance Director is responsible for creating the Financial/finance Department's Annual Work Plan for each fiscal year and submitting it to the Board for approval.

Pre Interview Mark Sheet - Finance Director

Criteria	Scoring Guide	Max. Score	Candidates Score
PRE-INTERVIEW INFORMATION			
1- QUALIFICATION			
A) Educational requirements	a chartered accountant OR • have ICMAP certification or a master's degree in finance or accounts- minimum requirement so no score		
B) Additional Education or qualification	Must be a recognized additional qualification in the field of Finance & Accounts	06	
2. EXPERIENCE	CA with 5 years' post qualification experience in finance and/or accounts in a major private or public		

	company/institution OR • have ICMAP certification or a master's degree in finance or accounts with 8 years of experience- minimum requirement so no score		
	Finance & Accounts Experience above the eligibility requirement 01 marks each year up to a maximum of 15marks	15	
	Experience of working in a tertiary care hospital or well reputed public or private institution as Head of Finance Department etc 3 marks each year up to a maximum of 15 marks	15	
	Experience of working in a tertiary hospital or well reputed public or private institution as Dy. Head of Finance Department etc 1.5 marks each year up to a maximum of 9 marks	9	
Total Experience marks are 39 ,a candidate may score varying marks in each category as per defined criteria and maximum score limits		39	
3. RECOGNITION OF EXCELLENCE	Awards from Professional Societies National or international	02	
4.Presentations	Presentations pertaining to Finance & Accounts functions in a National or international	03	
SUB Total of Pre-interview		50	

For All Executive Positions, Applications will be submitted to Board, In charge HR ATH & AMC shall assist Secretary BoG for processing the recruitment.

12. MANAGEMENT COMMITTEE

A management committee will be formed for the overall coordination of the Institution. The management committee will be chaired by the Dean/CEO and includes:

- i. The Hospital Director
- ii. The Medical Director
- iii. The Finance Director
- iv. The Nursing Director
- v. Two persons nominated by the Board on the recommendation of the Dean.

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 month or more frequently if the committee or the Board deem necessary.

- c) The committee will review the overall performance of the institution Implement processes to streamline departments, preventing duplication and ensuring the most efficient and functions across departments, preventing duplication and ensuring the most efficient and cost-effective function.
- d) Subject to delegation of powers by the Board, appoint or terminate any and all employees of a Medical Teaching Institution in accordance with the rules and regulations framed under this Act.
- e) Review and recommend for approval to the Board, the annual budget, strategic plan, operational plan for the Medical Teaching Institution, as prescribed by regulations.
- f) Review, recommend and approve annual work plans submitted by the Departmental Chairpersons of all the departments of the MTI(AMC,ATH) to the Board.
- g) Review and recommend the Coordinate efforts to ensure achievement of the base standards.
- h) Submit a quarterly report on management, health care services and financial management on a prescribed format to the Board.
- i) Recommend to the Board any addition of the department, facility or post at the Medical Teaching Institution; and
- j) Perform all such functions as may be specifically prescribed by the Board as per MTI Act, 2015 or the MTI Regulations thereof.
- k) The 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.
- l) 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 Medical College 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.

- m) Review and recommend for approval to the Board, the Annual Budget, Annual Work plans for the MTI (AMC,ATH).

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 may delegate authority to the Medical Director, Hospital Director and Nursing Director.

- a) Initial appointments of non-clinical positions for Ayub Teaching Hospital would be through selection committee and thereafter recommendations by the Hospital Director. The selection committee will be constituted by the Hospital Director and Management committee shall grant approval for the same.
- b) Initial appointments of clinical positions for Ayub Teaching Hospital would be through selection committee and thereafter recommendations by the Medical Director. The selection committee will be constituted by the Hospital Director and MC shall grant approval for the same.
- c) Initial appointments for Nursing Staff positions for Ayub Teaching Hospital would be through selection committee and thereafter recommendations by the Nursing Director with consultation of Medical Director & Hospital Director. The selection committee will be constituted by the Nursing Director and MC shall grant approval for the same.
- d) Within MTI - Ayub Medical College and Ayub Teaching Hospital, employees may be transferred based on the need for their services in a particular role and its availability.
- e) All employees, particularly those in the administrative or ministerial cadre at MTI (AMC, ATH), are subject to transfer or posting to another department that offers a suitable position equivalent to their current one after serving for no more than three years in one capacity irrespective of their appointed position.

1) Annual Performance Reports:

- a) That all ACRs of Clinical side will be signed by the Head of Department who will then forward it to the Chairperson, who will then after giving his comments send it to Medical Director, who then will counter sign the ACRs with comments and will send it to Dean/CEO.
- b) The ACRs of clinical consultants, including MOs, Junior Registrars, Registrars, pharmacy, paramedics will be signed by the HoD then to Chairperson and then to MD.
- c) The ACRs of Nursing staff will be signed by the Head, come and ten will be submitted to Nursing Director.
- d) The Annual Performance Reports of non clinical side will be signed by the HOD and will be sent to Hospital Director for ATH and Dean/CEO for AMC respectively

14. MEDICAL CONSULTANTS

- a) Only Medical faculty, duly recruited as in item 21, below, may be appointed as medical consultants to the Hospital.
- b) 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.
 - a. Such other Diplomas or equivalent qualifications as approved by the Pakistan Medical & Dental Council.
- c) At the Initiation of the Act, all medical consultants working at the Hospital will continue in their current positions.
- d) All medical consultant positions will be reviewed at least annually and their clinical privileges will be assessed by the Clinical Privileges Committee.
- e) All consultants/faculty members appointed under MTI Act 2015 must perform mandatory Institutional Based Private Practice within the Hospital premises. Private practice outside the Hospital premises shall be allowed in any capacity.

- f) All duties within the Hospital or otherwise, may be assigned accordingly by the Medical Director in consultation with the Dean and Department Chairpersons.
- g) Initial appointments of clinical and no clinical positions for Ayub Medical college and Ayub College of dentistry would be through selection committee and thereafter recommendations by the Dean/CEO. The selection committee will be constituted by the Dean and MC shall grant approval for the same.
- h) The Medical Director will submit the application to the Clinical Privileges Committee (CPC) for approval and assignment [see Regulation 14 (h)].
- i) 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.
- j) In the event of disagreement between the Medical Director and the Dean, the matter may be referred to the Board for a final decision.

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 and 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 7) with the membership and functions delineated therein.

16. CIVIL SERVANTS

- a) Before the commencement of the Khyber Pakhtunkhwa Medical Teaching Institutions Reform (Amendment) Act, 2018, all the civil servants serving in the

existing Medical Teaching Institution who opted for the employment of the Medical Teaching Institution shall be subject to terms and conditions of the employment as prescribed by the regulations including but not limited to their service structure, promotion, and disciplinary matter. Such opting employees shall be entitled to post-retirement benefits and emoluments as per existing government laws and rules. The Medical Teaching Institution shall deposit pension contribution on their behalf.

- b) Civil Servants who do not opt for absorption in the Medical Teaching Institution, so notified, shall be dealt with in such a manner as provided in section 11A of the Khyber Pakhtunkhwa Civil Servants Act 1973 for their future posting, which includes deputation to the Medical Institution subject to a request being made by the Board.

Provided that a civil servant working in a Medical Teaching Institutions, shall at all times be deemed to be on deputation. All documents made from the pay of such civil servants shall be deposited by the borrowing authority.

- c) A civil servant, at the request of the Board, may be sent on deputation to a Medical Teaching Institution by the Government. For all civil servants on deputation to the Medical Teaching Institution, pension contribution shall be made by the Medical Teaching Institution. The deputation of a civil servant to a Medical Teaching Institution may be terminated by the Board at any time without assigning any reason thereof and such servant's services shall revert to the Government immediately upon such termination being notified by the Board.
- d) After the commencement of this Act, if the provisions of this Act are applied to any newly established Medical Teaching institution within the meaning of section 3 of this Act, all the civil servants serving in such Medical Teaching Institution shall be dealt in a manner as provided in sub-section (3).
- e) A civil servant who opt to serve the Medical Teaching Institution shall cease to be civil servant from the date of his absorption in the service of the Medical Teaching Institution concerned and their seniority, pension and other matters vis-

a-vis employment in the Medical Teaching Institution, shall be determined in the manner, as may be prescribed by the Board.

- f) If at any time a Medical Teaching Institution reverts to Government for running under its own administration and management for any reason, the employees appointed under section (1) shall continue to serve the Medical Teaching Institutions, on the same terms and conditions as applicable to them immediately before such reversion.
- g) The deputation of a civil servant to a Medical Teaching Institution may be terminated by the Board at any time without assigning any reason thereof and such civil servants services shall revert to the Government immediately upon such termination being notified by the Board.
- h) Annual performance reports on all civil servants serving in the Institution will be completed as for other employees and placed in their records. These annual performance reports will be available to government for purposes of promotion, assignment or any other official activity.

17. PRIVATE PRACTICE

- i) Employees who opt for Institutional private practice may be entitled to such increase in salary, adjustment, bonuses or other ancillary benefits, as the Board may approve.
- ii) Employees, who do not opt for Institutional private practice within the premises of the hospitals, clinics, Imaging facilities and laboratories of the Medical Teaching Institution, shall not be entitled to any Increase and adjustment, incentives, bonuses or other ancillary benefits or administrative posts, which includes Dean, Hospital Director, Medical Director, Chairpersons or Head of Department, except in case of extraordinary need, as decided by the Board.
- iii) Consultant's professional fee shall not exceed the usual and customary fees charged for the same services in the community, assuring efficiency, and value for money to the clients.

- iv) Private patient billing shall consist of the professional fee component and the Institutional charges representing the charges of the clinic, imaging facility, laboratory services, or other Institutional charges. Provided that all patient billing shall be done only by the hospital, clinic, imaging facility, or laboratory, and the professional fee component shall be returned to the Consultant.
- v) No reduction of the professional component income to the Consultant from the patient shall be permissible by the Medical Teaching Institution.

18. GOVERNANCE STRUCTURE OF HOSPITAL

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

19. HOSPITAL EXECUTIVE COMMITTEE

- a) The Hospital Director will have a Hospital Executive Committee consisting of the Heads of all the departments under his authority, including Nursing (see Appendix 1).
- b) The Executive 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.

20. 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.

21. MEDICAL COLLEGE/SCHOOL

- a) The Medical college and faculty will function under the Dean, as shown schematically in Appendix 4.
 - b) That as per section 9B (7) of the MTI Act 2015 the Board from amongst the chairperson shall appoint a Vice-Dean to perform the functions of the Dean in the absence of the Dean.
 - c) The Associate Deans will be selected by the Dean for approval by the Board.
 - d) The Associate Dean for postgraduate education will:
 - i) represent the Institution on the joint induction committee of the PGMI and will also undertake any other duties at the PGMI assigned by the Dean.
 - ii) Oversee postgraduate medical education in the Institution and provide regular reports at 3 month Intervals to the Academic Council,
 - iii) Assist in the recruitment of trainee house staff for the Institution and other Institutions in Khyber Pakhtunkhwa
 - iv) Perform such other functions as prescribed by the Dean and Academic council.
 - v) The Dean, at the recommendation of the Academic Council, may abolish or add any functions to the Associate Dean for Postgraduate Education as they deem fit.
- d) APPOINTMENT OF TRAINING MEDICAL OFFICERS**
- (i) The PGMI may oversee the recruitment and training of trainee medical officers for the province of Khyber Pakhtunkhwa.
 - (ii) A joint Induction Committee comprised of Associate Deans of postgraduate education of all MTIS and headed by the CEO, PGMI, shall be constituted to oversee the process of induction.
 - (iii) That there will be an associate dean who will be over all in charge of the training medical officers (TMO) in respect of there over all supervision to the extent of MTI Abbottabad.

- (iv) The Medical Teaching Institution 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 & Thereafter will be distributed to the concerned department through head of unit who will then distribute TMOs as per the seniority of the faculty in the department.
- (v) All leaves of TMOs & MOs will be subject to the formal approval of the Head of Unit.
- (vi) that in case any of the TMO wants to transfer him/herself from the supervisor concerned to any other supervisor besides other legal requirements as per PGMI and CPSP, the concurrence the Head of unit will be mandatory

22. FACULTY

- a) The Board will delegate authority for recruitment and appointment of medical faculty, both basic science and clinical, to the Dean and Academic Council.
- 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 chairperson, with full justification and job description, indicating the level of the post (senior registrar, 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 PM&DC, 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.
- iii) For an approved post, the Human resources department will arrange to advertise as noted in Regulations 4 (e).

- iv) Suitable candidates will be invited for Interviews within the department by a selection committee constituted by the Dean consisting of Chairman of the concerned department and at least three senior most faculty members from a different departments nominated by the Dean.
- v) A reputable 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.
- vi) All reviewers will provide written comments on a prescribed standardized form.
- vii) The department chairman will select the candidate with advice of the selection committee.
- viii) 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.
- ix) The Dean will inform the Board and the academic council and send the appointment letter to the candidate.
- x) 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.
- xi) For all initial faculty appointments of Assistant Professors 20% will be from amongst the already serving employees fulfilling all the codal formalities for the position in BPS/IPS and 80% through initial recruitment on Institutional Pay Scale regulations. The institutional employee selected on Assistant Professor will have his service continuation, meanwhile his/her seniority amongst faculty will be counted from his/her appointment on new faculty position.

e) FACULTY PROMOTION

- (i) Faculty at the level of Senior Registrars, Assistant Professor or associate professor level will be considered for promotion as per Policy Board criteria for Faculty Board regulations (Appendix-8) Faculty Selection & Promotion Criteria Regulations for MTIs as amended by the Policy Board.

- (ii) The initial requirements for initial appointment at each level will be as recommended for that level by as decided by the Academic Council and the Board, provided that all promotions will be based entirely on merit and meet Policy Board faculty Selection & Promotion Criteria Regulations.
- (iii) The Initial decision to proceed with promotion or initial appointments 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 senior registrars, assistant and associate professors who have already served five or more years in the post to be considered for promotion as in Sub-Regulation (1).
- (iv) The candidate's dossiers, if approved by the Departmental Promotions Committee will be presented to the Medical College Promotions Committee.
- (v) If approved by the Medical College Promotions Committee, the candidate will be promoted and the Board so informed.
- (vi) If disapproved the candidate may apply again in the subsequent year.
- (vii) Provided that a candidate for promotion from Associate Professor to full Professor who is unsuccessful may continue in his post and apply again within 2 years.

viii) DEPARTMENTAL PROMOTIONS COMMITTEE.

The faculty members in each department will form a departmental promotions committee, chaired by the Senior most Professor 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 Dean will invite faculty members of appropriate rank from other

departments to complete the minimum requirement of three members. In case of appointment of departmental chairperson, DPC may be constituted by the Dean comprising of members from any department but equal or above the post of professor.

ix) MEDICAL COLLEGE PROMOTIONS COMMITTEE.

The Dean will appoint a medical college promotions committee consisting of seven members of the faculty at Professor level and the Medical Director but excluding department chairmen. However, if there is an insufficient number of professors in the Institution, faculty at associate or assistant professor level, In that order, may be included to fill the vacancies due to the absence of professors. The faculty so included will relinquish these positions as soon as a sufficient number of faculty are appointed to professorial posts. The Dean will 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 02 years or at the pleasure of the Board of Governors, 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 candidate's department.

The Dean shall review the recommendations of IPC and then inform the Board after ensuring that all the codal formalities have been met and shall be notified after information to the Board.

x) 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 two senior professors from the concerned department or in case there is non then from any other department. The committee will also include the Medical Director of the Hospital

or his nominee but not less than Grade-19. The Dean will appoint a chairman from amongst the members of the committee. The search committee will Invite applications and proceed as per Rules 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.

xi) Department Chairperson will serve for a term of two years renewable for two further terms of Two 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.

Departmental Chairperson Selection criteria:

Description	Marks
1. Seniority/Professor	30
2. Associate	15
3. Institutional Based Practice	30
4. Administrative Skill/Experience/diploma of Administration etc.	10
5. Recognized certificate in Health professional education	05
6. Publications /research papers other than required for promotion	05
7. Interview marks by the selection committee	05
8. All selected Chairpersons/HoDs will perform mandatory IBPP, no private practice outside the Hospital will be allowed. In case anyone is found practicing outside disciplinary proceedings will be initiated against those.	

f. EMPLOYEE GRIEVANCE PROCEDURE

All employees of a Medical Teaching Institution, except the Dean, Hospital Director, Medical Director, Nursing Director and Finance Director, shall have the right to appeal against any penalty, censure or termination of their employment to the Board.

i) The aggrieved employee should appeal within 30 days of the adverse action and the Board shall decide within 30 days.

- ii) Any employee aggrieved by a decision of the Board may seek resolution of the grievance by referral of the grievance or dispute to the Appellate Tribunal for Medical Teaching Institutions. The decision of the Appellate Tribunal shall be final in all respects.

g. DISCIPLINARY PROCEEDINGS

In the event that an employee is suspected to have committed an infraction of the MTI Act-2015, Rules and Regulations and policies, or the expected code of conduct, or violation of the employment contract, or the ethical obligations for medical staff, or other illegal activity, he/she may be suspended by the competent authority and an enquiry may be conducted as per E&D Regulations 2023.

(i). Legal Matters of MTI (AMC, ATH)

All legal issues of MTI (AMC, ATH) will be under the direct supervision of BoG Subcommittee on legal matters.

- All future appointments regarding Litigation Officer, legal panel will be through the BoG subcommittee.
- Litigation Officers and legal panel lawyers will be directly answerable to the BoG Subcommittee.

23. 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 then be submitted to the Management Committee for approval and thence 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 (Medial 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.

24. No Objection Certificate:

1. NoC for Ex-Pakistan leave incase of executives and all MTI employee(s) shall be subject to approval of the Board of Governors as per the Delegation of Power document and authorities defined therein.
2. As per Esta code provisions an MTI (AMC, ATH) employees shall take written NoC from the Board of Governors with regards to meeting any Government functionary at district level, provincial or federal level or political representative.
3. The Employee shall state reasons for meeting the Government Functionaries at any district, provincial or federal level or political representative.
4. No MTI Employee regular or contractual is hereby permitted to interact with Media, give interviews to social media without approval of the competent authority that is Board. Only nominated spokesperson is allowed to speak/post contents to the media/social media, official website or give interviews after approval of the competent authority (ies). Any employee posting contents on social media or news that are vulgar, shows disrespect, invades

privacy/confidentiality, create hate, racism, ethnic, violent or creates material for violence against any patient, public, government functionaries, MTI employee(s), MTI Board member (s) or any Pakistani while being an employee of the MTI or using MTI platform, he/she shall be liable to disciplinary proceedings/ action as per MTI E&D regulations.

5. The MTI employee in violation of this section of regulations will be treated under E&D regulations and as per Section 2(i) of these regulations.

25. Standard Operating Procedures for dealing for strikes/protests by MTI Employees

Taking of Notice by MC:

1. There shall be zero tolerance for any strikes, halt of operation/disruption of work/hindrance in health care delivery at the MTI.
2. An area (well away from the points of operation activities/services delivery) shall be designated for PEACEFUL Protests, if at all. Peaceful protest can only be carried out after due intimation and knowledge of MTI's authorities. (written)
3. Upon knowledge of any potential strike or protest by any cadre of employees, whether via NOTICES or other authentic means of information shall warrant an emergent Management Council meeting solicited by one or more members and participation of all members shall be mandatory. A collective decision shall be taken to pre-empt the situation.
4. Full cover to all the patients will be provided by the employees during strike including emergency and electives.
5. Essential Services Act applies to all health care workers.
6. The District Administration specifically the deputy commissioner shall be immediately informed of such a potential situation and if deemed appropriate, District Administration shall then impose section 144 and MPO in the area in and around the MTI premises (as per the government Orders)
7. A fact-finding committee shall be immediately constituted by the MC to probe into an non conforming incidents form thereon.

8. The committee shall submit respective reports within two (02) days using all kinds of evidences/information (third party/videos surveillances etc) to the relevant competent authorities as follows:

CADRE of EMPLOYEES	COMPETENT AUTHORITY
Faculty members and other staff of the Medical College	Dean/CEO
HOs/MOs, Paramedics	Medical Director
All non-clinical staff of ATH	Hospital Director
Nurses	Nursing Director
TMOs	Associate Dean

ACTION to BE TAKEN as per MTI E&D Regulations 2023

9. Action against an employee/employees based on the facts shall be taken immediate and collective by the MC, yet executed through the relevant competent authority.
10. In case of employees in BPS-18 and above, actions shall be recommended to the Chairman BoG being the competent authority.
11. Action pathway shall be as follows (and as per Govt. Laws):
- a. immediate suspension of the employee/employees for ninety (90) days as per Government rules;
 - b. Show cause notice for punitive action to be issued and answered within seven (07) days followed by personal hearings.
 - c. An appropriate order to be passed after personal hearing in compliance with MTI E&D Regulations 2023.
 - d. As per MTI E&D Regulations 2023, in the presence of substantial evidence against any employee (third party/video surveillance etc.) amounting to gross misconduct (as defined under the law), the employee/employees may even be terminated from service with immediate effect by the concerned competent authority.

12. MTI (AMC/ACD, ATH) Abbottabad prohibits unregistered unions and labor organizations from operating on its premises because health care is an essential service for patient care in both times of peace and unnatural conditions (war, natural catastrophe, emergencies, etc.).
13. An authenticated registration certificate, the organization's or union's charter, information on yearly contributions, the cabinet, and other documents are required of all registered organizations to be submitted to relevant competent authority.
14. The MTI E&D Regulation 2023 will apply to all such elements and pressure groups that are not registered with registration authorities or approved by laws or acts of the Government of Pakistan.

26. WORKING HOURS FOR HOSPITAL EMPLOYEES

Regular working hours for employees will be from 08:00 am to 02:00 pm, including a thirty minute lunch break, Six days a week.

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

Regular Shift	08:00 am to 02:00 pm
Morning Shift	08:00 am to 04:00 pm
Evening Shift	02:00 pm to 12:00 am
Nigh Shift	12:00 pm to 08:00 am

- Employees shall observe working hours as determined by their departmental manager or supervisor.
- All employees of MTI (AMC, ATH) shall mark their attendance through bio-metric attendance system policy. (Attached as Annex 1)
- Those who have completed their night shift will be off the next day after handing over the patients.
- or as per instructions from the Policy Board

- 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.

27. DRESSCODE:

Dress code is introduced for all MTI employees to ensure uniformity in dress code for identification of MTI employees at workplace to ensuring uniformity, discipline and preserving dignity of white collar employees.

All MTI staff shall wear formal prescribed uniform/dress code, name plates with name and designation on their dress during duty hours all the time in each and every department of MTI (AMC, ATH).

MTI staff not complying with the dress code may be fined, and disciplinary action may be taken against him/her as per E&D Regulations 2023 by the respective competent authority:

Female wearing Hijab & Abaya should wear Dark Blue color Abaya on dress code:

- Executive
Private Formal Dress code
- Doctors Male/Female
Private Formal Dress with White Coat with Name plate
- Consultants Male/Female
Formal Private (Preferably White Coat) and Name plate
- TMOs/HOs Male/Female:
Male - Green Scrub + white overall with Name plate
Female - Green Scrubs + white overall with Name plate

- For winter: Green color sweater/coat is allowed.
 - If any TMO/HO uses abaya or naqab, it shall be in conformity with the uniform.
- Nursing Staff:
As per Pakistan Nursing Council uniform/dress code for registered nurses working in clinical side in the hospitals
For Females: Dark Blue Shalwar Kameez, Name Plate, with white coat/blue scarf or dupatta
For Males: Dark Blue scrub with name plate
 - For winter: Blue color sweater/coat is allowed.
 - If any Nurse uses abaya or naqab, it shall be in conformity with the uniform.

Nursing Assistants:

Male - Blue Scrub + white overall with Name plate

Female - Blue Scrubs + along with white dupatta/Shawl, black shoes and white long overall below knee length. Name plate

- For winter: Blue color sweater/coat is allowed.
 - If any Nursing Assistant uses abaya or naqab, it shall be in conformity with the uniform.
- Medical College Students Male/female:
As per KMU dress code Ayub Medical College medical students will follow the dress code. It must be followed by all students during lectures, practical, tutorials, seminars, outdoor and indoor hospital duty and during all Institutional functions. Uniform is compulsory when student visits the Institute either taking classes or not. The students must wear white coat while attending laboratories, dissection hall and hospital.

1. Female Student's Dress Code

Maroon color shirt, white shalwar (no pajama) and footwear with no high heel along with white dupatta/Shawl, black shoes and white long overall below knee length.

- For winter: Maroon color sweater/coat is allowed.
- If any student uses abaya or naqab, it shall be in conformity with the uniform.

2. Male Student's Dress Code

White Shalwar Kameez with white overall where necessary along with Peshawari black Chappal or white shirt with full sleeves with gray pant along with black shoes. No tight jeans and half sleeves. For winter maroon color sweater/coat is allowed

- Paramedics/OT/ Lab staff Male & Female

Maroon Scrubs + Blue Overall, shoe, with name plate. For winter maroon color sweater/coat is allowed

- Administration/IT staff

Formal private dress(Suit, Pant/jean full sleeves shirt, plain clothes with Black/blue waist coat, Peshawar chapel/shoe, with name plate)

- Ward Boys (to wear uniform during duty hours all the time)

Khaki Plain clothes, Peshawar chapel/shoe with Red Cap, Name plate

For winter maroon color sweater/coat is allowed

- Support Staff/Office Boys (to wear uniform during duty hours all the time)

White Cloths with Black Waist Coat with name plate

For winter Black color sweater/coat/jacket is allowed

- Engineering & Maintenance Staff (to wear uniform during duty hours all the time)

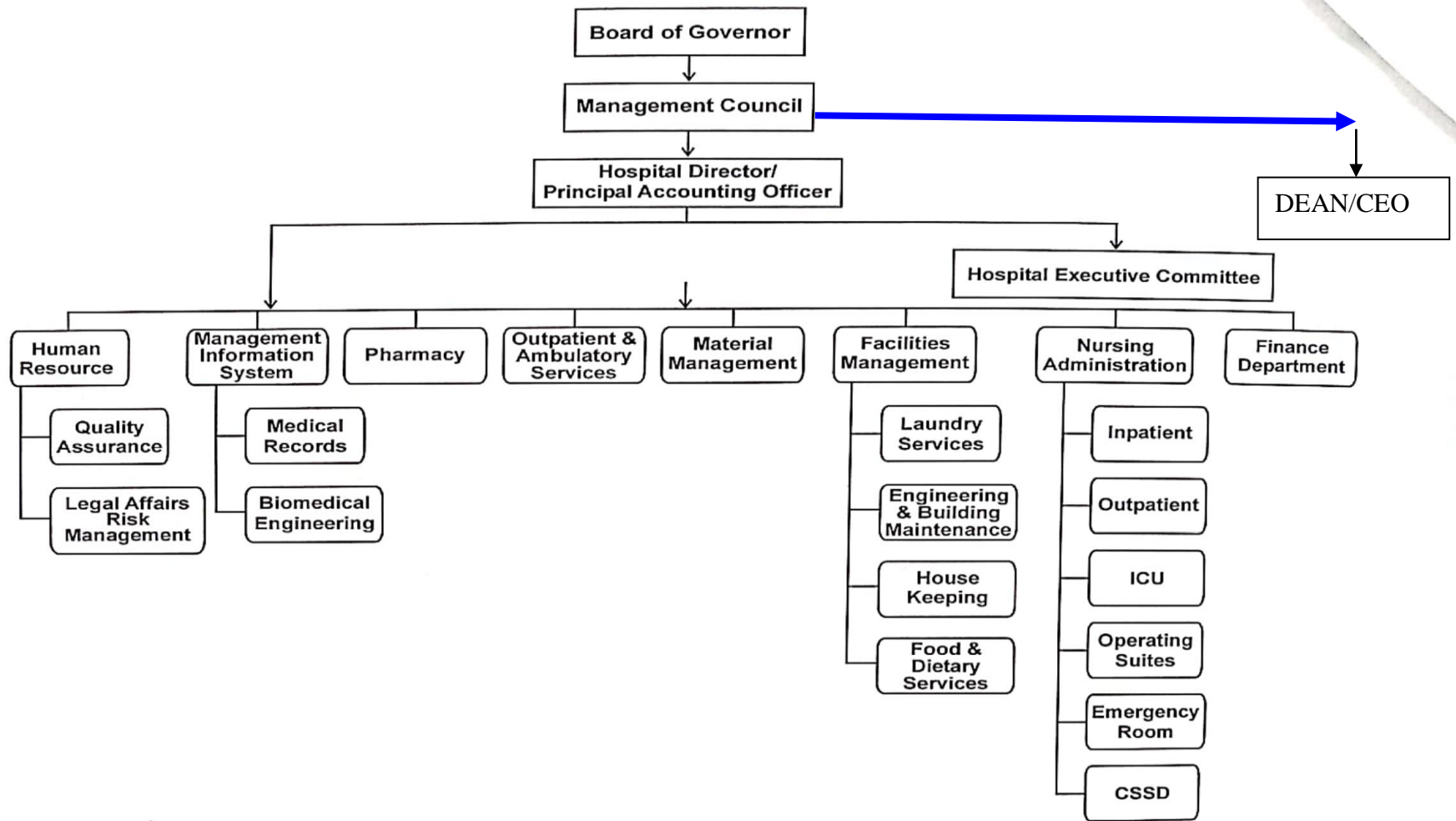
Engineers - Formal private dress(Suit, Paint/jean full sleeves shirt, plain clothes with Black/blue waist coat, shoe, working rubber shoes, with visibility blue jacket, name plate

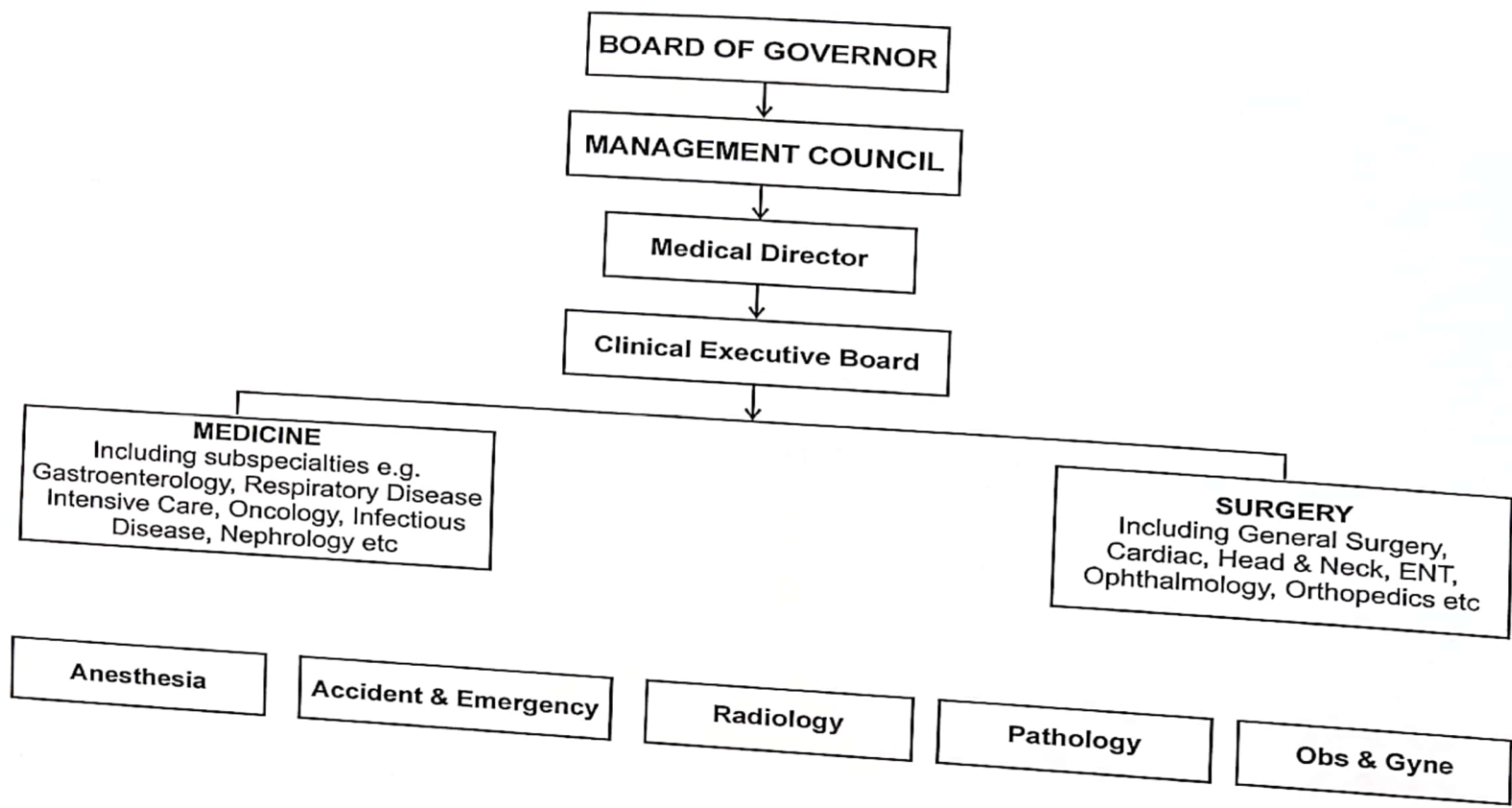
Supervisors and Helpers (to wear during duty hours all the time)

Dark Green Coverall(dangri), Rubber Shoes/shoes, with name plate

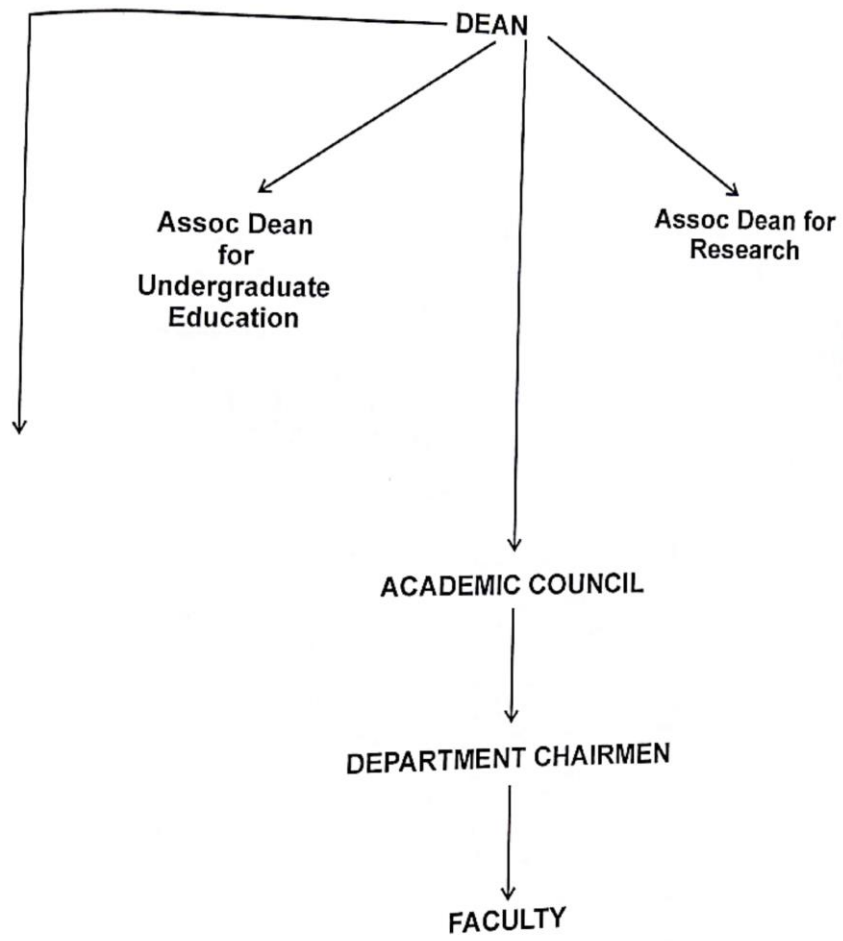
Head of Engineering and Maintenance to ensure; Use of Proper Personal Protective Equipments (PPEs) during construction, repair work and welding plant work, and dealing with Electric items especially 11,000KV Transmission lines.

- Security Staff male & female (to wear uniform during duty hours all the time)
Camouflage uniform dress, Cap, Name plate and DMS shoes.
For winter same color sweater/Coat with conformity with the uniform,
- Sanitation staff (including contractual staff) (to wear uniform during duty hours all the time)
Yellow Coveralls(dangri), rubber shoes, with name plate for Male staff
Yellow Visibility Jackets for Female staff
Winter sweater/jackets with conformity with the uniform.





ORGANISATIONAL STRUCTURE OF MEDICAL COLLEGE





**MEDICAL TEACHING INSTITUTION – ABBOTTABAD
[AYUB MEDICAL COLLEGE – AYUB TEACHING HOSPITAL]
BOG SECRETARIAT**

No.MTI-BOG/AMC-ATH/16/2017

August 10, 2017

NOTIFICATION

In exercise of the powers conferred under the Khyber Pakhtunkhwa Medical Teaching Institutions Act, 2015 and the Medical Teaching Institution Abbottabad Regulations, 2016, the BOG in its meeting held on 5th August, 2017 have been pleased to approve the following Biometric Attendance Policy and Standard Operating Procedure (SOP) for the Medical Teaching Institution:

**BIOMETRIC ATTENDANCE POLICY
&
STANDARD OPERATING PROCEDURE (SOP)**

POLICY

General. Introduction of automated solutions for improvement of performance of an organization and to strengthen its monitoring and accountability processes is a standard practice of the modern world and is now a prioritized policy of the Government of KPK.

Towards achieving this goal, MTI Abbottabad has initiated process for development and deployment of various IT based solutions. One of the solutions developed and currently being implemented is Biometric Attendance System. The aim of this system is to monitor, check and control employee attendances towards justifying their productive hours and achieve organizational efficiency towards bettering patient care and achievement of organizational goals.

MTI Abbottabad employees (MTI employees, Institutional Employees and Civil Servants) are held to a higher level of responsibility under the public trust, which demands effective and

efficient use of public funds in order to serve the public interest. Vast majority of MTI Abbottabad employees understand the fact that the use of working time public funds should always be in the public interest and not for individual or private gain, and public employees should not be paid for time they do not work that is not otherwise guaranteed to them (such as annual or sick leave). The public interest does not tolerate wasteful and abusive excesses such as padded payrolls or "phantom" employees nor the wastage of earned time. Health care Reform Act 2015 dictates that all MTIs of KPK are entrusted with public resources and must be answerable for fiscal responsibly to those who have assigned such responsibilities to it.

- MTI Abbottabad hospital functional hours period Begin at 12:01 am Monday of each week and ends at 12:00 pm midnight on the following Sunday without any disruption.
- Regular working days are Monday to Saturdays (06) days for MTI ATH and Monday to Friday (05 days) for MTI AMC (Except Clinical Faculty (Monday to Saturday)).
- Routine Work hours are scheduled so that all MTI offices/departments including Consultants OPDs are open by 8:00a.m. And close not earlier than 2:30pm. (Friday 8:00 – 12:30am), Monday through Saturday (AMC Monday through Friday), except on official holidays.
- MTI Full-time employees are required to work on a regular, on-going schedule of 40 hours and a minimum of 36 Hours per Six-day work period (AMC per 05 day period).
- KPK Government has recently substantially enhanced the pay and allowances of health sector employees particularly the doctors.
- As such, under the principles of "public accountability," MTI employees should not be paid for time they do not work, except as otherwise permitted by leave policies.

Essentials of Biometric/RFID Electronic Clock Policy

The Biometric/RFID electronic timekeeping system has hall become an official basis for recording time worked by MTI employees.

All employees are required to "clock in" in at their entry time, "clock out" at their exit time according to their work schedule. A time of 30 minutes shall be given during their lunch/Prayer hour. Employees will "clock out" anytime they leave the office/Unit/department for more than twenty (20) minutes for non-work related matters, and "clock out" at the end of the workday.

Any employee working at an off-site location or attending a training session, seminar or conference with the express written permission of their concerned Directors/Dean/ Associate Dean, must report time worked to his or her immediate supervisor so that time worked is entered or modified and presented using an approved timekeeping method.

Each supervisor and employee will be responsible for monitoring the recording of time worked. By signing the Time and Attendance Record, the supervisor and employee certify the accuracy of the information as presented.



Employees may not submit a Leave Request Form to modify his or her time and attendance record, unless prior approval by the Department Head has been sought.

Employees may not "call-in" and have other employees "clock in" for them, unless prior approval by the Department Head has been granted.

In case of absence of casual/earned leave, deduction will be made from salary

Employees who fail to account for any time missed from work for the established work hours and regular work period must follow existing policy for use of paid leave, or such absences from the work place shall be deemed Leave without Pay/Will full absence.

BIOMETRICS/RFID attendance system shall be synchronized with Payroll system of employees.

"As a control and monitoring measure to bring efficiency to the system, biometric attendance shall be linked to the promotion and career advancement of the employees"

In order to ensure proper time management as well as uninterrupted operation of the system; following Standard Operating Procedures (SOP) have been devised for approval by BOG.

STANDARD OPERATING PROCEDURE (SOP)

1. TECHNICAL & OPERATIONAL RESPONSIBILITIES

1.1 IT department MTI shall be responsible for appropriate/updated record keeping of attendance & shall ensure smooth, uninterrupted operation, management & maintenance of software & hardware of the system.

1.2 IT department MTI shall also be responsible for procurement, installation, rectification of faults, up-gradation and integration of the system.

1.3 In-charge IT and Manager HR shall act as focal persons and be responsible for co-ordination among concerned Officers / Offices and ensure record / data entry in the system at IT department and other database and its updating, monitoring and generation of requisite reports as & when required as well as handle accountability process in the HIMS perspective.

2. ENROLMENT THRESH

All Officers / Officials of MTI Abbottabad from BPS-1 to BPS-21 shall be enrolled in the system.



3. TIMINGS /WORKING HOURS

(EMPLOYEES IN GENERAL)

3.1 Official working hours required, to be adhered to in distributed hours or 40 Hours a week, however adjusted by the concerned department. The minimum working hours for a week shall be 36. The hours shall apply to all shifts from 08:00 hours in the morning till 8: 00 hours NEXT MORNING.

3.2 Officers / Officials will mark their attendance in the biometric device as per the shift timings indicated below:

MORNING SHIFT: (As entry) 08:00 hours in the morning, 14:30 hours in the afternoon

EVENING SHIFT: 14:00 hours in the afternoon and at 20:30 hours in the evening,

NIGHT SHIFT: 20:00 hours in the evening and 8:00 hours in the morning (as exit).

3.3 Employees marking their attendance within the first 30 minutes of their respective entry time shall not be considered late.


3.4 Those marking their attendance within the first 60 minutes of their entry time shall not be considered late subject to the condition that TIME LOST earlier is compensated later in the day.

3.5 Officials leaving office/work place before admissible time or without marking the attendance or without completing prescribed hours on duty (where applicable), as the case may be, shall be treated as early departure amounting to half day attendance for initial three occasions in a month. An employee found leaving the work place earlier for more than three times a month; the employee will be considered absent for that day or days. It will be adjusted against casual/earned leave, if available and if not, deduction will be made from salary.

3.6 FACULTY, TMOs AND ON CALL DOCTORS

3.6 (a) All employees of MTI Abbottabad working as Clinical faculty shall complete assigned work hours a minimum of 36 hours a week over the 06 working days (Monday-Saturday) according to the Rota/Schedule circulated by the Chairperson/HOU of their concerned department in the beginning of the week /Month (as decided). A copy of the Rota shall be submitted to the Medical Director/Dean.

3.6 (b) The Chairperson/HOU of every department shall be responsible for devising and

 4

timely circulation of the Duty/Rota of all concerned faculty members, Consultants/Registrars/Trainee doctors. The Rota/Schedule shall be communicated to the IT department well before hand to be incorporated in the automated biometric system. A copy of the Rota shall be submitted to the office of the Medical Director, Dean and HD.

3.6 (c) The Rota shall explicitly identify all planned activities (PAs) of the Clinical consultants including OPD, IPD, OR, CME., Admin, undergraduate and post graduate teaching schedules, lectures and other duties as well as ON CALL duties. Activities each day may be split into two planned activities (PAs) as AM and PM duties.

3.6 (d) The Chairperson/Head of the Units shall be responsible for monitoring the attendance as well as the performances of their respective department staff. And in case of any discrepancy shall issue advisory notes to the concerned staff, take corrective actions (admissible under law) as well as notify the offices of Dean, HD and MD accordingly. Weekly Work-Plan of all HOU, faculty members and basic sciences teaching staff will be maintained at concerned directorates. Submission of update information or about any changes in the duty schedules will be the responsibility of concerned officer.

The concerned Manager HR will maintain the record and will submit it to Director Finance immediately after 20th of the calendar month counting absent days from 21st of the preceding month.

3.6 (e) TIME COMPENSATION FOR ON CALL AND VARIED DUTIES OF CLINICAL FACULTY: -

- i. Time compensation will be awarded in the form of earned leave compensation or relaxation in time in the morning attendance.
- ii. A consultant can possibly be on call at a minimum of 1 in 7 per week and a maximum of 1 in 1 per week.
- iii. A consultant can only claim time compensation for being ON CALL beyond his/her prescribed /minimum mandatory working hours/week (36).

4. LEAVES IN BIOMETRIC PROSPECTIVE

- All leaves shall be dealt with in compliance with MTI-Abbottabad leaves policy issued by BOG.

5. RECORD / DATA TO BE ENTERED

5.1. All relevant data including working schedules, official holidays shall be entered into the system.



5.2 All kinds of leaves including casual leave, short leaves, official duties / visit programs, trainings, workshops, examinations, Conferences and academic duties of KMU and CPSP etc. shall be entered in the system.

6. ROLES AND RESPONSIBILITIES

6.1 Chairperson of the departments, Head of Units shall be responsible for monitoring and controlling the attendances of their respective staff on weekly basis and shall convey relevant information to Dean/Hospital Director/Medical Director, who shall be responsible for overall control, ensuring optimum attendances as well as taking appropriate actions. Manager HR shall be responsible to ensure that copies of all kinds of notifications pertaining to employees working at MTI Abbottabad i.e., postings / transfers, charge relieving & charge assumption reports, appointments, promotions, termination, retirement and trainings etc. including sanctioned leaves are marked and received in the office of IT In-charge.

6.2 The concerned Officers / Officials shall be responsible to provide copies of their sanctioned leaves, approved tour/visit programs, charge relieving and assumption reports and ensure their receipt in the office of IT In-charge and to concerned Administrative managers.

6.3 In-Charge IT and concerned ADs/DDMS /Manager HR shall be responsible to ensure that requisite data / record of all employees is entered / updated in the system on daily basis.

6.4 In-Charge IT and DDMS shall monitor the system and ensure rectification of any fault/errors / defect in the system and devices immediately.

6.5 In-Charge IT and Manager HR shall also be responsible and ensure immediate shifting / entry of data of those employees posted/transferred from one place / station to other, in the device installed at the place of their new posting.

6.7 In-Charge IT and Manager HR shall be responsible for immediate enrollment of Officers / Officials in the system at the time of their initial joining.

7. PROCEDURE FOR RECORD / DATA ENTRY

In-charge IT shall be responsible for entry of requisite data of all employees in the database.

8. PAYMENT OF TA/DA

Payment of TA/DA of officers / officials shall require biometric attendance system verification by IT in charge and concerned supervisor/manager.



9. ACCOUNTABILITY & ADMINISTRATIVE ACTIONS.

A copy of the Biometrics regulations shall be communicated to all MTI Employees for acknowledgement, understanding and compliance.

A copy of the undertaking shall be attached therewith for signatures of the employees.

The Department Chairperson/Heads of Units shall be responsible for monitoring respective staff attendances and as such shall play a significant role in ensuring sustainable implementation of the policy. They shall also ensure communication of all relevant information to the Dean/Medical Director/Hospital Director.

EMPLOYEES' ATTENDANCE SHORT FALLS AND CORRECTIVE ACTIONS

- Three or more advisory notes in a year against any employee shall warrant one Warning Letter by the concerned authority to be placed in employee's personal file.
- Three or more warning letters in a year against an employee shall warrant initiation of disciplinary action under E & D rules against the employee.
- In Case of TMOs, same regulations of actions will apply except in that case the Authority taking the actions would be Associate Dean.
- Further more, in case of non-conformities such as unauthorized leaves, once thresh of available earned leaves is exhausted, the Biometric system (linked with the pay roll) shall start deducting the salary of the employee.
- Any employee found guilty of tampering with the devices/system or any other misconduct regarding Biometrics shall be strictly dealt under E & D Rules.

AUTHORITY RESPONSIBLE FOR INITIATING CORRECTIVE ACTIONS

ATTENDANCE SHORT FALLS IN MONTHLY %	ACTIONS	AUTHORITY
0-20	Advisory notes to the employee and information to the concerned Chairperson/Director/Dean	HOD/HOU
21-30	Warning Letters to the employee and to be placed in his/her personal file	Concerned Director/Dean
31 and above	Initiation of disciplinary action under E & D Rules	Concerned Director/Dean

10. ACCESS TO THE SYSTEM


Other than In-charge IT, BOG Chairman & Members /Medical Director/Dean/ Hospital Director/ Addl. Medical Director shall have access to the system. Minister for Health KPK as well as Secretary Health KPK shall also be given access to the system.

11. COMMUNICATION OF INFORMATION.

All information on monthly basis unless desired earlier shall be communicated to the Medical Director/Hospital Director/Dean, In case of faculty/consultant, In-Charge IT shall forward information/monthly reports to the Chairman BOG.

12. MAINTENANCE OF RECORD / DATA

In-charge IT and DDMS / ADs shall ensure proper maintenance, safety and security of all files/ record and data as per standard.


M. Javed Panni
Chairman BOG

- 1) Dean, Ayub Medical College.
- 2) Medical Director, Ayub Teaching Hospital.
- 3) Hospital Director, Ayub Teaching Hospital.
- 4) Director Finance, Medical Teaching Institution.
- 5) Incharge I.T Department,
- 6) Manager HR, AMC.
- 7) Manager HR, ATH
- 8) Secretary, Board of Governors.

BIOMETRIC ATTENDANCE POLICY ACKNOWLEDGMENT FORM

EMPLOYEE NAME: _____

DEPARTMENT NAME: _____

EMPLOYEE ID: _____

DATE _____

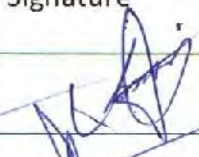
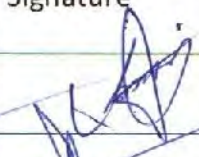
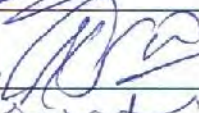

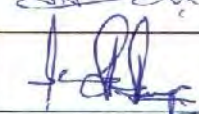
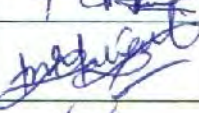
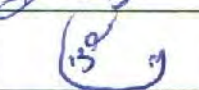
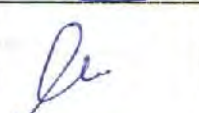
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Signature-Employee

Date

ACKNOWLEDGEMENT PROFORMA

Received Notification No.MTI/BOG/AMC-ATH/16/2017 dated August 10, 2017 from Chairman, BOG regarding Biometric Attendance Policy & Standard Operating Procedure. (SOP) for MTI.

S.No.	To Whom Delivered	Name of Receiver	Signature	Date
1.	Dean, AMC	Imran		15/8/17
2.	Medical Director ATH	Imran		15/8/17
✓ 3.	Hospital Director ATH	Sadique		15/8/17
✓ 4.	Director Finance, AMC & ATH.	Sohail		15/8/17
✓ 5.	I/c IT Dept.	Shahbaz Ahmed		15/8/2017 at 2:30pm
6.	Manager HR AMC	Khurram Khan		15/8/17
✓ 7.	Manager HR ATH	Mustaza Khan		15/8/17
8.	Associate Dean, DGMi AMC	Sherzad Khani		28/8/17

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**MEDICAL TEACHING INSTITUTION – ABBOTTABAD
[AYUB MEDICAL COLLEGE – AYUB TEACHING HOSPITAL]
BOG SECRETARIAT**

No.MTI-BOG/AMC-ATH/16/2017

August 10, 2017

NOTIFICATION

In exercise of the powers conferred under the Khyber Pakhtunkhwa Medical Teaching Institutions Act, 2015 and the Medical Teaching Institution Abbottabad Regulations, 2016, the BOG in its meeting held on 5th August, 2017 have been pleased to approve the following Biometric Attendance Policy and Standard Operating Procedure (SOP) for the Medical Teaching Institution:

**BIOMETRIC ATTENDANCE POLICY
&
STANDARD OPERATING PROCEDURE (SOP)**

POLICY

General. Introduction of automated solutions for improvement of performance of an organization and to strengthen its monitoring and accountability processes is a standard practice of the modern world and is now a prioritized policy of the Government of KPK.

Towards achieving this goal, MTI Abbottabad has initiated process for development and deployment of various IT based solutions. One of the solutions developed and currently being implemented is Biometric Attendance System. The aim of this system is to monitor, check and control employee attendances towards justifying their productive hours and achieve organizational efficiency towards bettering patient care and achievement of organizational goals.

MTI Abbottabad employees (MTI employees, Institutional Employees and Civil Servants) are held to a higher level of responsibility under the public trust, which demands effective and

efficient use of public funds in order to serve the public interest. Vast majority of MTI Abbottabad employees understand the fact that the use of working time public funds should always be in the public interest and not for individual or private gain, and public employees should not be paid for time they do not work that is not otherwise guaranteed to them (such as annual or sick leave). The public interest does not tolerate wasteful and abusive excesses such as padded payrolls or "phantom" employees nor the wastage of earned time. Health care Reform Act 2015 dictates that all MTIs of KPK are entrusted with public resources and must be answerable for fiscal responsibly to those who have assigned such responsibilities to it.

- MTI Abbottabad hospital functional hours period Begin at 12:01 am Monday of each week and ends at 12:00 pm midnight on the following Sunday without any disruption.
- Regular working days are Monday to Saturdays (06) days for MTI ATH and Monday to Friday (05 days) for MTI AMC (Except Clinical Faculty (Monday to Saturday)).
- Routine Work hours are scheduled so that all MTI offices/departments including Consultants OPDs are open by 8:00a.m. And close not earlier than 2:30pm. (Friday 8:00 – 12:30am), Monday through Saturday (AMC Monday through Friday), except on official holidays.
- MTI Full-time employees are required to work on a regular, on-going schedule of 40 hours and a minimum of 36 Hours per Six-day work period (AMC per 05 day period).
- KPK Government has recently substantially enhanced the pay and allowances of health sector employees particularly the doctors.
- As such, under the principles of "public accountability," MTI employees should not be paid for time they do not work, except as otherwise permitted by leave policies.

Essentials of Biometric/RFID Electronic Clock Policy

The Biometric/RFID electronic timekeeping system has hall become an official basis for recording time worked by MTI employees.

All employees are required to "clock in" in at their entry time, "clock out" at their exit time according to their work schedule. A time of 30 minutes shall be given during their lunch/Prayer hour. Employees will "clock out" anytime they leave the office/Unit/department for more than twenty (20) minutes for non-work related matters, and "clock out" at the end of the workday.

Any employee working at an off-site location or attending a training session, seminar or conference with the express written permission of their concerned Directors/Dean/ Associate Dean, must report time worked to his or her immediate supervisor so that time worked is entered or modified and presented using an approved timekeeping method.

Each supervisor and employee will be responsible for monitoring the recording of time worked. By signing the Time and Attendance Record, the supervisor and employee certify the accuracy of the information as presented.



Employees may not submit a Leave Request Form to modify his or her time and attendance record, unless prior approval by the Department Head has been sought.

Employees may not "call-in" and have other employees "clock in" for them, unless prior approval by the Department Head has been granted.

In case of absence of casual/earned leave, deduction will be made from salary

Employees who fail to account for any time missed from work for the established work hours and regular work period must follow existing policy for use of paid leave, or such absences from the work place shall be deemed Leave without Pay/Will full absence.

BIOMETRICS/RFID attendance system shall be synchronized with Payroll system of employees.

"As a control and monitoring measure to bring efficiency to the system, biometric attendance shall be linked to the promotion and career advancement of the employees"

In order to ensure proper time management as well as uninterrupted operation of the system; following Standard Operating Procedures (SOP) have been devised for approval by BOG.

STANDARD OPERATING PROCEDURE (SOP)

1. TECHNICAL & OPERATIONAL RESPONSIBILITIES

1.1 IT department MTI shall be responsible for appropriate/updated record keeping of attendance & shall ensure smooth, uninterrupted operation, management & maintenance of software & hardware of the system.

1.2 IT department MTI shall also be responsible for procurement, installation, rectification of faults, up-gradation and integration of the system.

1.3 In-charge IT and Manager HR shall act as focal persons and be responsible for co-ordination among concerned Officers / Offices and ensure record / data entry in the system at IT department and other database and its updating, monitoring and generation of requisite reports as & when required as well as handle accountability process in the HIMS perspective.

2. ENROLMENT THRESH

All Officers / Officials of MTI Abbottabad from BPS-1 to BPS-21 shall be enrolled in the system.



3. TIMINGS /WORKING HOURS

(EMPLOYEES IN GENERAL)

3.1 Official working hours required, to be adhered to in distributed hours or 40 Hours a week, however adjusted by the concerned department. The minimum working hours for a week shall be 36. The hours shall apply to all shifts from 08:00 hours in the morning till 8: 00 hours NEXT MORNING.

3.2 Officers / Officials will mark their attendance in the biometric device as per the shift timings indicated below:

MORNING SHIFT: (As entry) 08:00 hours in the morning, 14:30 hours in the afternoon

EVENING SHIFT: 14:00 hours in the afternoon and at 20:30 hours in the evening,

NIGHT SHIFT: 20:00 hours in the evening and 8:00 hours in the morning (as exit).

3.3 Employees marking their attendance within the first 30 minutes of their respective entry time shall not be considered late.


3.4 Those marking their attendance within the first 60 minutes of their entry time shall not be considered late subject to the condition that TIME LOST earlier is compensated later in the day.

3.5 Officials leaving office/work place before admissible time or without marking the attendance or without completing prescribed hours on duty (where applicable), as the case may be, shall be treated as early departure amounting to half day attendance for initial three occasions in a month. An employee found leaving the work place earlier for more than three times a month; the employee will be considered absent for that day or days. It will be adjusted against casual/earned leave, if available and if not, deduction will be made from salary.

3.6 FACULTY, TMOs AND ON CALL DOCTORS

3.6 (a) All employees of MTI Abbottabad working as Clinical faculty shall complete assigned work hours a minimum of 36 hours a week over the 06 working days (Monday-Saturday) according to the Rota/Schedule circulated by the Chairperson/HOU of their concerned department in the beginning of the week /Month (as decided). A copy of the Rota shall be submitted to the Medical Director/Dean.

3.6 (b) The Chairperson/HOU of every department shall be responsible for devising and

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timely circulation of the Duty/Rota of all concerned faculty members, Consultants/Registrars/Trainee doctors. The Rota/Schedule shall be communicated to the IT department well before hand to be incorporated in the automated biometric system. A copy of the Rota shall be submitted to the office of the Medical Director, Dean and HD.

3.6 (c) The Rota shall explicitly identify all planned activities (PAs) of the Clinical consultants including OPD, IPD, OR, CME., Admin, undergraduate and post graduate teaching schedules, lectures and other duties as well as ON CALL duties. Activities each day may be split into two planned activities (PAs) as AM and PM duties.

3.6 (d) The Chairperson/Head of the Units shall be responsible for monitoring the attendance as well as the performances of their respective department staff. And in case of any discrepancy shall issue advisory notes to the concerned staff, take corrective actions (admissible under law) as well as notify the offices of Dean, HD and MD accordingly. Weekly Work-Plan of all HOU, faculty members and basic sciences teaching staff will be maintained at concerned directorates. Submission of update information or about any changes in the duty schedules will be the responsibility of concerned officer.

The concerned Manager HR will maintain the record and will submit it to Director Finance immediately after 20th of the calendar month counting absent days from 21st of the preceding month.

3.6 (e) TIME COMPENSATION FOR ON CALL AND VARIED DUTIES OF CLINICAL FACULTY: -

- i. Time compensation will be awarded in the form of earned leave compensation or relaxation in time in the morning attendance.
- ii. A consultant can possibly be on call at a minimum of 1 in 7 per week and a maximum of 1 in 1 per week.
- iii. A consultant can only claim time compensation for being ON CALL beyond his/her prescribed /minimum mandatory working hours/week (36).

4. LEAVES IN BIOMETRIC PROSPECTIVE

- All leaves shall be dealt with in compliance with MTI-Abbottabad leaves policy issued by BOG.

5. RECORD / DATA TO BE ENTERED

5.1. All relevant data including working schedules, official holidays shall be entered into the system.



5.2 All kinds of leaves including casual leave, short leaves, official duties / visit programs, trainings, workshops, examinations, Conferences and academic duties of KMU and CPSP etc. shall be entered in the system.

6. ROLES AND RESPONSIBILITIES

6.1 Chairperson of the departments, Head of Units shall be responsible for monitoring and controlling the attendances of their respective staff on weekly basis and shall convey relevant information to Dean/Hospital Director/Medical Director, who shall be responsible for overall control, ensuring optimum attendances as well as taking appropriate actions. Manager HR shall be responsible to ensure that copies of all kinds of notifications pertaining to employees working at MTI Abbottabad i.e., postings / transfers, charge relieving & charge assumption reports, appointments, promotions, termination, retirement and trainings etc. including sanctioned leaves are marked and received in the office of IT In-charge.

6.2 The concerned Officers / Officials shall be responsible to provide copies of their sanctioned leaves, approved tour/visit programs, charge relieving and assumption reports and ensure their receipt in the office of IT In-charge and to concerned Administrative managers.

6.3 In-Charge IT and concerned ADs/DDMS /Manager HR shall be responsible to ensure that requisite data / record of all employees is entered / updated in the system on daily basis.

6.4 In-Charge IT and DDMS shall monitor the system and ensure rectification of any fault/errors / defect in the system and devices immediately.

6.5 In-Charge IT and Manager HR shall also be responsible and ensure immediate shifting / entry of data of those employees posted/transferred from one place / station to other, in the device installed at the place of their new posting.

6.7 In-Charge IT and Manager HR shall be responsible for immediate enrollment of Officers / Officials in the system at the time of their initial joining.

7. PROCEDURE FOR RECORD / DATA ENTRY

In-charge IT shall be responsible for entry of requisite data of all employees in the database.

8. PAYMENT OF TA/DA

Payment of TA/DA of officers / officials shall require biometric attendance system verification by IT in charge and concerned supervisor/manager.



9. ACCOUNTABILITY & ADMINISTRATIVE ACTIONS.

A copy of the Biometrics regulations shall be communicated to all MTI Employees for acknowledgement, understanding and compliance.

A copy of the undertaking shall be attached therewith for signatures of the employees.

The Department Chairperson/Heads of Units shall be responsible for monitoring respective staff attendances and as such shall play a significant role in ensuring sustainable implementation of the policy. They shall also ensure communication of all relevant information to the Dean/Medical Director/Hospital Director.

EMPLOYEES' ATTENDANCE SHORT FALLS AND CORRECTIVE ACTIONS

- Three or more advisory notes in a year against any employee shall warrant one Warning Letter by the concerned authority to be placed in employee's personal file.
- Three or more warning letters in a year against an employee shall warrant initiation of disciplinary action under E & D rules against the employee.
- In Case of TMOs, same regulations of actions will apply except in that case the Authority taking the actions would be Associate Dean.
- Further more, in case of non-conformities such as unauthorized leaves, once thresh of available earned leaves is exhausted, the Biometric system (linked with the pay roll) shall start deducting the salary of the employee.
- Any employee found guilty of tampering with the devices/system or any other misconduct regarding Biometrics shall be strictly dealt under E & D Rules.

AUTHORITY RESPONSIBLE FOR INITIATING CORRECTIVE ACTIONS

ATTENDANCE SHORT FALLS IN MONTHLY %	ACTIONS	AUTHORITY
0-20	Advisory notes to the employee and information to the concerned Chairperson/Director/Dean	HOD/HOU
21-30	Warning Letters to the employee and to be placed in his/her personal file	Concerned Director/Dean
31 and above	Initiation of disciplinary action under E & D Rules	Concerned Director/Dean

10. ACCESS TO THE SYSTEM


Other than In-charge IT, BOG Chairman & Members /Medical Director/Dean/ Hospital Director/ Addl. Medical Director shall have access to the system. Minister for Health KPK as well as Secretary Health KPK shall also be given access to the system.

11. COMMUNICATION OF INFORMATION.

All information on monthly basis unless desired earlier shall be communicated to the Medical Director/Hospital Director/Dean, In case of faculty/consultant, In-Charge IT shall forward information/monthly reports to the Chairman BOG.

12. MAINTENANCE OF RECORD / DATA

In-charge IT and DDMS / ADs shall ensure proper maintenance, safety and security of all files/ record and data as per standard.


M. Javed Panni
Chairman BOG

- 1) Dean, Ayub Medical College.
- 2) Medical Director, Ayub Teaching Hospital.
- 3) Hospital Director, Ayub Teaching Hospital.
- 4) Director Finance, Medical Teaching Institution.
- 5) Incharge I.T Department,
- 6) Manager HR, AMC.
- 7) Manager HR, ATH
- 8) Secretary, Board of Governors.

BIOMETRIC ATTENDANCE POLICY ACKNOWLEDGMENT FORM

EMPLOYEE NAME: _____

DEPARTMENT NAME: _____

EMPLOYEE ID: _____

DATE _____

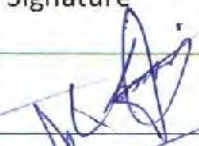
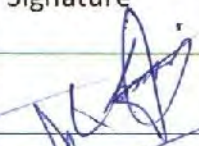
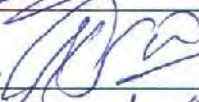
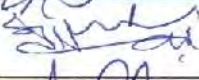
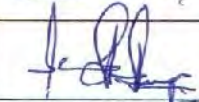
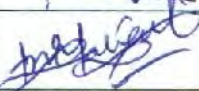
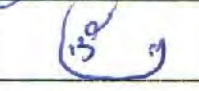

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Signature-Employee

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