

**Minutes of the Meeting of the Board of Governors  
National Institute of Health, Islamabad  
June 18, 2008**

The 57<sup>th</sup> meeting of the Board of Governors, National Institute of Health, Islamabad was held on June 18, 2007 at 10.30 am in committee room of the Ministry of Health. The meeting was attended by the following: -

- |      |   |          |
|------|---|----------|
| i)   | Mr. Khushnood Akhtar Lashari<br>Secretary<br>Ministry of Health   | Chairman |
| ii)  | Dr. Jooma Khan<br>Director General Health   | Member   |
| iii) | Maj. Gen. Farooq Ahmed<br>Nominee of Surgeon General  | Member   |
| iv)  | Dr. Huma Qureshi<br>Executive Director, PMRC  | Member   |
| v)   | Prof. Dr. Rizwana Chaudhry<br>Representative, CPSP  | Member   |
| vi)  | Dr. Muhammad Fayyaz Chaudhry<br>Chairman/Dean, Faculty of Biological Sciences<br>Nominee of V.C Quaid-i-Azam University | Member   |
| vii) | Maj. Gen. I (Rtd) Masood Anwar<br>Executive Director, NIH   | Member   |

1. The meeting started with recitation from the Holy Quran by Maj. Gen. (Rtd) Masood Anwar, Executive Director, NIH.

2. With permission of the chairman, the Executive Director, NIH, started proceeding of the meeting in accordance with agenda.

**3. Agenda item No.1 Implementation status of decisions taken by the Board of Governors in its 56<sup>th</sup> meeting held on September 18, 2007**

3.1 The Executive Director, NIH readout implementation status of the decisions taken by BoG in its 56<sup>th</sup> meeting held on September 18, 2007.

3.2 The Chairman inquired from the Members if they had any observation. The members did not pass any comment on implementation status. The item was thus approved.

4. **Agenda Item No.2: NIH Report 2007 for information and perusal of the BoG:**

4.1 The Executive, NIH informed the Board that report for year 2007 was prepared to apprise the Board of activities that took place during 2007. The salient features of the report are placed at Annex-II for perusal of the Board of Governors. Members commended the work done by NIH in 2007.

5. **Agenda Item No.3: Approval of Revised Budget Estimates for the year 2007-2008 & budget Estimates for the year 2008-2009:**

5.1 With permission of the Chairman the Executive Director invited Director Finance NIH to present Revised Budget Estimates for the year 2006-2007 and Budget Estimates for the year 2007-2008.

5.2. The Chairman remarked that budget proposals appeared reasonable the Board may accord concurrence for the same. However the mechanism to balance budget deficit was lacking. The members seconded observation of the Chairman.

5.3 The Executive Director, NIH informed that deficit will be narrowed through recovery of outstanding dues from provinces and programmes, revision of test charges and fee structure of CMLT as well as austerity measures.

5.4. The Director General Health said that NIH was justified for strong financial support to stream line its multidimensional activities in the field of public health and also proposed following two committee to oversee NIH functioning: -

- a) Technical Supervisory Committee.
- b) Management Supervisory Committee.

5.5. The Executive Director informed that a committee has already been proposed under the agenda item # XI. With regard to query by Chairman for the focal person for this committee the Executive Director proposed the name of Chief, BPD.

5.6. **Decision:**

The Board approved Revised Budget Estimates for the year 2007-2008 and Budget Estimates for the year 2008-2009 as proposed.

5.6. **Action:**

Executive Director, NIH

**6. Agenda Item No. 4: Approval of NIH Future Vision and Proposal for Restructuring:**

6.1. The Executive Director, NIH informed that as desired by the Board of Governors in its last meeting held on September 18, 2007 the Future Vision of NIH for the next 20-30 years is placed at Annexure-IV for perusal and decision by the Board of Governors.

6.2. He further informed that WHO was also requested for their input for which they agreed and constituted a Mission for the same but unfortunately in spite for four times scheduled visits the WHO Mission could not make it.

NIH has already completed restructuring for College of Medical Laboratory Technology and restructuring for Food and Drugs Laboratories is under process on the line of food and Drugs Administration, USA. He requested the Board to approve the proposal in principle; NIH will be able to submit final recommendations for approval of the Board in the near future.

6.3. The Director General Health pointed out that MoH has been facing problems with prevention and control of Infectious Diseases. He proposed NIH functions mainly deal with Public Health activities and productions of Biologicals. These functions are of vital importance and capability of the Institute for such activities needed to be strengthened.

6.4. Representative of Surgeon General said that the Institute was established more than 25 years back while premises were built more than 40 years ago. Since then tremendous changes have taken place in public health and preventive medicine field therefore there is a dire need for restructuring of NIH. He also proposed establishment of very much needed Centre for Metabolic Diseases.

6.5. The Executive Director NIH supported the proposal and said presently every national programme has an independent disease surveillance system which needs unification. This has also been proposed in the restructuring proposal. NIH had already prepared a PC-1 for Public Health Laboratories System with small laboratories in each province initially under control of NIH but later on to be transferred to provinces as independent laboratories.

6.6. The Director General Health supported the proposal and proposed that MoH may convene a meeting to discuss the project with concerned authorities of all provinces.

6.7. The Board appreciated long term vision of NIH and restructuring proposal and was of the consensus to approve the same in principle. The Board also desired that draft proposal for restructuring of NIH be prepared and put to the Board for final decision.

6.8. The issue of construction of EPI building at NIH premises came under discussion. The Director General Health MoH has proposed construction of a Health House where all programmes could be housed for better coordination. Executive Director NIH informed that the construction of EPI building was

reviewed and designed in a manner that with addition of one floor it can accommodate all programmes. The same may be designated as Coordinating Centre as proposed in Vision document.

**6.9. Decision**

- a) The Board in principle accorded approval of the Future Vision and restructuring plan of NIH with the direction to put up a draft of restructuring to the Board of NIH for final decision.
- b) The Director General Health will visit NIH and discuss possibility of housing of all programmes in under construction EPI building.

**6.10. Action by:**

Executive Director, NIH  
Director General Health

**7. Agenda Item No. 5: Approval for Revision of Fee Structure of College of Medical Laboratory Technology:**

7.1. The Executive Director, NIH informed the house that pursuant to Board's directions during its last meeting a detailed proposal for revision of Fee Structure of College of Medical Laboratory Technology has been prepared and placed at Annexure-V for perusal and approval by the Board of Governors.

7.2. Representative of CPSP proposed that increase should be made gradually over a period of three years. Nominee of VC, QUA supported the proposal for implementation from the next session.

**7.3. Decision:**

The Board approved the proposal fee structure for implementation from next year with gradual increase over a period of three years.

**7.4. Action by:**

Executive Director, NIH

**8. Agenda Item No.6: Approval of Revised Laboratory Test Charges for Drug Samples:**

8.1. The Executive Director, NIH informed that laboratory test charges for drugs sample were approved by the BoG in April, 2005. The cost of solvents, chemicals, repair & maintenance and calibration & validation has increased manifold. As existing charges do not cover the cost incurred on these tests

therefore revision of laboratory charges for drug sample has become essential. The Board of Governors is therefore requested to accord approval for the proposed increase in laboratory charges placed at Annexure-VI.

- 8.2. Representative of Surgeon General supported the proposal that cost should be recovered.
- 8.3. Executive Director PMRC remarked that the proposed charges should be less than the market. It was informed that some of the test are specialized and not done by the private sector.
- 8.4. The Chairman observed that proposed increase is more than 100% thus appeared unproportionate and said that actual cost should be charged.

8.5. **Decision:**

- a) The Board unanimously approved that the charges should be increased in accordance with following formula:-

a) For Government Samples	Only cost to be charged.
b) For Private Samples	Charges should equal cost + 15%
c) For Industry Samples	Charges should equal cost + 30%

- b) The Board also decided that charges will be approved on yearly basis on presentation of expected cost of test for the year.

8.6. **Action by:**

Executive Director, NIH.

9. **Agenda Item No. 7: Approval of Revised Laboratory Test Charges for Food & Water Samples:**

- 9.1. The Executive Director informed that the laboratory test charges for food and water sample were approved by the BoG in April, 2005. The cost of solvents, chemicals, repair & maintenance and calibration & validation has increased manifold. As existing charges do not cover the cost incurred on these test therefore revision of laboratory charges for food and water sample has become essential. The Board of Governors is therefore requested to accord approval for the proposed laboratory charges placed at Annexure-VII.

9.2. **Decision:**

The Board unanimously supported increase for laboratory test charges for Food and water samples in accordance with the same formula as for drugs.

9.3. **Action:**

Executive Director, NIH

**10. Agenda Item No. 8: Approval of Distribution of Diagnostic Laboratory Test Charges Shares:**

- 10.1 Presently distribution of laboratory test charges from non entitled patients is 60% to NIH and 40% to staff welfare fund which is not appropriate and has lead to financing deficit. As such to reduce the deficit a proposal for distribution of diagnostic laboratory test charges is placed at **Annex-VIII** for perusal and approval by the Board of Governors.
- 10.2. The agenda item could not be discussed and is to be put in the next meeting of BoG.
- 10.3. **Action**

**11. Agenda Item No.9: Approval of Administrative matters:**

- 11.1. **a) Approval for Appointment of Director Purchase & Procurement (BS-19) National Institute of Health on Contract Basis:**
- 11.2. A post of Director Purchase & Procurement (BS-19) of this Institute is lying vacant. According to method of appointment of the post, it is to be filled in by promotion from Deputy Director Purchase & Procurement (BS-18). The incumbent of the post of Deputy Director Purchase & Procurement (BS-18) could not be promoted due to pending inquiry against him followed by his arrest was released on bail by the Honorable Lahore High Court, Rawalpindi Bench w.e.f. 11<sup>th</sup> January, 2005. The case is still under adjudication.
- 11.3. Previously work of the post for Director P & P was assigned to certain officers in addition to their own duties and an officer of Ministry of Health was posted against this post on deputation, who has been repatriated to Ministry of Health w.e.f. 23.11.2006. These stop gap arrangements could not prove fruitful. It may also be pointed out that a case for appointment of army officer on secondment was also taken up through Ministry of Health but Ministry of Defence could not agree due to non-availability of suitable officer.
- 11.4. The work of Purchase & Procurement Department is suffering due to absence of regular incumbent of the post of Director Purchase & Procurement. It will therefore be appropriate if the post is filled up through open competition on contract basis.
- 11.5. The Board of Governors is requested to accord approval for the same.
- 11.6. **Decision:**
- The Board deferred the proposal due to imposition of ban on recruitment. Same may be presented once the ban is lifted.
- 11.7. **Action:**

Executive Director, NIH.

**11.9. Personal Up-gradation of NIH Officers:**

The Executive Director, NIH informed that Board of Governors in its meeting held on February 19, 2007 decided "The Board keeping in view its earlier decision approved that personal up-gradation of the officers may be considered for next higher scale provided he/she had rendered qualifying service for the second higher scale. Cases of personal up-gradation would be proposed through the Departmental Promotion Committee". Accordingly a meeting of the DPC was held under the Chairmanship of Secretary Health on March 04, 2008 at 11.30 hrs in his office. During meeting the committee observed non-existence of structure for career development of NIH officers resultantly they are stuck for years in the same scale. The Secretary Health directed that the case be placed before Board of Governors in its next meeting for standing approval for personal up-gradation of NIH officers in the light of BoG's decision of February 19, 2007 in future as and when required.

11.10. In the light of above, the Board of Governors is requested to accord approval.

**11.11. Decision:**

The Board approved the proposal of standing approval for up-gradation of the officer to the next higher scale when due provided he/she had rendered qualifying service for the second higher scale and is approved by the concerned Departmental Promotion Committee.

**12. Agenda Item No. 10: Allocation of NIH Land to World Health Organization:**

12.1. The Executive Director informed the Board that pursuant to approval of Ministry of Health and BoG the World Health Organization (WHO) was allocated a piece of NIH land measuring 60 x 145 feet for construction of prefab structure to solve their officer space problem on their initial request. As approved it was categorically conveyed to WHO that in future any construction over and above the allocated land would not be possible without prior approval of BoG.

12.2. On the contrary the WHO has constructed concrete structure building over and above the allocated size of plot mentioned above and has also constructed some additional buildings/structures on the NIH land around WHO office building. The WHO Country Representative was informed of the situation and conveyed that any construction work over and above the allocated NIH land would not be possible without prior approval of Board of Governors of this Institute. WHO did not stop the construction work and still continuing.

12.3. The MoH was also apprised of the situation who conveyed that plot was allotted to WHO without observing the codal formalities. Ministry of Foreign Affairs was not consulted. The Prime Minister and the Cabinet were also not taken in confidence. The Transfer of land did not take place according to the prescribed

procedure not the cost of land was paid by WHO, now intends to start additional construction which can not be done without prior permission of the Government. The MoH advised that matter may be placed on the agenda of the next meeting of BoG, NIH for through discussion.

12.4. Accordingly a brief on allocation of NIH land to WHO and unauthorized construction by WHO on NIH land is placed Annex-X for perusal and decision by the Board of Governors.

12.5. The Board was of the unanimous view to follow law for allocation of land to international agencies.

12.6. **Decision:**

The Board constituted a BoG sub Committee comprising of Director General Health and Executive Director, NIH to visit WHO office and discuss the issue with WHO Country Representative.

12.7. **Action:**

Executive Director, NIH

### **13. Agenda Item No. 11: Disposal of Central Air-Conditioning and Sewage Plant at NIH and Utilization of its Receipts**

13.1. The Executive Director, NIH apprised the Board that Central Air-Conditioning and Sewage Plant were installed in early 1960s during the construction of then National Health Centre now National Institute of Health. These plants have become obsolete and have not been in operation for the last twenty five years or so.

13.2. NIH through Secretary Health MoH approached Ministry of Housing & Works for technical inspection of the plants by experts to assess viability and if not viable to suggest further course of action for disposal of these plants. Ministry of Housing Works assigned the work to Pak PWD who recommended disposal of the plant as it has already outlived its normal life and considered to be unserviceable. With regard to the Sewage Plant PWD has shown their inability to give recommendations and suggested that other department may be approached as expertise in this equipment is not available with them.

13.3. NIH has planned to utilize the sale proceeds of these as under: -

- a) To uplift existing Sera Production Laboratory, complete R&D work on change of technology for ASV production, to uplift and augment Horse Stables and to procure material in order to double ASV production from its own resources.
- b) To prepare for immediate provision of Cell Culture Anti Rabies Vaccine and increase production of Sample Type Anti Rabies and increase production of Sample Type Anti Rabies Vaccine in the interim period in existing facility.

- c) To uplift and provide equipment and material for increasing production of Tetanus Toxoid.
  - d) To install GMP compliant prefabricated facility for production of ORS and Zinc Sulphate Suspension to meet requirements of EPI, LHW and MNC programmes.
- 13.4. In view of above, the Board of Governors is requested to accord approval of the disposal of the above plants through bidding/open auction.
- 13.5. The Chairman informed the Board that FA Health through his note as conveyed observation on utilization of receipts generated through disposal of control air-conditioning and sewage treatment plants at NIH under agenda item No. XI. He has proposed that these receipt should be deposited in the government treasury being sale proceed of the government property.
- 13.6. The Executive Director, NIH with regard to the observation of the FA Health on sale proceeds of air-conditioning and Sewage plants readout Section 21(2)(a) of the NIH Ordinance 1980 which categorically defines that all assets, rights, powers, authorities and privileges and all property, movable and immovable, cash and bank balances, reserve funds, investments and all other interest and rights in or arising out such property and all debts, liabilities and obligations of whatever kind of the laboratories shall be transferred to an vest in the Institute. He said that sale proceeds would become part of NIH receipts. The Board agreed with views of ED, NIH.
- 13.7. The Director General Health remarks that NIH needs funds and supported that receipts should go to NIH account.

13.8. **Decision**

The Board approved the disposal of Central Air-Conditioning and Sewage Treatment plants disposal. The Board also decided that the provisions of NIH ordinance may be conveyed to FA Health. Proceeds will be deposited in NIH account but not spent until clearance by FA Health.

13.9. **Action**

Executive Director, NIH

14. **Agenda Item No. 11: Any other item with permission of the Chairman**

14.1 **a) Promotion of Mr. Asghar Ali, Technical Assistant (BS-16) to the Post of Scientific Officer (BS-17).**

- 14.2. The Executive Director informed that MoH vide letter No. F.4-1/2008-E-II (MISC) dated the April 26, 2008 conveyed that Secretary Health has desired to examined and put up the case of Mr. Asghar Ali, Technical Assistant (B-16) for promotion to the post of Scientific Officer (BS-17) in the BoG's coming meeting.

- 14.3. The case has been examined in the light of application of the individual and the factual position is that presently there are two different cadres existing in BS-18 i.e. Assistant Scientific Officer and Technical Assistant. According to NIH Employees Service Regulation 1989, the post of ASO (BPS-16) is meant for promotion to be filled amongst Technical Assistants, Scientific Assistants, Junior Research Assistant and Scientific Assistant with 05 years experience. If no person is eligible for promotion then the post is to be filled by direct recruitment.
- 14.4. The post of Technical Assistant is meant for direct recruitment with qualification B.Sc Biological Sciences. Earlier this post was in BS-10, subsequently upgraded to BS-14 and then again upgraded to BS-16, with the approval of Board of Governors.
- 14.5. As per NIH Service Regulations 1989, the post of ASO (BS-16) is filled by promotion through feeding post of Technical Assistant. The post of Assistant Scientific Officer (BS-16) is the feeding post for promotion to the post of Scientific Officer (BS-17). The post of Scientific Officer is meant for promotion from among Assistant Scientific Officer (Biochemistry) heavy 03 years experience. If no person is eligible for promotion then by the post is to be filled by direct recruitment/transfer.
- 14.6. According to NIH Employees (Service) Regulation, 1989, the rules for initial appointment as well as for promotion to the post of ASO and Technical Assistant are different therefore these posts cannot be treated at par for promotion to the post of Scientific Officer (BS-17). However, Board of Governors may like to decide.
- 14.7. The case was discussed at length and the Board was of the view that due to limited chances of career development in NIH the employees could not get elevation.
- 14.8. **Decision**
- a) The Board decided to upgrade the existing posts of ASO (B-16) and redesignate as Scientific Officer (BS-17).
  - b) The Board also decided to redesignate the post of Technical Assistant as Assistant Scientific Officer BS-16 to make them eligible for further promotion as per rules.
- 14.9. **Action**
- Executive Director, NIH
- 14.10. **b) Promotion of Mr. Ikram ul Haq, Scientific Officer (BS-17) to the post of Senior Scientific Officer (Botanical) BS-18)**
- 14.11. The Executive Director, NIH informed that the Ministry of Health vide letter No. F.10-27/2008-E-II dated 24<sup>th</sup> May, 2008 conveyed that: -
- i. The post vacated by SSO (Botanical) BS-18 may be allowed to the specialty of Pharmacy/Pharmaceutical in pursuance of NIH Notification dated 23.11.2003.
  - ii. NIH may revise the working paper for promotion to the post of Senior

Scientific Officer (BS-18) in the specialty of Pharmacy/Pharmaceutical and furnish to this Ministry for necessary action.

- 14.12. As per NIH Employees Service Regulation 1989, the post of SSO (Botanical) BS-18 is meant for promotion/direct recruitment with the following criteria: -

Method of Appointment	Minimum qualification and experience for initial recruitment/promotion
i. By promotion from among Scientific Officer (Botanical). ii. If no person is eligible for promotion then by direct recruitment / transfer.	M. Phil in Pharmacognosy with three years experience. OR M. Sc. 2 <sup>nd</sup> Class in Botany with five years experience in Pharmacognosy.

- 14.13. The feeding post of Scientific Officer (Botanical) B-17 which has already been re-designated as Scientific Officer (Medical Technology) BS-17 with the approval of BoG and the incumbent is working against this post. Since the feeding post of Scientific Officer (Botanical) is not available therefore the vacant post of Sr. Scientific Officer (Botanical) BS-18 has to be filled up by direct recruitment as per notified recruitment rules. If the post is to be allocated for promotion under the specific qualification and experience required for this technical post specifically meant for botanical work related to Traditional Medicine research and analytical work.

- 14.14. According to section 13 of the NIH Ordinance 1980, Board of Governors is the competent authority to appoint officers in BS-18 therefore the matter is placed before the Board of Governors for decision.

- 14.15. The matter was discussed by the Board in detail and endorsed the view point of NIH.

- 14.16. **Decision:**

The Board did not agree to change the recruitment rules of the post of Scientific Officer Botanical BS-18 and directed to fill up the post by direct recruitment after lifting of ban on recruitment.

- 14.17. **Action:**

Executive Director

- 14.18. **c) Personal Upgradation of staff from BS-16 to BS-17 & 18**

- 14.20. The Executive Director, NIH explained that the Board of Governors in its meeting held on 19.02.2007 approved that personal upgradation of the officer may be considered for next higher scale provided he/she had rendered qualifying service for the second higher scale. Cases of personal upgradation would be processed through the Department Promotion Committee. Accordingly the officers in BS-17, 18 & 19 have already been given personal upgradation to next higher scale with the approval of BoG and competent

authority.

- 14.21. Now the officers/officials in BS-16 are also requesting for personal upgradation to BS-17 & 18 on the same line. As per criteria laid down by the BoG for personal upgradation following officers/officials BS-16/17, meet the requisite requirements: -

S No.	Name	Designation & Scale	Date of appott in present scale	Total service in BS-16
1	Mr. Abdul Salam	Medical Technologist	S/S BS-17 11.04.1992	16 years (S/S BS-17)
2	Mr. Maqbool Hassan	Asstt. Scientific Officer	15.09.1985	22 years 9 M
3	Mr. Hameed ur Rehman	Sub. Engineer	S/S BS-16 11.03.1986	22 years (S/S BS-16)
4	Mr. Ali Asghar	Asstt Director Store	30.01.1988	20 years
5	Mr. M. Ajmal	Asstt Scientific Officer	06.08.1990	18 years
6	Mr. Ellahi Reham	Asstt Private Secretary	S/S BS-16 14.06.1991	19 years
7	Mr. Gul Zada	ACAO	19.05.1992	16 years
8	Mr. Javed Akhtar Abbasi	Stenographer	S/S BS-16 08.08.1993	15 years
9	Mr. Jaffar Ali Azad	Superintendent	11.02.1996	12 years 3 M

- 14.22 The Board discussed the claim and was of the view that request of the officers/officials in BS-16 in genuine.

14.23. **Decision**

The Board approved personal upgradation of officers in BS-16 to BS-17/18 provided they meet the criteria already fixed by the Board in its meeting held on February 19, 2007 for personal upgradation.

14.24. **Action**

Executive Director NIH

14.25. **d) Regularization of service of N/Sub Retd Muhammad Nawaz, ASO against the post of Senior Security Supervisor BS-15**

- 14.26. The Executive Director, NIH apprised the Board that Naib Subedar Retd Muhammad Nawaz after his retirement from Army Medical Corps on completion of 26 years rank service was initially appointed as Assistant Security Officer on daily wages basis out of welfare fund of this Institute in October 1998 (copy of office order annexed). Later on he was engaged against the post of Senior Security Supervisor (BS-15) on contract basis w.e.f. August 11, 2006 (copy of office order annexed) on fixed remuneration of Rs.7000/- per month out of welfare fund. He has requested for his regularization against the post of Senior Security Supervisor (BS-15) retrospectively on the reason that he has been performing his duty regularly even in odd hours and on public holiday. But he is not eligible to avail fringe benefits like other regular employees of this Institute because of his engagement on fixed remuneration out of welfare fun. Moreover his remuneration is not in accordance with his assignment and may be enhanced reasonably.

14.27. In view of the prevailing security threats and situation his services are essentially required for this Institute on regular basis. The Board of Governor may like to consider his request for regularization from the date of his engagement against the vacant post of Senior Security Supervisor (BS-15) due to retirement of its incumbent.

14.28. The Board was the opinion that the Service Rules do not permit regularization of such a long period in retrospect. However Board appreciated the services rendered by the application and desired to acknowledge.

14.29. **Decision**

The Board decided that once the ban is lifted NB Sub (R) Muhammad Nawaz be employed on the post of Senior Security Supervisor on enhanced pay and grant of one month pay for each one year of service rendered as gratuity at the end of service.

14.30. **Action**

Executive Director, NIH

14.31. **e) Change of method of appointment of the post of Estate Officer (BS-17)**

14.32. With permission of the Chairman the Director Admin explained that the post of Estate Officer as per recruitment rules, is to be filled up through direct recruitment. Previously the post was filled through deputation of a Superintendent (Ch. Iftikhar Ahmed, MoH). After his repatriation to his parent department, the work of post is being managed through internal arrangements. At present 8 Superintendent BS-16 are working in different divisions/departments since years without any opportunity of promotion due to non availability of promotion posts. Only one post of Admin Officer is available for promotion. In order to create more promotion avenue for these officers, it is proposed that the post of Estate Officer, BS-17 may be filled up by promotion amongst the Superintendents BS-16 of this Institute having 5 years service in BS-16 as Superintendent.

14.33. The Board of Governors may kindly accord approval of the above proposal.

14.34. The Board was of consensus that proposal is sound and need consideration to provide more avenues for career development of superintendents.

14.35. The Chairman remarked that if no person is eligible then the post should be filled in by direct recruitment as per rules.

14.36. **Decision:**

The Board approved the proposal and decided to fill up the post by promotion amongst superintendents BS-16 and if no person is eligible then by direct recruitment.

14.37. **Action:**

Executive Director, NIH

15. In the end the Executive Director informed the Board that it might be his last meeting of BoG as he has already severed notice to Ministry of Health for termination of his contract. He thanked the Board for its guidance and cooperation to run the affairs of NIH smoothly and effectively during his tenure.

16. The Board unanimously appreciated efforts of Maj. Gen (R) Masood Anwar as Executive Director, NIH uplifting of the Institute. NIH, in his tenure has certainly made turn around and has been put on path of progress, which is quite visible. The Board wished him success in his future life.

The meeting ended with a vote of thanks to and from the Chairman.

Prepared by

Maj. Gen @  
Masood Anwar  
Executive Director/  
Secretary BoG, NIH

Approved by

(Khushnood Akhtar Lashari)  
Secretary Health/Chairman, BoG