



HUMAN RESOURCE MANUAL

YT NURSING ACADEMY



ACKNOWLEDGEMENT

FOREWORD FROM THE PROMOTER

As the Promoter of YT Nursing Academy, I am immensely proud to present our **Institute HR Manual**. This document represents a foundational milestone in our journey to establish an exemplary Higher Education Institution that caters to produce skilled and competent Nurses through our Three-year Diploma in General Nursing Midwifery (GNM).

Nursing is a noble calling rooted in compassion, scientific rigor, and unwavering dedication. To instill these values in our students, we must first cultivate an internal ecosystem that mirrors them. Our faculty and staff are the beating heart of this academy. Your expertise, mentorship, and daily commitment shape the future healthcare workforce of Bhutan and beyond.

Our Core Commitments

- **Professional Growth:** We are committed to fostering a culture of continuous learning, research, and professional development, ensuring you have opportunities to advance alongside the evolving healthcare sector.
- **Equity and Respect:** This manual establishes transparent, fair, and equitable guidelines designed to protect your rights, define clear expectations, and promote a collaborative work environment.
- **Institutional Integrity:** Every policy outlined herein reflects our shared dedication to accountability, transparency, and the highest standards of regulatory compliance.

As we grow together, let us remember that the success of YT Nursing Academy rests upon our collective integrity and mutual respect. I invite every member of our faculty and staff to embrace the spirit of this manual—not merely as a set of rules, but as a shared roadmap for our institutional culture.

Thank you for dedicating your talents, passion, and vision to our shared mission.

Tharchen

(Promoter)
YT Nursing Academy
Chummey, Bumthang

FOREWORD FROM THE DEAN

TABLE OF CONTENTS	
CONTENT	PAGE NUMBERS
Acknowledgement	1
Foreword from the Promotor	2
Foreword from the Dean	3
Table of Content	4
CHAPTER – 1 Introduction	8
• Purpose of the HR Manual	8
• Vision, Mission, and Core Values of the Institution	9
• Scope and Applicability (teaching, non-teaching, clinical, contractual staff)	10
• Guiding Principles (professionalism, compassion, integrity, accountability)	11
• Code of Professional Conduct	12
• Legal and Regulatory Framework (national nursing council, education board, labor laws)	14
CHAPTER – 2 – Governance and Management	16
(I)Governance	
• Governance Framework	
• Role of the Promotor in Institutional Governance	
• Strategic Planning and Institutional Vision	
• Policy Formulation and Approval	
• Institutional Oversight and Accountability	
• Financial Governance and Resource Allocation	
• External Relations and Stakeholder Engagement	
(II)Management	19
• Institutional Management Structure	
• Role and Responsibilities of the Dean	
• Academic Leadership and Academic Administration	
• Administrative Management and Institutional Operations	
• Faculty Management and Human Resource Oversight	
• Student Affairs Management	
• Financial and Resource Management	
• Institutional Compliance with University Regulations	
(III)Supporting Structures	22
• Academic and Administrative Leadership Team	
• Institutional Committees and Their Functions	
• Decision-Making and Reporting Mechanisms	
• Quality Assurance and Monitoring Systems	
• Principles of Good Governance and Institutional Management	
CHAPTER -3 Organizational Structure	26
• Organizational chart	
• Reporting hierarchy	
CHAPTER -4 Recruitment and Selection Policy	28
• Workforce Planning	
• Job Descriptions (a) Dean (b) Deputy Dean of Academic Affairs (c) Deputy Dean of Student Affairs (d) Faculty	

(e) Lab technician (e) Counsellor (f) Warden/ Matron (g) State Manager	
• Interview & Evaluation Process	
• Offer Letter & Appointment Terms	
CHAPTER -5 Compensation and Benefits	48
• Salary Structure	
• Allowances (clinical allowance, academic allowance, housing, etc.)	
• Provident Fund / Social Security	
• Health Insurance	
• Leave Travel Allowance (if applicable)	
CHAPTER -6 Working Hours and Leave Policy	49
• Working hours (teaching and non-teaching)	
• Clinical duty hours	
• Attendance policy	
• Leave Types:	
o Casual Leave	
o Sick Leave	
o Earned Leave	
o Maternity / Paternity Leave	
o Study Leave	
o Compassionate Leave	
• Leave application procedure	
CHAPTER 7- Code of Conduct and Professional Ethics	43
• Professional behavior expectations	
• Dress code (clinical and classroom settings)	
• Confidentiality and patient privacy	
CHAPTER 8- Performance Management System	54
• Annual Appraisal System	
• Key Performance Indicators (KPIs)	
o Teaching effectiveness	
o Clinical supervision	
o Research contributions	
o Community outreach	
• Feedback mechanism	
• Increment policy	
CHAPTER 9 -Faculty Development and Training	58
• Orientation program for new staff	
• Continuing Nursing Education (CNE)	
• Workshops and seminars	
• Research and publication support	
• Higher education encouragement	
• Clinical skill upgradation	
CHAPTER 10- Discipline and Grievance Redressal	60
• Minor and major misconduct	
• Disciplinary procedure	
• Show cause notice process	

• Suspension and termination policy	
• Appeal mechanism	
• Grievance committee structure	

CHAPTER 1

Introduction

Purpose of the Manual

YT Nursing Academy was established in September 2025 with a vision to nurture competent, compassionate, and ethically grounded nursing professionals who will serve society with skill and integrity. As a healthcare-education institution, we recognize that the strength of our academy lies not only in infrastructure or curriculum, but in the people who carry forward its mission—our faculty, clinical instructors, and administrative staff.

This Human Resource Manual has been developed to provide a clear framework for the management, development, and welfare of all employees of YT Nursing Academy. It outlines the policies, procedures, and guiding principles that govern recruitment, professional conduct, performance expectations, compensation, growth opportunities, and workplace relationships within the institution.

The purpose of this manual is to:

- Establish transparent and fair HR practices
- Ensure compliance with applicable regulatory and statutory requirements
- Promote professionalism, accountability, and ethical conduct
- Foster a safe, respectful, and inclusive working environment
- Support continuous learning and faculty development
- Provide clarity in roles, responsibilities, and institutional processes

As a newly founded institution, we are committed to building a culture rooted in respect, collaboration, compassion, and excellence. This manual is not merely a rulebook, but a foundational document that reflects our values and our commitment to integrity in both education and healthcare practice in Bhutan, in line with KGUMBS standards.

All employees are expected to familiarize themselves with the contents of this manual and adhere to the policies herein. At the same time, YT Nursing Academy remains committed to reviewing and refining these policies as the institution grows and evolves.

May this manual serve as a guide that strengthens our shared purpose—to educate, to heal, and to lead with professionalism and heart.

YT Nursing Academy
September 2025

I. VISION, MISSION, CORE VALUES OF THE INSTITUTION

Vision

To advance toward global health care through Bhutanese excellence in clinical skills and compassionate care.

Mission

To empower ethical, compassionate nursing and midwifery leaders to elevate healthcare in Bhutan and beyond.

Core Values

- ✓ *Compassion and Care*
- ✓ *Professionalism and excellence*
- ✓ *Selfless Service*
- ✓ *Honesty and Integrity*
- ✓ *Accountability and Responsibility*

II. SCOPE AND APPLICABILITY

This Human Resource Manual applies to all categories of employees engaged by YT Nursing Academy, irrespective of designation or employment status. The policies and procedures contained herein are designed to ensure consistency, fairness, and clarity in all employment-related matters.

This manual is applicable to:

- Teaching Staff – Professors, Associate Professors, Lecturers, Assistant Lecturers and Visiting Faculty.
- Clinical Staff – including Clinical Coordinators, Preceptors, and faculty assigned to hospital or community postings.
- Non-Teaching Staff – including administrative personnel, office staff, accounts personnel, librarians, laboratory technicians, hostel wardens, and support staff.
- Contractual and Part-Time Staff – including consultants, temporary employees, outsourced personnel, and project-based appointments.

While certain benefits, entitlements, or service conditions may vary depending on employment category or contractual terms, the fundamental standards of conduct, institutional expectations, and ethical responsibilities outlined in this manual apply uniformly to all.

Every employee, regardless of role, contributes to the academic excellence and professional reputation of YT Nursing Academy and is therefore expected to uphold the policies set forth in this document.

III. GUIDING PRINCIPLES

As an institution under KGUMSB, YT Nursing Academy is committed to excellence in nursing education, ethical healthcare practice, and responsible institutional governance. The following guiding principles form the foundation of all human resource policies and institutional conduct:

1. Professionalism

YT Nursing Academy upholds the highest standards of professional behavior in academic, clinical, and administrative domains. Faculty and staff are expected to demonstrate competence, discipline, punctuality, respect for institutional hierarchy, and adherence to KGUMBS academic guidelines and nursing regulatory standards. Professionalism also includes maintaining appropriate boundaries, ethical clinical supervision, and commitment to lifelong learning.

2. Compassion

Nursing education is rooted in compassion. As educators and healthcare professionals, we model empathy, sensitivity, and respect in all interactions—with students, patients, colleagues, and the broader community. The Academy fosters a supportive and inclusive environment where dignity and kindness guide communication and collaboration.

3. Integrity

Integrity is central to academic credibility and clinical trust. All employees are expected to uphold honesty in teaching, assessment, documentation, research, financial dealings, and administrative responsibilities. Confidentiality of patient information, fairness in student evaluation, and transparency in institutional processes are non-negotiable standards.

4. Accountability

Each member of the Academy is accountable for the faithful discharge of assigned duties. Accountability includes compliance with KGUMS regulations, responsiveness to feedback, responsible use of institutional resources, and commitment to continuous improvement. Leaders and staff alike share responsibility for maintaining the reputation, quality, and mission of YT Nursing Academy.

Together, these principles shape a culture of excellence, ethical responsibility, and compassionate service—reflecting both the values of YT Nursing Academy and the academic standards of KGUMS.

IV. CODE OF PROFESSIONAL CONDUCT

1. Professional Integrity

Faculty members must maintain the highest standards of honesty, integrity, and ethical behavior.

- Upholding truth and fairness in teaching, research, and evaluation.
- Avoiding plagiarism, falsification of data, or academic dishonesty.
- Maintaining transparency in academic and administrative duties.
- Acting in a manner that upholds the reputation of the institution and university.

2. Commitment to Teaching and Students

Faculty members are expected to prioritize student learning and development.

- Delivering quality teaching and effective learning experiences.
- Maintaining professional boundaries with students.
- Ensuring fair and unbiased evaluation of student performance.
- Providing guidance, mentorship, and academic support.
- Respecting the dignity, diversity, and rights of all students.

3. Professional Relationships

Faculty must maintain respectful and collaborative relationships with colleagues and staff.

- Promoting teamwork and collegiality.
- Avoiding discrimination, harassment, or intimidation.
- Respecting institutional hierarchy and administrative procedures.
- Supporting institutional goals and policies.

4. Responsibility in Research and Scholarship

Faculty members involved in research must adhere to ethical research practices.

- Conduct research with integrity and accountability.
- Obtain ethical approval where required.
- Properly acknowledge sources and contributions.
- Avoid fabrication, falsification, and plagiarism.

5. Use of Institutional Resources

Faculty should use institutional resources responsibly.

- II. Proper use of laboratories, equipment, and funds.

III. Avoiding misuse of institutional property for personal gain.

IV. Ensuring confidentiality of institutional information

6. Compliance with Laws and Institutional Policies

- National laws of Bhutan
- Institutional regulations and university policies
- Professional licensing requirements where applicable.

7. Professional Development

Faculty members are expected to:

- Continuously update their knowledge and skills.
- Participate in Continuing Professional Development (CPD) or professional training programs.
- Contribute to academic development through research, publications, and service.

8. Disciplinary Action for Misconduct

Violation of the Code of Professional Conduct may result in disciplinary action

Possible actions include:

- Warning or reprimand
- Suspension
- Termination of employment (for serious misconduct)

V. LEGAL AND ACADEMIC REGULATIONS

1. Statutory and Regulatory Compliance

YT Nursing Academy shall operate in full compliance with the academic, professional, and regulatory standards prescribed by KGUMSB (Khesar Gyalpo University of Medical Sciences of Bhutan) and the Bhutan Medical and Health Council (BMHC), along with all applicable laws of the Kingdom of Bhutan.

All institutional policies, employment practices, academic programs, and clinical training activities shall align with:

- KGUMSB academic regulations and curriculum standards
- BQPC registration and professional practice requirements
- The Labour and Employment Act of Bhutan (as amended)
- The Civil Service Act of Bhutan (where applicable)
- Relevant public health, safety, and penal laws of the Kingdom of Bhutan

2. Professional Registration and Licensure

All faculty members engaged in teaching nursing subjects, clinical supervision, or patient-related instruction must:

- Hold valid registration and licensure with the Bhutan Medical and Health Council.
- Maintain registration in good standing throughout their tenure of employment.
- Immediately inform the Academy of any suspension, restriction, or cancellation of their professional license.

Failure to maintain valid professional registration shall constitute grounds for suspension or termination of employment.

3. Scope of Practice

Faculty and clinical instructors shall practice strictly within:

- Their approved professional qualifications
- The scope defined by BQPC regulations
- The academic framework prescribed by KGUMSB

No employee shall undertake duties beyond their legal scope of practice or authorize students to perform procedures outside their permitted level of training.

4. Academic and Clinical Compliance

YT Nursing Academy shall ensure that:

- Curriculum delivery adheres to KGUMSB standards.
- Clinical postings are conducted only in approved teaching hospitals
- Student–faculty ratios comply with KGUMSB norms.
- Required clinical hours and competencies are documented accurately.
- Assessment and examination processes follow prescribed academic guidelines with OSCE stations.

5. Ethical Conduct and Professional Standards

All employees shall adhere to:

- The Code of Professional Conduct issued by the BQPC.
- Institutional Code of Conduct
- Ethical standards related to patient care, confidentiality, and professional boundaries.

Violations of professional ethics may result in internal disciplinary action and, where required, reporting to the Bhutan Medical and Health Council.

6. Employment Law Compliance

The Academy shall ensure that all employment relationships comply with:

- The Labour and Employment Act of Bhutan.
- Occupational health and safety standards.
- Lawful procedures for disciplinary action, suspension, and termination.
- Non-discrimination and equal opportunity principles.

Employees are expected to comply with workplace safety regulations and institutional policies designed to maintain a safe learning and clinical environment.

7. Reporting Obligations

YT Nursing Academy reserves the right and obligation to report to relevant authorities, including KGUMSB, in cases involving:

- Professional misconduct
- Gross negligence
- Ethical violations
- Criminal behavior
- Falsification of credentials or records

Such reporting shall be conducted in accordance with due process and applicable legal requirements.

CHAPTER -2

GOVERNANCE AND MANAGEMENT

I. Governance

1. Governance Framework

The institution shall maintain a clear governance structure to ensure accountability, transparency, and strategic leadership. Governance refers to the system through which the institution is directed and controlled to achieve its mission and objectives. The governance framework ensures that policies, strategic plans, and institutional goals are developed and monitored effectively. Governance responsibilities shall be vested in the Promotor, who provides overall oversight and direction for the institution.

2. Role of the Promotor in Institutional Governance

The Promotor shall serve as the highest authority responsible for institutional governance. The Promotor provides strategic guidance and ensures that the institution functions in accordance with national laws, university regulations, and institutional policies. The Promotor shall:

- Provide overall leadership and vision for the institution.
- Ensure that institutional goals align with national education priorities and university standards.
- Oversee the performance and accountability of institutional management.

3. Strategic Planning and Institutional Vision

Strategic planning is essential for ensuring the long-term sustainability and growth of the institution.

The Promotor, in consultation with the Dean and institutional leadership, shall guide the development of strategic plans that include:

- Institutional vision, mission, and values.
- Infrastructure and resource development.
- Research and innovation priorities.
- Community engagement and partnerships.

Strategic plans shall be periodically reviewed and updated to respond to changing educational and healthcare needs.

4. Policy Formulation and Approval

The institution shall develop policies that support effective governance and operational management. All institutional policies shall align with the academic and administrative regulations of KGUMSB.

The Promotor shall approve policies related to:

- Human resource management
- Student affairs
- Financial management
- Institutional governance in consultation with the Board

Once approved, these policies shall be implemented by the Dean and relevant administrative units.

5. Institutional Oversight and Accountability

The Promotor shall ensure that appropriate mechanisms are in place to monitor institutional performance and maintain accountability.

Oversight responsibilities include:

- Reviewing institutional reports and performance indicators.
- Ensuring transparency in decision-making processes.
- Evaluating the effectiveness of institutional leadership.

The Promotor may request periodic reports from the Dean regarding academic, administrative, and financial matters.

6. Financial Governance and Resource Allocation

Financial governance ensures responsible management of institutional resources.

The Promotor shall:

- Approve annual institutional budgets.
- Ensure that financial resources are allocated effectively to support academic and operational needs.
- Monitor financial accountability and transparency.
- Approve major infrastructure investments and institutional development projects.

Sound financial governance ensures sustainability and responsible use of institutional resources.

7. External Relations and Stakeholder Engagement

The Promotor shall support the development of institutional partnerships and relationships with relevant stakeholders.

These may include:

- Healthcare institutions and clinical training centers
- Government agencies
- Professional organizations
- Community organizations
- National and international academic institutions

Such collaborations enhance educational opportunities, research activities, and professional development.

II. Management

1. Institutional Management Structure

Institutional management refers to the operational leadership and administration responsible for implementing institutional policies and achieving academic goals.

The management structure shall be headed by the Dean, who is responsible for the overall administration of the institution. The Dean shall be supported by Deputy Deans, module coordinators, and administrative staff.

This management structure ensures effective coordination of academic, administrative, and student-related activities. The Dean heads the Academic Board and chairs all its committees.

2. Role and Responsibilities of the Dean

The Dean shall serve as the chief executive and academic head of the institution. The Dean in cooperation with the committee, shall be responsible for implementing policies approved by the Promotor and ensuring compliance with university regulations.

The Dean shall:

- Provide leadership in academic and administrative matters.
- Ensure effective functioning of academic programs.
- Supervise faculty and administrative staff.

3. Academic Leadership and Academic Administration

The Dean along with the Academic Board shall provide leadership in maintaining high academic standards and ensuring effective delivery of educational programs.

Responsibilities include:

- Implementing the curriculum approved by KGUMSB.
- Ensuring quality teaching and learning processes.
- Overseeing examination and assessment procedures.
- Promoting research, scholarship, and professional development.

4. Administrative Management and Institutional Operations

The Academic Board under the leadership of the Dean, shall oversee the day-to-day administrative operations of the institution. Administrative responsibilities include:

- Ensuring smooth functioning of institutional activities.
- Coordinating among academic departments and administrative units.
- Implementing institutional policies and procedures.
- Maintaining discipline and professional conduct among staff and students.

5. Faculty Management and Human Resource Oversight

The Academic Board chaired by the Dean, assisted by the Deputy Deans, shall oversee faculty recruitment, deployment, and professional development in accordance with institutional policies.

Responsibilities include:

- Ensuring recruitment of qualified faculty members; overseeing work of the Deputy Deans
- Maintaining appropriate faculty workload and student–faculty ratios.
- Conducting faculty performance evaluations
- Encouraging participation in professional development programs and research activities.

6. Student Affairs Management

The Dean, assisted by Deputy Deans shall ensure that student welfare and academic support systems are effectively implemented.

Key responsibilities include:

- Ensuring fair and transparent admission procedures.
- Providing academic counseling and mentoring for students.
- Supporting extracurricular and co-curricular activities.
- Addressing student grievances through appropriate mechanisms.
- Maintaining student discipline and professional conduct.

7 Financial and Resource Management

The Dean shall ensure efficient and responsible management of institutional resources.

Responsibilities include:

- Assisting the Promotor in annual budgets and operational plans.
- Make the Promotor aware of the need of finances for operational expenses
- Ensuring efficient use of facilities and equipment.
- Maintaining financial records and accountability.

8. Institutional Compliance with University Regulations

The Board shall ensure that the institution complies with all academic and administrative regulations set by KGUMSB.

Compliance responsibilities include:

- Following university academic regulations.
- Maintaining required faculty qualifications and staffing patterns.

- Adhering to academic standards and program requirements.
- Ensuring compliance with regulatory inspections and accreditation processes.

9. Academic and Administrative Leadership Team

To support effective institutional management, the Dean may be assisted by a leadership team that may include:

- Deputy Dean (Academic Affairs)
- Deputy Dean (Student Affairs)
- Module Coordinators
- Faculty

These leaders support the Dean in implementing academic programs, managing student services, and ensuring smooth institutional operations.

III. SUPPORTING STRUCTURES

Academic and Administrative Leadership Team

To support the effective management of the institution, the Dean shall be assisted by an Academic and Administrative Leadership Team. This team plays an important role in coordinating academic programs, administrative operations, and student support services. Members of the leadership team may include the Deputy Dean (Academic Affairs), Deputy Dean (Student Affairs), Program Coordinators or Heads of Departments, and Administrative Officers. The Deputy Dean (Academic Affairs) supports the Dean in implementing academic regulations, coordinating curriculum delivery, monitoring teaching and learning activities, and overseeing examination processes.

The Deputy Dean (Student Affairs) focuses on student welfare, counseling services, student discipline, and co-curricular activities. Program Coordinators ensure that academic programs are implemented according to curriculum requirements and academic schedules. Administrative officers assist in managing institutional operations such as human resources, finance, and records management. The leadership team shall meet periodically to review academic progress, discuss institutional matters, and support the Dean in implementing institutional policies and decisions.

Academic Committee

Members	Portfolio	Term
Dean	Chair	
Deputy Dean of Academic Affairs	Secretariat	
Other Board members	Faculty	

Examination Committee

Members	Portfolio	Term
Deputy Dean of Academic Affairs	Chair	
Other members	All Faculty	
Dean	Ex- officio	

Student Affairs Committee

Members	Portfolio	Term
Deputy Dean of Student Affairs	Chair	1 term – 2years
Faculty	Members	1 term – 2years
Matron and Warden	Members	1 term – 2years

Sports incharge	Member	1 term – 2 years
Student Counsellors	Members	1 term – 2years
Dean	Ex officio	

Disciplinary Committee

Members	Portfolio	Term
Deputy Dean of Student Affairs	Chair	1 term – 2years
Faculty	Members	1 term – 2years
Matron and Warden	Members	1 term – 2years
Student Councilor	Members	1 term – 2 years
College counsellor	member	1 term – 2 years

Institutional Committees and Their Functions

To ensure participatory governance and effective academic administration, the institution shall establish a number of functional committees. These committees assist the Dean in addressing specific academic, administrative, and student-related matters and help promote transparency and collective decision-making. Typical committees may include the Academic Committee, Examination Committee, Research and Ethics Committee, Student Affairs Committee, Quality Assurance Committee, and Grievance Redressal Committee. The Academic Committee monitors curriculum implementation and academic standards, while the Examination Committee oversees examination planning, assessment processes, and confidentiality of examination materials. The Research and Ethics Committee promotes research activities and ensures that all research conducted within the institution adheres to ethical standards.

The Student Affairs Committee addresses matters related to student welfare and engagement, and the Quality Assurance Committee monitors institutional quality standards and performance indicators. The Grievance Redressal Committee provides a mechanism for addressing concerns raised by students or staff. Each committee shall function according to defined responsibilities and shall report its recommendations to the Dean for consideration and implementation.

Decision-Making and Reporting Mechanisms

The institution shall maintain clear and transparent decision-making and reporting mechanisms to ensure accountability and efficient institutional functioning. Strategic decisions related to institutional policy, long-term planning, and major resource allocation shall be approved by the

Promotor. The Dean shall be responsible for operational and academic decisions related to the day-to-day functioning of the institution. Committees and leadership team members shall provide recommendations and inputs to support informed decision-making. All major decisions shall be documented and communicated to relevant stakeholders to ensure clarity and transparency. The Dean shall also submit periodic reports to the Promotor on academic performance, administrative matters, financial status, and institutional development. These reporting mechanisms help ensure that institutional goals are monitored and achieved effectively.

Quality Assurance and Monitoring Systems

The institution shall establish quality assurance and monitoring systems to maintain high academic standards and promote continuous improvement. These systems are designed to evaluate the effectiveness of teaching, learning, research, and administrative processes. Quality assurance activities may include regular academic reviews, faculty performance evaluations, student feedback mechanisms, internal audits, and program assessments.

The Quality Assurance Committee shall coordinate these activities and provide recommendations for improvement. The Dean shall ensure that quality assurance findings are reviewed and that necessary corrective measures are implemented. Through systematic monitoring and evaluation, the institution seeks to maintain compliance with university regulations and uphold standards of academic excellence in alignment with the requirements of the Khesar Gyalpo University of Medical Sciences of Bhutan. M and E is also taken care of by the Quality Assurance Committee

Internal Quality Assurance System

Members	Portfolio	Term
QA focal person/ Chairperson	Chair	1 term – 2years
Academic Representative	Member	1 term – 2years
Clinical training Co ordinator	Member	1 term – 2years
Research Co ordinator	member	1 term – 2years
Deputy Dean of student affairs	Member	1 term – 2years
Administrative officer	Member	1 term – 2years

Principles of Good Governance and Institutional Management

The institution shall be guided by principles of good governance and responsible management in all its activities. These principles include transparency in decision-making, accountability in leadership, fairness in institutional processes, and adherence to ethical standards. Institutional leaders and staff are expected to demonstrate professionalism, integrity, and respect in their interactions with students, colleagues, and stakeholders. The institution shall also promote participatory decision-making, encourage collaboration among faculty and staff, and ensure

responsible use of institutional resources. By adhering to these principles, the institution aims to foster a culture of trust, excellence, and continuous improvement in accordance with the educational values and regulatory standards established in Bhutan.

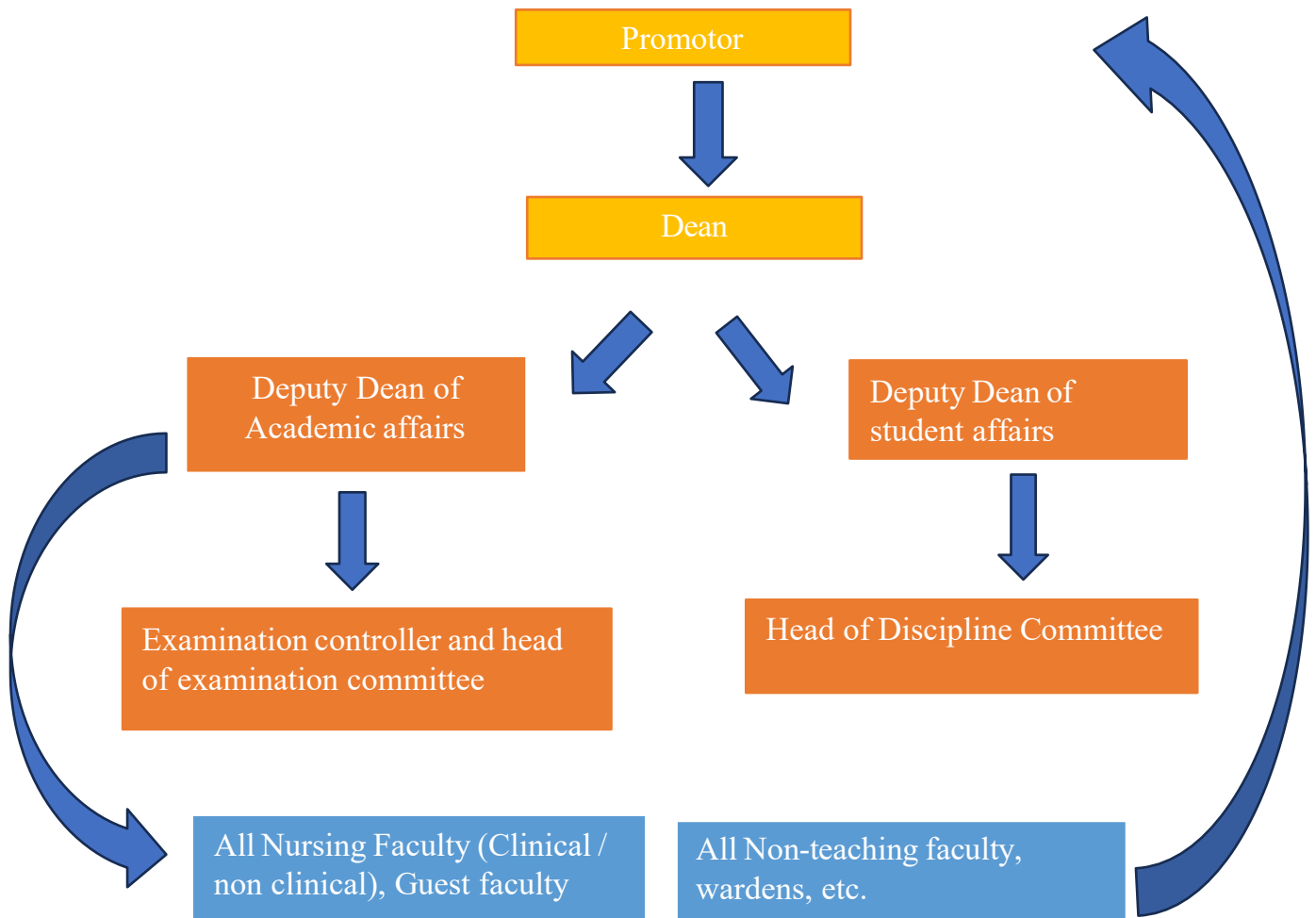
Decision-Making Framework

Decision-making within the institution shall follow a structured framework:

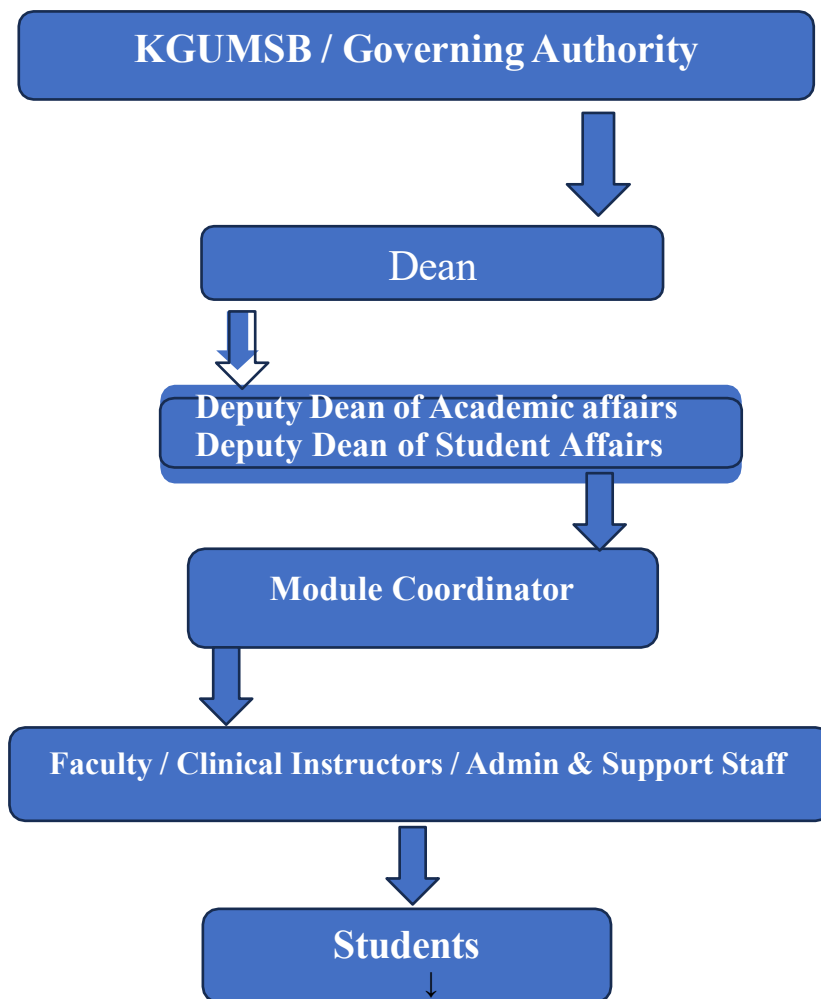
Level	Responsibility
Promotor	Strategic governance and policy approval
Dean	Institutional management and implementation
Deputy Deans	Academic and student administration
Committees	Advisory and operational support
Major	policy decisions shall require approval of the Promotor.

CHAPTER -3

Organizational Structure



II. REPORTING HIERARCHY



Purpose of Reporting Structure

The reporting structure ensures:

- Clear accountability
- Efficient communication
- Regulatory compliance
- Proper supervision of students
- Transparency in decision-making
- Smooth institutional functioning

CHAPTER -4

RECRUITMENT AND SELECTION POLICY

1. Workforce Planning

YT Nursing Academy is committed to maintaining an adequate number of qualified and licensed personnel to ensure high standards of nursing education and regulatory compliance. Workforce planning shall be conducted annually to align staffing requirements with student intake, academic workload, clinical training needs, and institutional growth plans.

Staffing levels shall comply with the faculty–student ratios and academic standards prescribed by KGUMSB and the professional registration requirements of the BQPC. All teaching and clinical faculty must hold valid professional licensure and practice within their approved scope.

Workforce planning shall consider:

- Approved student intake capacity
- Subject-wise academic requirements
- Clinical supervision needs
- Administrative and support service demands
- Anticipated vacancies and succession planning

The Academy shall ensure timely recruitment to prevent disruption of academic and clinical activities. Workforce projections shall be aligned with the institutional budget and reviewed periodically to maintain operational efficiency, sustainability, and regulatory compliance.

2. Job Descriptions

Job Description of Dean

a) Academic Leadership

- Provide overall academic direction and ensure implementation of KGUMSB-approved curriculum.
- Oversee high standards of teaching, learning, and student assessment.
- Oversee academic planning, examination processes, and faculty development.
- Promote research, innovation, and continuing professional development.
- He/ she is the main source of communication between KGUMSB and YT nursing academy

b) Regulatory Compliance

- Ensure full compliance with KGUMSB regulations and BQPC professional requirements.

- Oversee institutional readiness for inspections, accreditation, and audits.
- Ensure faculty maintain valid professional registration and licensure.
- Attend programs arranged by the University for Deans

c) Administrative Oversight

- Supervise the Deputy Deans
- Oversee that the institution follows the norms of KGUMBS
- Approve staffing plans and workload allocation.
- Ensure efficient use of institutional resources and adherence to approved budgets.
- Implement institutional policies and governance structures.

d) Student Affairs and Discipline

- Oversee student welfare, discipline, and grievance mechanisms.
- Foster a culture of professionalism, respect, and ethical conduct.

e) Strategic Development

- Lead long-term institutional planning and development initiatives.
- Represent YT Nursing Academy in academic, regulatory, and professional forums.

Job description of Deputy Dean of Academic affairs

Institute Academic Committee- Deputy Dean of Academic affairs

- 1) The Deputy Dean of Academic affairs will be the Secretariat of the Academic Committee and will work with the Dean who will chair the meetings. He/ she will serve as the guarantor of the academic standards and quality in respect of the design, delivery, development, and promotion of the best practice in curricula, programs, general education matters, and research.
- 2) Academic Committee shall also function as the Institute Examination Committee. However, the Deputy Dean of Academic Affairs shall chair the Examination Committee.
- 3) YT nursing Academic Committee shall develop guidelines and standard operating procedures in conformity to the TORs, rules, and regulations of the University.
- 4) The Deputy Dean of Academic affairs takes care of the Dean's responsibilities in the absence of the Dean

a) Academic Governance and Compliance

- Ensure implementation of KGUMSB Academic Regulations within the institute.
- Oversee compliance with curriculum approval, validation, and review procedures.

- Liaise with the Office of Academic Affairs, Office of the Controller, and KGUMSB.
- Ensure adherence to academic term structures, credit framework, and program requirements.
- Attend training programs and workshops arranged by the University
- Deputy Dean will be the Secretariat of the Academic Committee

b) Curriculum Management

- Facilitate curriculum development, review, and minor revisions as per regulations.
- Ensure curriculum implementation aligns with approved structure and learning outcomes.
- Monitor infusion of competency-based education, clinical exposure, and community-based learning.

c) Teaching and Learning Oversight

- Supervise academic departments to ensure quality teaching and learning.
- Monitor faculty workload allocation and teaching schedules.
- Ensure compliance with minimum teaching weeks and academic calendar.
- Oversee maintenance of academic documentation and module descriptors.

d) Assessment and Examination Oversight

- Chair the Institute Examination Committee.
- Ensure adherence to examination guidelines, moderation processes, and grading standards.
- Monitor Continuous Assessment (CA) and Summative Assessment (SA) compliance.
- Oversee academic integrity matters related to examinations and unfair practices.
- Coordinate re-examinations, repeat semesters, and academic appeals.

e) Academic Monitoring and Evaluation/ Quality Assurance

- Facilitate routine Monitoring and Evaluation (M&E) of academic activities.
- Submit academic reports to the Dean and KGUMSB as required.
- Coordinate internal academic audits in collaboration with IQAC.
- Ensure proper retention and security of academic records.
- The Deputy Dean of Academic affairs will also take care of the Quality Assurance of the institute

f) Faculty Development and Academic Support

- Promote faculty development programs in collaboration with IQAC/ BQPC

- Encourage research engagement and scholarly activities.
- Mentor junior faculty in academic planning and compliance.

g) Student Academic Progression

- Monitor student eligibility for examinations and progression.
- Ensure enforcement of attendance and continuous assessment requirements.
- Oversee academic advisement and support systems.

h) Institutional Committees

- Serve as a member of the Institute Academic Committee.
- Coordinate submissions to the Academic Board when required.
- Support preparations for accreditation and affiliation reviews.

Job description of Deputy Dean of Student affairs

a) Admission and Registration

- Coordinate student admission processes in alignment with KGUMSB Admission and Registration Regulations.
- Ensure compliance with prescribed eligibility criteria and selection procedures.
- Oversee maintenance of accurate student records and registration databases.
- Ensure timely submission of student enrolment data to the University.

b) Student Welfare and Support Services

- Oversee student orientation programs.
- Ensure provision of academic and non-academic support services, including ICT, library access, counselling, and co-curricular activities.
- Monitor hostel accommodation and student welfare services
- Promote student well-being and holistic development.

c) Discipline and Code of Conduct

- Chair the Institute Disciplinary Committee for student misconduct (non-academic matters).
- Ensure enforcement of the Student Code of Conduct in accordance with university regulations.
- Investigate complaints related to student misconduct.
- Recommend appropriate disciplinary measures in accordance with due process.
- Coordinate with the University Appeal Committee in case of appeals.

d) Academic Integrity (Student Conduct Dimension)

- Collaborate with the Deputy Dean – Academic Affairs in cases involving academic dishonesty or unfair examination practices.
- Ensure students are educated on academic integrity policies and ethical conduct.

e) Student Records and Documentation

- Maintain confidential records of student disciplinary actions, awards, achievements, and welfare interventions.

f) Ensure proper documentation and secure retention of student records as prescribed by regulations.

g) Leave and Attendance Oversight

- Approve and monitor student leave in coordination with the Dean
- Ensure proper maintenance of attendance and leave logs.

h) Student Engagement and Co-curricular Activities

- Coordinate student leadership programs, innovation activities, and extracurricular initiatives.
- Encourage community engagement and professional development activities.

i) Appeals and Grievances

- Receive and review student grievances related to admission, registration, and welfare.
- Facilitate fair resolution at institute level before escalation to University Appeal Committee.

i) Research and Scholarly articles

The Deputy Dean will involve in writing Research and Scholarly articles

j) Attending Workshops and Seminars

The Deputy Dean will also be allowed by the Academy to attend workshops and seminars arranged by the University

Competencies

- Strong knowledge of KGUMSB Academic Regulations
- Leadership and student management skills
- Fairness, impartiality, and conflict resolution ability
- Confidentiality and ethical decision-making
- Strong documentation and organizational skills
- Effective communication and counselling orientation

Job description of Faculty/ Tutors/ Clinical instructors

a) Academic Responsibilities

- Deliver lectures, tutorials, demonstrations, and practical sessions as per the approved curriculum.
- Prepare lesson plans, teaching materials, and evaluation tools.
- Maintain accurate academic records, attendance registers, and assessment documentation.
- Participate in curriculum implementation and academic planning.
- Contribute to examination processes, including paper setting, invigilation, and evaluation.

b) Clinical Supervision

- Supervise and guide students during hospital and community clinical postings.
- Ensure safe clinical practices and adherence to patient care standards.
- Evaluate clinical competencies as per prescribed guidelines.
- Coordinate with clinical preceptors and affiliated hospitals.

c) Student Support

- Provide academic mentoring and guidance.
- Address student concerns in a professional and supportive manner.
- Promote professional behavior and ethical conduct among students.

d) Research and Professional Development

- Engage in research and scholarly activities.
- Participate in workshops, seminars, and continuing professional development programs.
- Maintain updated knowledge in nursing practice and education.

e) Institutional Duties

- Serve on academic or administrative committees as assigned.
- Assist in accreditation, inspections, and regulatory documentation.
- Support community outreach and institutional programs.

Qualifications

- Bachelors in Nursing or Master's Degree in Nursing from a recognized institution.
- Valid registration with the Bhutan Medical and Health Council (BMHC).

- Relevant teaching or clinical experience preferred.

Competencies

- Strong subject knowledge and clinical expertise
- Effective communication and teaching skills
- Professional integrity and ethical practice
- Organizational and documentation skills
- Ability to mentor and guide students

Job description of a Lab technician

a) Laboratory Preparation and Support

- Prepare laboratories (e.g., Nursing Foundation, Anatomy & Physiology, Community Health, MCH, Nutrition) for practical sessions.
- Arrange equipment, mannequins, simulation equipments models, instruments, and supplies prior to demonstrations and practical classes.
- Assist faculty during practical teaching sessions as required.
- Ensure adequate stock of consumables and teaching materials.

b) Equipment Maintenance

- Maintain laboratory equipment in working condition.
- Conduct routine inspection, cleaning, and minor repairs.
- Report major repairs or replacement needs to the administration.
- Maintain inventory records of all equipment and supplies.

c) Safety and Compliance

- Ensure laboratories comply with safety and infection control standards.
- Maintain proper storage of equipment and materials.
- Ensure safe handling and disposal of waste materials.
- Assist in maintaining emergency preparedness within the laboratory.

d) Documentation and Record Keeping

- Maintain stock registers and issue/return records.
- Track usage of consumables and prepare requisitions when necessary.
- Support documentation required for inspections and accreditation.

e) Institutional Support

- Assist during university inspections and audits.

- Support workshops, demonstrations, and special academic events.

Job description of a Clinical Counsellor

Student Counselling and Mental Health Support

- Provide individual and group counselling to students experiencing emotional, academic, behavioural, or personal difficulties.
- Assess psychological problems such as stress, anxiety, depression, adjustment issues, and burnout among nursing students.
- Develop and implement intervention plans for students requiring counselling support.
- Maintain confidential counselling records in accordance with professional ethics and university policies.
- Refer students to appropriate psychiatric or medical services when necessary.

Psychological Assessment

- Conduct psychological screening and assessments for students facing academic or behavioural difficulties.
- Use appropriate counselling and assessment tools to evaluate students' mental health and coping abilities.
- Prepare assessment reports and counselling notes for institutional use where required.

Teaching and Academic Contribution

- Teach modules related to mental health, counselling skills, communication, and behavioural sciences for nursing and allied health students.
- Participate in curriculum development and review related to counselling and mental health education.
- Facilitate workshops, seminars, and awareness programs on stress management, resilience, and emotional wellbeing.

Student Welfare and Support Programs

- Organize student wellness programs including:
 - Stress management workshops
 - Mental health awareness campaigns
 - Peer counselling training
- Support student orientation programs on psychological wellbeing and coping strategies.
-

Institutional and Administrative Roles

- Serve as a member of committees such as:
 - Student Welfare Committee
 - Disciplinary Committee
 - Grievance Committee
- Assist in developing student support policies and counselling guidelines.
- Submit periodic reports on counselling activities and student wellbeing programs.

Job description of Warden/ Matron

Student Welfare and Supervision

- Ensure the physical, emotional, and social well-being of hostel residents.

- Provide guidance and counselling to students when required.
- Maintain a friendly and supportive hostel environment that promotes healthy living and learning.
- Attend to students' personal or welfare issues and refer serious cases to appropriate authorities.

Discipline and Conduct

- Maintain discipline and adherence to hostel rules and regulations.
- Monitor students' behaviour and ensure compliance with institutional policies.
- Take appropriate action or report cases of misconduct or indiscipline to the administration.
- Enforce curfew timings and hostel attendance regulations.

Hostel Administration

- Maintain hostel records, including student admission registers, leave records, and visitor logs.
- Allocate hostel rooms and ensure proper occupancy.
- Supervise hostel facilities such as rooms, sanitation, water supply, and common areas.
- Coordinate with maintenance staff for repair and upkeep of hostel infrastructure.

Safety and Security

- Ensure safety and security of hostel residents.
- Monitor entry and exit of visitors and maintain visitor registers.
- Take necessary action during emergencies such as illness, accidents, or fire hazards.
- Ensure compliance with health and safety standards within the hostel.

Health and Hygiene

- Ensure cleanliness and hygiene in the hostel premises.
- Monitor students' health conditions and arrange medical assistance when required.
- Promote healthy living practices and sanitation among students.

Coordination and Reporting

- Coordinate with college administration, faculty, and security staff regarding student issues.
- Submit regular reports on hostel management and student welfare to the institution.
- Participate in institutional committees related to student welfare and discipline.

Job description of Office Assistant

Clerical and administrative support

The Office Assistant performs routine clerical duties such as typing, photocopying, filing documents, scanning records, and organizing office files and correspondence.

Record keeping and documentation

They maintain office records including student files, staff records, attendance registers, and official documents. Proper filing and safe storage of records are part of their responsibilities.

Handling correspondence

The Office Assistant receives, records, and distributes incoming letters, emails, and official documents. They may also help prepare official letters, notices, and reports as instructed by the administration.

Assisting faculty and administration

They support faculty members and administrative staff in preparing documents, printing teaching materials, arranging meetings, and organizing official events or activities.

Front office assistance

The Office Assistant may receive visitors, guide students or parents, and provide general information regarding office procedures, forms, or services.

Office supplies management

They help monitor office supplies such as stationery, registers, and printing materials and report shortages to the administration for procurement.

Data entry and basic computer work

The Office Assistant may enter data into office systems, maintain digital records, and update databases related to students, staff, or academic activities.

Support in examinations and academic activities

They may assist in preparing examination materials, maintaining exam records, distributing question papers, and supporting academic documentation.

Maintenance of office equipment

They ensure that office equipment such as printers, computers, and photocopiers are functioning properly and report any problems for repair.

Job description of State Manager

1. Administrative management

The State Manager supervises the field operations of the organization within the state. He checks to see that adequate equipment is given for the institute in consultation with the Promoter

2. Field work implementation in institute

The State Manager oversees the planning and implementation of various affairs of the institute, the day to day requirements like electricity, internet, water supply etc. They ensure that organizational goals and objectives are achieved. He sees that the facilities of the institute are well managed by the students and faculty within

5. Financial usage

The State Manager monitors the use of financial resources within the state, ensuring that funds are utilized properly according to approved budgets and financial guidelines.

Institute Disciplinary Committee- Deputy Dean of student affairs

The Deputy Dean of Student Affairs will chair the disciplinary committee for disciplinary actions, and the Deputy Dean of Academic Affairs shall preside over the matters related to academic dishonesty and unfair practice in the examinations.

The Committee shall have jurisdiction over all students enrolled at YT Nursing Academy, including conduct occurring:

- On campus
- During clinical postings
- In hostel facilities
- During community postings or field visits

- In institutional events and official activities
- On digital platforms where institutional reputation is affected

Matters may include but are not limited to:

- Academic dishonesty (cheating, plagiarism, exam malpractice)
- Breach of clinical protocols or patient confidentiality
- Insubordination or disrespectful behavior toward faculty/staff/ patient
- Harassment, bullying, or discrimination
- Damage to institutional property
- Substance abuse within campus/hostel
- Attendance violations
- Misuse of social media affecting institutional reputation

Composition of the Committee

The Student Disciplinary Committee shall consist of:

- Chairperson – Deputy Dean of student affairs
- Senior Faculty
- Clinical Instructor/Clinical Coordinator
- Hostel Warden (if hostel-related issue)
- Student Counselor (if available)
- Ex officio -Dean
- Ex officio- Promotor

Tenure of committee members

Members shall serve for a defined term (e.g., two or three academic years) and may be reappointed by the Governing Authority.

Discipline and Student Code of Conduct

The student codes of conduct of universities and institutes, which are designed to safeguard students' rights and allow them to effectively complete their education, are expected to be followed by all students.

While encouraging harmonious living, it will make sure that all-around student development is prioritized, national and community interests are satisfied, and students are treated consistently and fairly.

Misconduct

Complaints related to students' misconduct shall be submitted in writing to the DDSA of respective institutes.

Misconduct of the student shall be dealt accordingly by respective institutes or University.

Unresolved or appeal cases shall apply to the Registrar, office of the president.

Obstructive Conduct

Obstructive conduct refers to conduct that incites or threatens to disrupt the normal functions of the University and infringes on the rights of other individuals, including causing public nuisance.

Obstructive conduct may categorize, but not limited to the following;

- a. Possession or Abuse of Narcotic Drugs, Psychotropic Substances and Tobacco Products;
- b. Possession or Consumption of Alcohol;
- c. Unauthorized Access and Use of University Facilities and Services;
- d. Damages to University or Institutes Properties;
- e. Theft;
- f. Formation of Gangs;
- g. Ragging
- h. Sexual Harassment
- i. Inappropriate Relationship
- j. Indecent or Obscene Behaviour
- k. Fighting
- l. Stalking
- m. Misuse of Social Media
- n. Misuse of Electronic Devices;

- o. False charges;
- p. Falsification
- q. Unauthorized collection of fund;
- r. Pregnancy

Roles and Responsibilities

The Committee shall:

- Receive and review complaints or reports of misconduct
- Conduct preliminary inquiries
- Issue notices to concerned students
- Provide opportunity for explanation and hearing
- Examine evidence and witness statements
- Maintain written records of proceedings
- Recommend appropriate disciplinary actions
- Promote corrective and educational interventions

Possible Disciplinary Measures

Students violating the rules and regulations shall be held accountable, and appropriate interventions will be taken to address the violation. The following interventions, as appropriate, may be considered for implementation:

- a. Counselling
- b. Self-grooming
- c. Mentoring (staff/peer)
- d. Engaging Family Members
- e. Warning (both verbal and written where applicable)
- f. Referral
- g. Restitution
- h. Withdrawal of Privileges
- i. Withholding of Awards
- j. Parental Undertaking
- k. Suspension
- l. Termination
- m. Referral to Law enforcement agency

Interview & Evaluation Process

The interview process is fully governed by the Academic Board with the Dean taking the lead along with the committee for interview process and finalization of candidates.

- a) There would be advertisement from YT nursing Academy on the website and other social media platforms like FB, Instagram or through printed media
- b) A specific timeline of one month is given to the candidates to report
- c) Relevant documents are to be sent online through mails
- d) The date for the interview is fixed and an official mail is sent to the candidate by the Academic Board

The recruitment and selection of faculty shall be conducted through a transparent, merit-based process under the authority of the IHRC

1. Shortlisting

Applications shall be shortlisted based on:

- Academic qualifications and specialization
- Teaching and clinical experience
- Research publications
- Valid Nursing Council registration
- Compliance with Position Directory requirements

2. Written Examination (where applicable)

May assess subject knowledge, research aptitude, and teaching competency.

3. Teaching Demonstration (Mandatory)

Candidates shall deliver a structured teaching session to assess:

- Subject mastery
- Teaching methodology
- Communication skills
- Student engagement
- Professional conduct

4. Viva Voce (Interview)

The panel shall assess:

- Academic depth and clinical competence
- Research contributions
- Leadership and mentoring ability
- Understanding of nursing education standards

- Alignment with University Service Values and Code of Conduct

5. Final Selection

Selection shall be based on cumulative performance in:

- Qualification & experience
- Written test (if conducted)
- Teaching demonstration
- Interview

OFFER LETTER & APPOINTMENT TERMS

OFFER LETTER

(For Faculty Appointment – YT nursing academy)

Date:

Ref No:

To,
[Name of Candidate]
[Address]

Subject: **Offer of Appointment as (Position Title)**

Dear [Name],

We are pleased to inform you that upon recommendation of the Recruitment and Selection Committee and approval of the competent authority, you are hereby offered appointment as **[Position Title]** under, YT Nursing Academy- Khesar Gyalpo University of Medical Sciences of Bhutan (KGUMSB).

Your appointment shall be governed by the provisions of the **HR Manual of YT nursing Academy**, University policies, Position Directory, and other applicable rules.

You are requested to confirm your acceptance of this offer within [10] working days from the date of issue of this letter.

Further details of your appointment terms are outlined below.

We look forward to your contribution to academic excellence and professional service.

Yours sincerely,

[Name]
[Designation]

YT Nursing Academy

Appointment Terms and conditions.

1. Position and Level

The appointee is appointed as _____ under the Academic Category and shall report to the Dean/Head of Department.

2. Nature of Appointment

The appointment shall be **Regular/Contract**, effective from **[Date]**.

A probation period of 6 months shall apply where applicable and confirmation shall be subject to satisfactory performance.

3. Remuneration and Benefits

Pay shall be fixed at the minimum of the approved salary scale for the designated level as per YT Nursing Academy policies. Allowances and benefits shall be in accordance with prevailing University and Government financial rules.

4. Duties and Responsibilities

The faculty member shall undertake teaching, research, clinical/professional services, curriculum development, student assessment and mentoring, and any other responsibilities assigned by the University.

5. Code of Conduct and Professional Standards

The appointee shall adhere to the University Service Values, Code of Conduct and Ethics, and relevant professional regulatory requirements.

6. Undertaking

The appointee shall sign the required Oath of Allegiance and Undertaking and complete mandatory orientation prior to assumption of duties.

CHAPTER -5
COMPENSATION AND BENEFITS

Salary Structure

Benefit Type	Who Contributes	Who Benefits	Remarks
Provident Fund	Employer + Employee	Faculty (member)	Accumulates over service; payable at retirement/qualifying separation
Social Security	Employer + Employee	Faculty & dependents (subject to scheme rules)	Covers medical/disability/maternity/injury per national social security laws

i. Health Insurance

Nursing Faculty are entitled to health coverage in accordance with national regulations of the Royal Government of Bhutan.

- In-country medical care: Faculty are covered under Bhutan's public healthcare system and may avail medical and medical escort leave as prescribed.
- Ex-country duty/training: Faculty deputed abroad on official assignment are covered by medical insurance or eligible for reimbursement as per government rules.
- Work-related injury: Illness or injury sustained during official duties shall be addressed under applicable service and welfare regulations.
- Dependents: Eligible dependents are covered under the national healthcare framework.

ii. Leave Travel Allowance (if applicable)

Nursing Faculty at YT Nursing Institute are eligible for Leave Travel Allowance (LTA) subject to the following provisions:

- Eligibility: Regular faculty members may avail Leave Travel Allowance in accordance with approved leave entitlements and travel regulations.
- Purpose: LTA is granted to facilitate travel during earned/annual leave.
- Entitlement: Travel expenses are reimbursed as per the approved class and rates prescribed under Government Travel Rules.
- Frequency: The frequency and admissibility of LTA shall be governed the institute
- Conditions: LTA claims must be supported by approved leave orders and travel documents and shall comply with prescribed procedures.

CHAPTER -6

Working Hours and Leave Policy

i. Working hours (teaching and non-teaching)

1. The Working hours for YT nursing Academy during Academic sessions at college will be from 9 am to 4 pm for teaching and the non- teaching faculty from Monday to Friday
2. As per the guidelines of the institute Saturday may or may not be a working day however whenever the Dean calls for a Faculty meeting , the Faculty are priorly informed before 3 days of the Agenda of the meeting for discussion
3. Academic teaching will be 15 hours per week, and one Faculty should not be taking more than 2 modules per semester
4. The Faculty meeting , as per the Dean's guidelines would start at 10 am and end by 1 pm
5. The common assembly will start at 8.30 am on Monday in which both teaching and non- teaching faculty are required to join
6. The Clinical working hours will be for 7 hours depending as per the guidelines of the hospital.

ii. Nature of Duties of Teaching Faculty

Faculty are expected to:

- Develop and implement teaching and learning programs
- Supervise and support students
- Conduct assessments and provide feedback
- Engage in research and scholarly activities
- Participate in curriculum development and academic administration

iii. Clinical duty hours

The Clinical working hours will be for 6 hours or per the guidelines of the hospital for Faculty who would be on a supervisory role at the Teaching hospitals The **CoS 2025** states that employees involved in clinical practice must attend to patients, provide treatment, maintain clinical records, and ensure quality care.

iv. Attendance policy

An attendance register will be maintained by the institution and the faculty will have to sign their attendance on a daily basis.

v. Leave Types:

Leave provisions for employees (including teaching faculty)are as follows;

Leave Entitlements for Nursing Faculty

Annual Leave	30 days per year	Earned leave for rest, travel, or personal matters
Casual Leave	10 days per year	For urgent personal matters
Medical Leave	Up to 6 months with full pay (subject to medical certification)	Requires medical certificate
Medical Escort Leave	As required based on medical recommendation	For escorting patient
Medical Attendant Leave	As required	For attending seriously ill family member
Maternity Leave	6 months (180 days)	For female employees
Paternity Leave	10 working days	For male employees after childbirth
Bereavement Leave	21 days	In case of death of immediate family member
Study / Training Leave	As approved by Institute	Based on HR development policy
Leave Without Pay As approved by competent authority	When other leave exhausted	

Leave terms explained

Annual Leave (Earned Leave)

Annual leave is the leave that employees earn during their period of service and may use for rest, vacation, or personal matters. Staff accumulate leave over time and may avail it with prior approval from the competent authority. The accumulated leave can be carried forward up to the prescribed limit, and in certain situations a portion of the leave may be encashed according to university regulations.

Casual Leave

Casual leave is a short-term leave granted to employees to attend to urgent or unforeseen personal matters such as family needs, minor emergencies, or important personal obligations. It is usually taken for a brief period and must be approved by the immediate supervisor or competent authority. Casual leave is intended for occasional use and cannot normally be accumulated or carried forward to the following year.

Medical Leave

Medical leave is granted when an employee is unable to perform official duties due to illness or injury while on campus or during Clinical posting. This leave must be supported by a medical certificate issued by a recognized medical practitioner. The employee continues to receive salary during the approved medical leave period, and for prolonged illness a medical board recommendation or fitness certificate may be required before returning to work.

Maternity Leave

Maternity leave is granted to female employees to support childbirth and post-natal care. Eligible employees are entitled to three months of maternity leave with full pay. This leave also applies in cases of adoption of a newborn child and is considered part of active service for purposes such as promotion and retirement benefits.

Paternity Leave

Paternity leave is granted to male employees at the time of the birth or legal adoption of their child. The leave is intended to allow the father to support the mother and care for the newborn during the early days after birth.

Bereavement Leave

Bereavement leave is provided when an employee experiences the death of an immediate family member such as a parent, spouse, child, or sibling. This leave allows the employee time to attend funeral rites, support the family, and observe mourning traditions.

Study Leave

Study leave is granted to employees who wish to pursue higher education or professional training that is relevant to their field of work. The purpose of this leave is to enhance knowledge, skills, and professional competence that will benefit both the employee and the institution. Study leave may be granted with pay or without pay depending on the program and approval by the institute

Extraordinary Leave (Leave Without Pay)

Extraordinary leave is granted when an employee requires leave for personal reasons but does not have sufficient other leave balances. This leave is generally without pay and is granted only under special circumstances with approval from the appropriate authority. The period of extraordinary leave usually does not count as active service for certain employment benefits.

vi. Approval Authority

Leave approval generally depends on the Dean incharge.

vii. Leave application procedure

The principles and approval process for leave applications for employees, including nursing faculty.

1. Application Requirement

Employees must apply for leave formally and obtain approval from the competent authority before proceeding on leave, except in emergencies. This ensures continuity of academic and institutional work.

2. Submission of Leave Request

The employee must:

- Submit a leave application to the immediate supervisor or relevant authority.

- Clearly indicate:
 - Type of leave
 - Duration of leave
 - Dates of absence
 - Reason for leave
 - Contact details during leave (if required).

3. Supporting Documents

Where applicable, the employee must submit supporting documentation, for example:

- Medical certificate for medical leave
- Hospital documentation for medical escort leave
- Proof of circumstance for bereavement leave.

4. Approval Authority

The approval authority depends on the type and duration of leave.

- Routine leave may be approved by the faculty or departmental authority.
- Certain leave matters or those not delegated to lower committees are reviewed by the Institutes Human Resource Committee (IHRC).

5. Emergency Leave

If leave is required suddenly:

- The employee must inform the supervisor immediately.
- A formal leave application must be submitted afterward.

6. Work Responsibility Before Leave

Before proceeding on leave, employees must:

- Ensure handover of duties
- Inform colleagues or supervisors responsible for ongoing work
- Ensure teaching, clinical, or administrative responsibilities are covered.

7. Record and Documentation

The leave record is maintained by the Dean at the college level.

CHAPTER 7

Code of Conduct and Professional Ethics

1. Professional Behavior Expectations

Nursing faculty must maintain high standards of professionalism, integrity, and ethical conduct in teaching, clinical practice, research, and administration. Faculty should:

- Demonstrate honesty, accountability, and respect in all professional interactions.
- Treat students, patients, and colleagues fairly and without discrimination.
- Maintain professional boundaries with students and provide constructive guidance.
- Avoid plagiarism, falsification of information, or misuse of university resources.
- Promote teamwork, collegial relationships, and a positive learning environment.
- Uphold the values of Tha Damtsi and Ley Jumdrey while serving the university and the nation.

2. Dress Code

Classroom Setting

Faculty should wear professional and modest attire appropriate for an academic environment and maintain good personal hygiene.

Clinical Setting

During clinical teaching or patient care, faculty must:

- Wear appropriate clinical attire such as lab coats or scrubs.
- Follow hospital infection control and safety guidelines.
- Display identification when required.

Faculty are expected to follow Driglam Namzha (Bhutanese etiquette and dress standards) for Bhutanese Nationals and serve as role models for students.

CHAPTER 8

Performance Management System

I. Annual Appraisal System

1. Purpose of the Annual Appraisal

The appraisal system is designed to:

- Evaluate the performance and professional contributions of faculty.
- Support career progression, promotion, and professional development.
- Ensure faculty performance aligns with the mission, goals, and standards of the university.

2. Components of Faculty Performance Evaluation

Faculty performance is generally assessed in the following areas:

Teaching and Academic Responsibilities

- Delivery of lectures, tutorials, and clinical teaching.
- Preparation of teaching materials and curriculum development.
- Student supervision and mentoring.
- Student assessment and feedback.

Research and Scholarly Activities

- Conducting research and publishing scholarly work.
- Participation in academic conferences and professional activities.
- Contribution to knowledge and evidence-based practice.

Professional and Institutional Service

- Participation in committees and academic governance.
- Contribution to institutional programs and policy development.
- Engagement in community health and professional service.

3. Evaluation Process

The annual appraisal process generally involves:

- ✓ Self-assessment by faculty members, documenting achievements and contributions.
- ✓ Review by the immediate supervisor or Head of Department.
- ✓ Evaluation by the faculty or institutional review committee where required.
- ✓ Documentation of performance outcomes in the university's HR or performance management system.

The results may influence promotion, training opportunities, or performance improvement plans.

4. Link to Career Progression

Performance appraisal plays an important role in:

- Promotion to higher academic ranks
- Eligibility for training and professional development
- Recognition and rewards
- Identification of areas needing improvement

II. Key Performance Indicators (KPIs) for Nursing Faculty

1. *Teaching Effectiveness*

Teaching effectiveness refers to the ability of faculty to deliver high-quality teaching and facilitate student learning. According to the Academic Regulations, faculty are responsible for developing, implementing, and evaluating teaching and learning programs and ensuring that the curriculum meets academic standards.

Indicators of teaching effectiveness include:

- Preparation and delivery of lectures, tutorials, and clinical teaching sessions.
- Prior submission of lesson plans
- Development and implementation of curriculum and learning materials.
- Use of appropriate teaching methods and assessment strategies.
- Monitoring student progress and providing constructive feedback.
- Ensuring that learning outcomes and competencies are achieved.

Faculty are expected to continuously improve teaching practices through professional development and peer review of teaching.

2. *Clinical Supervision*

Clinical supervision refers to the guidance and oversight provided by faculty to students during clinical practice.

Faculty involved in clinical services must ensure quality patient care while supervising students and maintaining professional standards in healthcare settings.

Indicators include:

- Supervising students during clinical placements and practical training.
- Ensuring that students follow safe and ethical clinical practices.
- Demonstrating professional nursing procedures and clinical decision-making.
- Assessing students' clinical competence and performance.
- Maintaining professional standards and patient safety during training.

Clinical supervision ensures that students develop the skills, attitudes, and competencies required for safe nursing practice.

3. Research Contributions

Research contributions reflect faculty engagement in scholarly activities that advance healthcare knowledge and professional practice.

Indicators include:

- Conducting research studies relevant to nursing and healthcare.
- Publishing articles in peer-reviewed journals.
- Presenting research findings at academic conferences or seminars.
- Participating in collaborative research projects.
- Contributing to evidence-based nursing practice and curriculum development.

Research activities enhance the academic reputation of the university and improve healthcare outcomes.

4. Community Outreach

Community outreach refers to faculty involvement in health promotion, public education, and community health services. Academic programs are expected to include community-based learning and activities that address healthcare needs of the population.

Indicators include:

- Participation in community health programs and outreach initiatives.
- Organizing health education activities and awareness programs.
- Supporting community-based training for nursing students.
- Collaborating with healthcare institutions and community organizations.
- Promoting preventive healthcare and public health initiatives.

Community outreach aligns with the university's mission to improve health services and contribute to national healthcare development.

III. Feedback Mechanism

According to the Academic Regulations and institutional quality assurance processes, feedback is used to improve teaching, learning, and academic standards.

The feedback mechanism includes:

- Student feedback on teaching quality, learning environment, and course delivery.
- Peer review and academic monitoring by faculty members and academic committees.

- Supervisor evaluation by the Head of Department or Dean during annual performance appraisal.
- Institutional review through academic committees such as the Institute Academic Committee and Academic Board, which monitor teaching, curriculum implementation, and academic quality.

The feedback helps identify strengths and areas for improvement and supports continuous professional development of faculty.

IV. Increment Policy

Salary increments are governed by the Performance Management System and career progression framework.

Key provisions include:

- Faculty members are eligible for annual salary increments based on satisfactory performance, usually around 1000/ year
- Performance is assessed through annual appraisal and performance evaluation.
- Increments are linked to teaching performance, research contributions, institutional service, and professional conduct.
- If performance is unsatisfactory or disciplinary issues arise, increments may be withheld or delayed.

This system ensures fairness, accountability, and alignment with the university's standards for academic excellence and professional service.

CHAPTER 9

Faculty Development and Training

I. Orientation program for new staff

Orientation for newly appointed staff is mandatory and is organized by the university to help employees understand institutional policies, responsibilities, and workplace expectations.

Objectives of the program

The orientation program aims to:

- Introduce new staff to the vision, mission, and values of KGUMSB.
- Familiarize them with university policies, rules, and regulations.
- Help staff understand their roles, responsibilities, and job expectations.
- Support smooth integration into the academic and professional environment of the university.

Key Components of the Orientation Program

The orientation program typically includes:

- Introduction to the university structure, work culture, and institutional values.
- Overview of academic programs, teaching and learning processes, and research activities.
- Explanation of university policies, HR regulations, and financial rules.
- Training on professional ethics, integrity, and conduct.
- Awareness of occupational health, safety, and workplace procedures.

Outcome of the Orientation

The orientation ensures that new faculty and staff:

- Understand the academic regulations and institutional policies.
- Are prepared to perform their teaching, clinical, research, and administrative responsibilities effectively.
- Become integrated members of the KGUMSB academic community.

II. Continuing Professional Education Development(CPD)

1. Requirement for Continuing Professional Development

Faculty members are expected to engage in continuous professional development to maintain competence in teaching, research, and clinical practice. Faculty should regularly update their knowledge and skills through: a) Workshops and training programs, b) Academic conferences and seminars, c) Research activities and scholarly publications d) Professional certification or advanced studies

Role of the Institute in Supporting Professional Development

The Institute supports professional development through Human Resource Development initiatives, including:

- In-country short-term training programs
- Ex-country training and conferences (subject to approval)
- Higher education or specialization programs
- Faculty development workshops and academic training

Link with Academic Responsibilities

Faculty should continuously enhance their competencies in:

- Curriculum development and implementation
- Modern teaching and assessment methods
- Research and scholarly activities
- Clinical and professional practice

III. Research and publication support

1. Promotion of Research Activities

The institute encourages faculty to engage in research and scholarly activities to advance knowledge and improve healthcare education and practice. Faculty are expected to conduct individual or collaborative research that supports teaching, professional development, and healthcare improvement.

2. Institutional Support for Research

KGUMSB supports faculty research through:

- Establishment of Institute Research Committees to promote research activities and maintain research standards.
- Facilitation of research collaboration and interdisciplinary projects.
- Provision of guidance on research design, ethics approval, and implementation.

3. Ethical Review and Research Governance

All research involving human participants must obtain ethical clearance from the appropriate research ethics authority before implementation. This ensures that research is conducted according to ethical standards and regulatory requirements.

4. Support for Publications and Academic Dissemination

Faculty are encouraged to:

- Publish research findings in peer-reviewed journals.
- Present research at academic conferences, seminars, and professional forums.
- Contribute to evidence-based practice and curriculum development.

CHAPTER 10

Discipline and Grievance Redressal

I. Minor and major misconduct

Minor Misconduct

Minor misconduct refers to less serious violations of workplace rules or professional conduct that do not severely harm the university, patients, students, or colleagues.

Examples may include:

- Late attendance or minor neglect of duties
- Failure to follow administrative procedures
- Inappropriate or unprofessional behavior toward colleagues or students
- Minor breach of workplace etiquette or dress code
- Carelessness in performing assigned tasks

Minor misconduct is usually addressed through:

- Verbal or written warning
- Counseling or corrective guidance
- Monitoring of performance.

II. Major Misconduct

Major misconduct refers to serious violations of professional ethics, university rules, or laws that may harm individuals, patients, students, or the reputation of the university.

Examples include:

- Harassment, discrimination, or abuse of students or colleagues
- Plagiarism, falsification of academic or research records
- Breach of patient confidentiality
- Fraud, corruption, or misuse of university resources
- Gross negligence in professional or clinical duties
- Criminal offenses or serious ethical violations

Major misconduct may lead to:

- Formal disciplinary investigation
- Suspension or disciplinary action
- Termination of employment or other penalties depending on severity.

III. Suspension and termination policy

1. Suspension

Suspension is a temporary removal of an employee from duty during investigation of serious misconduct or disciplinary matters.

Key points include:

- Suspension may occur when there are serious allegations of misconduct, corruption, or violation of university rules.
- It is implemented to allow fair investigation without interference.
- The employee remains under disciplinary review while suspended.
- Suspension may be ordered by the competent authority or disciplinary committee.

During this period, the employee may receive allowances or benefits as determined by university policy.

2. Termination

Termination refers to the permanent end of employment.

Termination may occur due to:

- Serious misconduct or disciplinary violations
- Poor performance or failure to meet professional standards
- Violation of university rules or professional ethics
- Criminal conviction or legal disqualification
- Failure to complete probation successfully
- Resignation or expiry of contract (where applicable)

Termination decisions are made through formal disciplinary procedures and review by the appropriate authority or committee to ensure fairness and due process.

3. Due Process and Appeal

Employees have the right to:

- Be informed of the charges or reasons for disciplinary action
- Respond to allegations during investigation
- Appeal decisions to the appropriate authority within the university

This ensures transparency, fairness, and accountability in disciplinary actions.

IV. Grievance committee structure

The Grievance committee takes care of all the grievances that are raised from within the premises and in the clinical settings

Functions of the Committee

The committee is responsible for:

- Reviewing grievances or appeals submitted by an aggrieved party.
- Reviewing decisions made by Institute Disciplinary Committees or relevant authorities.
- Conducting fair and objective evaluation of complaints.
- Communicating the final decision to the concerned parties.
- Presenting findings to the Academic Board where necessary.

Procedure for Grievance Handling

The grievance process typically follows these steps:

1. The aggrieved person first raises the issue informally with the concerned authority (e.g., supervisor or institute).
2. If unresolved, a formal complaint or appeal may be submitted to the appropriate committee.
3. The College Appeal Committee reviews the case and investigates the issue.
4. The committee provides a decision or recommendation, which is communicated to the concerned parties.