

MODULE 1 | LEGAL FOUNDATIONS

Working with the Board and the Provincial Secretariat

Practical hospital governance in Punjab, Pakistan

Prepare the case. Record the decision.
Follow the action to completion.

AUTHOR

Dr Qurban Hussain Khan

02

LECTURE

What this lecture will help you do

For the Medical Superintendent (MS): turn a hospital need into a clear proposal, a lawful decision and a completed action.

- Prepare a case that the Board can decide.
- Check the rules for a valid Board meeting.
- Send a complete case through the Secretariat.
- Record the decision and track the result.

LAW / RULE

A plain-language statement linked to a named official source.

WORKING METHOD

A recommended way to organise work. It is not a new legal rule.

TEACHING CASE

An invented example. Names, costs and targets are not actual hospital data.

Study output

One Board paper, one draft resolution and one action tracker.
Allow about 45-60 minutes, including the exercises.

Builds on Lecture 1. Use each cited text with later amendments, the hospital notification and current orders. Source editions are listed at the end.

A service proposal needs several decisions

Teaching case: a hospital proposes a 24-hour emergency laboratory service. Its current orders require Government approval for the extra posts and grant.

1

The need

Invented review: 90 referrals a month after hours. The clinical team must explain the gap.

2

The proposal

Longer hours need staff, equipment, supplies, supervision and a safe operating plan.

3

The decision

Ask the Board to recommend the plan and submit a complete case to Government.

A favourable Board discussion does not, by itself, appoint staff, provide a grant or permit a purchase. Identify each required decision.

Start with the hospital notification

A notification is an official written order. Use the hospital notification to identify the governing Act; the Board title alone is not enough.

Framework	What to check before using its Board rules
2003 Medical and Health Institutions Act	Check section 3 notification and whether the institution is a Medical Institution or a Health Institution. Section 5 treats them differently.
2020 Medical Teaching Institutions Act	Check notification under sections 1(3) and 3. This is a separate framework.
2025 Specialized Medical Institutions Act	Check notification under sections 1(3) and 3. The Act does not apply to every hospital simply because it is newer.

Use the framework actually made applicable to the institution, including any later change or transition order. Do not choose it from the hospital name.

Sources: **S1**: ss. 3, 5 | **S8**: ss. 1(3), 3 | **S3**: ss. 1(3), 3

Similar Boards can have different legal roles

These are selected differences between two Acts. They are not interchangeable job descriptions.

Point	2003 Act: Medical Institution	2025 Act: notified institution
Board title	Board of Management.	Board of Governors.
Board Secretary	MS of the main teaching hospital. Section 6(2) assigns this role.	Hospital Director is Member/Secretary under section 6(1)(g).
Chair selection	Members elect a non-official member at the first meeting.	Government may nominate a Chairperson from the private-sector members.
Executive powers	Head and MS exercise the powers prescribed for their offices.	The Dean is the Chief Executive Officer under section 12(2).

Being Board Secretary is a separate role from being a voting member. Check membership in the applicable Act; do not infer a vote from the word Secretary.

Sources: **S1**: ss. 6-8 | **S3**: ss. 6, 12(2)

Keep a current Board constitution file

Before preparing a meeting, verify who may act and which procedure applies.

01 Legal basis

Act, hospital notification, rules and valid institutional regulations.

02 Members

Appointment orders; ex officio posts, meaning members by virtue of office.

03 Tenure

Start and end dates; resignations, replacements and any removal orders.

04 Chair and Secretary

The lawful selection or appointment and the exact office-holder.

05 Representation

Whether a substitute is allowed, and any required rank or nomination.

06 Meeting rules

Quorum, notice, voting, records and any valid special procedure.

This file is a working control. A previous attendance sheet is not enough to prove that today's Board is correctly constituted.

Sources: **S1**: s. 6 | **S3**: ss. 6-7

Meeting rules under the 2003 framework

For a Board governed by the Punjab Medical and Health Institutions Rules, 2003, rule 4 states:

- | | | |
|---|-------------------|---|
| 1 | Frequency | The Board shall meet once a month. |
| 2 | Quorum | Five members, including at least one Punjab Government Secretary or a representative not below Additional Secretary. |
| 3 | Voting | Decisions are by majority vote. If votes are equal, the Chairman has a casting vote. |
| 4 | Your check | Match the attendance record to the legal membership and representation rules. Confirm any later amendment before use. |

Quorum means the minimum legally required attendance. A casting vote is the extra vote used to break a tie where the law allows it.

Sources: **S2**: r. 4 | **S1**: s. 6

Meeting rules under the 2025 framework

These provisions apply to an institution notified under the 2025 Act. Do not use them as the 2003 meeting rules.

1	Frequency	At least six Board meetings in a financial year.
2	Quorum	One-half of the members, including at least two members from the Government offices listed in section 6(1)(a)-(d).
3	Voting	Simple majority of members present and voting. The person presiding has a casting vote in a tie.
4	Attendance	Actual members present determine the count. Proxy votes do not count. A co-opted expert has no vote.

The four offices are Specialized Healthcare, Finance, Planning and Development, and Law. Check section 6 for its exact representation provisions.

Sources: **S3**: ss. 6(1), 6(8), 7(1)-(6)

Separate the roles around the table

Use these working distinctions alongside the powers given by the applicable law.

Role	Practical function	Authority check
The Board	Decides matters placed within its legal powers.	Identify the provision for this decision.
Chair / presiding member	Conducts the meeting under the applicable procedure.	An individual direction needs its own lawful authority.
Board Secretary	Organises papers, records decisions and communicates them.	Do not change a decision while drafting minutes.
Institutional management	Supplies facts and carries out authorised decisions.	Check the responsible office and any delegated power.

Under the 2025 Act, section 7(9) expressly lists the Board Secretary's duties. Under the 2003 framework, use the Act with the applicable rules and orders.

Sources: **S1**: ss. 5-8 | **S3**: ss. 7(9), 8, 12

A committee needs a clear task and power

Delegation gives another person or body specified powers under the law. Forming a committee alone does not do this.

What the Acts permit

- 2003 Act: section 11 allows committees. Section 13 allows delegation of Board powers, duties or functions to a person or committee.
- 2025 Act: section 8(3) allows delegation of functions to the Chairperson or a committee of Board members, subject to Board conditions.

What the written order should show

- The legal provision and the precise task or power.
- Members, limits, conditions and reporting duty.
- Whether it recommends a decision or may make it.
- Any end date and how unresolved matters return to the Board.

A technical committee may assess need without having authority to approve expenditure. State the distinction in the order.

Sources: **S1**: ss. 11, 13 | **S3**: ss. 7(8), 8(3)

Know the limits of a Board decision

Autonomy has legal limits. These examples show why every proposal needs a power check.

Example	What the cited text requires
Disposal of land or a structure	Under the 2003 Act, section 3(2) makes this subject to Government approval.
User charges under the 2003 Rules	Rule 3(1)(e) requires prior Government approval for the charges and fees it describes.
A local Board regulation	Under section 19 of the 2003 Act, it must remain consistent with the Act and rules.
A Government financial proposal	Rule 19 of the Rules of Business requires Finance consultation in the cases it covers, subject to its delegation exception.

A Finance officer's Board attendance is not, by itself, proof that a separate required Finance consultation, concurrence or sanction has been completed.

Sources: **S1**: ss. 3(2), 19 | **S2**: r. 3(1)(e) | **S4**: r. 19

State why each item is on the agenda

The agenda is the list of business for the meeting. Give every item a clear purpose.

For information

Members receive a report. No new approval is requested.

Example: progress on an already approved repair.

For discussion

Members examine options before a final proposal.

Example: possible ways to extend a service.

For recommendation

The Board proposes action to another authority.

Example: requesting a Government grant.

For approval

The Board is asked to decide within its own power.

Example: an item supported by a verified legal provision.

Do not record an information item as an approval. If the purpose changes during discussion, check the applicable agenda and meeting procedure.

A useful Board paper answers six questions

A Board paper is a short written case. Attach the evidence needed to verify it.

01 What is needed?

Define the service problem and the exact decision requested.

02 What proves it?

Give dates, activity figures and the source of each important fact.

03 Who has power?

Cite the law, rule or delegation. List approvals still needed.

04 What choices?

Compare feasible choices, including continuing the present service.

05 What is the full cost?

Separate one-time and yearly costs. Identify the funding source.

06 What is proposed?

Give reasons, conditions, a responsible officer and a review point.

Attach the relevant papers in a numbered index. The reader should be able to find the evidence without reconstructing the case.

Sources: **S5**: adapted from paras. 4.3-4.4, 4.7

Show the full cost of the laboratory proposal

Invented, tax-inclusive planning figures for the exercise. They are not prices, pay scales or legal spending limits.

Cost item	One-time cost	Cost for 12 months
Equipment and setup	Rs 2.40 million	-
Additional staffing	-	Rs 1.80 million
Additional consumables	-	Rs 0.90 million
Added maintenance and utilities	-	Rs 0.30 million
Total added cost	Rs 2.40 million	Rs 3.00 million

First full year: Rs 5.40 million. Later full years: Rs 3.00 million before price changes or replacement costs. For a part-year start, show the actual months separately.

Worked example: the Board paper

Purpose: for recommendation. Case premise: Government must approve the extra posts and grant.

Problem	The invented three-month review shows an average of 90 after-hours referrals each month. Attach the checked activity data.
Options	Retain current hours; extend selected shifts; or provide a full 24-hour service. Show staffing, cost and service limits for each.
Recommendation	Recommend the full service only if the clinical plan and staffing assessment support it. Request Rs 2.40 million once and Rs 3.00 million a year.
Decision requested	Recommend the proposal to Government and authorise submission of the case. Identify the verified power for this Board action.
Conditions	Government approval, funds, staffing and the required purchase process remain to be completed before launch.

In a real paper, replace every assumption with evidence. A recommendation must explain why the preferred option is better suited to the identified need.

Sources: **S5**: case structure adapted from para. 4.3

Resolve factual gaps before the meeting

Early discussion should improve the written case and preserve a clear record.

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|---|-----------------------------------|--|
| 1 | Clinical review | Confirm the need, safe operating plan and the effect on existing services. |
| 2 | Finance and staff review | Check the total cost, funding route, sanctioned posts, staffing plan and missing approvals. |
| 3 | Legal and technical review | Check disputed powers and technical requirements. Put any unresolved issue in the paper. |
| 4 | Issue the meeting pack | Follow the applicable notice and agenda procedure. Use one version, a clear index and a record of circulation. |

A telephone discussion may help resolve a question. Record material advice and changes in the case; a conversation is not a substitute for a required approval.

Sources: **S5**: paras. 4.4, 4.11-4.14

Handle interests and disagreement openly

Use the applicable conflict, conduct and meeting rules. The steps below are recommended administrative controls.

A personal or financial interest

- Ask the member to disclose a relevant connection, such as a supplier link.
- Record the declaration and how discussion or voting was handled under the applicable rule.
- Recheck quorum if a member withdraws. Seek advice if its effect is unclear.

A professional disagreement

- State the disputed fact, rule or likely consequence.
- Record a material objection, the response and any formal dissent.
- Use neutral language. If a major fact is missing, identify the evidence needed for a later decision.

A recorded dissent means a member's formal disagreement. Do not replace the actual voting result with a false statement that everyone agreed.

Minutes must show what was actually decided

Minutes are the official record of the meeting. These fields make the decision traceable.

☐ **Meeting identity**

Date, place, meeting number and the person presiding.

☐ **Exact item**

Agenda number, subject and the version of the paper used.

☐ **Conditions and owner**

Remaining approvals, limits, responsible officer and target.

☐ **Valid attendance**

Members and guests separately; quorum and relevant changes.

☐ **Decision and reasons**

The outcome, important reasons, vote and material dissent.

☐ **Final record**

Complete the required confirmation or authentication process.

Correct a draft through the proper process. Preserve a record of later corrections; do not silently rewrite an approved decision.

Sources: **S3**: s. 7(9)(c), for the 2025 Secretary's duty

Worked example: a clear Board resolution

A resolution is the Board's formal decision. This example assumes a verified Board power and a valid meeting.

Item 06	Proposed extension of the emergency laboratory to 24-hour operation.
Decision	The Board recommends the proposal for Government consideration: Rs 2.40 million one-time cost and Rs 3.00 million annual recurring cost.
Reasons	The proposal addresses the documented after-hours service gap, subject to the clinical and staffing plan set out in the case.
Action	The Head of Institution will submit the complete approval case through the prescribed channel. The MS will coordinate supporting records.
Conditions	No staff appointment, purchase commitment or service launch is authorised by this recommendation. Required approvals remain pending.

The full minute must also contain the attendance, quorum and actual voting record. This example shows the decision wording, not a complete minute book.

Use decision words carefully

Read the complete decision, its conditions and the authority behind it. These are practical reading checks.

Wording	What to establish before acting
Noted	The report was received. Identify any separate action actually directed.
Recommended	Another authority must consider the proposal. Identify that authority and the submission route.
Approved in principle	Read what was accepted and which conditions remain. Do not assume permission to spend or start.
Approved / sanctioned	Check the approving power, exact scope, amount, conditions and any further required approval.

A sanction is a formal approval. Check its scope and legal authority. A conditional decision operates only within its stated conditions.

Sources: **S1**: ss. 13, 19 | **S3**: s. 8 | **S6**: rr. 3, 6

Send the case through the correct channel

The administrative department is the Government department responsible for the institution's business.

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|---|--------------------------------|---|
| 1 | Hospital | Prepare the facts, legal basis, cost, Board decision and precise request. Use the hospital's authorised submission route. |
| 2 | Departmental section | The responsible section examines the case and obtains missing information. Confirm its current work allocation. |
| 3 | Departmental leadership | The Secretary's written standing orders allocate work, define internal powers and set the channel of submission. |
| 4 | Decision level | The case goes to the authority required by the rules. Some matters need the Minister, Chief Minister or Cabinet; others do not. |

For a hospital under Specialized Healthcare and Medical Education, use that department's current allocation and channel. Do not assume every case must reach the Chief Minister.

Sources: **S5**: para. 1.4(iii), (v)-(vii); paras. 4.15-4.18

Ask the right department the right question

The administrative department arranges the consultations required for the case. The first two rows summarise Rules of Business provisions.

Interface	Question or requirement
Finance Department	Rule 19 covers proposals affecting provincial finances, subject to its delegation exception. Show the funding and financial effect.
Law Department	Rule 20 covers law-making, legal interpretation, agreements and memoranda of understanding, and Government civil litigation.
Regulations Wing	For a reference to this Wing, give the precise issue, supporting papers and the administrative department's reasoned view.
Planning and Development	For a development scheme, ask the administrative department which planning and project-approval route applies.

Consultation seeks a department's view. Concurrence means its agreement. A financial concurrence and an expenditure sanction serve different purposes.

Sources: **S4**: rr. 19-20 | **S5**: para. 1.60; last row is a routing check

Build a self-contained Government case

Paragraph 4.3 of the Secretariat Manual provides a clear sequence for a case note.

1	Question	State the exact decision required. Avoid a vague request for necessary action.
2	Facts	Give the brief background, dates, verified evidence and any important correction.
3	Legal position	Identify the relevant rules or policy and explain why they apply. Include any unresolved legal issue.
4	Decision and proposal	Separate the points for decision. Give a specific recommendation with reasons and a draft communication where useful.

Attach the Board resolution, cost and funding details, required departmental views and an indexed set of relevant records. The hospital pack supports the department's formal summary.

Sources: S5: paras. 4.3-4.4, 4.12-4.18

Answer a returned query point by point

Use one consolidated reply. Keep the original question and show where its answer is supported.

Query	Clear reply	Supporting record
Why is this service needed?	Give the review period, verified demand and present service gap.	Signed activity review.
How much will it cost?	Give one-time, full-year and part-year costs; state what is included.	Reconciled cost sheet.
Who can approve it?	Cite the applicable power and identify the approvals still required.	Law/order and Board minute.
Why this option?	Compare feasible alternatives and explain the preferred choice.	Clinical, staffing and technical review.

If evidence is unavailable, say what is missing, who is obtaining it and when it is expected. Do not invent a reference or repeat the unanswered request.

Sources: **S5**: paras. 1.60, 4.3-4.4, 4.7-4.8

If Finance does not agree

Apply the Government rule to the Government case. A hospital Board cannot replace the required escalation route.

The rule: Government proposals

- Rule 19(3): where prior Finance consultation is required and Finance has not concurred, the proposal cannot proceed unless the Cabinet decides that it may.
- Even then, formal orders issue only after Finance has scrutinised the details.

The practical response

- Identify whether the objection concerns cost, funds, authority or missing evidence.
- Correct the case or revise the proposal. Show any service consequences.
- If disagreement remains, the administrative department handles the lawful escalation. Keep both views in the record.

Check whether rule 19 consultation is required in the first place, including its delegation exception. Do not assume every hospital transaction requires a fresh Finance reference.

Sources: **S4**: r. 19(1), (3) | **S5**: paras. 4.3, 4.16

If the Board cannot function

A non-functional Board does not automatically transfer all Board powers to the MS.

The applicable Act matters

- 2003 Act, section 6(10): the Chief Minister may constitute an Administration Committee for the period described in the section.
- 2025 Act, section 5(3): Government shall constitute an administrative committee to run the institution for three months if the Board becomes dysfunctional.

What management should do

- Verify the actual defect and any valid committee or replacement order.
- Send the facts, patient-service risk and action required through the prescribed channel.
- Continue work within existing lawful powers. Escalate decisions that require the unavailable authority.

A vacancy alone may not invalidate proceedings. This does not remove the need to check quorum and approval powers. Seek advice on a disputed defect.

Sources: **S1**: s. 6(8), (10) | **S3**: ss. 5(3), 7(5)

Check the conditions before implementation

For each action, identify the actual approval, the responsible officer and the evidence that conditions are met.

01 Decision

Obtain the properly issued decision. Check its scope and conditions.

02 Spending power

Verify the relevant power, authorised holder and applicable limit.

03 Funds

Confirm the proper budget, available funds and any release required.

04 Staff

Check sanctioned posts, appointment or deployment powers and procedure.

05 Purchase

Use the applicable procurement process and authorised contract route.

06 Safe operation

Confirm trained staff, supplies, equipment readiness and clinical oversight.

Section 33 of the Public Financial Management Act requires the specified sanction and budget authority for spending from the Provincial Consolidated Fund or Public Account.

Sources: **S7**: s. 33 | **S6**: rr. 3, 6-7

Track actions until there is evidence of completion

Teaching case: sample management targets after the meeting. These are not statutory deadlines or promises of Government approval.

Action	Responsible lead	Target	Completion evidence
Finalise the case pack	MS with finance and staffing team	Day 7	Checked, signed papers.
Submit the approval case	Head of Institution	Day 10	Submission and receipt number.
Review pending queries	Designated case officer	Weekly	Query log and supported replies.
Check launch readiness	Clinical lead with MS	After approvals	Documented staffing, equipment and supply checks.

Track approval, funds and implementation as separate stages. A file sent to Government is a submitted case, not a completed service.

Report what the Board needs to decide

A useful management report shows the result, the gap, its cause and the decision needed.

01 Patient services

Demand, access, service interruptions and serious safety concerns.

02 Finance

Budget, spending, commitments, unpaid bills and shortfalls.

03 Staff

Critical vacancies, service coverage and unresolved approval needs.

04 Assets and projects

Equipment availability, project progress, delay and expected cost.

05 Audit and directions

Outstanding observations, corrective action and overdue directions.

06 Decisions required

State the specific decision, supporting evidence and consequence of delay.

Use consistent definitions and periods. For the laboratory case, compare referrals and operating hours before and after launch, alongside cost and safety information.

WORKING METHOD | Illustrative material is identified in the text.

Keep statutory reporting dates separate

A local management dashboard does not replace a report required by the applicable Act.

2003 Act | Annual report

- Section 16 requires submission to Government within three months after the relevant calendar year ends.
- A report for January-December is therefore due within the following three months.
- Government is to place a copy before the Provincial Assembly.

2025 Act | Quarterly report

- Section 11(2)(c) requires the Management Committee to submit a quarterly report to the Board.
- It covers management, healthcare services and financial management.
- Use the correct committee, reporting period and institutional process.

Put each legal reporting duty in a calendar with its source, period, responsible office, due date and proof of submission.

Sources: **S1**: s. 16 | **S3**: s. 11(2)(c)

Preserve the complete decision record

A successor should be able to understand the case without relying on someone's memory.

- | | | |
|---|-------------------------|--|
| 1 | Keep the chain | Keep the paper, evidence, minutes, final decision, approvals and completion records together or clearly cross-referenced. |
| 2 | Control versions | Mark drafts and final copies. Record issue dates, reference numbers and any authorised correction. |
| 3 | Control access | Protect patient, personnel and other restricted material. Handle requests through the applicable disclosure and confidentiality process. |
| 4 | Handover | List pending conditions, cases awaiting Government, overdue actions and the next responsible officer. |

For website teaching, use invented or properly cleared examples. Do not upload live patient records, personnel files or restricted Board annexes.

WORKING METHOD | Illustrative material is identified in the text.

Three situations: what should the MS do?

Write your answer and reason before reading the next page. Use the framework stated in each case.

01 | Missing quorum

A Board governed by the 2003 Rules has five members present. None is a Government Secretary or an eligible representative.

**Can it take Board decisions?
What should be recorded?**

02 | Conditional support

The Board recommends the laboratory proposal. Government approval and funding are still pending. A supplier asks for an order.

Does the resolution authorise the order?

03 | A disputed minute

The draft minute says unanimously approved. A member points to a recorded dissent and a condition that the draft omits.

How should the record be corrected?

Test the power, the process and the record. A confident answer should identify which fact or legal provision controls the next action.

Answers and reasons

The aim is to explain the decision, not simply memorise a rule number.

01 | The stated quorum requirement is not met.

Rule 4(2) requires five members including the specified Government Secretary or eligible representative. Record attendance and the defect; arrange a valid meeting through the proper process. Do not describe an informal discussion as a Board approval.

02 | No order is authorised by that recommendation.

In this case, the Board recommended a Government decision. Confirm the missing approvals, funds, spending authority and purchase process. Continue the case work and lawful service arrangements while pursuing the approvals.

03 | Correct the draft through the required process.

Check the record made at the time. Restore the actual decision, condition and voting result, and follow the applicable confirmation or authentication procedure. Preserve a traceable correction if the record was already finalised.

Recording a problem is only the first step. Assign the corrective action and follow it to completion.

Sources: **S2**: r. 4(2) | **S6**: rr. 3, 6; cases 2-3 apply the working methods

Produce three useful working documents

Choose one pending, non-confidential hospital issue. Use verified local documents for the authority check.

1 | Board paper

State the need, evidence, options, full cost, power and precise decision requested.

2 | Draft resolution

Write the proposed outcome, reasons, conditions and responsible officer. Mark it DRAFT.

3 | Action tracker

List approvals still needed, who will pursue them and the evidence required for completion.

Review question: can another officer identify what is approved, what is pending, who must act and which record proves completion?

Next in this foundation sequence: delegations, standing orders and the authority register. Retain these three documents as your practical course work.

WORKING METHOD | Illustrative material is identified in the text.

Sources 1-3 | Institutional law and Board rules

Select a source title or its official-source link to open the document.

S1 Punjab Medical and Health Institutions Act 2003

Act IX of 2003. Sections 3, 5-8, 11, 13, 15-16 and 19. Official consolidated text, including the 2014 amendment shown in the document.

Government of Punjab | Specialized Healthcare and Medical Education Department | [Official source](#)

S2 Punjab Medical and Health Institutions Rules, 2003

Rules 3-4. Reproduced in the Act and Rules compendium hosted by the Ministry of National Health Services. The cited provisions appear on printed pages 8-9; check later amendments.

Pakistan Health Knowledge Hub | Ministry of National Health Services, Regulations and Coordination | [Official source](#)

S3 Punjab Specialized Medical Institutions Act 2025

Act LVI of 2025. Sections 1(3), 3, 5-8, 11 and 12. Published in the Punjab Gazette on 25 June 2025. Application depends on notification under section 3.

Government of Punjab | Punjab Laws | [Official source](#)

The 2003 and 2025 meeting rules belong to different frameworks. Check the institution's current Gazette notification, later amendments and valid regulations.

Sources 4-6 | Government cases and financial powers

Select a source title or its official-source link to open the document.

S4

Punjab Government Rules of Business 2011

Rules 19-20, official PDMA-hosted compilation, printed page 9. This older compilation contains the cited consultation provisions. Check later amendments and current standing orders.

Government of Punjab | S&GAD; copy hosted by Provincial Disaster Management Authority (PDMA) | [Official source](#)

S5

Manual of Secretariat Instructions, 2023

Official edition updated February 2025. Paragraphs 1.1, 1.4, 1.60, 4.3-4.4, 4.7-4.18. Covers case notes, departmental routing, clear drafting and formal summaries.

Government of Punjab | Services and General Administration Department (S&GAD) | [Official source](#)

S6

Punjab Delegation of Financial Powers Rules 2016

Rules 3, 6 and 7; relevant Schedules. Finance Department notification No. FD(FR)II-2/89(P-I), 1 July 2016. No current rupee ceiling is reproduced in this lecture.

Government of Punjab | Finance Department | [Official source](#)

Source footers link to these references. Titles and Official source links open the publisher's document. Templates are teaching adaptations, not prescribed forms.

Sources 7-8 | Financial law and framework boundary

Select a source title or its official-source link to open the document.

S7

Punjab Public Financial Management Act 2022

Act XXXVII of 2022. Section 33: sanctioning expenditure from the Provincial Consolidated Fund and Public Account. Do not assume every institutional fund uses the same route.

Government of Punjab | Punjab Laws | [Official source](#)

S8

Punjab Medical Teaching Institutions (Reforms) Act 2020

Act II of 2020. Sections 1(3), 3 and 7. Cited to identify a separate, notification-based institutional framework; its meeting rules are not taught as rules under the 2003 Act.

Government of Punjab | Punjab Laws | [Official source](#)

Keep this lecture with its edition date. For a live decision, verify the current law, applicable notification, delegation and approval conditions.

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