



COLLEGE OF MEDICINE & DENTISTRY AT THE HILLS

Policy for Quality & Patient Safety

FOR THE YEAR 2025-26



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ABOUT HEALTH AUTHORITY OF (CMDH)

College of Medicine & Dentistry at the Hills, Abbottabad (CMDH) is the regulative body of the Health System in the CMDH Abbottabad and seeks excellence in Health for the community by regulating and monitoring the health status of the population. CMDH defines the strategy for the health system, monitors and analyses the health status of the population and performance of the system. In addition, CMDH shapes the regulatory framework for the health system, inspects against regulations, enforce regulations, and encourages the adoption of best practices and performance targets by all health service providers. CMDH also drives programs to increase awareness and adoption of healthy living standards among the residents of the Abbottabad, Pakistan in addition to regulating scope of services, premiums, and reimbursement rates of the health system in Pakistan.

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Definitions

1. Best Practice

The use of the highest standard of knowledge drawn from credible scientific research, respected clinical expertise, and evidence-based guidelines to ensure that healthcare processes and patient outcomes reflect optimal care delivery.

2. Effectiveness

The degree to which intended outcomes, goals, or objectives are achieved through a specific activity, intervention, or strategy under normal working conditions (as opposed to controlled laboratory settings). It reflects the real-world impact of healthcare actions.

3. Efficiency

A measure of how well a system converts its inputs (resources, staff time, equipment, finances) into desired outputs or outcomes. A process or individual is considered efficient when excellent performance is achieved with the least possible waste of time, effort, or resources.

4. Health Facility

A CMDH-licensed institution where healthcare services are delivered by healthcare professionals authorized and licensed under CMDH regulations.

5. Health System Stakeholders

All entities involved in the delivery, regulation, or financing of healthcare, including patients, healthcare providers, insurers, payors, regulators at national and provincial levels, and any other relevant organizations.

6. Structure

The foundational elements that shape the environment in which healthcare services are delivered. These include facility infrastructure, equipment, human resources, policies, administrative arrangements, data systems, and other resources essential for ensuring quality and patient safety. Structural strength is directly connected to the reliability of processes and outcomes.

7. Patient Safety

A discipline focused on applying safety science principles to minimize risks, prevent harm, and ensure trust in healthcare delivery systems.

8. Process

The set of actions and procedures that guide the delivery of healthcare services. These include screening, assessment, diagnosis, treatment, preventive care, documentation, communication, coordination of care, clinical and technical procedures, and patient education. Effective processes are essential for achieving desired outcomes and ensuring patient safety.

9. Policy

A formal statement outlining the intended direction, principles, roles, and responsibilities within the health system. Policies are mandatory and enforceable, guiding governance, operations, and compliance.

10. Quality

The degree to which healthcare services improve the likelihood of achieving desired health outcomes and align with the most up-to-date professional standards. Quality has six essential dimensions:

- **Safe:** Preventing harm and avoiding injuries resulting from the care intended to help patients.
- **Effective:** Providing evidence-based services to all beneficiaries and avoiding unnecessary or harmful interventions.

- **Patient-Centered:** Respecting individual patient preferences, needs, and values while ensuring patient values guide clinical decisions.
- **Timely:** Minimizing delays and unnecessary waiting for both patients and providers.
- **Efficient:** Preventing waste of resources, time, supplies, ideas, and energy.
- **Equitable:** Ensuring consistent quality of care regardless of gender, ethnicity, geographic location, socioeconomic status, or other personal attributes.

11. Outcome

A measure of the impact of healthcare on a patient's health status, knowledge, behavior, satisfaction, or quality of life. Outcomes include clinical results, safety outcomes, patient and staff satisfaction, and overall improvement in health.

12. Quality Assurance (QA)

A structured and systematic set of activities designed to ensure that healthcare services meet established standards. QA includes defining standards, monitoring performance, evaluating service delivery, and implementing improvements to ensure that care is safe, effective, and efficient. The four fundamental principles of QA include:

- Focus on meeting patient needs and expectations
- Emphasis on systems and processes
- Use of data to analyze service delivery
- Promotion of teamwork in solving problems and driving improvement

13. Quality Improvement (QI)

A systematic approach aimed at enhancing performance within healthcare systems. It involves structured techniques to assess current practices, identify gaps, test changes, measure progress, sustain improvements, and benchmark performance. QI focuses on ongoing enhancement rather than one-time corrections.

1. INTRODUCTION

1.1 International Context

The 2014 Commonwealth Fund Report emphasized that the effectiveness of a health system is no longer measured by how much money is spent, but by how well quality and patient safety are integrated into preventive and curative services¹. Improving healthcare quality and safety relies on three essential foundations:

- **A strong policy and governance framework:** Healthcare organizations must function within clear policies, strong oversight systems, and an accurate understanding of community needs and expectations to achieve optimal outcomes.
- **Meaningful engagement of stakeholders:** Policymakers can only design and introduce effective quality strategies when healthcare providers, communities, and service users actively participate in the process.
- **Active community involvement:** Patients and communities must have a voice in shaping how services are delivered, as their involvement directly contributes to better performance and improved health outcomes.

1.2 Local Context

The Quality and Patient Safety Policy has been developed based on the Pakistan Health System Strategy and a detailed Situation Analysis on quality and safety. National priorities focus on providing a seamless continuum of care, ensuring high-quality and safe services, enhancing patient experience, and attracting, training, and retaining skilled healthcare professionals. Additional priorities include strengthening emergency preparedness, promoting preventive health and wellness, ensuring cost-effective and sustainable healthcare spending, encouraging private-sector participation, and expanding digital health initiatives. In alignment with these goals, CMDH has outlined a comprehensive set of initiatives that address all seven strategic priority areas and will be implemented over the next five years.

1.3 Purpose of this Policy

This Policy reflects a core theme of the healthcare strategy for the College of Medicine & Dentistry at the Hills (CMDH), Abbottabad. It ensures that the essential foundations for quality and patient safety are firmly established by putting in place the necessary measures related to structure, processes, and outcomes. The Policy is supported by clear procedures and frameworks designed to drive continuous improvement across all healthcare and academic services. It establishes the groundwork for a value-based healthcare system, fostering engagement, coordination, and collaboration among all stakeholders—faculty, clinical staff, students, administration, and partner healthcare facilities. This approach supports CMDH’s vision of delivering safer, higher-quality, and patient-centered care. Additionally, this Policy outlines the implementation mechanisms required to ensure its effective adoption, integration, and sustained practice across all departments and affiliated hospitals.

1. WHO (2006). Quality of Care. A Process for Making Strategic Choices in Health Systems.

2. VISION, GOAL AND GUIDING PRINCIPLES

2.0 Vision

To be a leading institution in medical education, dedicated to cultivating a workforce of professional leaders who excel in providing equitable, affordable, and exemplary healthcare while addressing the diverse health needs of our nation and the global community.

Mission

To deliver a transformative medical education that empowers future healthcare leaders to innovate in clinical care and health system design. Our mission is supported by a passionate and diverse faculty committed to fostering collaboration, upholding the highest ethical standards, and addressing healthcare disparities. We are committed to providing exceptional patient care and fostering the next generation of healthcare professionals.

2.1 Goal

Establish a World Class Health Quality and Patient Safety Framework in the College of Medicine & Dentistry at the Hills, Abbottabad

2.2 Guiding Principles

The Guiding Principles of this Policy are as follows:

2.2.1 Performance is Focused

The College of Medicine & Dentistry at the Hills (CMDH), Abbottabad is the responsible authority for defining standards of healthcare quality and patient safety. CMDH will establish performance parameters and quality indicators that all affiliated and partner health facilities are expected to meet.

2.2.2 Continuous Improvement

High-quality care and patient safety depend on an ongoing cycle of improvement. This includes routine audits, systematic performance measurement, continuous monitoring, and evidence-based enhancements undertaken by healthcare providers, professionals, payers, regulators, and with active participation from patients and staff.

2.2.3 Stakeholder Engagement

The advancement of healthcare quality and patient safety requires the commitment and active involvement of all stakeholders. Collaboration among CMDH leadership, faculty, clinical partners, students, and service providers is essential to ensure coordinated improvement efforts.

2.2.4 Accountability

All affiliated health facilities and their staff are accountable for meeting established quality and safety standards. Identified gaps, failures, or non-compliance must be addressed promptly and transparently.

2.2.5 Requirements for Quality Improvement

Achieving meaningful quality improvement necessitates:

- **Leadership:** Strong leadership is essential for building a culture that supports change, sets clear improvement goals, and allocates resources to achieve them.
- **Learning:** A commitment to continuous learning is vital for becoming an organization focused on sustained improvement.
- **Organizational Change:** While not every change results in improvement, every improvement requires thoughtful and well-managed change.
- **Community Engagement:** Patients, families, and service users play an essential role in shaping how services are delivered and influencing their own health outcomes.

2.2.6 Evidence-Driven Quality

Quality measurement must be objective, valid, reliable, and grounded in scientific evidence.

Evidence-based assessment enables recognition of high performance and the practices that make it possible. It also helps identify areas of poor performance, especially where best-practice guidelines, clinical pathways, or established standards were not followed

3. Priority Areas for The Policy on Quality and Patient Safety

Priority 1

Ensure all health facilities meet the minimum requirements for structure.

Priority 2

Ensure all health facilities meet the minimum requirements for process.

Priority 3

Ensure all health facilities meet the minimum requirements for outcome.

Priority 4

Set out the roles and responsibilities to assure implementation.

Note: Appendix 1 illustrates the healthcare quality and patient safety priorities

4.0 POLICY OBJECTIVES AND STRATEGIES

4.1 Structure

Policy Objective 1:

Ensure that the structural components of all health facilities are appropriate, safe, and fit for purpose.

Policy Strategy 1:

Define the structural requirements that health facilities and CMDH must meet to achieve this objective.

Health Facilities Affiliated or Licensed by CMDH Will:

- Ensure that all actions related to quality and patient safety comply with **Pakistan’s federal and provincial healthcare regulations**, as well as CMDH policies.
- Ensure access to healthcare services in accordance with the standards, regulations, and requirements established by **CMDH, Abbottabad**.
- Obtain valid **CMDH facility licensure** before providing any healthcare services.
- Maintain a comprehensive **Quality and Patient Safety Strategy**, supported by well-defined policies, procedures, and operational plans.
- Implement effective **quality and safety assurance mechanisms** at every level of the organization.
- Establish a **robust governance framework** with clearly defined roles, responsibilities, decision-making pathways, and escalation procedures to support high-quality and safe care.
- Maintain essential organizational programmes, including:
 - Business Continuity Management
 - Emergency Preparedness and Response
 - Risk Management
 - Patient Complaints and Feedback System
 - Workplace Health and Safety
 - Environmental Health and Safety
 - Infection Prevention & Control
 - Clinical Audit Programme
 - Quality Improvement & Patient Safety Programme
- Ensure that all healthcare professionals practice only within roles, privileges, and conditions supported by:
 - CMDH licensure
 - Professional indemnity/medical liability coverage
 - Applicable **Pakistan health laws and regulatory standards**
 - CMDH policies and regulations
 - Approved scope of service
 - Defined scope of professional practice
 - Official job descriptions
 - Privileges granted by the health facility

- Facility-approved policies, procedures, and clinical protocols
- Implement safeguards to prevent **conflicts of interest** in staff decision-making.
- Maintain adequate capacity for **quality and patient safety data collection, analysis, and reporting**.
- Ensure that written and approved **policies, procedures, SOPs, and guidelines** exist to support safe, high-quality care.
- Ensure that treatment plans are integrated with **preventive care approaches** where applicable.
- Promote **patient-centered care**, transparency, communication, and informed patient choice.
- Collaborate with other healthcare facilities and partners to improve patient outcomes and system performance.
- Ensure that healthcare professionals consistently apply **evidence-based practices** and maintain ongoing education, training, and competency to safeguard patient safety.

CMDH Will:

- Oversee the **licensing of health facilities**, including application review, inspections, audits, and renewals.
- Establish and enforce **facility design and infrastructure requirements** aligned with national and international standards.
- Define the **service provision requirements** for CMDH-affiliated healthcare facilities.
- License healthcare professionals in accordance with CMDH policies and national regulations.
- Define and monitor the requirements for **Continuing Medical Education (CME)** and continuous professional development.
- Ensure that financial and operational frameworks are in place to support safe and effective healthcare delivery.
- Conduct audits, inspections, and evaluations of health facilities to assess compliance with structural requirements that influence quality and patient safety.
- Hold health facilities accountable in cases where quality, safety, or structural standards are compromised or not met.
- Develop additional **policy provisions, guidelines, and standards** to continually strengthen facility structure requirements.

4.2 Process

Policy Objective 2:

Ensure that all healthcare facility processes are appropriate, evidence-based, and support high-quality care.

Policy Strategy 2:

Define the requirements that CMDH-affiliated health facilities must meet to ensure that all operational processes are effective and aligned with quality and patient safety standards.

All CMDH-Licensed Health Facilities Will:

- Implement processes that support **quality measurement, improvement, and assurance** across all service areas.
- Ensure all staff receive adequate **training and orientation** relevant to the processes within their assigned departments.
- Validate and evaluate all processes through recognized **assessment methods, certifications, audits**, or internal policy mechanisms.
- Ensure processes incorporate **best practices**, risk assessment, and timely mitigation measures.
- Align all clinical and administrative processes with the **latest scientific evidence** and international quality standards.
- Establish processes designed to deliver the **highest standard of patient care**.
- Maintain a **continuous feedback loop** to identify performance gaps and initiate improvements promptly.

Policy Objective 3:

Ensure that all data and information processes within health facilities are secure, transparent, and dependable.

Policy Strategy 3:

Define the requirements health facilities must follow to ensure the integrity, confidentiality, and reliability of data and information.

All CMDH-Licensed Health Facilities Will:

- Maintain strict processes to ensure that all data and patient information are **confidential**, secure, and validated for accuracy, integrity, and reliability.
- Implement protocols that assure the **quality and reliability** of data used for reporting and decision-making.
- Ensure that all information collected is **valid, relevant, and supports quality and patient safety improvement**.
- Provide CMDH with complete and accurate data **within specified timelines** when requested.

Policy Objective 4:

Ensure processes are in place to strengthen effective patient care and promote continuous learning.

Policy Strategy 4:

Define requirements for health facilities to sustain safe patient care and continuous professional development.

All CMDH-Licensed Health Facilities Will:

- Implement processes to assess and verify the **clinical competence** of healthcare professionals regularly.
- Link clinical processes to **patient safety goals** and staff training needs.
- Ensure that patient care processes enhance clinical management and **do not compromise patient outcomes**.
- Strengthen systems to achieve safety goals and prevent errors such as **wrong-patient, wrong-site, wrong-procedure, and wrong-medication** incidents.
- Ensure processes cover both **Clinical Care and Support Services**.
- Improve efficiency by reducing waste and optimizing resources through **internal assessments and benchmarking**.

Policy Objective 5:

Enhance patient and staff engagement in healthcare processes.

Policy Strategy 5:

Define the requirements for increasing participation of patients and staff in improving healthcare services.

All CMDH-Licensed Health Facilities Will:

- Utilize structured mechanisms for **patient and staff feedback** to strengthen quality, safety, communication, and service improvement.
- Provide continuous **education and training** for administrative, clinical, and support staff to ensure culturally sensitive, patient-centered, and linguistically competent care.

CMDH Will:

- Strengthen data exchange, transparency, and reporting across the CMDH health system.
- Conduct patient and staff satisfaction surveys across all licensed facilities.
- Establish provisions for patient rights, informed consent, and responsibilities.
- Ensure financial mechanisms supporting healthcare delivery are functional and sustainable.
- Audit and inspect health facilities to evaluate compliance with required operational processes.
- Hold health facilities accountable when quality or patient safety is compromised.
- Develop additional policy requirements to further improve healthcare processes.

4.3 Outcome

Policy Objective 6:

Ensure that health facilities achieve the intended quality and patient safety outcomes.

Policy Strategy 6:

Define the responsibilities of health facilities, insurers, and CMDH to achieve desired quality and safety outcomes in Pakistan's healthcare environment.

All CMDH-Licensed Health Facilities Will:

- Comply with CMDH-defined **Key Performance Indicators (KPIs)** relevant to their scope of services, including but not limited to:
 - Accurate reporting of all quality and patient safety indicators
 - Complete and validated performance submissions
 - Compliance with reporting timelines
 - Submission of any additional data requested by CMDH
- Demonstrate actions taken to meet or exceed performance standards based on **national and international benchmarks** where KPIs are not explicitly defined.
- Take **immediate corrective action** when CMDH identifies performance shortcomings, including those identified through:
 - Internal performance thresholds
 - Accreditation bodies
 - Health facility governing board
- Respond promptly to all CMDH instructions and requests.
- Ensure healthcare billing:
 - Complies with CMDH billing rules and facility licensure
 - Uses correct billing codes supported by documentation and audit trails

All CMDH-Authorized Health Insurers Will:

- Ensure their activities support quality and patient safety in accordance with applicable **Pakistan health insurance regulations**.
- Ensure health services align with CMDH requirements and national insurance standards.
- Maintain a clear governance structure with transparent roles and responsibilities.
- Prevent conflicts of interest in any staff decision-making.
- Maintain written policies and procedures for claims management and reimbursement that promote quality and safety.
- Collaborate with healthcare facilities to improve patient outcomes.
- Ensure healthcare provider contracts match the facility's approved scope of practice.
- Maintain secure systems for **data protection, confidentiality, information management, and retention**.
- Apply CMDH-directed **payment frameworks** that promote sustainable, quality-driven care.

CMDH Will:

- Define and publish **quality and patient safety indicators** for all licensed facilities.
- Audit, inspect, and monitor performance using:
 - Indicator reporting
 - Complaint data
 - Patient and staff satisfaction surveys
 - Facility audits
 - Financial inspections
 - Health system intelligence platforms
- Ensure financial structures that support service delivery are in place.
- Hold facilities accountable for outcome failures and quality lapses.
- Publicly report facility performance to promote transparency and informed patient choice.
- Authorize health insurers and share performance information to support contract negotiations.
- Monitor and audit both healthcare facilities and insurers to ensure compliance with quality and safety standards.
- Take action against facilities or insurers when performance or payment practices do not align with CMDH frameworks.
- Introduce and enforce sustainable **pay-for-performance** mechanisms across the health system.
- Explore and implement **cost-effective quality incentives**.
- Develop additional policies to continually improve patient safety and healthcare outcomes.

5.0 IMPLEMENTATION ARRANGEMENTS

5.1 Roles and Responsibilities

Policy Objective 7:

Ensure meaningful engagement of all stakeholders within the health system.

Policy Strategy 7:

Define the roles and responsibilities of health system stakeholders to effectively achieve the objective of stakeholder engagement.

Regulatory Authority (CMDH):

- CMDH is responsible for regulating the health system and ensuring that all regulatory requirements are in place to address service gaps, inefficiencies, malpractice, or unfair practices.
- CMDH must maintain governance structures that protect patients and support the delivery of safe, high-quality healthcare across all facilities.
- CMDH will provide leadership, oversight, and ensure compliance with this Policy through its regulatory powers. When needed, it may introduce additional regulatory measures to meet current and emerging healthcare needs in Pakistan.

Healthcare Providers:

- Providers must adopt a flexible, patient-focused approach to ensure that high-quality, safe, and effective care is delivered every time a patient or caregiver interacts with the service.
- Providers should strengthen patient and caregiver engagement through appropriate communication and support mechanisms.
- Providers must develop service delivery plans ensuring that human and physical resources are adequate. Business continuity plans should be in place to guarantee uninterrupted service delivery during critical times.
- Providers are responsible for meeting the requirements outlined in this Policy as well as relevant laws and regulations applicable in Pakistan.

Health Insurers:

- Insurers must adopt practices that foster collaboration between healthcare providers and patients.
- Insurers should ensure reimbursement and payment systems promote evidence-based, high-quality, and safe care.
- Insurers must ensure that claims handling, reimbursement procedures, and payment mechanisms are aligned with national healthcare regulations and Pakistan's healthcare system requirements.
- Insurers are responsible for complying with all relevant policies and national regulatory standards.

Patients and the Public:

- Patients must follow the rights and responsibilities established by CMDH.
- When quality or patient safety is compromised, patients and caregivers should report such concerns through available channels to the healthcare provider, insurer, or regulator.
- Patients are encouraged to engage with the health system—through patient groups or similar forums—to share experiences and contribute to improving future service delivery and decision-making.

5.2 Escalation and Enforcement

Policy Objective 8

Ensure effective escalation and enforcement mechanisms for Quality and Patient Safety.

Policy Strategy 8:

Define CMDH's approach to escalation and enforcement to uphold Quality and Patient Safety standards.

CMDH will:

- Review complaints, evaluate performance, and investigate any potential breaches of duty.
- Escalate issues and take appropriate actions where breaches are identified.
- Exercise regulatory powers flexibly to ensure actions target areas where intervention is most needed.
- Ensure delivery of high-quality, safe patient care.
- Address any non-compliance with this Policy and ensure such failures do not recur.
- Restore conditions (as far as possible) to what they should have been had the non-compliance not occurred.

CMDH will follow a structured investigative process to determine whether violations of laws or regulations have occurred. Based on its findings, CMDH will apply suitable enforcement measures, which may include:

- Providing guidance or advice
- Requiring a remedial action plan
- Referring matters to the Competent Committee for actions such as:
 - Issuing reprimands, notices, or warnings
 - Issuing a suspension notice
 - Revoking licensure
 - Recommending legal action
 - Any other necessary corrective measure

Health facilities, professionals, or insurers may appeal CMDH decisions in line with CMDH's established appeal criteria, rules, and procedures.

5.3 Monitoring and Evaluation

Policy Objective 9:

Ensure effective monitoring and evaluation of this Policy.

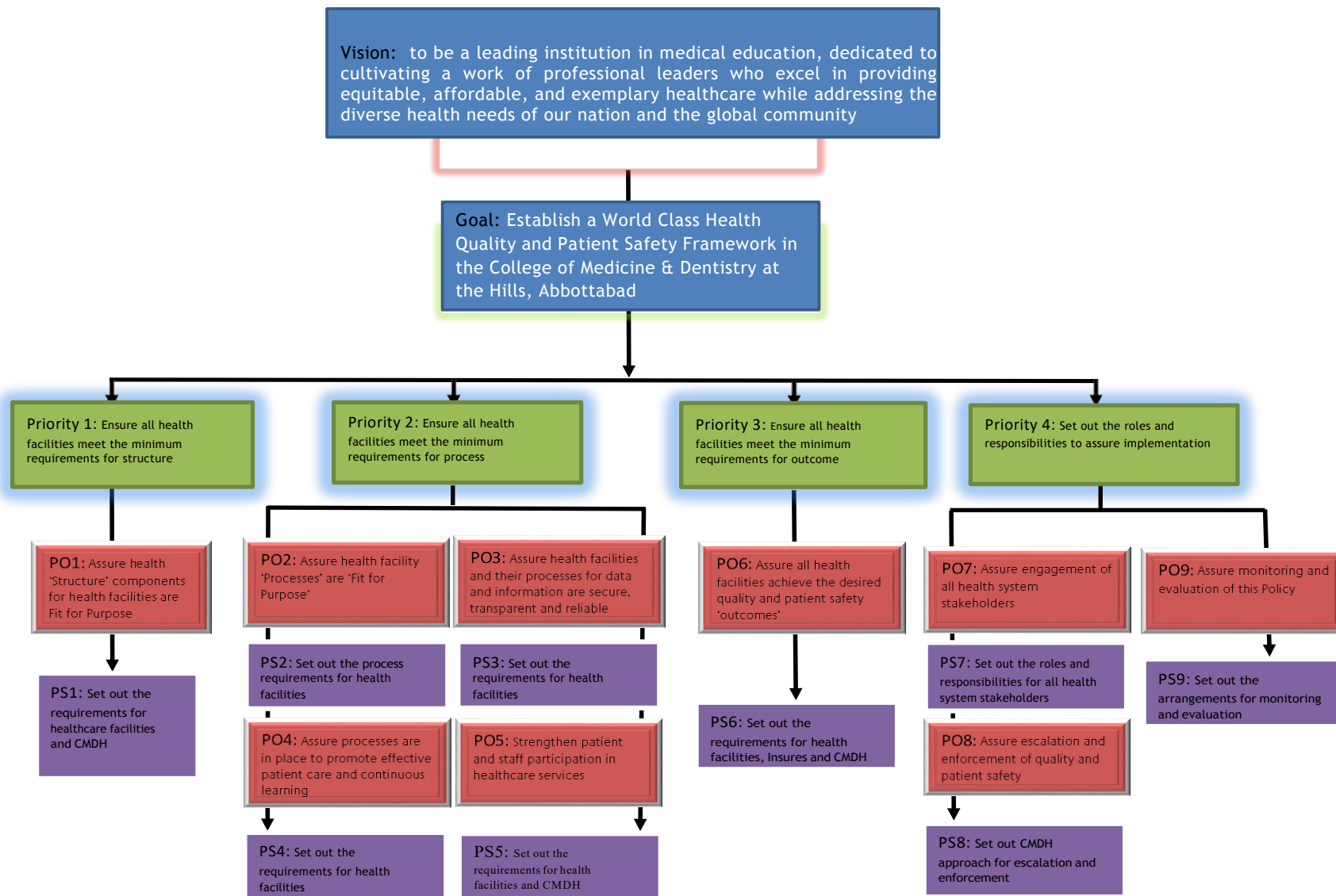
Policy Strategy 9:

Establish a monitoring and evaluation framework to oversee the implementation, effectiveness, and overall impact of the Policy.

A structured monitoring and evaluation system will be developed to assess compliance, performance outcomes, and the long-term effectiveness of this Policy across the CMDH healthcare system.

6.0 APPENDIX

Appendix 1. Organogram for Healthcare Quality and Patient Safety Priorities



PO = Policy Objective
PS = Policy Strategy

Appendix 2. Laws Related to This Policy

1. **Pakistan Medical and Dental Council (PM&DC) Act, 2022** – Governing the regulation, accreditation, licensing, and professional standards for medical and dental education and practice in Pakistan.
2. **Pakistan Medical Commission (PMC) Act, 2020** (*now superseded but referenced for transitional regulations*) – Concerning the regulation of medical education, licensing, and professional practice.
3. **Federal Health Regulatory Authority (FHRA) Framework** – Regulations pertaining to private healthcare facilities and service standards across Pakistan.
4. **Punjab Healthcare Commission (PHC) Act, 2010** (*relevant for national best practices*) – Setting service delivery standards, licensing of private facilities, and healthcare quality assurance.
(*Khyber Pakhtunkhwa Health Care Commission Act, 2015 may also be referenced for Abbottabad*)
5. **Medical Tribunal Rules & Medical Liability Laws (Pakistan Penal Code & Civil Liability Framework)** – Covering legal accountability, malpractice handling, and professional misconduct of healthcare practitioners.
6. **National Guidelines on Patient Safety & Clinical Governance (Ministry of National Health Services, Regulations & Coordination)** – Regulations establishing patient safety protocols and clinical governance standards.
7. **Health Insurance Regulations (SECP Guidelines & State Life Health Insurance Schemes)** – Governing health insurance standards, reimbursement, and coverage under national health insurance programs.
8. **Constitution of the Islamic Republic of Pakistan, 1973 – Article 9, 14 & 25** – Fundamental rights relevant to patient privacy, dignity, and equal access to healthcare.
9. **Pakistan Penal Code (PPC), 1860 (Sections on privacy, confidentiality, and professional misconduct)** – Including but not limited to Sections 269–270 (public health), 337 (medical negligence) and provisions on confidentiality.
10. **Infectious Diseases (Prevention and Control) Act, 2020** – Federal framework for prevention, management, and reporting of communicable diseases.
11. **Federal Labour Laws of Pakistan** – Including
 - *Factories Act 1934*
 - *Industrial & Commercial Employment Ordinance 1968*
 - *Occupational Safety & Health (OSH) regulations*Relevant sections address workplace safety, employee health, and staff welfare.
12. **Prevention of Electronic Crimes Act (PECA) 2016** – Governing data security, cyber safety, electronic record protection, and penalties related to misuse of digital patient information.
13. **Pakistan Telecommunication (Re-organization) Act, 1996 & PTA Regulations** – Governing electronic communication, data transfer, and digital privacy for telemedicine and health information systems.