



## QUALITY ENHANCEMENT CELL (QEC)

DOW UNIVERSITY OF HEALTH SCIENCES

# STRATEGIC PLAN (2024 – 2027)

Pioneering Excellence | Inspiring Innovation



**To Heal | To Educate | To Discover**

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## TABLE OF CONTENTS

Director's Message.....	5
Executive Summary.....	7
About the Institute.....	8
Introduction & Overview.....	9
Institutional Organogram.....	14
Section I: Overview of the Strategic Planning Process.....	15
Section II: Vision, Mission, and Values.....	18
Section III: Aspirational Institutions.....	20
Section IV: Strategic Goals.....	21
Objectives, OKRs & KPIs.....	22
Section V: Resource Planning for Achieving Strategic Goals.....	29
Section VI: Implementation and Monitoring of Strategic Plan.....	32
Section VII: List of Appendices.....	33
A: SWOT Analysis.....	34
B: TOWS Matrix.....	37
C: QEC Survey For Faculty And QMS Coordinators.....	42
D: International Rankings Of DUHS (2020-2024).....	48

## DIRECTOR'S MESSAGE



As the Director of the Quality Enhancement Cell, I am honored to lead a team of dedicated quality professionals committed to ensuring and enhancing the quality of education and academic processes at Dow University, which is a historic institution known for excellence in the health and medical sciences.

Our purpose at the QEC is to foster a culture of continuous quality improvement across all aspects of academic and University life. We work tirelessly to uphold and exceed the highest academic standards, aligning our efforts with national and international quality assurance frameworks. Through rigorous evaluation, strategic planning, and innovative initiatives, we aim to provide an enriching and transformative educational experience for our students.

With the support of our dedicated faculty, staff, and students, we engage in comprehensive self-assessment processes all year around that allow us to identify strengths and areas for enhancement within the academic programs offered.

By nurturing an environment of collaboration, accountability, and transparent communication, we empower our faculty, students, and QMS coordinators to actively contribute towards our continued journey of achieving academic excellence.

Our commitment to quality extends beyond the confines of our lecture halls. We continuously seek feedback from all stakeholders, valuing their insights as a catalyst for positive change. Through this inclusive approach, we ensure that our university's systems, processes, programs, and service offerings reflect the evolving needs of our diverse student body and the demands of an ever-changing world.

As of 2023, we have undergone a significant change in the continuous efforts to evolve through a revamped quality assurance framework, PSG 2023, as introduced by the HEC. This will hopefully result in a new era of excellence and accountability in Pakistan's higher education sector through a framework that is designed to bridge long-standing gaps and address challenges.

My vision for the future aligns with the University Master Strategic Plan but that includes working towards creating a higher education eco-system that is student-centered and is characterized by consistent quality improvement through national and international recognition and policy-making that foster transparency, collaboration, and continuous improvement.

Focusing on Vision 2030 of the University, in the past we have strived towards active engagement with all stakeholders, including students, faculty, and administrators along with accreditation bodies and regulators. However, in the future, I hope we will transform from conformity-based practices towards enhancement-driven practices that will encourage collaboration for greater consistency and effectiveness in quality assurance practices. We must remain responsive in terms of data-driven decision-making and customized initiatives to evolve with the ever-changing landscape of quality improvement in higher education.

Ultimately the desired outcome of continuous improvement is to transition towards a student-centered educational environment that caters to the needs of the stakeholders through innovation and inclusiveness. This will hopefully lead us to have graduates who are well able to find employment through greater recognition and acceptance of our degrees within Pakistan and all over the world.

Finally, through this strategic plan, I encourage you to learn more about our initiatives, accreditation efforts, and the various ways we contribute to elevating the overall educational experience of students and faculty at DOW University of Health Sciences.

Sincerely,

**Sanam Soomro**

Director,  
Quality Enhancement Cell  
Dow University of Health Sciences Karachi

## EXECUTIVE SUMMARY

The Master Strategic Plan of the University titled, “A Bridge to Excellence” was the framework upon which this strategic plan is based. The strategic goals and objectives described in this plan are the basis upon which this plan is formed.

The strategic goals of the QEC are the adoption of the revamped quality assurance framework titled, Pakistan Precepts Standards and Guidelines for Quality Assurance in Higher Education (PSG-2023), along with ensuring continuous quality improvement at the program level (undergraduate and postgraduate) through periodic program review and assessments; furthermore, Goal III is to enhance the University Rankings through high-quality research in areas of identified strategic interest and Goal IV is to educate and train a quality workforce of IQAE within the University. Additionally, Goal V is to facilitate the Recognition of Affiliated Institutes/Colleges of DUHS; while ensuring they can develop and sustain an environment of student-centered education with accountability and transparency, and Strategic Goal VI deals with strengthening the evaluation tools provided by the HEC, and their implementation processes within the University.

These goals have specific objectives and key results outlined along with KPIs for tracking the achievement of these objectives from 2024 to 2027.

As part of the strategic planning process, the department was also required to plan for resources for achieving the strategic goals and the implementation and monitoring mechanism of the strategic plan, which are outlined in this document.

## ABOUT THE QUALITY ENHANCEMENT CELL

The Quality Enhancement Cell at Dow University of Health Sciences was established in the first phase of HEC implementation of their Project (PC-1) for Establishment of QEC at Public Sector Universities 2006, along with 29 other cells in various public sector universities throughout Pakistan, which was linked to promoting public confidence that the quality and standards of the award of degrees and overall quality of knowledge being imparted by the Universities are enhanced and safeguarded. It was fully budgeted by the HEC for the initial phase of implementation.

The prime objective of the QEC is to practice evaluative measures to achieve excellence in program delivery. QEC is structured to pay attention to quality assurance aspects of higher education delivery at the University level, namely, to monitor the ongoing/continuous quality improvement of the degree awarding programs offered at the university, to meet the challenges of global ranking and sustainability in higher education, along with the focus on implementing the QA framework of HEC at the program and institutional levels.

The QEC is focused on quality assurance aspects of higher education concerning the mentioned aspects:

- ❖ To monitor the ongoing/continuous quality of the degree-awarding programs offered by the University.
- ❖ To meet the challenges of global ranking and compatibility in higher education.
- ❖ To develop a viable and sustainable mechanism of quality assurance in higher education at the institutional and program levels.

## INTRODUCTION & OVERVIEW

The QEC has been involved in various initiatives with the support of the Vice Chancellor since 2017. One of the accomplishments in pursuance of continuous quality improvement is that we set the benchmark scores in our region as far as reporting to and complying with HEC standards through the HEC yearly progress reporting mechanism, with scores that are above satisfactory in terms of the size of the institutions. The HEC has recognized these efforts of the QEC team of Dow University in 2021 with recognition of excellent performance in 2018-2019.

Furthermore, the establishment of the dedicated QEC-AC (Affiliated Colleges) was formally initiated at DUHS as a pilot institution by HEC, duly recognizing our efforts as a public sector University in Sindh to have one of the first established departments for monitoring and evaluation of the affiliated colleges. This required the QEC to restructure itself in 2023 and align itself to accomplish its Vision 2030.

Another accomplishment of the QEC is the recognition of the Director QEC in 2023 as a Certified Reviewer in Sindh and by the HEC, Pakistan as a reviewer of Institutional Performance Evaluation and Post-Graduate Program Review since 2021.

Quality Enhancement Cell, QEC-DUHS is also actively engaged in developing collaborations and linkages with other universities, colleges, and associations around the world in different areas of interest, such as student and faculty exchange opportunities and clinical elective opportunities. We have developed a Memorandum of Agreement with the University of Illinois-College of Medicine at Chicago (UIC) and the American Association of Medical Schools (AAMC), which is a prestigious Medical School and association. The AAMC Visiting Student Learning Opportunities (VSLO) provides a pathway by which qualified final-year medical students may browse and apply to clinical opportunities at a host institution through the facilitation of QEC.

The QEC was involved and a facilitator of the Pak-Sri Lanka student scholarship program offered to Sri Lankan students who choose DUHS as their higher institution of study, with a scholarship granted by the HEC. Furthermore, the faculty exchange program has also been initiated by the QEC to ensure that the outbound and inbound exchange of faculty expertise and research collaboration continues between the two countries.

Furthermore, we are involved in unique training opportunities such as Professional English language workshops, which facilitate the students, staff, and faculty to be able to converse in the English language at the most basic and advanced levels.

## The QA Framework:

The QA framework includes a comprehensive internal quality assurance mechanism and an external quality assurance mechanism.



## PROGRAM LEVEL EVALUATIONS

Internal Program Evaluation is cyclically conducted through the Self-Assessment reporting (SAR) process. All the degree programs offered at the University are required to prepare a Self-Assessment Report (SAR) based on the standards and criteria of the Higher Education Commission, Pakistan. The SAR highlights the weaknesses and strengths of the program to identify areas of improvement as part of continuous quality improvement.

## STUDENT-TEACHER EVALUATION & STUDENT SATISFACTION SURVEYS

Student-teacher evaluation and other student satisfaction surveys are conducted regularly for each program at Dow University of Health Sciences. The evaluation surveys are conducted towards the end of each module or the end of each semester-based program, where the survey is conducted following the method prescribed by HEC forms. Furthermore, faculty course review reports document the teacher's progress through their teaching plan, lectures, summaries, assessments conducted, and evaluation/student progress.

However, Teachers' evaluation by the students and the student course evaluation are both done online, where the average feedback results of each College/Institute/ School are correlated with the previous feedback results for quality improvement. These results are then further compared with the next evaluation cycle.

QEC-DUHS has also implemented a very structured feedback mechanism where feedback is collected from the various stakeholders, students, faculty, employees, employers, alumni, etc., regarding course evaluation, teachers' evaluation, and their satisfaction related to administrative services, job prospects, as per surveys prescribed by the HEC.

## **TRAINING AND DEVELOPMENT INITIATIVES**

Various programs offered focus on the training needs of the faculty and provide them with forums and channels for the enhancement of their professional skills, such as English language proficiency, and business communication along with faculty development training in the fields of curriculum design, teaching as a profession, academic planning and management, learner's psychology, assessment and evaluation, communication skills and research methods. The faculty development programs offered by QEC are often facilitated by various master trainers from the HEC, where a continuous system called, "Train the Trainer" identifies faculty members who have exhibited education leadership potential and skills to be trained; subsequently, they are then required to re-create the training at the program and institutional levels.

## **INSTITUTIONAL PERFORMANCE EVALUATION (IPE) BY HEC AND PERIODIC SELF REVIEW**

The Quality Enhancement Cell – Dow University of Health Sciences is required to host an Institutional Performance Evaluation, as part of the external quality assurance mechanism implemented by the Higher Education Commission, Pakistan. The self-review of the exercise of IPE is also conducted at the University level at both campuses each year with external reviewers and is a comprehensive evaluation of the overall performance of the University and gauges institutional effectiveness, among other standards. Students and faculty members participate in the evaluation and discuss their concerns with the evaluators, where the evaluators meet with the Vice Chancellor and discuss major and minor observations regarding students, curriculum delivery, academic governance, institutional resources, research and innovation activities, accreditation status and the state of its Affiliations, along with a comprehensive evaluation of the Ph.D. and MS/M.Phil. Programs offered.

The evaluators evaluate the institution all the eleven (11) standards of IPE, where they also meet the Registrar, Director of Planning & Development, Controller of Examinations, Director Finance, Director Procurement, and Head of Department of Research, among HoDs, Deans and Principals/Program Directors.

The evaluation is usually strengthened by feedback from individual interviewers to clarify any questions regarding the evidence provided by their departments. The evaluators then met the students from every graduate and undergraduate program

at different departments of DUHS. Students discuss their concerns and share their feedback regarding the various programs with the evaluators in open group discussions and a report is shared with the Vice Chancellor to improve the program delivery and the state of teaching and learning.

### **MS/MPHIL AND EQUIVALENT PROGRAM REVIEW**

This program review focuses on the validation of post-graduate academic programs and assurance of adherence to HEC's standards and QA criteria. This reflects overall on the program acceptance and recognition at the regional and international levels, as well as adding value to the University's portfolio of Graduate programs offered. This provides a useful feedback tool to the Quality Assurance Agency of the Higher Education Commission Pakistan to standardize graduate education offered at different HEIs. The QEC conducts the graduate program review at the MS/MPhil and Master level each year and the HEC conducts this external evaluation every four years or so. Furthermore, self-reviews of the Post Graduate Programs of MS, MPhil, and Ph.D. offered at Dow University of Health Sciences (DUHS) are conducted for three days annually, under the supervision of the Quality Enhancement Cell (QEC). The review team visits all program learning spaces, laboratories, and libraries, along with touring the allied facilities offered to the students at each campus. The review team also meets with the Deans/Principals/HoDs/Program Coordinators, students, and faculty members for feedback and open discussions.

At the end of the visit, the Review Team meets with the Vice Chancellor and briefs him regarding the performance of the MS/MPhil. / Master and Ph.D. programs of DUHS at all campuses.

### **INTERNATIONAL COLLABORATION AND VISITING STUDENT LEARNING OPPORTUNITIES**

QEC is actively engaged in developing collaboration and linkages with different international medical universities and colleges all over the world for the offering of student clinical electives in various specialties. This program focuses on identifying areas where international collaboration may be established, and student exchange may be conducted in the final year of study of MBBS students. The QEC is also engaged in student and faculty exchange programs and encourages and facilitates the exchange with partner Universities and institutions all over the world and across Pakistan.

### **DEPARTMENT OF QEC- AFFILIATED COLLEGES (QEC-AC) INTRODUCTION**

In response to specific directives from the Higher Education Commission (HEC) in 2022-2023, the Dow University of Health Sciences (DUHS) took a significant step by establishing the department of QEC-AC within the existing Quality Enhancement Cell (QEC).

This dedicated department is tasked with streamlining activities aimed at elevating the quality of teaching and learning at DUHS-affiliated colleges. Through the implementation of the Quality Assurance Agency - HEC Monitoring Framework, the

QEC-AC seeks to instill public confidence by meticulous monitoring, evaluating, sustaining, and continuously enhancing the overall quality of education provided by the 41 affiliated colleges, which offer 39-degree programs, one diploma, and one serving as a training site for a postgraduate diploma program.

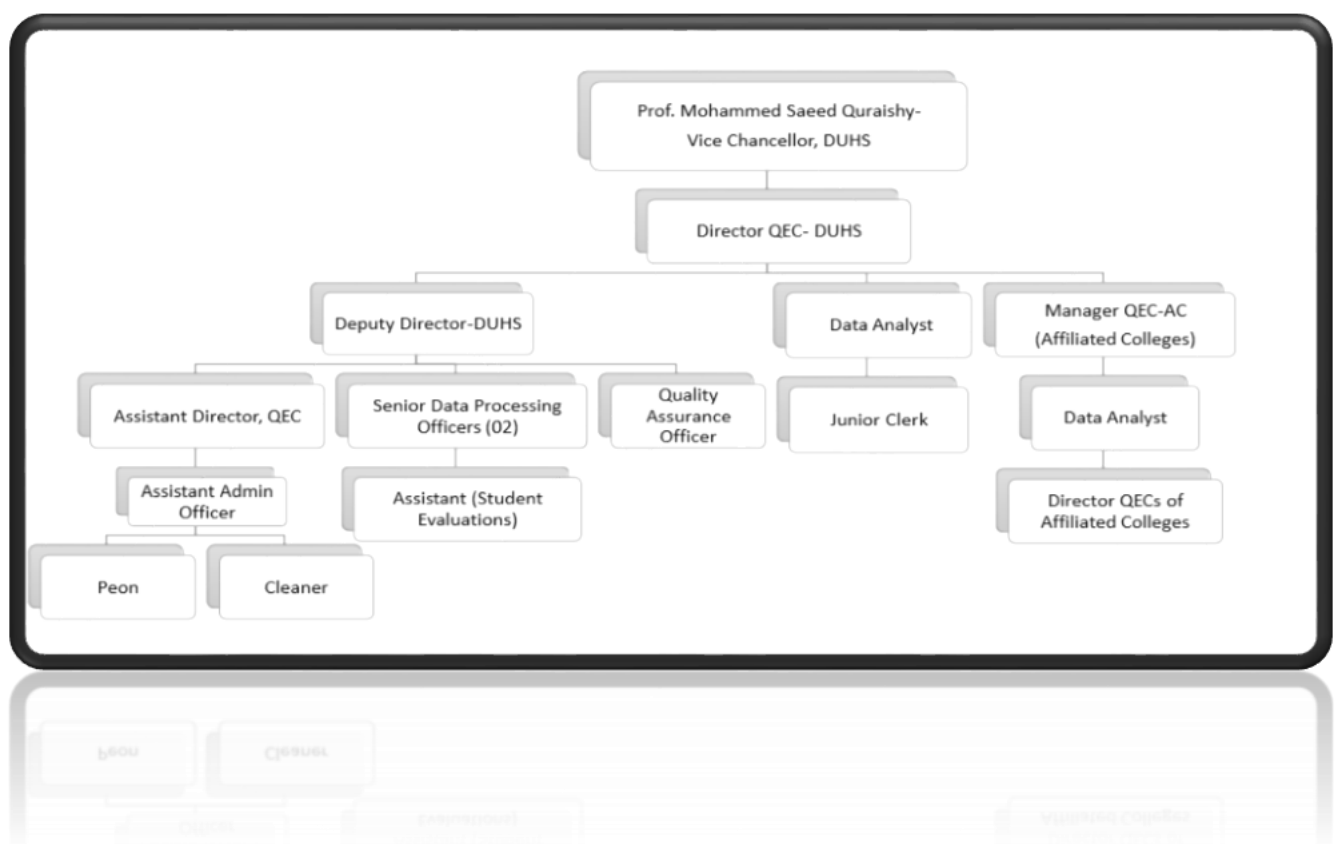
The assessment and evaluation strategies have been realigned with HEC standards, and members of the QEC-AC have undergone training and development initiatives to augment their skills. The QEC-AC actively identifies areas for improvement and implements robust quality assurance mechanisms. With approximately 8,000 enrolled students, QEC-AC plays a pivotal role in fostering effective communication and collaboration among diverse colleges, contributing to a more cohesive and integrated educational environment. The department consists of one manager, QEC-AC, and a data analyst, and reports to HEC regarding statistics and self-assessment reports.

## THE ORGANIZATIONAL STRUCTURE OF QEC-DUHS

The QEC DUHS has offices and QMS coordinators on each campus and program, to facilitate the student feedback evaluation process within 19 institutes/colleges and schools.

The departmental organizational structure consists of a director reporting to the Vice Chancellor and the hierarchy also includes a Deputy Director, Assistant Director, Manager QEC-AC, a Data Analyst, and two Senior Data Processing Officers, along with a Quality Assurance Officer and an Assistant Administrative Officer. The QEC-DUHS has a department dedicated to affiliated colleges that is headed by a Manager QEC-AC.

### ORGANOGRAM



As of the academic year 2022-2023, the QEC has evaluated 1393 courses with feedback from over 7200 students and 950 faculty.

## SECTION I: OVERVIEW OF THE STRATEGIC PLANNING PROCESS

The DUHS initiated a strategic plan to create a legacy of extraordinary achievement and academic excellence. The most critical element toward the realization of this goal is the development and timely implementation of the University and the department-wise strategic plans, enabling the University to take advantage of the opportunities that are presented locally and globally in the realm of education, research, clinical care, and community service.

This dynamic and competitive environment presents both challenges and opportunities for the University and the Quality Enhancement Cell; therefore, the Strategic plan of the University and the department must be developed in tandem within the cohesive framework that capitalizes on the strengths and contributions of the QEC.

The Master Strategic Plan was an outcome of many months of work, undertaken by the Executive Strategic Planning Workgroup, which under the tutelage of Prof. Mohammed Saeed Quraishy has defined a grand Vision for the future of this institution.

Recently, as of Sept. 2023, the University planned its mid-term review retreat and updated the progress of the University's Strategic Plan to achieve its grand Vision for 2030. Following this, the Executive Plan Development and Implementation workshop was initiated to provide a hands-on training program consisting of 7 modules, each lasting approximately two hours, to endow the participants with the requisite knowledge to develop an effective and implementable Strategic Plan for their respective academic and administrative units.

The QEC strategic plan is a part of the outcome of this initiative. In line with the direction of the Executive Plan Development and Implementation workgroups, the QEC developed its committee and focus group to formulate the strategic plan. The committee consisted of a faculty member, a staff focal person (QMS Coordinator), the Manager of QEC-Affiliated Colleges, the Assistant Director, and the Deputy Director as members to conduct the SWOT analysis and the TOWS matrix, moving toward formulating the Objectives/ Goals and the KPIs of the QEC Strategic Plan. Following this, the focus group narrowed down and identified a strategy to gain more insight into the workings of the QEC and its focal people.

Furthermore, to gain more insight into the thoughts of the stakeholders and as part of our initial brainstorming during the SWOT analysis, the core group started by designing a survey as a tool to gauge the effectiveness of the department and its previous work. The survey was sent to 48 respondents from the QMS coordinator group and approximately 550 students as a sample of the entire student population. QMS coordinators are the focal people who coordinate and deal with and work with the QEC at the department and collegiate levels. The results of the survey are as follows:

## **STUDENT SURVEY REGARDING THE EFFECTIVENESS OF QEC AND ITS TOOLS:**

Out of 622 respondents, about 58% responded that they were aware that a QEC existed within the University. 52% of the student respondents also expressed satisfaction with the conduct of the teacher evaluation and course evaluation surveys; whereas 35% were neither satisfied nor dissatisfied and rated 'neutral' on the question. 14% of students expressed dissatisfaction as to whether they were satisfied with the working of the department regarding the conduct of teacher evaluation and course evaluation surveys. Of the total 622 respondents, 91% also indicated that they do respond to the student satisfaction surveys as conducted by the QEC in the digital library or online. 9% of the students surveyed indicated that they do not respond to the student satisfaction surveys that are conducted by the QEC.

## **QMS COORDINATOR/ FACULTY SURVEY:**

Among the QMS coordinators, 89.6% of respondents agreed or strongly agreed that the QEC ensures efficient and effective mechanisms of communication with all stakeholders of programs within the University whereas 10.5% disagreed or strongly disagreed on the matter and 4.2% responded neutrally.

89% of QMS coordinators responded that the QEC effectively engages students in the feedback mechanism regarding student-teacher /course evaluations and 2.1% disagreed on the subject.

Furthermore, 77.1% of respondents among the target group responded that they agreed or strongly agreed that the QEC utilizes effective tools to Monitor and evaluate the progress of various programs towards their recognition & accreditation whereas 2.1% disagreed on the question and 20.8% neither agreed nor disagreed on whether or not the QEC utilizes effective tools to Monitor and evaluate the progress of various programs towards their recognition & accreditation.

More specifically, when asked if The QEC utilizes effective tools to evaluate the progress of various programs, such as SARs and periodic program reviews, approximately 77% either strongly agreed or agreed on the matter, whereas 20.8 were neutral with neither disagreement nor agreement on the matter. 2.1% of the respondents disagreed.

Furthermore, approximately 79.2% also agreed and/or strongly agreed that the QEC utilizes effective tools to enable the development of policies and procedures within the University; whereas 18.8% were neutral about the question and 2.1% disagreed with the statement. Approximately, 62.5% were strongly satisfied with the working of the department regarding the dissemination and implementation of HEC policies within the University; whereas 20.8 were Very satisfied and 8.4 % were dissatisfied or very dissatisfied.

When asked if they respond to the HEC feedback surveys shared online by the QEC periodically, 89.6% responded "Yes", whereas 4.2 % responded 'No", and another 8.3% responded that it did not apply to them. Furthermore, when asked if the same respondents acted regarding the feedback submitted by the students in their

faculty-student satisfaction surveys, 66.7% responded 'Yes', whereas 18.8% stated that they did not take any action regarding the feedback submitted by the students in their faculty-student satisfaction surveys.

Approximately 63% of respondents stated that they frequently or periodically consulted with the quality enhancement cell for their program accreditation and any other requirements, whereas 12.5% stated that they did not periodically or at all consult the QEC for the program accreditation requirements. When asked about the most recent experience with the QEC office and its staff, 58% stated they were satisfied and 20.8% stated they were very satisfied with the experience. 20.8% of respondents also stated that they were neutral on the matter.

## SECTION II: VISION, MISSION & VALUES

### VISION

To be a pre-eminent academic institution committed to changing and saving lives.

### MISSION

Providing outstanding patient-centered education, training, and clinical care informed by cutting-edge research and innovation, generating and disseminating new knowledge.



### VALUES

#### Customer Service

- Put patients & students first.

#### Empathy & Compassion

- Understand before you judge.
- Be concerned for the sufferings & misfortunes of others.

#### Excellence

- Be the best and commit to exceptional quality and service.

## **Innovation**

- Encourage curiosity, imagine, create, and share.

## **Teamwork**

- Engage & collaborate.

## **Integrity & Leadership**

- Be a role model and influence others to achieve their best. Have the courage to do the right thing.
- Hold yourself and others accountable.

## **Respect & Collegiality**

- Be kind.
- Listen to understand.
- Value different opinions.

## **STATEMENT OF PURPOSE**

To ensure the Continuous Monitoring Evaluation of Education and Training Provided Through Accredited Programs to Meet the Challenges of Global and Regional Ranking /Compatibility; To Implement a Sustainable Quality Assurance Culture Within the University through rigorous programs and self-reviews.

### SECTION III: ASPIRATIONAL INSTITUTIONS

Identifying benchmarking institutions of higher education and their QEC departments provides the University with an opportunity to not only benchmark its performance and output but also to benchmark the recognition of its degrees through world and regional rankings of institutions that are essentially offering similar programs as DUHS.

Benchmarking both internal and external stakeholders with the tool to continually evaluate an institution's progress towards accomplishing its goals, using objective and measurable parameters such as KPIs.

Since the University initiated this process of defining our aspirational institutions and peer Universities by first recognizing that its primary responsibility is to impart quality education and training to students and to provide outstanding clinical care to our patients, the quality enhancement cell is also dedicated to defining its peers in CQI. This understanding was brought up by our desire to continue to develop appropriate capacity and infrastructure for research and scholarship in selected areas of interest that would enrich the educational experience of our students, inform the delivery of quality clinical care, and endow this University with the intellectual assets (s) to serve the community.

The rationale of the selection of a regional and international aspirational is determined by the extent of and aim of their compliance against international standards and the functionality of its units of institutional effectiveness with regards to its monitoring and evaluation mechanisms, along with the effectiveness of QA practices and their impact on the quality of education provided.

The identified Regional Benchmarks include the following:

1. AKU's Network of Quality, Teaching and Learning (AKU NQTL)
2. The QEC of Institute of Business Management, Karachi (IOBM)
3. Worldwide benchmarks include the Quality unit at King Saud University, KSA

## **SECTION IV: STRATEGIC GOALS**

### **Goal 01: Adoption of the New HEC Quality Assurance Framework.**

Objective 1: Implement and execute the new QA framework for internal and external assurance.

### **Goal 02: Ensuring Continuous Quality Improvement.**

Objective 1: Ensure implementation of undergraduate and graduate education policies across DUHS programs.

Objective 2: Define graduate attributes for implementing outcome-based education.

Objective 3: Conduct routine self-reviews for program effectiveness per PREE standards in the QA Framework.

### **Goal 03: Enhancing University National and International Rankings.**

Objective 1: Strengthen rankings through excellence, improvement, sustainability, and collaboration.

### **Goal 04: Educate and Train A Quality Workforce of IQAE within the University.**

Objective 1: Build faculty and staff capacity as PREE and RIPE reviewers under the revamped QA Framework.

Objective 2: Build IQAE team capacity in CQI for continuous improvement and international alignment.

### **Goal 05: Facilitate compliance with HEC criteria for affiliated colleges and ensure they maintain a transparent educational environment.**

Objective 1: Ensure HEC compliance with affiliated institutions and implement an AI-driven monitoring platform for CQI.

Objective 2: Establish an independent department to monitor affiliated institutes for quality education per HEC guidelines.

### **Goal 06: Enhance HEC evaluation tools and streamline their implementation within the University.**

Objective 1: Update evaluation and assessment forms to align with current education and clinical training standards.

Objective 2: Develop effective alumni feedback surveys for program reviews.

Objective 3: Implement an advanced system to enhance quality feedback loop closure by HoDs.

Objective 4: Ensure responsive program evaluations using rubrics and toolkits for continuous improvement.

## OBJECTIVES, OKRs & KPIs

Goal 01: Adoption of the New HEC Quality Assurance Framework							
Goal Statement: Adoption of the revamped quality Assurance framework titled, Pakistan Precepts Standards and Guidelines for Quality Assurance in Higher Education (PSG-2023).							
Objectives & Key Results (OKRs)							
Objective 1: Implement and execute the new QA framework for internal and external assurance							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Implementation and execution of the new quality assurance framework with regards to the external and internal quality assurance mechanisms.	KR 1.1: Initiation of formalization of the new IQAE, Institutional Quality Assessment and Effectiveness Office (IQAEs) (formerly QEC), and the constitution/formation of Institutional Quality Circle (IQC).	Number of Review Committees formed adequate for both internal and external quality assurance mechanisms.	The number of review committees established.	1. 1st meeting of IQC 2. 2nd meeting of IQC	QEC	1. Formation Of Ripe Committee, 4-5 Internal and External Reviewer Remuneration 2. 3 Day Event to Conduct the Review of Institutional Performance and Enhancement, With Lunch for Reviewers	Formation complete, MEETING not held for 2 quarters.
	KR 1.2: Formation of Institutional Performance Report Committee (IPR) to write and compile the University's Institutional Performance Report for the current assessment year and revise within the next two years draft sections of the performance report by analyzing data inputs using the appropriate AI tools and providing a structured narrative. Moreover, implementing an AI-powered dashboard to automatically gather, sort, and visualize data from multiple sources for the IQC committee & HEC review.	Percentage of Report compiled according to the new standards by the end of the academic year.	The percentage of reports completion.	1. Drafting sessions 2. Complete IPR report	Institutional Performance Report Committee:		By the end of Q1 2025
				1. Committee formed 2. Conduct of RIPE at DUHS	Ms. Sanam Soomro		Q2 2025
	KR 1.3: Formation of the committee for Review of Institutional Performance and Enhancement (RIPE Committee) at the University level by June 2024	Number of Corrective actions identified and closed and rectified according to the new standards of IPR and review of Institutional Performance and Enhancement.	The number of corrective actions identified, addressed, and resolved.	1. Drafting of RIPE Report 2. Complete report	Ms. Salma Tariq		By the end of Q2 2025

	KR 1.4: Identify strengths and weaknesses, as well as necessary feedback from self-assessment through RIPE.	Achievement of an Effective score within the categorization of expectations and standards, with more than 65% of standards and expectations retained from 2024-2026.	The attainment of an effective score within the expected categories and standards.	1. Preparation of Evaluation Report 2. Dissemination of report to the concerned departments	Ms. Aasma Kulsoom		By the end of Q2 2026
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Goal 02: Ensuring Continuous Quality Improvement							
Goal Statement: Ensuring continuous quality improvement at the program level (undergraduate and postgraduate) through periodic program review and assessments.							
Objectives & Key Results (OKRs)							
Objective 1: Ensure implementation of undergraduate and graduate education policies across DUHS programs							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Ensure adoption and translation of the undergraduate education and graduate education policy across the various programs offered at DUHS	KR 1.1: Implementation of the undergraduate education policy v1.1. Within at least 75% of the undergraduate programs since Fall 2024 and in the next three years.	Number of curriculum review committees formed or re-formed to review general education requirements and curricula.	The number of curriculum review committees established or restructured.	1. Awareness Session for Undergraduate programs offered 2. Awareness sessions for the new Graduate education policy within DUHS	QEC, Program Directors & Coordinators and respective CRCs	Resource Personnel	Q4 2025
		Number of programs adopted and offered in accordance with the undergraduate education policy v.1.1.	The number of programs implemented and offered.		QEC, Program Directors & Coordinators and respective CRCs		Q4 2025
	KR 1.2: Ensure implementation of HEC's Graduate Education Policy across 80% of the offered postgraduate programs, with alignment through Doctoral Admission Committee (DAC).	Percentage of alignment with the Graduate Education Policy through the DAC, by Fall 2024.	The percentage of alignment with the Graduate Education Policy		QEC, DAC & Program Directors		Q4 2025
Objective 2: Define graduate attributes for implementing outcome-based education							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Identification of the Graduate Attributes as part of implementation of the outcome-based	KR 2.1: Ensure programs are based on outcome-based education with defined learning outcomes for 75% of the courses offered by the University	Number of Programs that have developed their PLOs. Use of AI dashboards can track and report the	The number of programs that developed their PLOs. AI dashboards tracked and reported the number of	1. Follow up the remaining PROGRAM Learning outcomes 2. Completion of	QEC, Dr Sonia Ijaz Haider, Program Directors/Coordinators	Resource Personnel trained in OBE for making of the graduate attributes	Q2 2026

education standards.	across undergraduate and postgraduate programs in the next 3 years.	number of programs completing their PLOs in real time, highlighting progress toward the goal.	programs completing their PLOs in real time, providing insights into progress toward the goal.	PROGRAM Learning outcomes of all programs			
		Number of Programs that have also developed their CLOs. The AI tools can monitor progress, documenting which programs and courses have defined and implemented CLOs.	The number of programs that developed their CLOs.	1. Follow up of the remaining Course Learning outcomes 2. Completion of Course Learning outcomes of all programs	QEC, Dr Sonia Ijaz Haider, Program Directors/Co ordinators		Q2 2026
Objective 3: Conduct routine self-reviews for program effectiveness per PREE standards in the QA Framework							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Undertake routine self-program review for Effectiveness and Enhancement, against the PREE standards as required in the revamped Quality Assurance Framework of HEC (PSG-2023).	KR 3.1: 80% of academic programs shall conduct a self-assessment to evaluate the program's performance against the revamped PREE Standards, as outlined in the new Quality Assurance Framework, within the oversight of the IQAE (QEC) by using AI-enabled platforms to facilitate communication and collaboration between QEC, IQAE, and departments throughout the self-assessment process.	Number of programs completed self-assessments cycle against the PREE standards to self-evaluate the programmed performance through 2026-2027.	The number of programs that completed the self-assessment cycle against the PREE standards.	1. Initiate self-assessment training 2. Self-Assessment done in all the programs in which the process is due.	QEC, Programs Team Members and respective institutional heads	Resource Personnel to conduct the internal and external Programme Review for Effectiveness and Enhancement (PREE); resource personnel need to be identified, trained, and then oriented towards this 3-day evaluation as per the new QA framework requirements.	Q4 2026
	KR 3.2: Number of QAE/ QEC briefings delivered to ensure that each department understands the new self-assessment process and agrees to a schedule for completion as per the target for that year.		The number of programs that completed the self-assessment cycle against the PREE standards.		QEC, Programs Team Members and respective institutional heads		Q4 2026

Goal 03: Enhancing University National and International Rankings							
Goal Statement: Enhance University National and International Rankings							
Objectives & Keyresults (OKRs)							
Objective 1: Strengthen rankings through excellence, improvement, sustainability, and collaboration							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Strengthen the University's national and international rankings by excelling in academic programs, continuously improving institutional performance, enhancing sustainability practices, and strategic collaborations at the departmental level.	KR 1.1: Ensure 80% of academic programs are aligned with national accreditation standards by 2026.	Placement of the University in Rankings (Top 500 in any World Ranking agency).	The placement of the University in rankings	1. Facilitation in the accreditation process/visits 2. Facilitation in the accreditation process/visits	Principal/Dir ector of constituent colleges	Policy needs revision through financial analysis	Q2 2026
	KR 1.2: Review the existing University's Research policy for Incentivizing Research and make recommendations for 2024-2027.		The placement of the University in rankings		QEC Dept		Q2 2026
	KR 1.3: Achieve a minimum of 90% compliance with the Higher Education Commission's (HEC) Quality Assurance Framework by 2025.	Number of high-quality Impact Factor research articles published in a year in accordance with the policy.	The number of high-quality research articles with an Impact Factor published annually in accordance with the policy.	1. Attaining the HEC targets 2. Attaining the HEC targets	Principal /Directors of constituent colleges of DUHS		Q4 2025

Goal 04: Educate and Train A Quality Workforce of IQAE within the University							
Goal Statement: Educate and Train A Quality Workforce of IQAE within the University							
Objectives & Key Results (OKRs)							
Objective 1:Build faculty and staff capacity as PREE and RIPE reviewers under the revamped QA Framework							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Enhance the reviewer capacity and train faculty/staff within the University to be reviewers of PREE and RIPE standards as per the revamped QA Framework.	KR 1.1: Train reviewers as per the new standards and guidelines.	Number of Trained Reviewers on quality assurance within HEIs (internal and external) in alignment with the new standards.	Number of reviewers participated in IQA and EQA events.	1. Engage the faculty/staff in the reviews 2. Engage the faculty/staff in the reviews	QEC	Resource personnel for conducting the PREE & RIPE	Q4 2027

Objective 2: Build IQAE team capacity in CQI for continuous improvement and international alignment							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Train IQAE team in CQI, promoting a culture of continuous improvement, proactive problem solving, stakeholder engagement, and alignment with international standard across various programs.	KR 2.1: Participate in and contribute to Quality workshops /seminars and awareness sessions throughout the year.	Number of sessions/ trainings attended in quality assurance for continuous quality improvement.	Number of reviewers participated in IQA and EQA events.	Training session for the preparation of the program self-assessment report.	QEC	TRAINING needs assessment of all staff members as per the new QA Framework	Q4 2025
		Number of national and international events hosted in QA for continuous quality improvement	Number of reviewers participated in IQA and EQA events.	Conduct of QA sessions for various universities.	QEC		Q4 2025

Goal 05: Facilitate compliance with HEC criteria for affiliated colleges and ensure they maintain a transparent educational environment							
Goal Statement: Facilitate the Recognition of Affiliated Institutes/Colleges of DUHS, ensuring they can Develop and Sustain an Environment of Student-Centered Education with Accountability and Transparency.							
Objectives & Key Results (OKRs)							
Objective 1: Ensure HEC compliance for affiliated institutions and implement an AI-driven monitoring platform for CQI							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Provide compliance for HEC Recognition of affiliated institution in accordance with the new affiliation criteria and policy and create a centralized compliance monitoring platform through AI tools to be able to track progress of CQI.	KR 1.1: Adoption and implementation (with review of currently affiliated institutes), as per the new affiliation criteria of HEC by using AI tools to create a centralized compliance monitoring platform that tracks each institute's progress toward meeting HEC's new affiliation criteria in real-time.	Number of affiliated institutes visited/ re-visited / inspected within the calendar year.	The number of affiliated institutes visited, revisited, or inspected during the calendar year.	Regular visits of affiliated colleges as per Registrar's schedule	Registrar Secretariat, Manager QEC AC, Data Analyst	The affiliation committee is to be incentivized through various means to continue to visit new and fresh affiliations	Q2 2025
	KR 1.2: Facilitate the approval of Pakistan Qualification Registry entries of majority of the affiliated institutes by the HEC by using AI scheduling tools to optimize inspection visit timelines and prioritize institutes needing immediate support.	Number of compliant institutes as per the new affiliation criteria (80% compliance or more) by implementing AI-powered dashboards to track and visualize compliance percentages for all affiliated institutes.	The number of institutes compliant with the new affiliation criteria.	1. Create Dashboard to show the status of compliance against standards of affiliation 2. Track the compliance of the affiliated colleges with standards	Registrar Secretariat, Manager QEC AC, Data Analyst		Q2 2025

Objective 2: Establish an independent department to monitor affiliated institutes for quality education per HEC guidelines							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Form a functional independent department that can evaluate and monitor the affiliated institutes to be able to offer quality education in compliance with HEC GUIDELINES to provide professional management and administrative support within the ambit of quality assurance and enhancement.	KR 2.1: Formation of an effective QEC- QEC-affiliated colleges unit/department with staff to monitor and evaluate the compliance of criteria, guidelines, monitoring, and measuring the quality of faculty, facility, resources, and education being provided to the students.	Number of enhanced activities including seminars and good practice workshops or academic regulations disseminated by using AI tools to track the number and quality of workshops, ensuring diverse topics and tailored content for affiliated institutes.	The number of enhanced activities, including seminars, best practice workshops, or academic regulations.	1. Create Dashboard to track the number and quality of workshops 2. Meet the target of at least one workshop/se minar to be conducted by the affiliated colleges	QEC and HR	QEC- AC HEC allocation of funds; HR requires 2-3 dedicated staff members, and one of those staff at the managerial level	Q2 2025
		Number of self-assessments conducted or reported by the affiliated institute/college in the academic year/ cycle.	The number of self-assessments conducted or reported.	1. HEC target 2024-25 was completed	Manager QEC AC		Accomp-lished

Goal 06: Enhance HEC evaluation tools and streamline their implementation within the University							
Goal Statement: Strengthen the Evaluation Tools provided by HEC, and their implementation processes within the University							
Objectives & Key Results (OKRs)							
Objective 1: Update evaluation and assessment forms to align with current education and clinical training standards							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Review of the student evaluation survey forms and the Peer and HoD Assessment forms to bring them in line with current requirements of education, quality and clinical training.	KR 1.1: Inclusion of clinical evaluation/survey and feedback by students and teachers as per the prescribed approved evaluation tool.	Number of Clinical student evaluations conducted in the year	The number of clinical student evaluations conducted during the year.	1. Clinical evaluations to be done in all the colleges (where applicable)	QEC Evaluation team and respective coordinators	Review of forms requires expertise in the subject	Q4 2025
		Number of Peer and HoD evaluation surveys conducted as per the revised evaluation tool in the year.	The number of peer and HoD evaluation surveys conducted using the revised evaluation tool during the year.	Evaluations in all the colleges/institutes	Director QEC, Evaluation team, Principals/Directors & HoDs		Q4 2026

Objective 2: Develop effective alumni feedback surveys for program reviews							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Brainstorm ways to implement alumni feedback surveys as an effective tool for program level reviews.	KR 2.1: Implementation of alumni feedback survey in conjunction with the alumni department of DUHS	Number of alumni feedback conducted as a percentage of the total passed out in the year.	The number of alumni feedback surveys conducted.	1. Meetings with the A&M Department to develop an effective evaluation strategy 2. Selection of software to replace or modify CMS as an effective tool of evaluation	Alumni & Marketing Department and QEC Evaluation team	Centralized student management software is required where the alumni portal is active throughout the student life cycle and beyond	Q2 2027
Objective 3: Implement an advanced system to enhance quality feedback loop closure by HoDs							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Incorporate an advanced feedback analysis system to address closing of the quality feedback loop by the HoD.	KR 3.1: Identification of corrective actions by HoD for under-performing faculty as per the student evaluation feedback forms in the year.	Number of feedback evaluation results assessed and identified corrective actions by HoD per program/faculty.	The number of feedback evaluation results assessed, with corrective actions identified by the HoD for each program/faculty.	1. Selection of methodology/ software regarding closing the feedback loop 2. Develop a tracking mechanism to track closing the feedback loop by addressing concerns and comments of students about courses taught	QEC and HoDs	The software or tracking mechanism is required to track the feedback loop by addressing concerns and comments of students about courses taught.	Q2 2026
Objective 4: Ensure responsive program evaluations using rubrics and toolkits for continuous improvement							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Maintain a high level of responsiveness in program-level evaluations via rubrics and through prescribed toolkits as a continuous quality improvement tool	KR 4.1: Program evaluation as per prescribed toolkits as a continuous quality improvement tool.	Number of programs evaluated in the academic year, with the prescribed proformas and rubrics.	The number of programs assessed in the academic year.	1. Conceptualizing strategies to develop evaluation criteria and supports for continuous improvement within program structures 2. Develop rubrics and other tools for CQI within the program's levels	QEC Evaluation team	Expertise in QA through peer institutions in the region to develop rubrics and other tools for CQI within the program's levels	Q2 2027

## SECTION V: RESOURCE PLANNING FOR ACHIEVING STRATEGIC GOALS

Strategic Objectives	Resources Needed (People/ Space/ Equipment)	Year 1-2024-2025	Year 2- 2025-2026	Year 3-2026-2027
<u>Goal 1/Objective 1:</u> Implement and execute the new QA framework for internal and external assurance.	<ol style="list-style-type: none"> <li>1. Formation Of Ripe Committee, 4-5 Internal and External Reviewer Remuneration</li> <li>2. 3-Day Event to Conduct the Review of Institutional Performance and Enhancement with Lunch for Reviewers</li> </ol>	<ol style="list-style-type: none"> <li>1. People/ Trained Resources: Remuneration for experts and reviewers Budget allocation for the 3-day visit, including TA/DA for out-of-station externals</li> </ol>	<ol style="list-style-type: none"> <li>1. Remuneration for experts and reviewers Budget allocation for the 3-day visit, including TA/DA for out-of-station externals</li> </ol>	<ol style="list-style-type: none"> <li>1. Remuneration for experts and reviewers Budget allocation for the 3-day visit, including TA/DA for out-of-station externals</li> </ol>
<u>Goal 2/Objective 1:</u> Ensure implementation of undergraduate and graduate education policies across DUHS programs	❖ Resource Personnel	<ol style="list-style-type: none"> <li>1 Awareness Session for Undergraduate programs offered</li> <li>2 awareness sessions for the new Graduate education policy within DUHS</li> </ol>	Undergraduate education policy awareness for affiliated colleges	Graduate Education policy review after adoption.
<u>Goal 2/ Objective 2:</u> Define graduate attributes for implementing outcome-based education	❖ Resource Personnel trained in OBE for making the graduate attributes	Resource Personnel for Master trainers to make the PROGRAM Learning outcomes	Medical Education Personnel as Master Trainer for making Course Learning Outcomes across all programs. Teaching Strategies that incorporate OBE	Medical Education Personnel for the development of assessment strategies that measure and evaluate OBE
<u>Goal 2/ Objective 3:</u> Conduct routine self-reviews for program effectiveness per PREE standards in the QA Framework	❖ Resource Personnel to conduct the internal and external Program Review for Effectiveness and Enhancement (PREE); resource personnel need to be identified, trained, and then oriented towards this 3-day evaluation as per the new QA framework requirements.			
<u>Goal 3/ Objective 1:</u> Strengthen rankings through excellence, improvement,	❖ Policy needs revision through financial analysis	❖ Policy is revised as per the current benchmark for incentivizing high-quality research	❖ Policy is Implemented with financial incentives in place for both students and faculty	❖ PPolicy is monitored via budget consumption and as per KPI for high-quality

sustainability, and collaboration				research output.
<u>Goal 4/</u> <u>Objective 1:</u> Build faculty and staff capacity as PREE and RIPE reviewers under the revamped QA Framework	❖ Resource personnel for conducting the PREE & RIPE	❖ External reviewer's training	❖ Budgeted Faculty training for standards in accordance with the new QA Framework	
<u>Goal 4/</u> <u>Objective 2:</u> Build IQAE team capacity in CQI for continuous improvement and international alignment	❖ TRAINING needs assessment of all staff members as per the new QA Framework	❖ Training in CQI about the new policy framework.	❖ Budgeting required for sponsoring one IQAE staff to national or international training.	❖ Cyclic training programs for QMS coordinators within each campus on promoting CQI, and aligning with regional/inter national standards across various programs
<u>Goal 5/ Objective 1:</u> Ensure HEC compliance for affiliated institutions and implement an AI-driven monitoring platform for CQI	❖ The affiliation committee is to be incentivized through various means to continue to visit new and fresh affiliations	❖ Revisits required of existing affiliations as per new HEC criteria	❖ Remuneration for a member of the affiliation committee as per Revisits schedule	❖ Budget allocation of visits required for new and existing affiliations, including external members that may accompany as experts
<u>Goal 5/</u> <u>Objective 2:</u> Establish an independent department to monitor affiliated institutes for quality education per HEC guidelines	❖ QEC- AC HEC allocation of funds; HR requires 2-3 dedicated staff members and one of those staff at the managerial level	❖ Hiring of 1 administrative level staff if affiliations are less than 40 in number	❖ Hiring of additional qualified staff as data analysts, as affiliations may increase per subject and total number	

Goal 6/ Objective 1: Update evaluation and assessment forms to align with current education and clinical training standards	❖ Review of forms requires expertise in the subject	❖ Reviewed forms are implemented in the online QEC student feedback evaluation portal	❖ Increase the capacity of the portal to be accessible for Peer and HoD evaluations	❖ Design a modern portal so IT expertise is required for this purpose.
Goal 6/ Objective 2: Develop effective alumni feedback surveys for program reviews	❖ Centralized student management software is required where the alumni portal is active throughout the student life cycle and beyond	❖ Selection of software to replace or modify CMS	❖ Trial period of new software to track students beyond graduation as alumni	❖ Send alumni feedback surveys through the mail with identified employers as per the database established
Goal 6/ Objective 3: Implement an advanced system to enhance quality feedback loop closure by HoDs	❖ The software or tracking mechanism is required to track closing the feedback loop by addressing concerns and comments of students about courses taught	❖ Selection of methodology / software regarding closing the feedback loop	❖ Implementation of the tool	❖ Evaluation of the tool and its effectiveness by peer reviewers.
Goal 6/ Objective 4: Ensure responsive program evaluations using rubrics and toolkits for continuous improvement	❖ Expertise in QA through peer institutions in the region to develop rubrics and other tools for CQI within the program levels	❖ Identified experts are remunerated financially for external review/program evaluations that are to take place as per cyclic calendar annually.		

## SECTION VI: IMPLEMENTATION AND MONITORING OF THE STRATEGIC PLAN

1. The monitoring mechanism of the strategic plan is two-fold:
  - a. Monitoring and Evaluation / Action Committee will be formed from the core Committee to be able to achieve the desired objectives and meet the KPIs.
  - b. The action committee, for this purpose, would have individual goal champions, allocated against each goal so that they can aid in the implementation of the goal through its objectives & Key Results, KPIs for 3 years (2024-2027).
2. The Monitoring and Evaluation Committee of the QEC-strategic plan would report its quarterly progress to the IQC, Institutional Quality Circle as per the new/ revamped QA framework.
3. The review of the objectives and KPIs achieved would also be considered through periodic surveys and feedback received from the faculty/ QMS Coordinators and the students.

**SECTION VII:****LIST OF APPENDICES**

No.	DESCRIPTION
A	SWOT ANALYSIS
B	TOWS MATRIX
C	QEC SURVEY FOR FACULTY AND QMS COORDINATORS
D	INTERNATIONAL RANKINGS OF DUHS (2020-2024)

## APPENDIX A: SWOT ANALYSIS

STRENGTHS	WEAKNESSES
<ol style="list-style-type: none"> <li>1. <b>Leadership:</b> Staffing/ leadership is complete as per HEC requirements.</li> <li>2. <b>Effective as per outcomes:</b> Effective as per intended outcomes achieved with respect to HEC standards and guidelines, placed in W-category by achieving a high score on their annual performance evaluation (above 90% consistently) for the last 7 years.</li> <li>3. <b>Accredited and Ranked Programs:</b> The majority of programs are accredited and ranked internationally.</li> <li>4. <b>Implementation of HEC policies:</b> Swift implementation of HEC policies via the Board of Studies/Academic Council.</li> <li>5. <b>Consistent and Transparent:</b> Clear and transparent processes for assessment, accreditation, and improvement contribute to the credibility of the QEC.</li> <li>6. <b>High level of responsiveness:</b> The assigned tasks either by the internal or the external bodies are met in the stipulated timeframe.</li> <li>7. <b>QEC-Affiliated Colleges:</b> Fully functional funded QEC-AC, established this year as per TORs of HEC, to monitor and evaluate the affiliated colleges and their programs' delivery.</li> <li>8. <b>Increased Revenue:</b> Financial contributions from affiliated colleges contribute to the university's overall revenue.</li> </ol>	<ol style="list-style-type: none"> <li>1. <b>Disparity:</b> Disparity in programs' quality and levels due to non-compliance with the feedback analysis provided.</li> <li>2. <b>Data Quality:</b> Challenges in ensuring the accuracy and completeness of data used for performance evaluations.</li> <li>3. <b>Quality at the QEC level only:</b> QEC assesses and analyses quality but faces challenges when this is not utilized at the institutional level for improvement.</li> <li>4. <b>Affiliated Colleges in PQR:</b> Affiliated colleges are not entered into the Pakistan Qualification Register due to lack of HEC recognition.</li> <li>5. <b>Accreditation:</b> SOME programs may be lacking accreditation status for a long time, affecting student intake and overall recognition.</li> <li>6. <b>QEC Presence:</b> QEC is reactive in some situations, such as external visits, otherwise isolated within the University as a support department.</li> <li>7. <b>Conformity rather than enhancement:</b> We focus on CONFORMITY, which is the baseline, rather than enhancement of those standards.</li> <li>8. Public sector mindset.</li> </ol>

OPPORTUNITIES	THREATS
<ol style="list-style-type: none"> <li>1. <b>Improvement through feedback:</b> Utilizing student and teacher feedback as a valuable resource for continuous improvement and closing the feedback loop.</li> <li>2. <b>Adapt innovative approaches:</b> Adaptation of innovative methodologies for continuous improvement in institutional effectiveness such as SAR, RIPE, PGPR, etc.</li> <li>3. <b>Training and Capacity Building:</b> Training programs for QEC staff can further enhance capacity.</li> <li>4. <b>Technology Advancement:</b> Power BI can be utilized as a data analysis tool.</li> <li>5. <b>Strategic Partnerships:</b> Collaboration with external organizations or experts for benchmarking and best practices.</li> <li>6. <b>Program level evaluation:</b> The evaluations can be implemented as a continuous quality improvement tool.</li> <li>7. <b>University ranking for recognition:</b> Accurate Ranking statistics data collection and submission to submit on time</li> </ol>	<ol style="list-style-type: none"> <li>1. <b>Limited stakeholder engagement:</b> Limited Involvement of various stakeholders, including faculty, students, and academicians, as all the feedback is taken online.</li> <li>2. <b>Affiliated Colleges' Performance:</b> Poor performance or non-compliance with policies in Affiliated colleges may threaten the University's reputation and credibility.</li> <li>3. <b>New Accreditation Councils:</b> New Councils and their guidelines may be introduced in the market, and the accreditation process takes time.</li> <li>4. <b>FIS in Postgraduate programs:</b> Postgraduate Program Review conducted by HEC may lead to further intake stopped due to minor or major non-compliance or lack of supervisors.</li> <li>5. <b>Recognition from Accrediting bodies:</b> Some PG programs have no recognition status since PM&amp;DC has not visited them for a long time and HEC guidelines ask us to maintain accreditation status through an external visit in the last 5 years.</li> <li>6. <b>Unknown status of accreditation:</b> Some programs are not PMDC-approved nor recognized, and their status is unknown.</li> <li>7. <b>NOC from HEC:</b> NOCs take a very long time to process, leading to delays in the programs offered.</li> <li>8. <b>Conflict with HEC policies:</b> New Policies of HEC may be in conflict with existing QEC infrastructure &amp; capabilities.</li> <li>9. <b>Change in Leadership:</b> Changing upper MANAGEMENT &amp; Leadership.</li> <li>10. <b>Reporting mechanism:</b> The reporting mechanism is all YEAR LONG, even the Registrar's</li> </ol>

	<p>responsibility of ANNUAL REPORT is compiled by the QEC.</p> <p><b>11. Cooperation from the HoDs:</b> Non submission of data in the Raking agencies or no cooperation from HoDs.</p> <p><b>12. Competitive Landscape:</b> Increasing competition among educational institutions may raise the bar for quality standards.</p> <p><b>13. Utilization of data:</b> Limited use of data concerning decision-making.</p>
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## APPENDIX B: : TOWS MATRIX

OPPORTUNITIES	THREATS
<ol style="list-style-type: none"> <li><b>1. Improvement through feedback:</b> Utilizing student and teacher feedback as a valuable resource for continuous improvement and closing the feedback loop.</li> <li><b>2. Adapt innovative approaches:</b> Adaptation of innovative methodologies for continuous improvement in institutional effectiveness, such as SAR, RIPE, PGPR, and other regulatory bodies- PNC, PCP, AND NBEAC.</li> <li><b>3. Training and Capacity Building:</b> Training programs for QEC staff can further enhance capacity.</li> <li><b>4. Technology Advancement:</b> Power BI can be utilized as a data analysis tool.</li> <li><b>5. Strategic Partnerships:</b> Collaboration with external organizations or experts for benchmarking and best practices.</li> <li><b>6. Program level evaluation:</b> The evaluations can be implemented as a continuous quality improvement tool.</li> <li>Participation in Curriculum Review Committees to ensure continuous quality improvement.</li> </ol>	<ol style="list-style-type: none"> <li><b>1. Limited stakeholder engagement:</b> Limited Involvement of various stakeholders, including faculty, students, and academicians, as all the feedback is taken online.</li> <li><b>2. Affiliated Colleges' Performance:</b> Poor performance or non-compliance of policies in affiliated colleges may threaten the University's reputation and credibility.</li> <li><b>3. New Accreditation Councils:</b> New Councils and their guidelines may be introduced in the market, and the accreditation process takes time.</li> <li><b>4. FIS in Postgraduate Programs:</b> Postgraduate Program Review conducted by HEC may lead to further intake being stopped due to minor or major non-compliance or lack of supervisors.</li> <li><b>5. Recognition from Accrediting bodies:</b> Some PG programs have no recognition status since PM&amp;DC has not visited them for a long time and HEC guidelines ask us to maintain accreditation status through an external visit in the last 5 years.</li> <li><b>6. Unknown status of accreditation:</b> Some programs are not PMDC-approved or recognized, and their status is unknown.</li> <li><b>7. NOC from HEC:</b> NOCs take a very long time to process, leading to delays in the programs offered.</li> <li><b>8. Conflict with HEC policies:</b> New Policies of HEC may be in conflict with existing QEC infrastructure &amp; capabilities.</li> </ol>

		<p><b>9. Change in Leadership:</b> Changing upper MANAGEMENT &amp; Leadership.</p> <p><b>10. Reporting mechanism:</b> The reporting mechanism is all YEAR LONG, even the Registrar's responsibility of ANNUAL REPORT is compiled by the QEC.</p> <p><b>11. Cooperation from the HoDs:</b> Non-submission of data in Raking agencies or no cooperation from HoDs.</p> <p><b>12. Competitive Landscape:</b> Increasing competition among educational institutions may raise the bar for quality standards.</p> <p><b>13. Utilization of data:</b> Limited use of data with regard to decision-making.</p>
STRENGTHS	SO	ST
<p><b>1. Leadership:</b> Staffing/ leadership is complete as per HEC requirements</p> <p><b>2. Effective ROLE with the University for generating external outcomes:</b> Effective as per intended outcomes achieved with respect to <b>HEC standards and guidelines</b>, placed in W-category by achieving a high score on their annual performance evaluation (above 90% consistently) for the last 7 years.</p> <p><b>3. Accredited and Ranked Programs:</b> The majority of programs are</p>	<p><b>1. Leadership and Feedback (S1, O1):</b> Utilize effective leadership and methodologies to close the feedback loop for continuous improvement within our programs.</p> <p><b>2. Responsiveness and Program Evaluation (S7, O6):</b> Maintain high responsiveness (S7) and implement program-level evaluations (O6) via rubrics and through prescribed toolkits as a continuous quality improvement tool.</p> <p><b>3. Effective Outcomes and Innovative Approaches (S2, O2):</b> Capitalize on THE EFFECTIVE ROLE WITHIN THE University by adapting innovative methodologies, such as revised SAR,</p>	<p><b>1. Disparity Resolution and Stakeholder Engagement (S1, T1):</b> Address program quality disparity (W1) by involving stakeholders more actively through targeted online feedback sessions.</p> <p><b>2. Data Quality Assurance and Affiliated Colleges' Performance (S2, T2):</b> <b>Improve data quality assurance processes (W2) to monitor and address poor performance or non-compliance within the programs to rectify the non-compliance levels.</b></p> <p><b>3. QEC Presence and New Accreditation Councils (S6, T3):</b></p> <ul style="list-style-type: none"> <li>Identify programs for accreditation</li> </ul> <p>The process for DUHS affiliation should be granted only in accordance with fulfilling all criteria by the applying institutions to ensure validation/recognition of the degree.</p>

<p>accredited and ranked internationally.</p> <p><b>4. Implementation of HEC policies:</b> Swift implementation of HEC policies via the Board of Studies/Academic Council.</p> <p><b>5. Consistent and Transparent:</b> Clear and transparent processes for assessment, accreditation, and improvement contribute to the credibility of the QEC.</p> <p><b>6. QEC-Affiliated Colleges:</b> Fully functional funded QEC-AC, established this year as TORs of HEC, to monitor and evaluate the affiliated colleges and their programs' delivery.</p> <p><b>7. High level of responsiveness:</b> The assigned tasks either by the internal or the external bodies are met in the stipulated timeframe.</p> <p><b>8. Increased Revenue:</b> Financial contributions from affiliated colleges contribute to the university's overall revenue.</p>	<p>RIPE, PGPR, and CIEC to enhance institutional effectiveness in compliance with the regulatory guidelines.</p> <p><b>4. Accredited Programs and Capacity Building (S3, O3):</b> Leverage accredited programs to establish training programs (O3) for QEC staff, enhancing their capacity.</p> <p><b>5. Transparent Processes and Technology (S5, O4):</b></p> <ul style="list-style-type: none"> <li>Enhance transparency by utilizing advanced technological methods with effective data management/analysis to further contribute to the transparency of QEC.</li> </ul> <p><b>6. Affiliated Colleges and Strategic Partnerships (S6, O5):</b> Strengthen QEC's role and establish strategic partnerships (O5) with external organizations for benchmarking.</p>	<p>Create and disseminate guidelines for entities to self-monitor the progress of their own revised improvement plans.</p>
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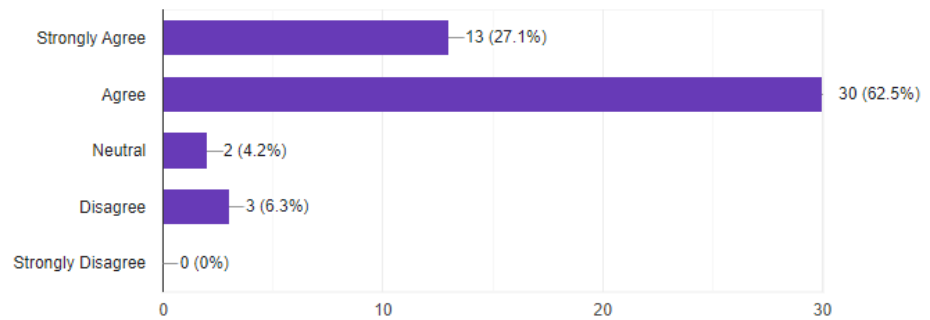
WEAKNESSES	WO	WT
<p>1. <b>Disparity:</b> Disparity in programs' quality and levels due to non-compliance with the feedback analysis provided.</p> <p>2. <b>Data Quality:</b> Challenges in ensuring the accuracy and completeness of data used for performance evaluations.</p> <p>3. <b>Quality at the QEC level only:</b> QEC assesses and analyses quality but faces challenges when this is not utilized at the institutional level for improvement.</p> <p>4. <b>Affiliated Colleges in PQR:</b> Affiliated colleges are not entered into the Pakistan Qualification Register due to lack of HEC recognition.</p> <p>5. <b>Accreditation:</b> SOME programs may be lacking accreditation status for a long time, affecting student intake and overall recognition.</p> <p>6. <b>QEC Presence:</b> QEC is reactive in some situations, such as external visits, otherwise isolated within the University as a support department.</p> <p>7. <b>Conformity rather than enhancement:</b></p>	<p>1. Feedback Analysis Improvement (W1, O1): Incorporate an advanced feedback analysis system with clinical student feedback (O1) to address closing the quality feedback loop.</p> <p>2. Data Quality Enhancement and Technology (W2, O4): Improve data accuracy and completeness in collaboration with relevant stakeholders for more effective data presentation to the required agencies/councils.</p> <p>3. Institutional Utilization of QEC Assessments (W3, O6): Promote the utilization of QEC assessments at the institutional level (W3) for continuous quality improvement.</p> <p>4. Strengthening IQA (SARs, RIPE, PGPR) program review processes that are aligned with curriculum reviews</p>	<p>1. Accreditation Status Improvement and Reporting Mechanism (W5, T5, T10): Address accreditation gaps (W5) and streamline the reporting mechanism (T10) to avoid delays in processing NOCs (T7).</p> <p>2. Proactive QEC Presence and Leadership Changes (W6, T9): Actively establish QEC's presence (W6) and prepare for potential leadership changes (T9) by ensuring a smooth transition process.</p> <p>3. Enhance Data Utilization and Competitive Landscape (T13, W7): Increase the utilization of data for decision-making (T13) by shifting focus from conformity (W7) to enhancement of standards.</p> <p>Facilitate the HEC recognition of affiliated institutes/colleges, ensuring they can develop and sustain an environment of fiscal responsibility, accountability, and transparency.</p>

<p>We focus on CONFORMITY, which is the baseline, rather than enhancement of those standards.</p> <p>8. QA Processes ( IQA &amp; EQA) are not updated by regulatory authorities and therefore not aligned internally.</p> <p>9. Our QA processes are not aligned with curriculum reviews</p>		
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## APPENDIX C: QEC SURVEY FOR FACULTY AND QMS COORDINATORS

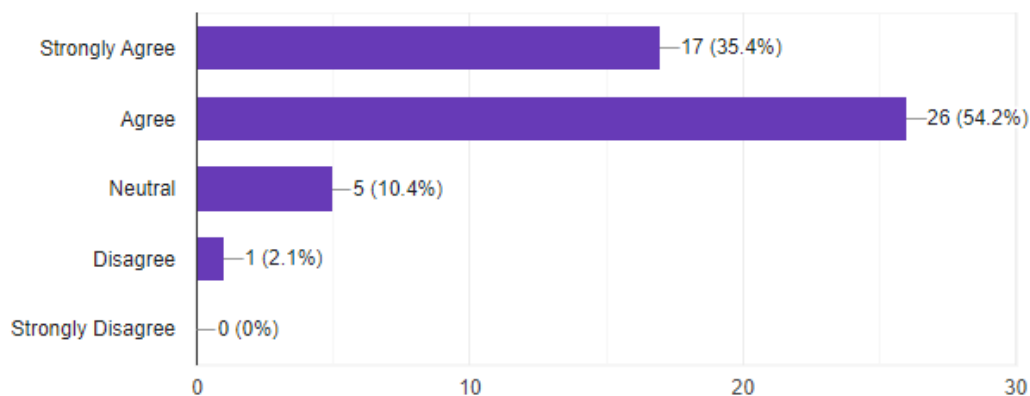
Q1.The QEC ensures efficient and effective mechanisms of communication with all stakeholders of programs within the University.

48 responses



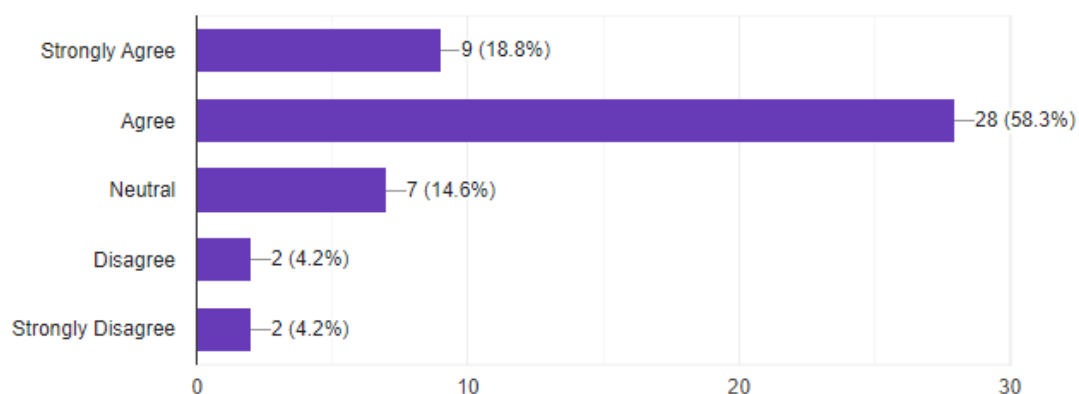
Q2.The QEC effectively engages students in the feedback mechanism regarding student-teacher /course evaluations.

48 responses



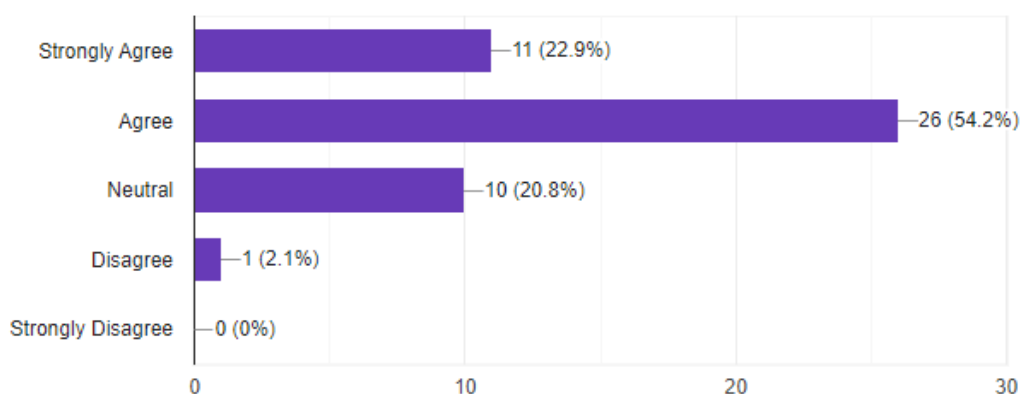
Q3.The QEC effectively engages faculty and staff as partners in the Quality assurance activities

48 responses



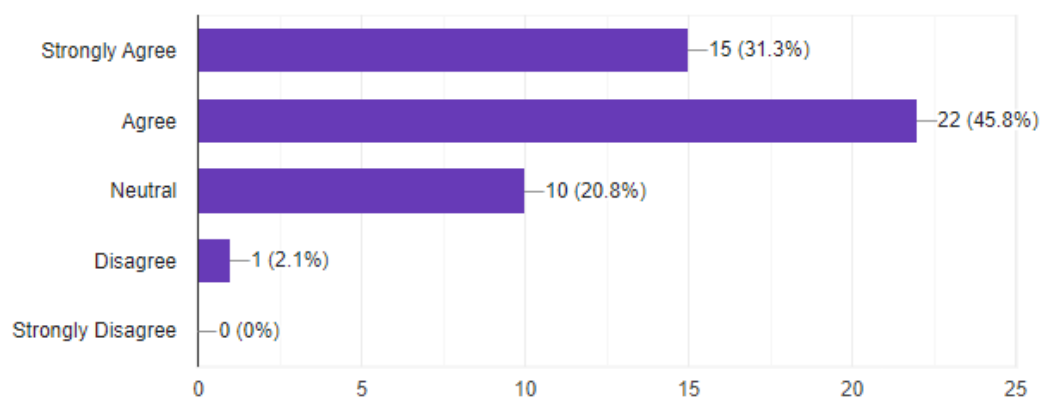
**Q4. The QEC utilizes effective tools to monitor and evaluate the progress of various programs toward their recognition & accreditation**

48 responses



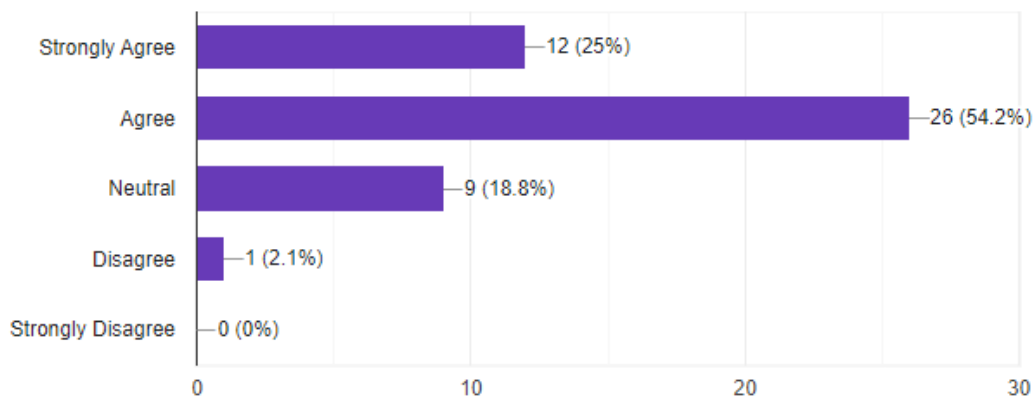
**Q5. The QEC utilizes effective tools to evaluate the progress of various programs, such as SARs and periodic program reviews.**

48 responses



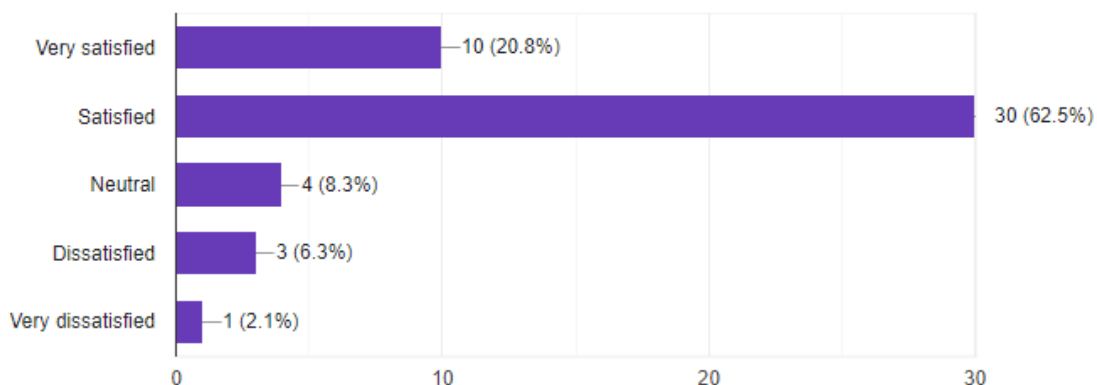
**Q6. The QEC utilizes effective tools to enable the development of policies and procedures within the University.**

48 responses



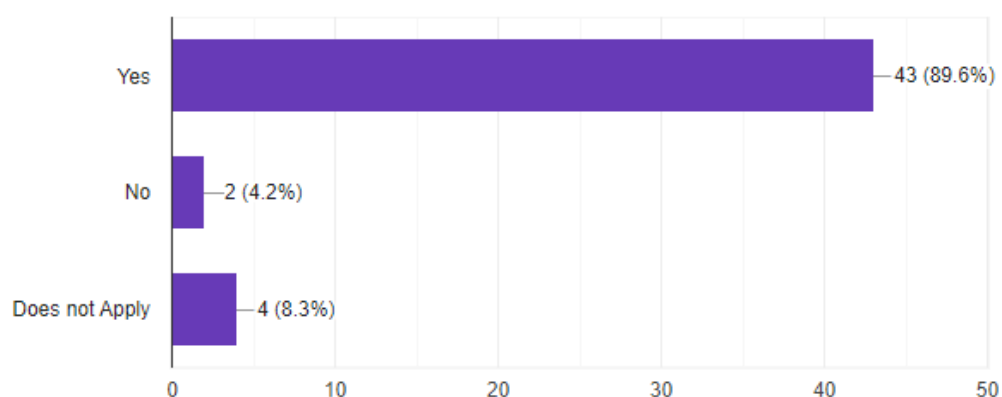
**Q7. How satisfied are you with the working of the department about the dissemination and implementation of HEC policies within the University?**

48 responses



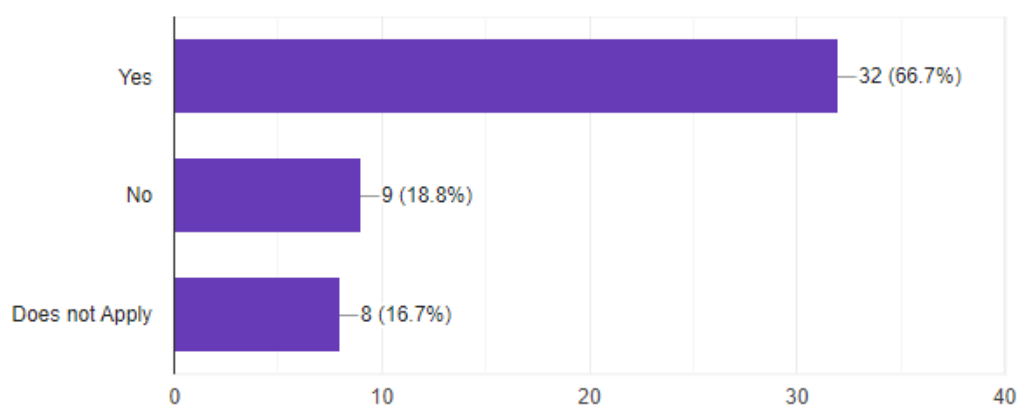
**Q8. Do you respond to the HEC feedback surveys shared online by the QEC periodically?**

48 responses



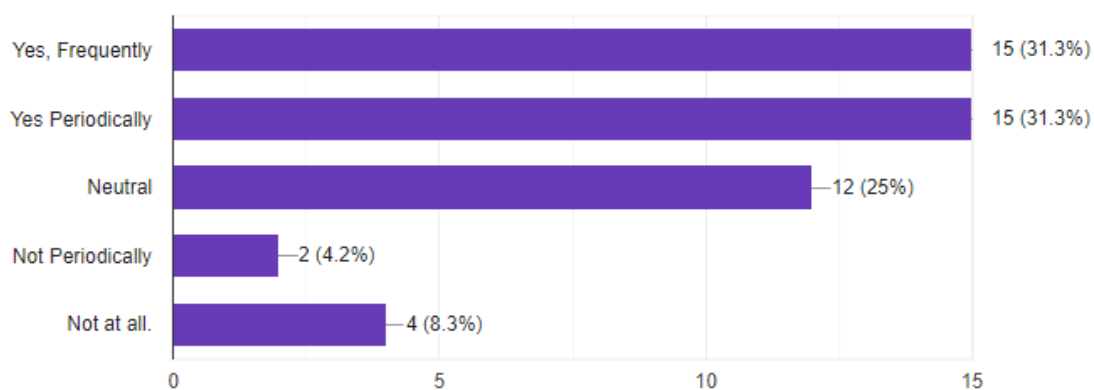
**Q9. Do you take any action regarding the feedback submitted by the students in their faculty-student satisfaction surveys?**

48 responses



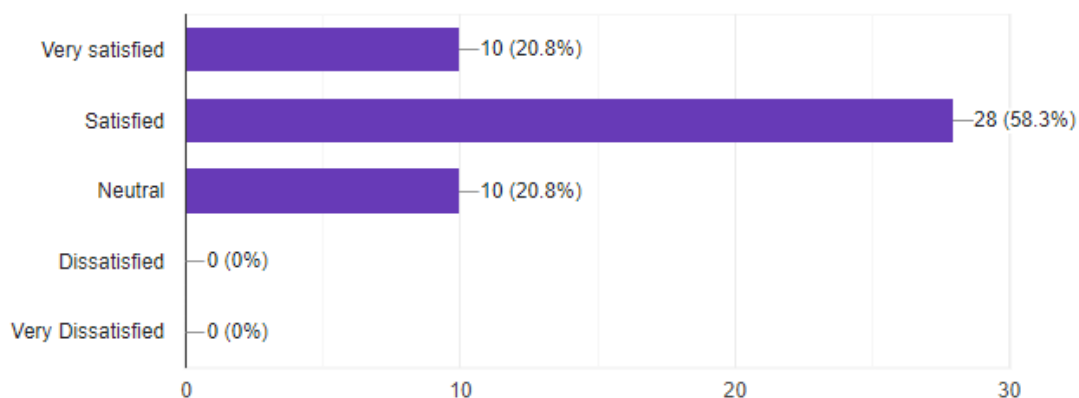
**Q10. Do you consult with the quality enhancement cell for your program accreditation and any other requirements?**

48 responses



Q11. How was your most recent experience with the QEC Office and its staff?

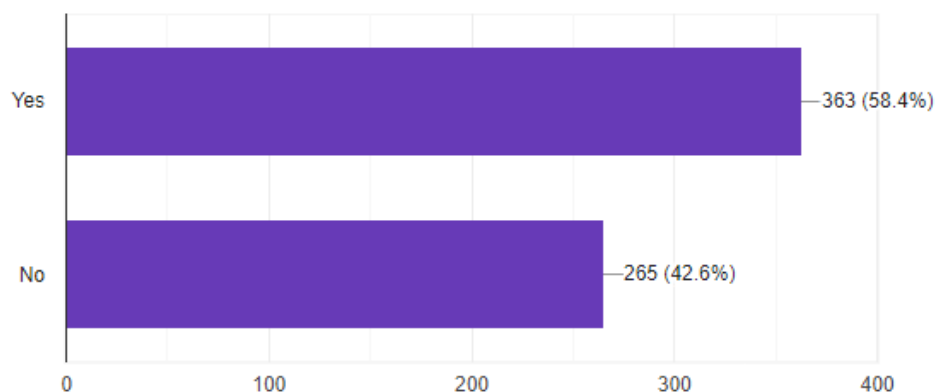
48 responses



#### ANNEXURE IV: STUDENTS' FEEDBACK REGARDING QUALITY ENHANCEMENT CELL-DUHS

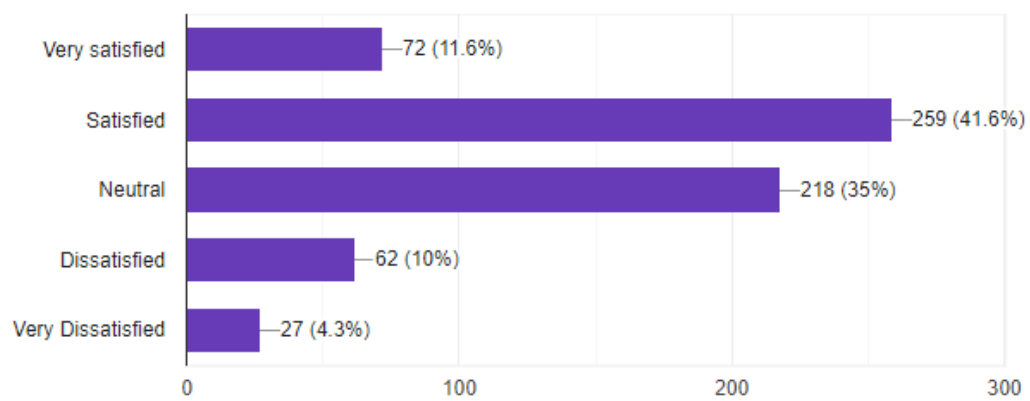
Q1. Are you aware that a Quality Enhancement Cell exists in the University?

622 responses



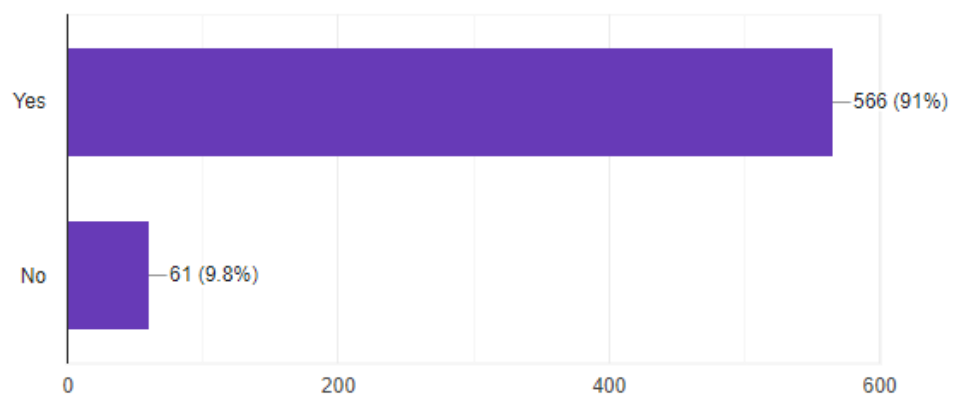
Q2. How satisfied are you with the working of the department about the conduct of Teacher Evaluation and Course Evaluation surveys?

622 responses



**Q3. Do you respond to the Student Satisfaction surveys as conducted by the QEC in the Digital Library or online?**

622 responses



## APPENDIX D: INTERNATIONAL RANKINGS OF DUHS (2020-2024)

Ranking Agencies	2020	2021	2022	2023	2024
1. Times Higher Education World University Rankings	REPORTER status	REPORTER status	REPORTER status	601-800 out of 1799 institutions	1201-1500
2. THE World University Rankings by Subject- <i>Clinical &amp; Health</i>	Not Ranked	Not Ranked	Not Ranked	501-600	601-800
3. <i>THE</i> Impact Ranking Overall	601+	801-1000	801-1000 (out of 1406 institutions)	801-1000	801-1000
• <i>THE</i> Impact Ranking <i>SDG 3-Good Health &amp; Well Being</i>	401-600	201-300	101-200	96 overall in the world	101-200
• <i>THE</i> Impact Ranking <i>SDG 4-Quality Education</i>	401-600	601-800	601-800	601-800	601-800
• <i>THE</i> Impact Ranking <i>SDG 5-Gender Equality</i>	201-300	201-300	401-600	201-300	201-300
4. QS World University Ranking by <i>Subject-Medicine</i>	Not Ranked	601-650	551-600	601-650	551-600

5. QS Asia University Ranking	451-500	401-450	351-400	<i>Not Ranked (Not Eligible)</i>	401-450
6. QS Asia University Rankings: Southern Asia	Not Ranked	Not Ranked	Not Ranked	Not Ranked	106 out of 280
7. UI GreenMetric World University Rankings	784 <sup>th</sup> in the world	658 <sup>th</sup> in the world	857 <sup>th</sup> in the world	879 <sup>th</sup> in the world	685 <sup>th</sup> in the world