



**Implementation/Action Plan of
Self Review of Institutional Performance & Enhancement (RIPE-15-17 MAY 2025) at
Dow University of Health Sciences**

S. No.	Findings	Proposed Corrective Actions	Implementation Date	Responsible Body
Standard 1: Vision, Mission, Goals And Strategic Planning				
1	Vision and mission statements have not been revised in the last five years. Initiate formal review and revision process of vision and mission statements with input from faculty, students, alumni, and other stakeholders to ensure relevance and alignment with institutional goals.	Initiate formal review and revision process of vision and mission statements with input from faculty, students, alumni, and other stakeholders to ensure relevance and alignment with institutional goals.	By 1-August 2025	Office of Strategic Development and Implementation (OSDI)
2	Insufficient evidence of an institutional-level implementation and monitoring mechanism for strategic plan feedback.	Develop an institution-wide monitoring and feedback mechanism for strategic plan implementation including regular reporting, defined performance indicators, and structured stakeholder feedback to enhance transparency and accountability.	By 1-August 2025	Office of Strategic Development and Implementation (OSDI)
Standard 2: Governance, Leadership And Organization				
3	No defined mechanism for regular review and monitoring of the strategic plan.	Establish a formal monitoring and evaluation framework for the strategic plan with annual reviews to track progress and implement corrective actions.	By 1-August 2025	Office of Strategic Development and Implementation (OSDI) /Registrar Secretariat
4	No formal mechanism for periodic review of departmental KPIs.	Implement a structured quarterly KPI review mechanism aligned with the University's vision, mission, and strategic objectives.	By 1-August 2025	Office of Strategic Development and Implementation (OSDI) /Registrar Secretariat
5	Statutory meetings held without a tentative calendar; Registrar's Office lacks full awareness and coordination.	Develop and circulate an annual tentative calendar of all statutory body meetings and ensure full coordination and awareness within the Registrar's Office to enhance governance functionality.	By 1-August 2025	Registrar Secretariat
6	Mentorship and counselling services available but lack effectiveness evaluation.	Assess mentorship and counselling service impact using retention, performance, and satisfaction data, and incorporate findings into service enhancement plans.	By 1-August 2025	To all DUHS Institutes
Standard 3: Institutional Resources And Planning				
7	Lack of post-contract vendor performance evaluation or procurement improvement monitoring.	Develop and implement a vendor evaluation policy including performance metrics; integrate evaluation findings into procurement planning and continuous improvement.	By 1-August 2025	Planning & Development/Procurement
Standard 4: Audit And Finance				
8	No formal financial forecasting software or tool is currently used.	Implement a financial forecasting model or software to support long-term financial planning and strategic resource allocation.	By 1-August 2025	Finance Directorate
9	Lack of student feedback regarding financial resource utilization.	Conduct student perception surveys on value-for-money and integrate feedback results into financial planning and resource allocation decisions.	By 1-August 2025	Finance Directorate
10	No roadmap or KPIs for financial aid expansion.	Develop a financial aid strategy with clear, measurable KPIs aligned with student population growth and institutional goals.	By 1-August 2025	Finance Directorate/Financial Aid Office

Standard 5: Affiliated Colleges/Institutions				
11-	Approximately 40% of affiliated colleges are not listed in the HEC Pakistan Qualification Register (PQR).	Ensure all affiliated colleges are registered with HEC's Pakistan Qualification Register (PQR) and make it mandatory for continued affiliation.	By 1-August 2025	Registrar Secretariat
12	Potential reconsideration or exceptions to non-reaffiliation policy for disaffiliated institutions, risking policy integrity.	Strictly adhere to existing policy of non-reaffiliation of disaffiliated institutions; implement regular audits and compliance tracking mechanisms to uphold quality standards and institutional credibility.	By 1-August 2025	Registrar Secretariat
Standard 6: Internationalization Of Higher Education And Global Engagement				
13	Inadequate integration between LMS and CMS limits effective teaching, data usage, and international collaboration.	Align LMS and CMS systems for integrated teaching, collaborative learning, and real-time academic data exchange; enable support for virtual programs, joint teaching, and curriculum delivery aligned with international standards.	By 1-August 2025	LMS/CMS
14	Limited membership in global academic networks restricts international engagement and mobility.	Actively pursue institutional membership in global academic networks (e.g., IAU, APQN); initiate MoUs with international institutions for research, faculty/student mobility, and collaborative projects.	By 1-August 2025	Registrar Secretariat
15	Limited structured student and faculty exchange programs.	Develop formal bilateral exchange frameworks with international academic partners; include objectives, selection criteria, timelines, and credit transfer mechanisms; assign institutional focal units for execution and visibility.	By 1-August 2025	Registrar Secretariat
Standard 7: Faculty Recruitment, Development And Support Services				
16	Lack of awareness among faculty about recruitment and promotion policies, especially internal promotions.	Conduct orientation workshops and briefings across departments; ensure digital access to HR policies; disseminate clear internal promotion guidelines.	By 1-August 2025	HR Directorate
17	Contractual faculty employed for over five years on six-month terms with gaps; inconsistent contract durations.	Develop and enforce standardized long-term contract policies; offer contract regularization for long-serving faculty; eliminate gap-renewal practices to enhance job security.	By 1-August 2025	HR Directorate
18	Unequal distribution of contractual/permanent and full-time/visiting faculty across departments.	Conduct a workforce audit; establish department-level faculty distribution benchmarks; ensure balanced and equitable staffing plans to support stability and career progression.	By 1-August 2025	HR Directorate
19	Inexperienced faculty appointed as OSPE examiners, violating regulatory and institutional policies.	Enforce strict compliance with OSPE examiner criteria; only allow Assistant Professors and above with ≥5 years teaching experience; create verification and approval mechanism for examiner appointments.	By 1-August 2025	To all DUHS Institutes/Examination Department
20	Controlled documents on faculty policy lack periodic review mechanisms.	Introduce a formal review calendar for all faculty-related policies and procedures; assign QEC or HR to ensure periodic updating and communication of documents.	By 1-August 2025	QEC and HR Directorate
Standard 8: Academic Programmes And Curricula				
21	No documented mechanism to monitor follow-up actions on program evaluation recommendations (SAR, PGPR, IPE, RIPE).	Establish a centralized tracking system for evaluation follow-ups with assigned responsibilities, implementation timelines, and documented evidence of progress.	By 1-August 2025	QEC

22	CRCs lack student and alumni representation, which limits feedback and compliance with HEC norms.	Revise CRC structures to include student and alumni members; develop guidelines for nomination and engagement of representatives to ensure user-focused curriculum design.	By 1-August 2025	To all DUHS Institutes-CRCs
23	CMS and LMS systems operate in silos, leading to inefficiency in academic operations.	Launch CMS-LMS integration project to synchronize academic data, streamline content delivery, and improve reporting and monitoring functionalities for all stakeholders.	By 1-August 2025	IT/CMS/LMS
24	Course Learning Outcomes (CLOs) are not consistently developed or updated across programs.	Mandate CLO development and periodic review for all academic programs; align CLOs with program learning outcomes and industry relevance to ensure academic rigor and employability.	By 1-August 2025	To all DUHS Institutes
Standard 9: Admission, Progression, Assessment And Certification				
25	Updated 2024 postgraduate policies are not available on the University website; submitted evidence is outdated.	Publish the updated 2024 postgraduate policies online; consolidate documents under a publicly accessible "Admission, Progression, Assessment, and Certification Manual.	By 1-August 2025	Department of Alumni, Marketing, and Communication, DUHS
26	No formal policy for admission of foreign postgraduate students.	Develop and include a comprehensive foreign-student admission policy in the updated admission manual; ensure clarity on eligibility, process, and documentation.	By 1-August 2025	Admission Department
27	Grievance and Academic Committees were briefed in 2024, but their MoUs and formal records have not been updated.	Update and archive terms of reference, meeting minutes, and revised MoUs for Grievance and Academic Committees; ensure they reflect July 2024 changes and are publicly accessible.	By 1-August 2025	DUHS Grievance and Academic Committees/Registrar Secretariat
28	Absence of a comprehensive Examination Policy beyond the 2020 Online Examination Policy.	Integrate the Online Examination Policy into a broader Examination Framework covering all assessment types, invigilation, grading, rechecking, and academic integrity protocols.	By 1-August 2025	Examination Department, DUHS
29	Delays of 6–8 months in examinations and certifications for non-MBBS/BDS programs.	Implement strict timelines and monitoring for examination and result turnaround; target maximum processing time of under three months across all programs.	By 1-August 2025	Examination Department, DUHS
Standard 10: Student Support Services				
30	Student participation in curriculum review is not uniformly implemented across departments.	Institutionalize student participation in curriculum review processes across all faculties; amend CRC guidelines to ensure consistent inclusion of student representatives.	By 1-August 2025	To all DUHS Institutes-CRCs
31	Psychological counselling services exist, but their frequency, adequacy, and effectiveness have not been evaluated.	Conduct a formal evaluation of psychological counselling services; assess staff-student ratios, session frequency, and student satisfaction. Expand staffing and facilities based on evaluation findings.	By 1-August 2025	Psychological Counseling and Therapy services - Institute of Behavioral Sciences (IBS)
32	No documented SOP available for the Sports Department, limiting evaluation and standardization.	Develop a formal and comprehensive SOP for the Sports Department, covering governance structure, safety, program planning, resource allocation, and periodic review mechanisms; publish and train staff on SOP compliance.	By 1-August 2025	Sports
Standard 11: Impactful Teaching And Learning And Community Engagement				
33	LMS is underutilized in certain academic programs, with inconsistent adoption across departments.	Monitor and guide departments to fully integrate LMS into teaching and assessment processes. Implement regular audits and feedback loops to ensure consistent usage across all departments.	By 1-August 2025	IT/LMS

34	The DLC at DMC campus faces spatial constraints, limiting student access during peak academic periods.	Expand the physical infrastructure of the DLC or create satellite digital learning spaces. Increase virtual access to DLC resources via remote login and scheduling systems to maximize student access.	By 1-August 2025	IT/DLC
35	No formal mentoring sessions for students addressing academic queries, mental health concerns, and learning challenges.	Introduce structured mentoring sessions for students, addressing academic, mental health, and learning challenges. Integrate these sessions with departmental support systems for regular scheduling and evaluation.	By 1-August 2025	To all DUHS Institutes
36	Community engagement is not fully institutionalized across all departments and faculties.	Encourage all departments to actively participate in community outreach, aligned with their academic domains. Institutionalize community engagement within program objectives, and document these efforts for continuous improvement and impact measurement.	By 1-August 2025	To all DUHS Institutes
Standard 12: Research, Innovation, Entrepreneurship And Industrial Linkage				
37	Limited evidence of regular training/workshops for faculty and students on research methodology, ethics, and grant writing.	Organize structured, regular workshops on research methodology, ethical research practices, and grant writing. Integrate these into academic calendars and conduct them in collaboration with experienced researchers and external experts to ensure quality and alignment.	By 1-August 2025	Office of Research Innovation and Commercialization (ORIC)
38	No documentary evidence of Animal IRB SOPs, despite a functioning animal house and related research activities.	Develop and publish SOPs for the Animal IRB. Make the procedures and guidelines accessible to faculty and students via institutional portals to support ethical animal research and enhance transparency.	By 1-August 2025	Office of Research Innovation and Commercialization (ORIC)
39	Current APC reimbursement limit of USD 400 for journals with Impact Factors 1–4 is below market rates, restricting publication options.	Increase the APC reimbursement ceiling to USD 800 for journals with Impact Factors 1–4. Establish a review mechanism to annually reassess APC caps based on prevailing market rates and align financial support with faculty research needs.	By 1-August 2025	Office of Research Innovation and Commercialization (ORIC)
Standard 13: Fairness and Integrity				
40	The Marketing Policy and both Faculty Handbooks (Grading and Promotion) exist only in draft form and lack formal institutional approval.	Route the draft Marketing Policy and both Faculty Handbooks through the University's governance bodies (e.g., Senate, Academic Council) to obtain official approval and formalize their adoption.	By 1-August 2025	Department of Alumni, Marketing, and Communication, DUHS
41	The Faculty Handbooks do not clearly identify in their titles whether they pertain to grading or promotion, risking confusion among users.	Revise the titles of the handbooks to clearly indicate their purpose: "Grading Policy Handbook" and "Promotion Policy Handbook." Ensure these are easily identifiable and accessible to all stakeholders.	By 1-August 2025	HR
42	No evidence of a Student Handbook, leaving students without a consolidated reference for rights, responsibilities, and grievance procedures.	Create and publish a comprehensive Student Handbook that details academic regulations, student rights, responsibilities, and grievance mechanisms. Ensure it is easily accessible and distributed to all students at the start of their academic journey.	By 1-August 2025	To all DUHS Institutes-
43	Documentation to support EOI 2 (faculty and staff records), EOI 6 (BASR letter and Terms of Reference for committee members), and Animal IRB approval are unavailable in the evidence portfolio.	Compile and archive the required documentation for EOI 2 (faculty/staff records), EOI 6 (BASR letter and Terms of Reference), and Animal IRB approval. Ensure these documents are made accessible to auditors and stored in an online repository.	By 1-August 2025	Office of Research Innovation and Commercialization (ORIC)

44	Policies and handbooks are not readily available to the public or students, limiting transparency.	Publish all approved policies and handbooks in a dedicated online repository (e.g., Quality Assurance portal) to ensure transparency, accessibility, and version control for future reference.	By 1-August 2025	Registrar Secretariat
Standard 14: Public Information And Transparency				
45	SOPs for marketing and website management have been drafted but not formally approved, limiting their implementation and effectiveness.	Route the drafted SOPs (Marketing and Website Management) through the appropriate governance bodies for official approval. Once approved, disseminate them institution-wide to ensure consistent application across departments.	By 1-August 2025	Department of Alumni, Marketing, and Communication, DUHS
46	No formal policy exists for the periodic review and updating of SOPs, policies, and other official documents.	Develop and implement a comprehensive Document Review and Control Policy to establish clear procedures for creation, approval, periodic review, and version control of institutional documents. Assign timelines and responsible offices to oversee this process.	By 1-August 2025	Registrar Secretariat
Standard 15: Institutional Effectiveness, Quality Assurance And Enhancement				
14	No implementation plan exists to guide execution of the updated Quality Policy (2022).	Develop a comprehensive Quality Policy Execution Plan outlining strategic objectives, timelines, responsible units, and measurable indicators to ensure effective implementation and monitoring of the Quality Policy.	By 1-August 2025	QEC/Registrar Secretariat
48	Departments lack documented implementation plans for their Key Performance Indicators (KPIs), limiting accountability.	Require all academic and administrative departments to develop detailed KPI Implementation Plans with clear targets, timelines, accountability assignments, and reporting schedules to promote data-driven performance management.	By 1-August 2025	To all DUHS Institutes/Departments
49	Absence of a Standard Operating Procedure (SOP) for strategic planning aligned with DUHS guidelines.	Formulate and disseminate a formal SOP for Strategic Planning that specifies roles, responsibilities, timelines, and review processes, ensuring institutional strategic planning is standardized and effective across all units.	By 1-August 2025	Registrar Secretariat/QEC
50	Institutional Quality Committee (IQC) Minutes of Meetings are not available, hindering evidence of oversight and decision-making.	Ensure regular recording, approval, and archiving of IQC Minutes of Meetings. Make these minutes accessible to relevant stakeholders to demonstrate ongoing governance, oversight, and continuous quality improvement activities.	By 1-August 2025	QEC
Standard 16: CQI And Cyclical External Quality Assurance				
51	Feedback from stakeholders (students, faculty, alumni, employers) is collected, but its implementation remains fragmented and insufficiently structured.	Develop a centralized feedback framework that systematically collects, analyzes, and integrates feedback from students, faculty, alumni, and employers into actionable KPIs. Outcomes should feed into curriculum review, faculty development, and strategic planning processes.	By 1-August 2025	QEC
52	The Course Management System (CMS) is not utilized to support CQI or QA functions, limiting opportunities for automated data collection and real-time monitoring.	Upgrade and configure the CMS platform to support quality assurance functions such as course evaluations, faculty performance tracking, student outcomes, and periodic reporting. This will enhance data accuracy and improve turnaround time for evaluations, supporting a more agile CQI process.	By 1-August 2025	IT/CMS/LMS

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Prepared by: *Sanam Soomro*
 Name & Signature: Ms. Sanam Soomro
 Approved by: *Sanam Soomro*
 Name & Signature : Vice Chancellor-DUHS

Ms. SANAM SOOMRO
 Director
 Quality Enhancement Cell
 Dow University of Health Sciences
 Karachi, Pakistan

Nazli Hossain

25-6-25

PROF. DR. NAZLI HOSSAIN
 PRO-VICE CHANCELLOR
 Meritorious Professor of Obstetrics
 & Gynecology
 Dow University of Health Sciences
 Karachi