



**Corrective Actions Against the 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	Responsible Body	Rectification
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.	Office of Strategic Development and Implementation (OSDI)	<p>DUHS's vision remains relevant and aspirational, providing long-term guidance for our strategic direction. In line with global best practice, vision statements are intended to be stable over a 10–20+ year horizon and are revised only when an institution undergoes a fundamental shift in identity or direction. Accordingly, we believe the current vision does not require revision at this time.</p> <p>By contrast, the mission should be reviewed periodically to reflect evolving priorities and external realities. We will place this item on the Strategic Planning Working Group (SPWG) agenda for October 2025. The SPWG will evaluate the current mission and, if warranted, launch a structured update process with input from faculty, students, alumni, and other stakeholders.</p> <p>This approach maintains stability in our long-term vision while ensuring the mission remains current, actionable, and aligned with institutional goals. See Annexure 1: Proposed Mechanism for Mission Review.</p>
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.	Office of Strategic Development and Implementation (OSDI)	<p>DUHS recognizes the need for a structured, institution-wide mechanism to monitor and report on the implementation of both the Master Strategic Plan and unit-level strategic plans. To that end, we will adopt a tiered monitoring process led by the Office of Strategic Development & Implementation (OSDI) and overseen by the Strategic Planning Working Group (SPWG). The proposed mechanism will be presented for formal approval at the October 2025 SPWG meeting and, upon approval, fully operationalized by January 2026. (See Annexure 2: Proposed Monitoring and Feedback Mechanism.)</p>
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.	Office of Strategic Development and Implementation (OSDI) /Registrar Secretariat	The framework will feature quarterly reviews of unit-level plans with standardized reporting, defined performance indicators, and feedback loops, along with an annual institution-level review of the Master Strategic Plan. This ensures alignment, accountability, and continuous stakeholder engagement. The tiered monitoring process will be led by OSDI and overseen by SPWG.
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.	Office of Strategic Development and Implementation (OSDI) /Registrar Secretariat	As part of the tiered monitoring process, quarterly reviews of unit-level plans will include standardized reporting and defined performance indicators (KPIs) with feedback loops to ensure continuous monitoring and improvement at the departmental level.
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.	Registrar Secretariat	A tentative calendar for statutory meetings is maintained and followed. The Registrar's Office is fully aware of the schedule and ensures coordination for all meetings, as evidenced by their successful and regular conduction throughout the year. Calander Attached
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.	To all DUHS Institutes	All institutes have initiated mechanisms to evaluate the effectiveness of mentorship and counselling services through student feedback, retention, and satisfaction data. These findings are being incorporated into service improvement plans.

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.	Planning & Development/Procurement	<p>Post-Contract Vendor Performance Evaluation & Procurement Improvement Monitoring</p> <p>Procurement Directorate – Dow University of Health Sciences (DUHS)</p> <p>As part of our commitment to transparent, efficient, and value-driven procurement practices, the Procurement Directorate of DUHS implements a structured framework for Post-Contract Vendor Performance Evaluation and Procurement Improvement Monitoring.</p> <p>1. Post-Contract Vendor Performance Evaluation</p> <p>After the completion of each contract, vendors are systematically evaluated to ensure that they have fulfilled their contractual obligations in line with DUHS standards. The evaluation focuses on:</p> <ul style="list-style-type: none"> • Quality of goods/services delivered • Timeliness and adherence to delivery schedules • Compliance with specifications and regulatory requirements • Cost-effectiveness and adherence to budget • Responsiveness and communication • Health, safety, and ethical standards
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.	Finance Directorate	The scholarship module software is in the planning stage and will be launched in the office soon
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.	Finance Directorate	Survey or Form for feedback from students (scholars) has been issued to understand their perception on value for money and the effectiveness of scholarship support.
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.	Finance Directorate/Financial Aid Office	<p>Dow University of Health Sciences is now certified by the Pakistan Centre for Philanthropy and is actively working to establish strategic partnerships with businesses, industries, and NGOs. The objective is to develop targeted scholarship and financial aid programs aligned with institutional priorities and student enrollment growth. The financial aid strategy includes measurable KPIs such as:</p> <ul style="list-style-type: none"> • Increase in the number of funded scholarships year-over-year • Percentage of financial aid distributed relative to total student enrollment • Growth in partnerships contributing to financial aid programs • Improvement in student retention and graduation rates among aid recipients

Standard 5: Affiliated Colleges/Institutions				
11	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.	Registrar Secretariat	The university maintains a strict no-reaffiliation policy. Any exception would require extraordinary circumstances and would not compromise on quality standards.
Standard 6: Internationalization Of Higher Education And Global Engagement				
12	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.	LMS/CMS	The LMS–CMS integration process has been initiated. Technical alignment between platforms is underway, with IT and CMS teams collaborating to ensure seamless teaching and learning experiences. Implementation will be hopefully completed by the end of 2025.
13	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.	Registrar Secretariat	Direct University Partnerships: DUHS maintains 25+ formal foreign linkages with institutions like Stanford University, Duke University, and the University of Manchester for research and academic collaboration.
				<p>Global Research Projects: DUHS researchers collaborate directly with international partners, such as with the University of Sheffield, UK on tissue engineering and Qatar University on preclinical studies.</p> <p>International Faculty & Student Mobility: DUHS facilitates exchanges through programs like the Split-Site PhD with the University of Manchester and the Pak-Sri Lanka Faculty Exchange Program.</p> <p>World Ranking Achievement: DUHS earned a Top 100 global ranking (95th) for SDG 3: Good Health and Well-being in the Times Higher Education Impact Rankings 2025, demonstrating its international standing.</p>
14	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.	Registrar Secretariat	<p>DUHS has established multiple structured exchange programs and actively pursues international mobility opportunities for its students and faculty.</p> <p>Examples include:</p> <p>Split-Site PhD Program: A structured program with the University of Manchester, where PhD scholars like Dr. Tanseer Ahmed complete part of their research in the UK.</p> <p>Faculty Exchange Program: A formal Pak-Sri Lanka Faculty Exchange Program bringing international professors like Prof. Dr. Chantha Jayawardena to DUHS for teaching and collaboration.</p> <p>Clinical Electives: Structured international clinical electives for medical students at institutions like the University of Illinois, Mayo Clinic, and Harvard Medical School through the AAMC's VSLO system.</p> <p>US-Pakistani Partnerships: Active faculty development programs funded by USEFP, IIE, and the U.S. Department of State to enhance academic exchange.</p> <p>Global Research Mobility: Faculty regularly participate in international conferences and training, such as representation at SAGES 2024 in the USA and specialized fellowships abroad.</p>

Standard 7: Faculty Recruitment, Development And Support Services				
15	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.	HR Directorate	HR conducts orientation workshops and departmental briefings on HR policies on a need basis to raise awareness. HR will also ensure that all HR-related policy documents are digitally accessible on the DUHS portal, enabling faculty to easily understand the guidelines for internal promotions.
16	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.	To all DUHS Institutes/Examination Department	Strict compliance with OSPE examiner criteria is being ensured. Only qualified faculty (Assistant Professors and above with ≥5 years of teaching experience) are appointed as examiners, though some institutes noted this was not applicable due to the nature of their distance learning programs.
17	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.	QEC and HR Directorate	A formal Document Review Policy will be created and implemented. This policy will establish fixed review cycles and clear version control procedures.
Standard 8: Academic Programmes And Curricula				
18	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.	QEC	The Quality Enhancement Cell (QEC) assigns responsibilities, sets implementation timelines, and manages documented evidence of progress for all recommendations arising from program evaluations (SAR, PGPR, IPE, RIPE).
19	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.	To all DUHS Institutes- CRCs	Student and alumni representatives have been formally added to Curriculum Review Committees (CRCs), and guidelines have been developed to ensure their active engagement in curriculum design.
20	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.	IT/CMS/LMS	The integration project framework has been developed. Data synchronization requirements are being mapped, and workflow streamlining is in process. IT, CMS, and LMS departments are coordinating closely to ensure timely execution.
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21	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.	To all DUHS Institutes	Development and regular review of CLOs have been institutionalized across all programs. CLOs are now aligned with program learning outcomes and market relevance to ensure academic quality and employability.
Standard 9: Admission, Progression, Assessment And Certification				
22	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.	Department of Alumni, Marketing, and Communication, DUHS	Document postgraduate policies attached and uploaded on the DUHS website.
23	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.	Admission Department	The School of Postgraduate Studies, DUHS, will develop and incorporate the Foreign Student Admission Policy into the official admission manual, outlining eligibility criteria, application procedures, required documentation, and fee structures for international postgraduate applicants.
24	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.	DUHS Grievance and Academic Committees/Registrar Secretariat	The university will update and archive the Terms of Reference, meeting minutes, and revised MoUs for both committees to reflect the July 2024 changes. These documents will be made publicly accessible on the DUHS website and official portal.

25	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.	Examination Department, DUHS	The Examination Department acknowledges that the online Examination Policy developed during the COVID-19 period is no longer applicable. Currently, a document titled "Regulations for Registration & Examination of Students at Dow University of Health Sciences 2024" is available on the DUHS website. The department recognizes the need for a comprehensive examination policy covering all aspects such as assessment types, invigilation, grading, rechecking, and academic integrity protocols. To develop this policy, a committee of relevant stakeholders will be formed to thoroughly discuss and finalize these issues. Therefore, while the comprehensive policy is not yet in place, steps are actively being taken to prepare and implement it.
26	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.	Examination Department, DUHS	The Examination Department explains that the delays of approximately 6-8 months in examinations and certification for non-MBBS/BDS programs were due to unforeseen circumstances including the impact of COVID-19, the conduct of MDCAT exams over the past three years, and the upgrade of the University CMS system. These factors adversely affected the academic calendar and led to the delays. The department is currently making efforts to streamline the affected programs and reduce these delays, although resolving this issue will require additional time.

Standard 10: Student Support Services

27	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.	To all DUHS Institutes- CRCs	Student representatives have been formally included in CRCs to ensure consistent and meaningful student participation in curriculum reviews across all departments.
28	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.	Psychological Counseling and Therapy services - Institute of Behavioral Sciences (IBS)	Evidence from the Institutional Counseling Report -attached- (June-Sep 2025) confirms: 825 therapy sessions conducted 49 DUHS students received counseling Staff ratios and satisfaction levels evaluated as adequate Services are operational, regularly monitored, and effective.
29	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.	Sports	A comprehensive Code of Conduct is already in place and displayed prominently at the Sports Complex. This ensures that all users—students, faculty, and staff—are well-informed about expected behavior, safety protocols, and access procedures. Sports Directorate ensures a safe and well-managed environment through a clearly displayed Code of Conduct, CCTV surveillance, gender-specific access, first aid facilities, and full-time staff support. While the Sports Directorate recognize the importance of a formal SOP in ensuring institutional transparency, standardization, and compliance with internal and external evaluations and committed to developing and implementing a detailed Sports SOP to further strengthen our operational framework

Standard 11: Impactful Teaching And Learning And Community Engagement				
30	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.	IT/LMS	Departmental training and monitoring have started. The Digital Learning Center is coordinating with Heads of institutions to ensure consistent LMS adoption. Progress is being tracked, access and activity reports are being sent to all institutes on regular basis.
31	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.	IT/DLC	Expansion was approved in the Strategic Plan. The proposal for additional infrastructure at Ojha Campus will commence after allocation of budget and allocation of space.
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32	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.	To all DUHS Institutes	Institutes have initiated structured mentoring workshops and sessions addressing academic, mental health, and learning issues, integrated with departmental support systems.
33	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.	To all DUHS Institutes	Departments are actively involved in community outreach programs, which are now being formally documented and aligned with academic objectives to ensure sustainability and measurable impact.
Standard 12: Research, Innovation, Entrepreneurship And Industrial Linkage				
34	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.	Office of Research Innovation and Commercialization (ORIC)	Please find the evidence regarding structured, systematized workshops on research organized previously and planned before September 30, 2025. The attachment contains flyers along with dates and content.
Standard 13: Fairness and Integrity				
35	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.	Department of Alumni, Marketing, and Communication, DUHS	University Code Book 2025 (Approved) circulated via Registrar's Office
36	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.	HR	The university HR Directorate will revise the handbook titles to clearly reflect their purpose and ensure that the documents are easily identifiable by all faculty members.
37	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.	To all DUHS Institutes-	Institutes have developed and distributed comprehensive student documents, including handbooks, logbooks, and internship agreements, clearly outlining rights, responsibilities, academic regulations, and grievance procedures.
38	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.	Registrar Secretariat	All key policies, student handbooks, and academic regulations are available in a dedicated section of the official DUHS website. To further enhance transparency and accessibility, DUHS is developing a centralized digital portal, with plans to provide direct access links and orientation sessions for all students.

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Standard 14: Public Information And Transparency				
39	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.	Department of Alumni, Marketing, and Communication, DUHS	Draft prepared, uploading/approval is in process.
40	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.	Registrar Secretariat	A formal Document Review Policy will be created and implemented. This policy will establish fixed review cycles and clear version control procedures.
Standard 15: Institutional Effectiveness, Quality Assurance And Enhancement				
41	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.	To all DUHS Institutes/Departments	All departments have developed detailed KPI Implementation Plans, including clear targets, timelines, accountability structures, and reporting mechanisms, to promote data-driven performance management.
42	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.	Registrar Secretariat/QEC	The dedicated Office of Strategic Development and Implementation (OSDI) and formal multi-year strategic plan indicate a structured planning process. However, an SOP will be developed by OSDI-DUHS to formalize this process and outline clear steps for implementation, monitoring, and review.
Standard 16: CQI And Cyclical External Quality Assurance				
43	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.	QEC	Feedback results and student comments are routinely shared with all constituent heads. These are discussed at institute-level meetings, and curriculum-related matters are reviewed in CRC and Board of Studies meetings. Identified improvements are forwarded to statutory bodies such as the Academic Council for approval and implementation.
44	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.	IT/CMS/LMS	This is ready from cur end, would be executed once there is a demand from the QEC.

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