



جامعة الخليج الطبية
GULF MEDICAL UNIVERSITY
ACADEMIC HEALTH CENTER

Quality Assurance & Institutional Effectiveness Unit

Annual Report, AY 2022-2023



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1. Introduction:

Gulf Medical University (GMU) has implemented a comprehensive Quality Assurance and Institutional Effectiveness (QA&IE) system, comprising the QA&IE Unit, the University QA&IE Committee, and College-level Quality Assurance and Program Evaluation (QA&PE) Committees.

At the college level, the QA&PE committees, comprising faculty and student representatives, play a crucial role. At the university level, the QA&IE Committee, chaired by VCQIE and composed of QA&PE Committee Chairs and the Director of QA&IE Unit, ensures an integrated approach to quality assurance.

The QA&IE Unit is equipped with the necessary human and physical resources to fulfill its responsibilities, primarily focusing on collecting and utilizing institutional data to inform the university leadership's planning, budgeting, and resource allocation processes.

Regular evaluations of the QA&IE Unit and QA&PE Committees are conducted, allowing for continuous improvement and recognition of achievements. The evaluation results highlighted improving performance in several colleges, while also identifying areas for further development, emphasizing GMU's commitment to a culture of continuous quality enhancement.

2. Purpose of the Report

The purpose of this report is to provide a comprehensive overview of the quality assurance efforts at GMU for the reporting period. It aims to document the structure, responsibilities, and achievements of GMU's QA&IE Unit, as well as the broader quality assurance framework within the institution. The report serves as a tool for internal and external stakeholders to understand GMU's commitment to quality in education and institutional effectiveness.

3. Scope of the Report

The scope of this report encompasses various aspects related to GMU's quality assurance processes and developments. Key areas covered include:

- Quality Assurance Unit Structure
- Accreditation and Internal Audit
- Data Collection and Analysis
- Key Performance Indicators (KPIs)
- Faculty Evaluation
- Student Support Services
- Stakeholder Feedback
- Future Action Plans

4. Quality Assurance Unit Structure

Updated QA&IE Unit Organizational Chart:

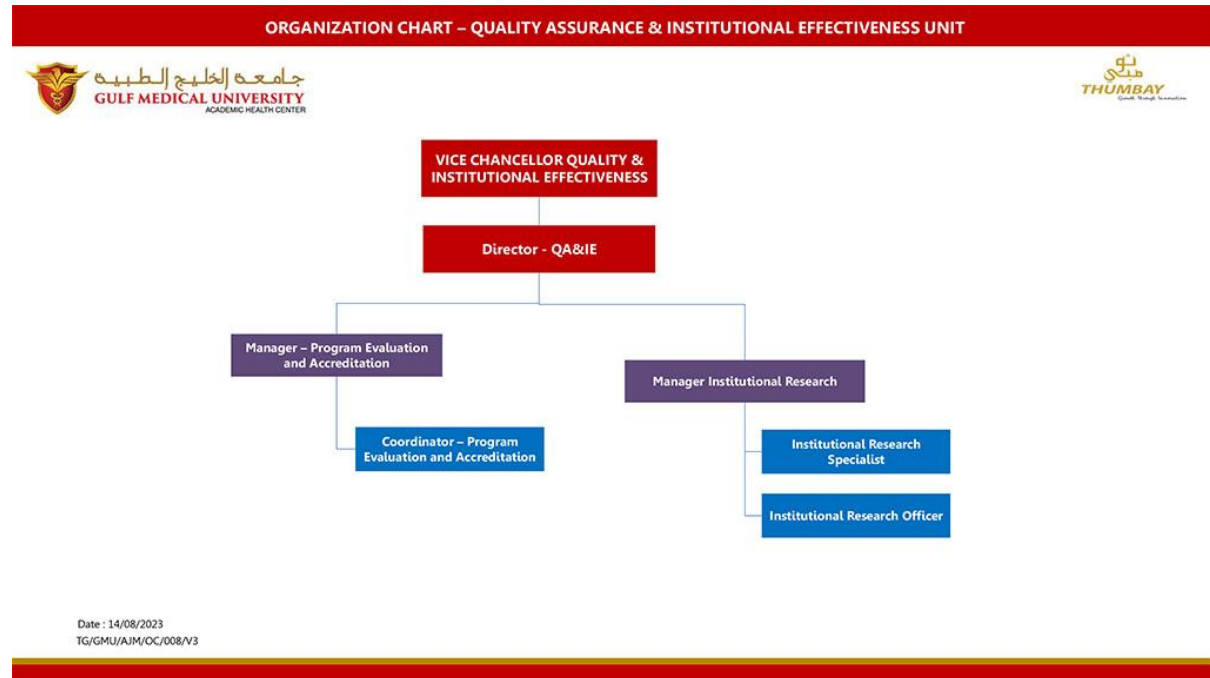


Figure 1: The QA&IE Unit Organizational Chart

Updated Positions and CVs

- Director of the QA&IE Unit ([A2.3.1: Director - Dr. Ibrahim Elsayed CV](#))
- Program Evaluation and Accreditation Manager ([A2.3.5: Program Evaluation and Accreditation Manager CV - Dr. Sara Osman](#))
- Program Evaluation and Accreditation Coordinator ([A2.3.6: Program Evaluation and Accreditation Coordinator CV - Dr. Lubna M. Abed Eljawad](#))
- Institutional Research Manager ([A2.3.2: Deputy Institutional Manager - Ms. Cristeta CV](#))
- Institutional Research Specialist ([A2.3.3: Institutional Research Specialist – Mr. Salah CV](#))
- Institutional Research Officer ([A2.3.4: Institutional Research Officer - Ms. Fathima CV](#))

5. Accreditation and Internal Audit:

Accreditation:

Programs received initial accreditation from CAA:

1. Doctor of Medicine (MD Program)
2. Bachelor of Pharmacy
3. Doctor of Pharmacy (Postgraduate)

Program reaccredited by CAA:

1. Masters in Health Professions Education (MHPE)
2. Post Graduate Diploma in Health Professions Education (PG Diploma HPE)
3. Bachelor of Science - Medical Imaging Sciences (BSc. MIS)

Self-study reports submitted for initial accreditation:

1. Master of Science in Midwifery
2. Master of Science in Neonatal Nursing
3. Master of Science in Medical Ultrasound

Self-study reports submitted for reaccreditation:

1. Master of Dental Surgery in Periodontics
2. Master of Dental Surgery in Endodontics
3. Bachelor of Dental Surgery (BDS)
4. Bachelor of Physiotherapy (BPT)
5. Executive Master in Healthcare Management and Economics (EMHME)
6. Master of Science in Medical Laboratory Sciences (MSc. MLS)

Internal audit

The QA&IE conducted 4 internal audits for:

1. Bachelor of Dental Surgery (BDS)
2. Master of Science in Drug Discovery and Development
3. Executive Master in Healthcare Management and Economics (EMHME)

4. Master of Science in Medical Laboratory Sciences (MSc. MLS)

The internal audit involved a series of structured meetings with key stakeholders including the Dean, Associate Dean, Program Director, Faculty, Students, Alumni, And Clinical Staff. It included the collection and analysis of various documents such as workload reports, course syllabi, appraisal documents, student and alumni data, mentorship reports, and assessment documents.

Example for the internal audit schedule ([Link](#)) and report ([Link](#)).

The main Outputs:

- Identification of program strengths and areas for improvement.
- Enhanced understanding of students' and faculty on the accreditation process.
- Evaluation of resource allocation and identification of additional needs.

6. Times Higher Education Impact Ranking

GMU has been ranked between 101 and 200 in both the “Quality Education” and “Health & Wellbeing” sustainable development goals on a global scale. Furthermore, the University’s dedication to reducing disparities, fostering diversity and inclusivity have been globally acclaimed, earning the 95th rank worldwide for “Reduced Inequalities”. This achievement underscores Gulf Medical University’s commitment towards nurturing a balanced and inclusive environment for all its members and the broader community.

GMU has demonstrated exceptional progress in this year’s rankings, surpassing its previous placement by a significant margin. Advancing by over 100 positions, the university now holds a commendable position within the 301-400 range out of 1,590 universities globally-emphasizing its consistent dedication towards academic superiority and societal impact.



Figure 2: Trend Analysis of GMU Scores since 2020

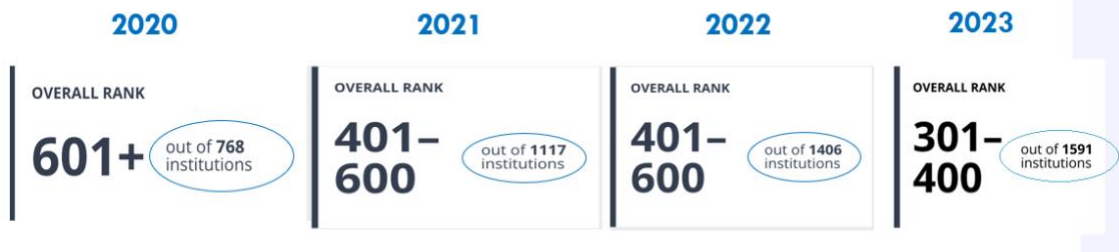


Figure 3: Trend Analysis of GMU Overall Ranking since 2020

7. Data Collection and Analysis:

The QA&IE Unit has introduced an automated system that empowers colleges and programs to streamline data compilation and calculation for various critical metrics. Drawing data from sources like the CHEDS Submission, Teaching Assignment Application, Faculty Database, and Student Grades from the Student Management System, is adopted to reduce, and ultimately eradicate, the potential for human error.

The core feature of this automated system is its ability to generate comprehensive reports encompassing both College Level and Program Level Key Performance Indicators (KPIs). These KPIs serve as a vital parameter of our educational excellence and encompass the following domains:

1. Students KPIs:

- Student enrollment (Freshmen and Overall)
- Percentage of National students
- Percentage of Female students
- Average cumulative Grade Point Average (cGPA)
- Percentage of Students under probation

- Course pass rate

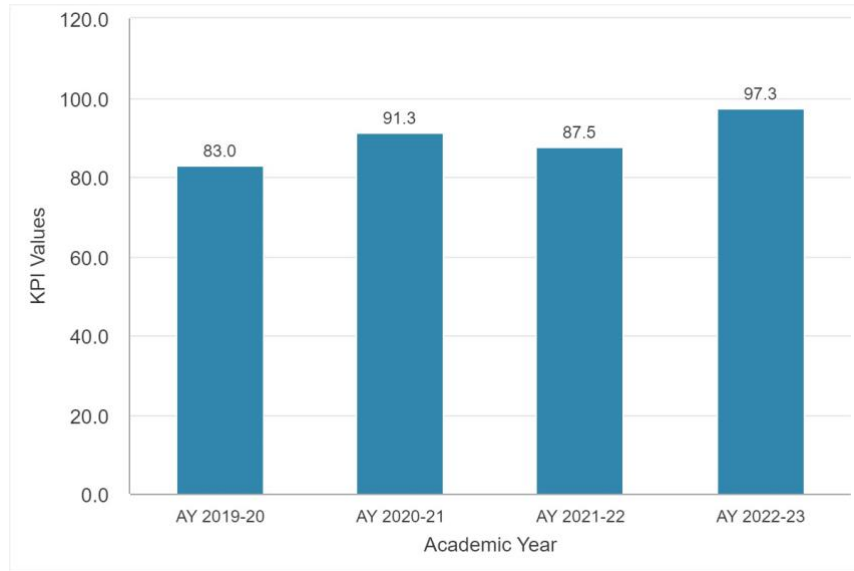
2. Faculty KPIs:

- Full-time equivalent (FTE)
- Percentage of Part-time faculty
- Percentage of Non-terminal degree faculty
- Student/faculty ratio
- Average Full-time teaching load
- Average Part-time teaching load
- Faculty retention
- Scopus publications per faculty

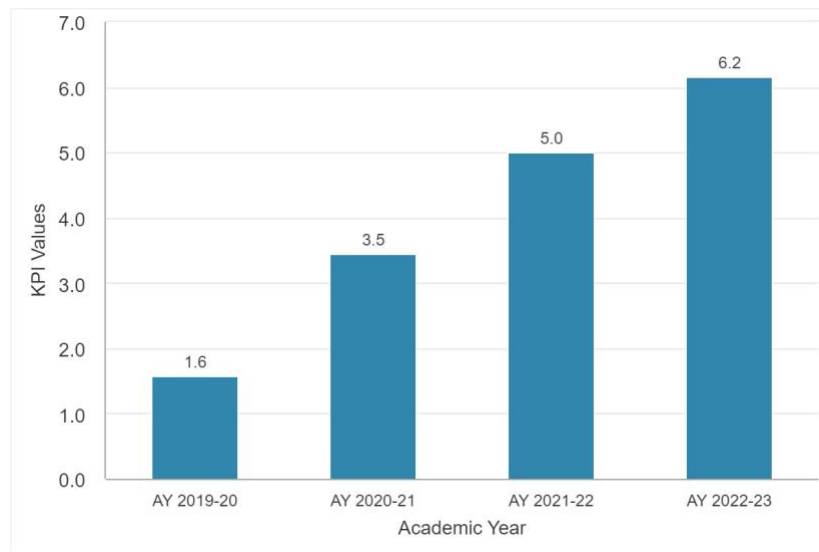
Additionally, the QA&IE Unit updated the [KPIs Application](#) by adding a link for Trend Analysis in front of each KPI (College and Program Level KPIs). The trend analysis provides program directors with immediate insights into the progress of the KPI values over the last 4 academic years (since the AY 19/20). This update saves time and effort of the program directors while creating self-study reports, program effectiveness reports and college annual reports.

Examples:

- Student Satisfaction with Mentorship (%) - Trend Analysis
Bachelor of Biomedical Science-BBMS -COM



- COP - Average number of Scopus publications per faculty per year - College Level - Trend Analysis



8. Key Performance Indicators (KPIs):

- College of Medicine ([Link](#))
- College of Dentistry ([Link](#))
- College of Pharmacy ([Link](#))
- College of Health Sciences ([Link](#))
- College of Nursing ([Link](#))

- College of Healthcare Management ([Link](#))

N.B.

- The data on student attrition and on-time graduation will be accurate only by November 2023 (Time for CHEDS submission).
- Freshmen and overall enrollment values for the phasing-out programs (*e.g. ADPCS, MBBS and 5Y PharmD*) and the phasing-in programs (HDPCS, MD and BPharm/PharmD Combined Degree) are calculated as if we have separate programs (i.e. values are not merged).

9. Policies and Procedures:

Throughout the AY 2022-2023, 45 policies were reviewed, 8 new policies were developed and 1 policy was terminated.

Policy Title	Type of Request	Description of the Change(s)	Reason/Trigger/Aim of the Change(s)
Institutional Planning Policy	Policy Review	The Policy and Procedures have been updated to guide the development and evaluation of the GMU 23-27 Strategic Plan	Regular review
Risk Management	Policy Review	The definitions and procedure sections have been updated.	Regular review
Scholarly Activity, Professional Development, and Academic Currency	New Policy		Based on a CAA requirement during the initial accreditation of MSc Ultrasound
Funding Graduate Student Research Projects	Policy Review	The policy's scope has been broadened to encompass both lab-based and non-laboratory-based research that may require consumable projects for graduate students.	Based on a CAA requirement during the initial accreditation of MSc Ultrasound
Graduate Completion Requirements	Policy Review	Adding additional requirements to the master's program completion (Point 3.8.2).	Based on CAA requirement during the initial accreditation of MSc Ultrasound
Terms of Reference of Standing Committees	Policy Review	Procedure for the selection of faculty, staff and students as committee members have been added.	Regular Review
Bachelor of Dental Surgery (BDS) Program Technical Standards and Accommodations	New Policy		CAA accreditation requirements
Academic Promotion	Policy Review	Expanded the scope for faculty academic promotions by adopting the Boyer's	Regular review

		Expanded Definition of Scholarship (Academic Medicine, Vol 75, No.9 / Sept. 2000)	
Compensation and Benefits	Policy Review	Updating the introduction and section “Governing Principles for Compensation and Benefits”	Regular review
Professional Development for Faculty and Staff	Policy Review	The procedures for budget allocation for the professional development programs have been elaborated.	Regular review
Facility management policy	New Policy		
Thesis/Dissertation on Supervision and Examination	Policy Review	Updating the grading system of the thesis	Suggestion from the directors of the graduate programs.
Faculty and Professional Staff Role	Policy Review	Added Code of Conduct	Code of Conduct was missing
Leadership Evaluation Policy	New Policy		The purpose of this policy is to evaluate the GMU leadership by faculty and staff. This evaluation is important for the continuous quality improvement of the organization.
Appointment and Re-appointment of Senior Academic Administrators	New Policy		The purpose of this policy is to outline the terms of appointment and re-appointment of senior academic administrators at Gulf Medical University. This is to ensure that GMU is following a consistent, transparent and effective process to recruit, appoint and reappoint GMU’s academic leadership positions. This policy is part of the policies and procedures related to succession plan of senior managers of the university.
Undergraduate admissions	Policy Review	EmSAT requirements added, changes in the Interview and selection process, conditional and provisional admission conditions updated	to update the admission criteria changes, Pharmacy program name change, Heading and content changes.
User Access Management	New Policy		The purpose of this policy is to outline the guidelines for the management of the electronic systems at Gulf Medical University. The scope of this policy includes granting access, authentication of users, and termination of access to the systems.
Faculty and Staff Evaluation	Policy Review	The evaluation procedure and criteria have been reviewed.	Regular review

Publications	Terminate Policy		The whole content of this policy is included in the GMU-POL-S06-017: Student Publications and Media policy.
Overtime and Compensatory Off	Policy Review	Purpose, scope and definitions have been reviewed	Regular review
Business Travel Policy	Policy Review	- Purpose, scope and definitions have been reviewed	Regular review
Cash Management	Policy Review	- Purpose and scope have been reviewed.	Regular review
Auxiliary Enterprises	Policy Review	- Purpose and scope have been reviewed. - Sections 2, 3 and 4 were added.	Regular review
FINANCIAL RISK MANAGEMENT	New Policy		This policy also aims to ensure that financial risks are treated appropriately in order to protect GMU's financial resources in accordance with the University's policies.
Overdue Fee Policy	New Policy		The purpose of this policy is to emphasize the adverse consequences of non-payment of tuition fees. This policy is applicable to all current students of GMU and former students with outstanding debt.
External Audit	Policy Review	- Board of directors was changed to the board of trustees. - Purpose and scope of the policy have been updated.	Regular review
Internal Audit	Policy Review	The purpose and scope have been reviewed.	Regular review
Financial Policies	Policy Review	- Section 2.1 (Revenues) has been revised. - Internal audit section was removed.	Regular review
Accuracy and Authenticity of certificates and transcripts	Policy Review	Registration department before submitting the graduate list to the university council. Serial number of certificates to be shared by the registration department to each student.	Regular review
Manpower Planning	Policy Review	Points 6.2.7, 6.2.8 & 6.2.9 have been added. The policy owner has been changed to be the Vice Chancellor Academic	Regular review, every 3 years

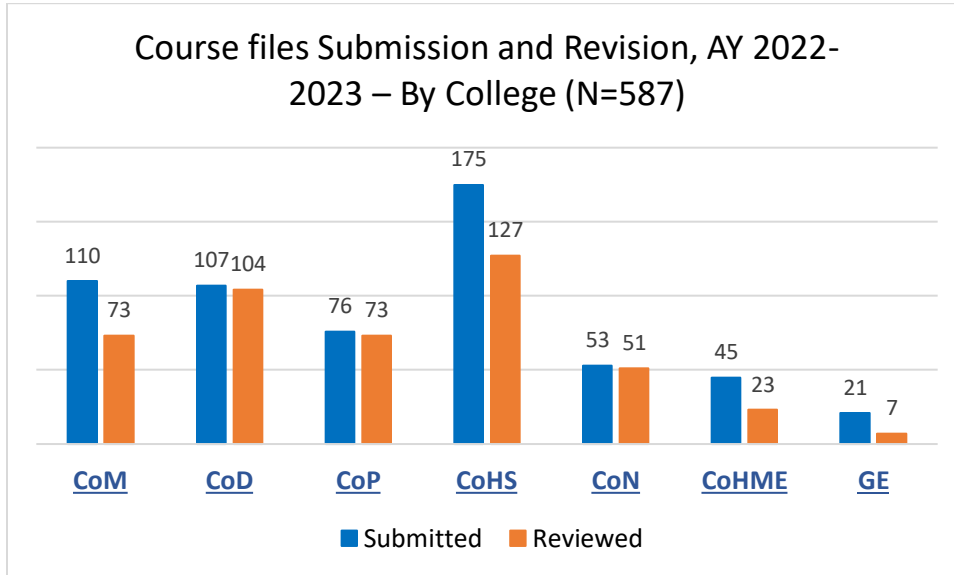
GMU Transportation Policy	Policy Review	Points 3.13 - 3.17, 4 & 4 have been added to the policy.	Regular review, every 3 years
Leave Policy	Policy Review	The policy owner is changed to be the Vice Chancellor Academic Types and regulations of leaves have been revised to be more comprehensive	Regular review, every 3 years
Compensation and Benefits	Policy Review	The policy owner is changed to be the Vice Chancellor Academic The following is added to 5.2.2: • Scholarship on Tuition fee • Employee Discounts on Products and Services within Thumbay Group	Regular review, every 3 years
Academic Promotion	Policy Review	The policy owner changed to the Vice Chancellor Academic HCM changed to HR	Regular review, every 3 years
Recruitment	Policy Review	- The policy owner changed to the Vice Chancellor Academic - Compensation and benefits section is removed as it is already included in a separate policy.	Regular review, every 3 years.
Graduate Assistants	Policy Review	The policy owner changed to the Vice Chancellor Academic	Regular review, every 3 years
Faculty and Professional Staff Grievances	Policy Review	The policy owner changed to be the HR department	Regular review, every 3 years
Faculty and Professional Staff Appeals	Policy Review	The policy owner changed to be the HR department	Regular review, every 3 years.
Faculty and Staff Personnel Records and Benefits	Policy Review	HCM changed to HR. The content of faculty and staff files has been reviewed to address the CAA requirements.	Regular review, every 3 years
Employment	Policy Review	- HCM changed to HR. - Preceptor added to 5.1.3 - Research associate added to 5.1.4	Regular review, every 3 years

Faculty and Professional Staff Role	Policy Review	Weekends changed from Friday to Sunday	Regular Review
Health Services	Policy Review	Repeated statements and irrelevant information have been removed from the procedure. The purpose and scope have been reviewed.	Regular review (every 3 years)
Internship/Practicum	Policy Review	Ensure full alignment with Standards for Institutional Licensure and Program Accreditation December 2019. Commission for Academic Accreditation, Ministry of Education, UAE.	Regular review (every 3 years)
IT Operation and Operational Continuity	Policy Review	Policy is changed to highlight that the mentioned GMU's IT operations are planned, implemented and monitored by GMU IT Department in coordination with Thumbay Technologies	Regular review
WIFI Access and Bring Your Own Device [BYOD]	Policy Review	Policy is changed to highlight that the mentioned GMU's IT operations are planned, implemented and monitored by GMU IT Department in coordination with Thumbay Technologies	Regular review
Information Technology (IT) Management	Policy Review	The process owner changed to Information Technology Department in coordination with Thumbay Technologies Team	Regular review
Appropriate Use of Technology Resources	Policy Review	Policy is changed to highlight that the mentioned GMU's IT operations are planned, implemented and monitored by GMU IT Department	Regular review
Distance Learning Manual	Policy Review	<ul style="list-style-type: none"> - Reviewing workload calculations in online/blended learning. - Reviewing short-term and long term evaluation in online/blended learning. 	To comply with the CAA manual for online/blended learning
Grading and Assessment	Policy Review	Reviewing the assessment in distance learning to align with the CAA online/blended procedural manual	CAA requirement during MHPE requirement

Distance Learning	Policy Review	Considering the online/blended learning in Planning, evaluation, and procedure of course delivery.	CAA requirement during MHPE re-accreditation
Regular and Intensive Modes of Course Delivery	Policy Review	Adding details of credit and contact hours equivalent for the online/blended offered programs/courses	CAA requirement during the re-accreditation of the MHPE program.
Faculty Workload	Policy Review	<ul style="list-style-type: none"> - Update the policy to align with the CAA recent procedural manual for online/blended learning. - Adding the CAA definitions of F2F, blended, and online. - Adding the workload calculation for online. 	CAA requirement during the re-accreditation of the MHPE program.
Student Misconduct Policy	Policy Review	Reviewing the procedure of initiating and workflow of the issuing disciplinary actions, in addition to merging academic and personal misconduct procedures.	Request from the University Council: https://c2acq054.caspio.com/dp/67829000fb1f6e2e68e04626acf5?ID_No=2101
Policies Development, Document Control, Review, and Dissemination	Policy Review	<p>The system is created on Jotform and connected to the QA portal.</p> <p>The whole procedure is updated to reflect the new policy approval electronic workflow.</p>	The internal auditors recommended building a rigorous system for policy approval that regulate and documents policy suggestion/change initiation, review, approval and dissemination.

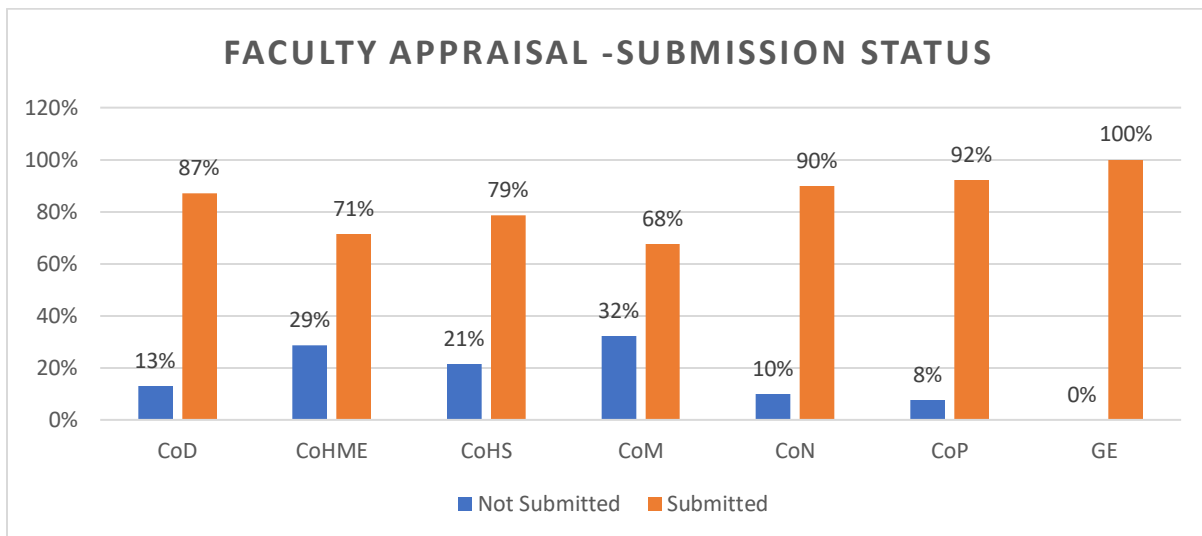
10. Course Files:

College-wise Course files Submission and Revision



11. Faculty Evaluation:

Submission Status



12. Student Support:

The QA&IE Unit at GMU developed the "Student Voice" mobile application that enable our students to access:

- **Course Evaluation** (To be filled during the second half of each semester or by the end of each training/rotation/clerkship)
- **Faculty Evaluation** (To be filled during the second half of each semester or by the end of each training/rotation/clerkship)
- **Self-Assessment for mentorship** (To be filled once at the beginning of each academic year)
- **Student grievances and/or suggestions**

Students can download and install the application on their iPhone/iPad ([How to install](#)) or Android phone ([How to install](#)) using the following link: <https://www.jotform.com/app/221075075776460>

Student Grievances Report

During the AY 22/23, 61 grievances out of 70 have been addressed by each College Student Happiness Center:

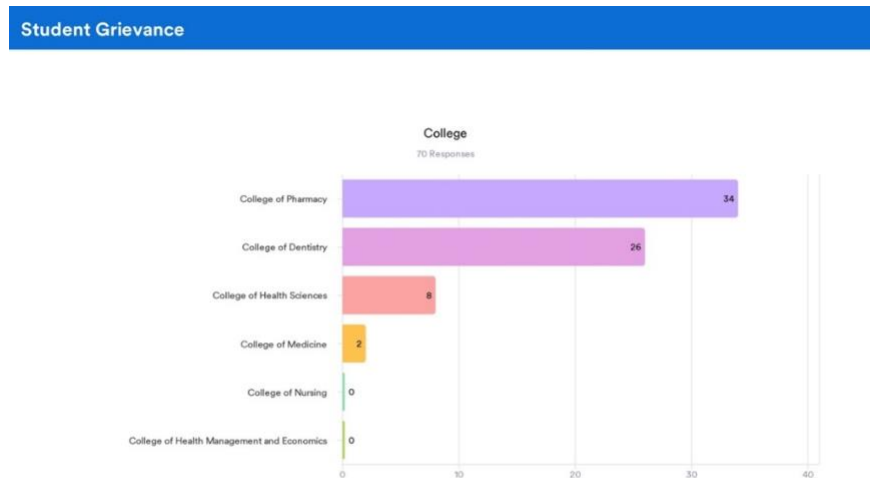


Figure 4: Grievances by College

Student Grievance

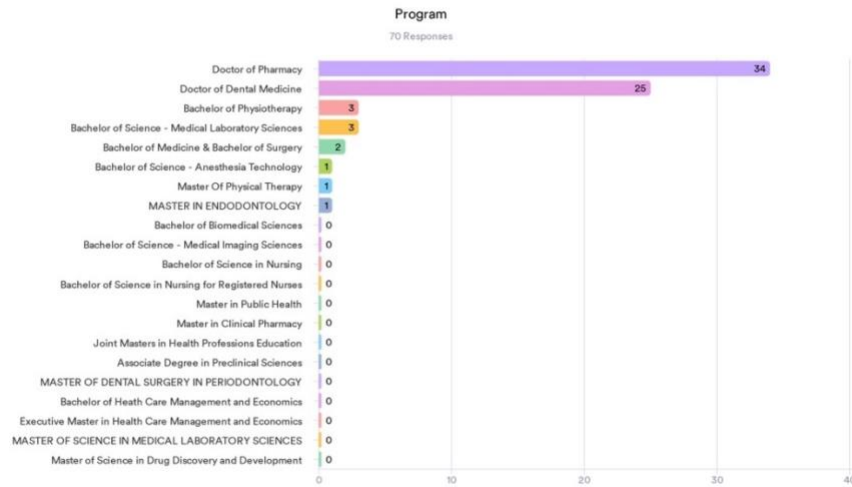


Figure 5: Grievances by Program

Student Grievance

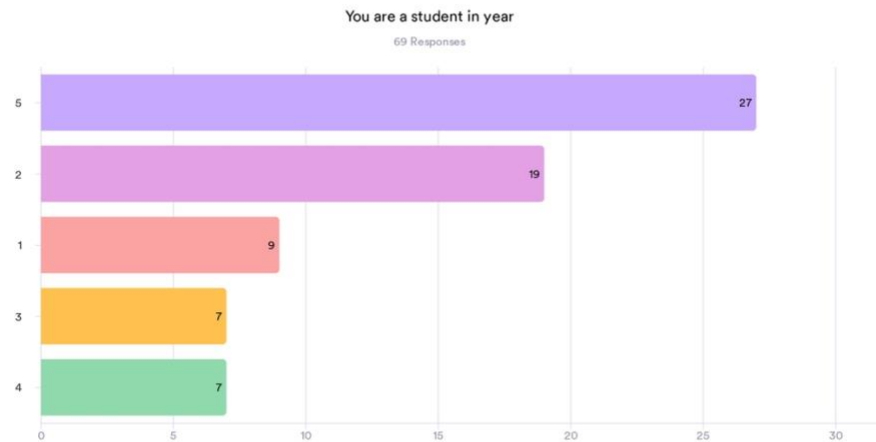


Figure 6: Grievances by Study Plan Year

Student Grievance

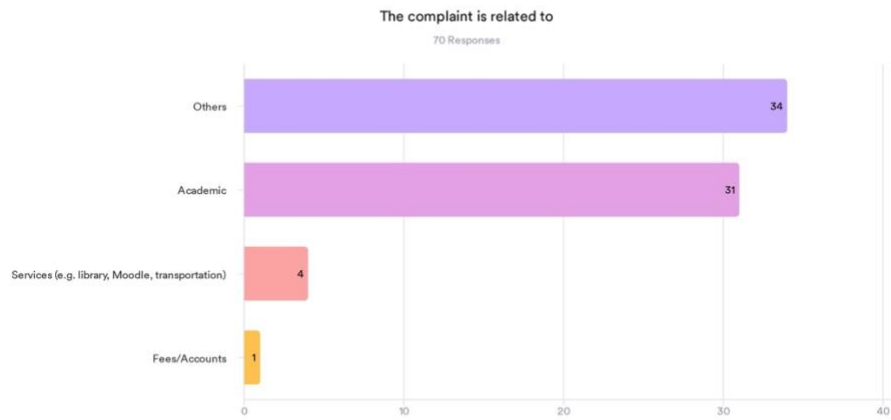
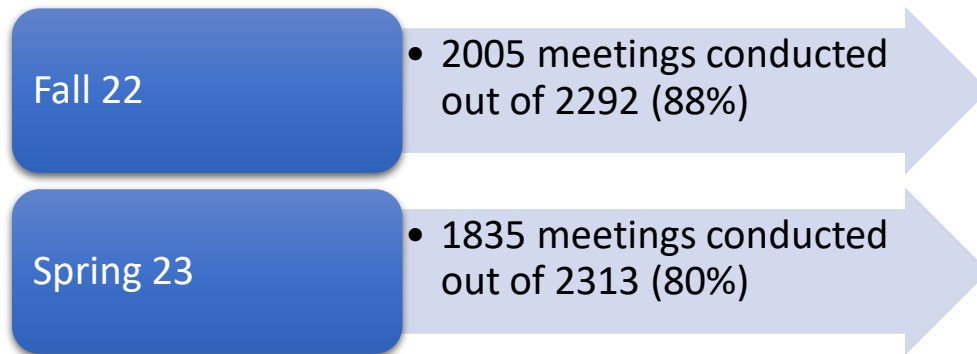


Figure 7: Grievances by Category

Student Mentorship

Analytics of mentor-mentee meetings:



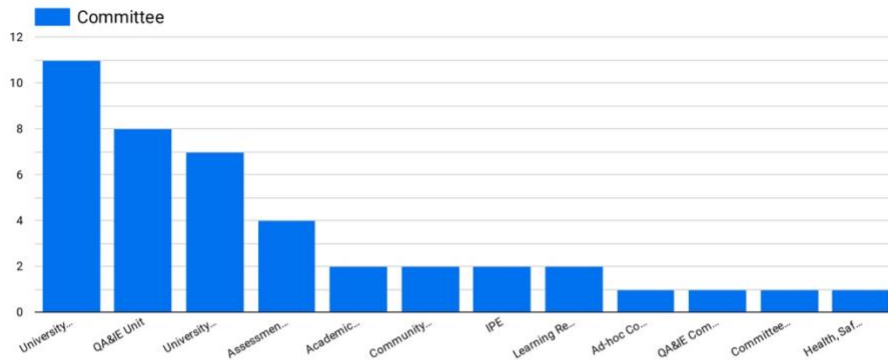
13. Analytics of Committee Meetings:

University Level



Sep 1, 2022 - Aug 31, 2023

Meeting Minutes



CollegeUnit / No. of Meetings	
Committee	University
University Council	11
University Academic	7
QA&IE Unit	8
QA&IE Committee	1
Learning Resources	2
IPE	2
Health, Safety and Environment Committee	1
Community Engagement	2
Committee of Research Coordinators	1
Assessment Committee	4
Ad-hoc Committee for PG Programs	1
Academic Health System	2

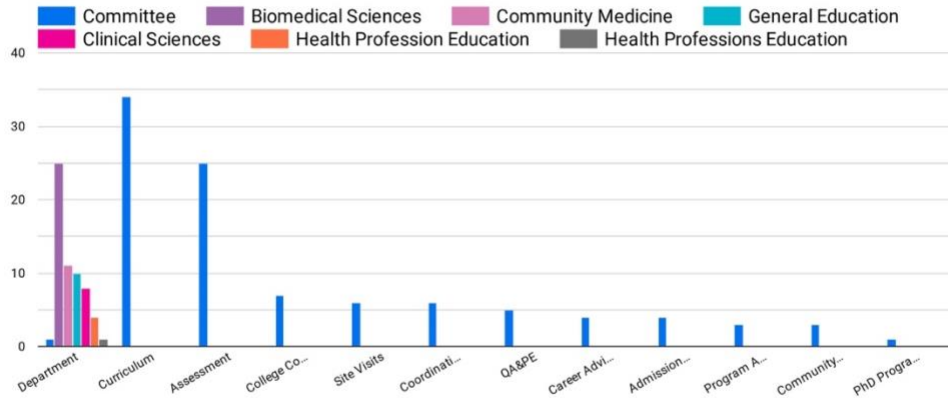
College of Medicine

College of Medicine



Sep 1, 2022 - Aug 31, 2023

Meeting Minutes



		CollegeUnit / No. of Meetings
Committee	Dept/Committee	COM
Site Visits	Committee	6
QA&PE	Committee	5
Program Advisory Board	Committee	3
PhD Program-Curriculum Committee	Committee	1
Department	Biomedical Sciences	25
	Community Medicine	11
	General Education	10
	Clinical Sciences	8
	Health Profession Education	4
	Committee	1
	Health Professions Education	1
Curriculum	Committee	34
Coordination Meetings	Committee	6
Community Engagement Committee	Committee	3
College Council	Committee	7
Career Advising Committee	Committee	4
Assessment	Committee	25
Admission committee	Committee	4

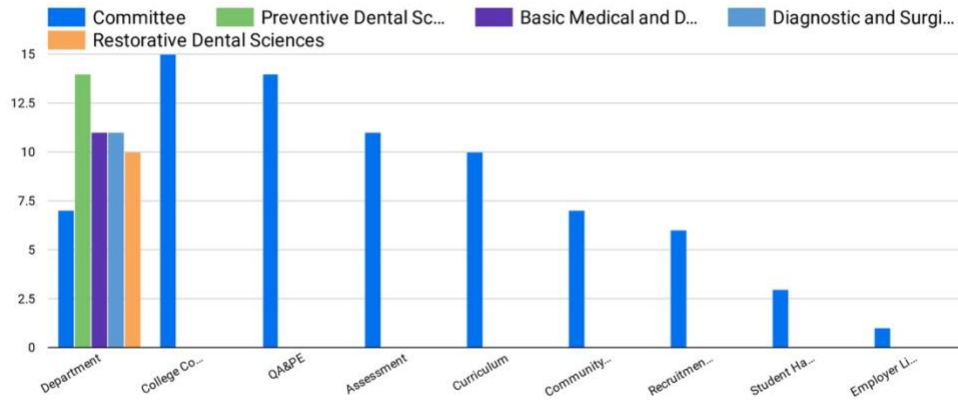
College of Dentistry



College of Dentistry

Sep 1, 2022 - Aug 31, 2023

Meeting Minutes



		CollegeUnit / No. of Meetings
Committee	Dept/Committee	COD
Student Happiness Centre	Committee	3
Recruitment Committee	Committee	6
QA&PE	Committee	14
Employer Liaison and Advisory Board	Committee	1
Department	Preventive Dental Sciences	14
	Basic Medical and Dental Sciences	11
	Diagnostic and Surgical Dental Sciences	11
	Restorative Dental Sciences	10
	Committee	7
Curriculum	Committee	10
Community Engagement committee	Committee	7
College Council	Committee	15
Assessment	Committee	11

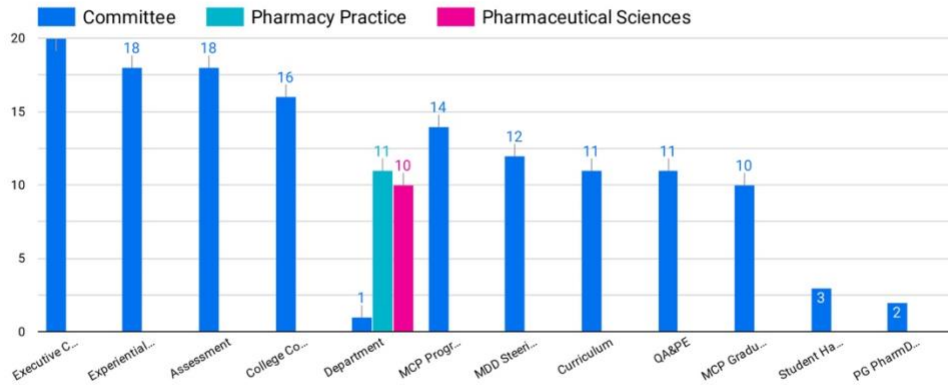
College of Pharmacy

College of Pharmacy



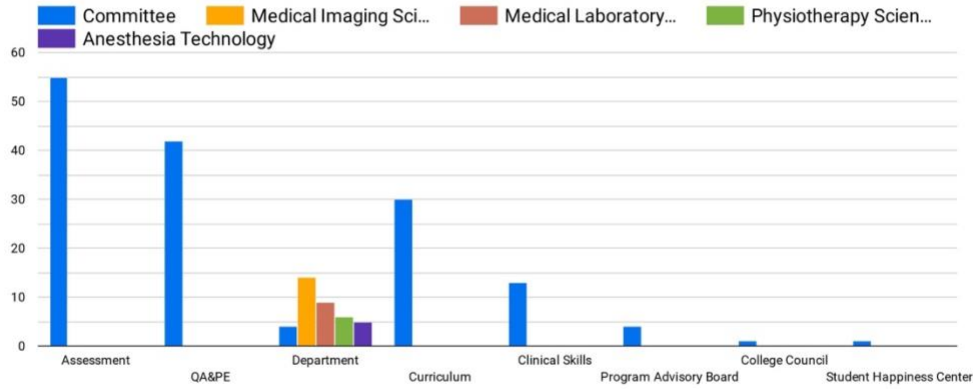
Sep 1, 2022 - Aug 31, 2023

Meeting Minutes



		CollegeUnit / No. of Meetings
Committee	Dept/Committee	COP
Student Happiness Center	Committee	3
QA&PE	Committee	11
PG PharmD Steering Committee	Committee	2
MDD Steering committee	Committee	12
MCP Program committee	Committee	14
MCP Graduate committee	Committee	10
Experiential Education	Committee	18
Executive Committee	Committee	20
Department	Pharmacy Practice	11
	Pharmaceutical Sciences	10
	Committee	1
Curriculum	Committee	11
College Council	Committee	16
Assessment	Committee	18

College of Health Sciences  Sep 1, 2022 - Aug 31, 2023
Meeting Minutes



		CollegeUnit / No. of Meetings
Committee	Dept/Committee	COHS
Student Happiness Center	Committee	1
QA&PE	Committee	42
Program Advisory Board	Committee	4
Department	Medical Imaging Sciences	14
	Medical Laboratory Sciences	9
	Physiotherapy Sciences	6
	Anesthesia Technology	5
	Committee	4
Curriculum	Committee	30
College Council	Committee	1
Clinical Skills	Committee	13
Assessment	Committee	55

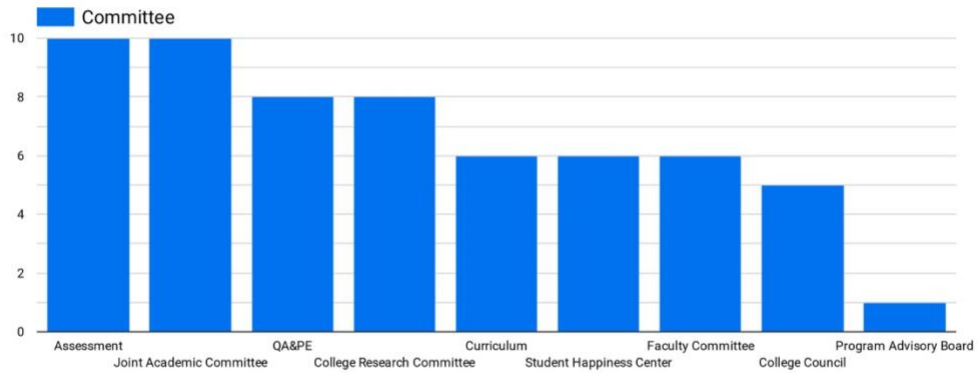
College of Nursing

College of Nursing



Sep 1, 2022 - Aug 31, 2023

Meeting Minutes



CollegeUnit / No. of Meetings		
Committee	Dept/Committee	CON
Student Happiness Center	Committee	6
QA&PE	Committee	8
Program Advisory Board	Committee	1
Joint Academic Committee	Committee	10
Faculty Committee	Committee	6
Curriculum	Committee	6
College Research Committee	Committee	8
College Council	Committee	5
Assessment	Committee	10

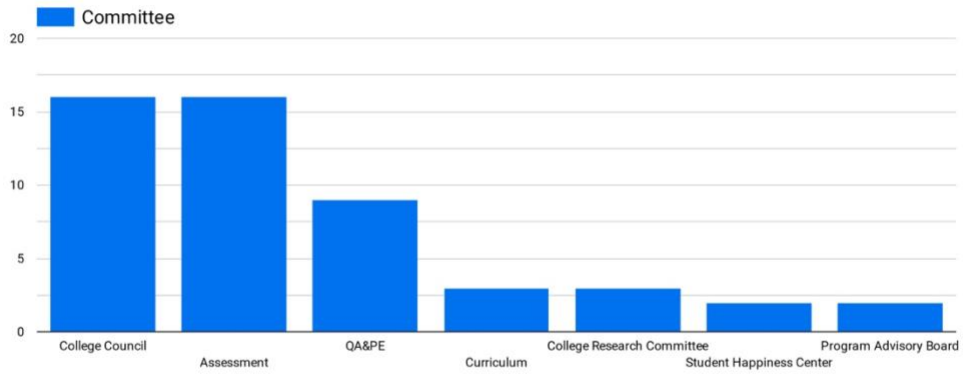
College of Healthcare Management and Economics

College of Healthcare Management and Economics



Meeting Minutes

Sep 1, 2022 - Aug 31, 2023



CollegeUnit / No. of Meetings		
Committee	Dept/Committee	COHME
Student Happiness Center	Committee	2
QA&PE	Committee	9
Program Advisory Board	Committee	2
Curriculum	Committee	3
College Research Committee	Committee	3
College Council	Committee	16
Assessment	Committee	16

14. Analytics of Activities (Community Engagement, Research Seminars, Professional Development, etc):

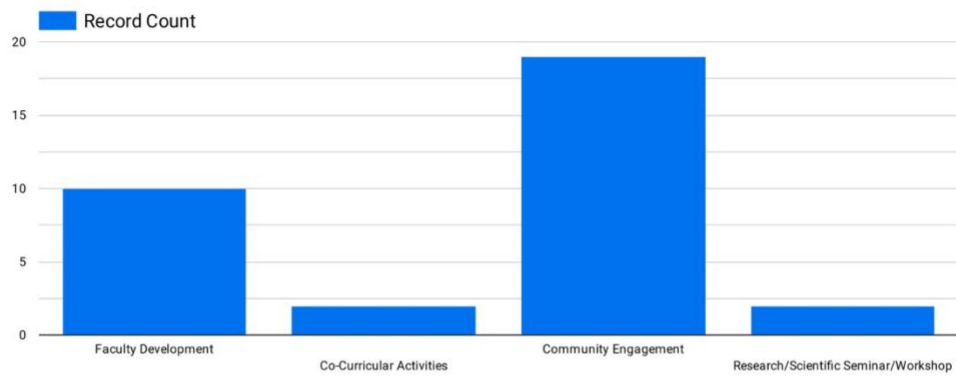
University Level

University-Level



Sep 1, 2022 - Aug 31, 2023

Activities



Type_of_the_event	College_Unit / Record Count
Community Engagement	19
Faculty Development	10
Co-Curricular Activities	2
Research/Scientific Seminar/Workshop	2

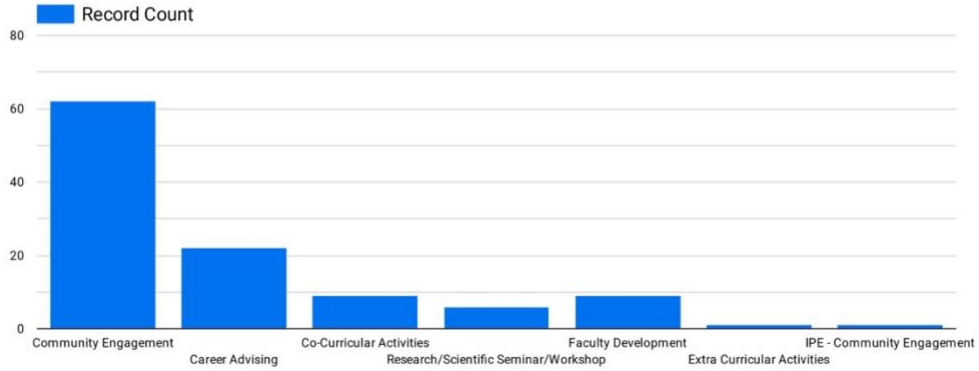
College of Medicine

College of Medicine



Sep 1, 2022 - Aug 31, 2023

Activities



Type_of_the_event	College_Unit / Record Count
Community Engagement	62
Career Advising	22
Faculty Development	9
Co-Curricular Activities	9
Research/Scientific Seminar/Workshop	6
IPE - Community Engagement	1
Extra Curricular Activities	1

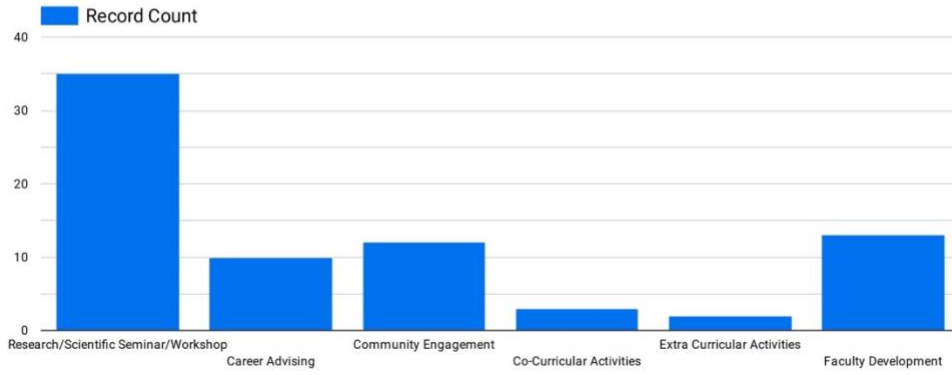
College of Dentistry

College of Dentistry



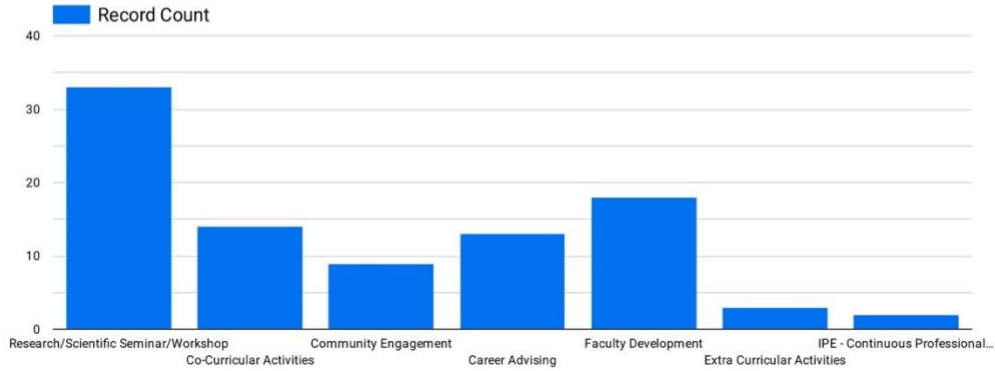
Sep 1, 2022 - Aug 31, 2023

Activities



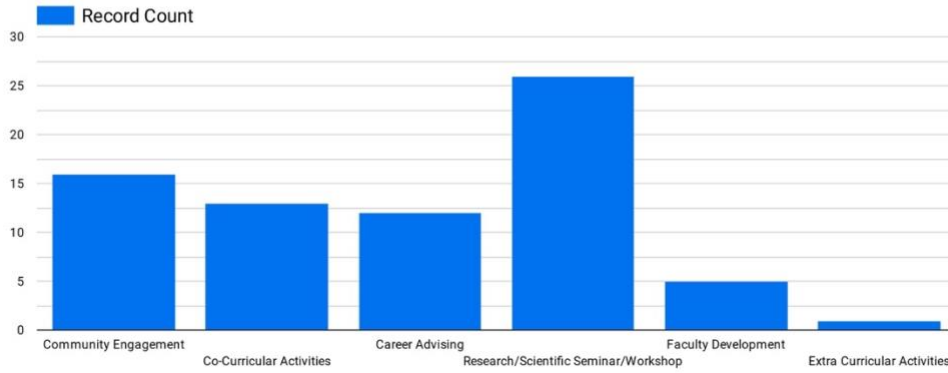
Type_of_the_event	College_Unit / Record Count
Research/Scientific Seminar/Workshop	35
Faculty Development	13
Community Engagement	12
Career Advising	10
Co-Curricular Activities	3
Extra Curricular Activities	2

Activities



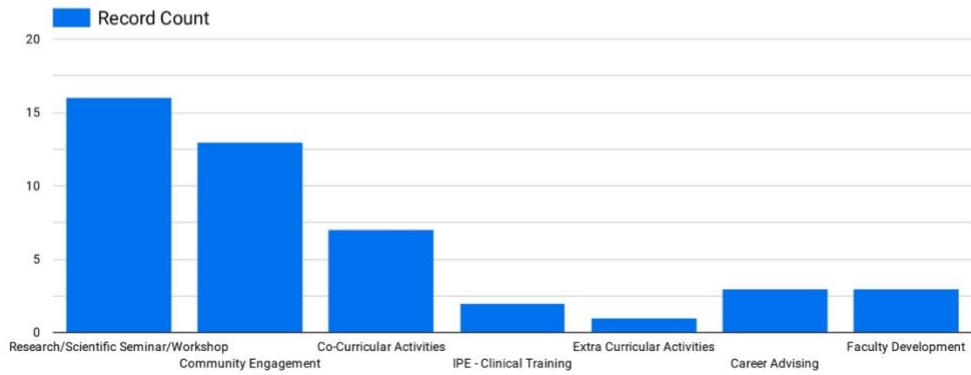
Type_of_the_event	College_Unit / Record Count
Research/Scientific Seminar/Workshop	33
Faculty Development	18
Co-Curricular Activities	14
Career Advising	13
Community Engagement	9
Extra Curricular Activities	3
IPE - Continuous Professional Development	2

Activities



College_Unit / Record Count	
■ Type_of_the_event	CoHS
Research/Scientific Seminar/Workshop	26
Community Engagement	16
Co-Curricular Activities	13
Career Advising	12
Faculty Development	5
Extra Curricular Activities	1

Activities



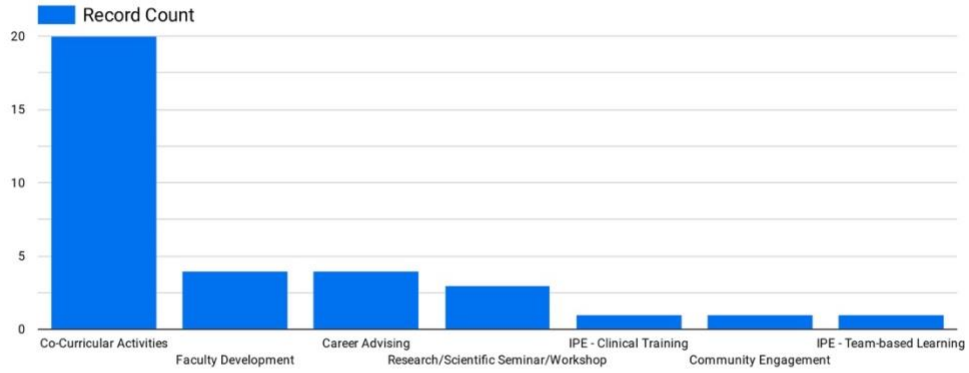
College_Unit / Record Count	
■ Type_of_the_event	CoN
Research/Scientific Seminar/Workshop	16
Community Engagement	13
Co-Curricular Activities	7
Faculty Development	3
Career Advising	3
IPE - Clinical Training	2
Extra Curricular Activities	1

College of Healthcare Management and Economics



Sep 1, 2022 - Aug 31, 2023

Activities

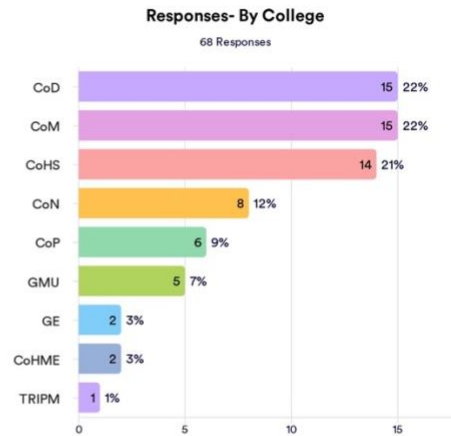
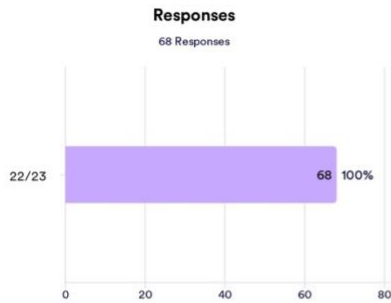


College_Unit / Record Count	
Type_of_the_event	CoHME
Co-Curricular Activities	20
Faculty Development	4
Career Advising	4
Research/Scientific Seminar/Workshop	3
IPE - Team-based Learning	1
Community Engagement	1
IPE - Clinical Training	1

15. Stakeholder Feedback:

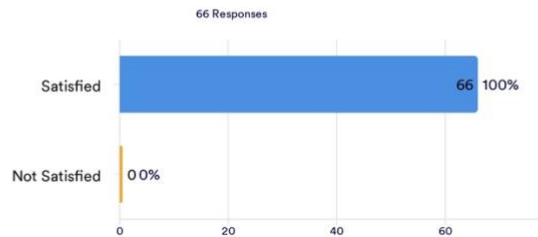
Link to the Report: <https://www.jotform.com/report/23066247765806308>

Stakeholder Evaluation of QA&IE Unit

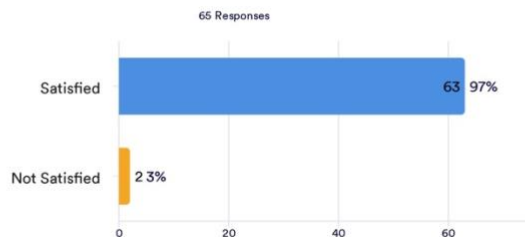


Stakeholder Evaluation of QA&IE Unit

The QA&IE members provided support during accreditation and preparation of all quality related documents.

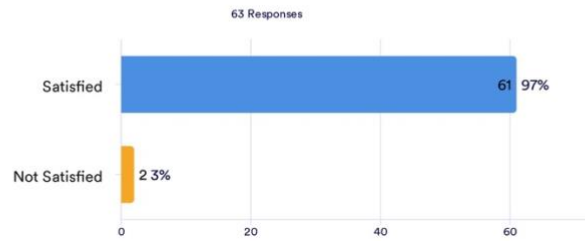


The course file submission and review system was efficient and easy to use.

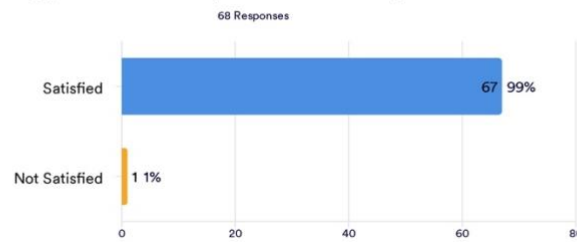


Stakeholder Evaluation of QA&IE Unit

The faculty appraisal system helped me to identify my strengths and areas for improvement.

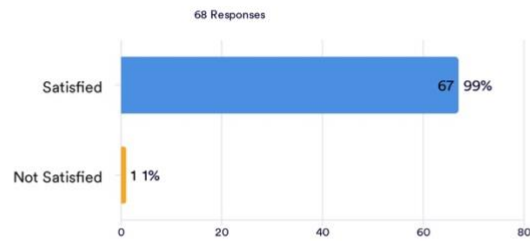


The QA&IE Unit delivered valuable workshops for introducing the new applications and systems before implementation

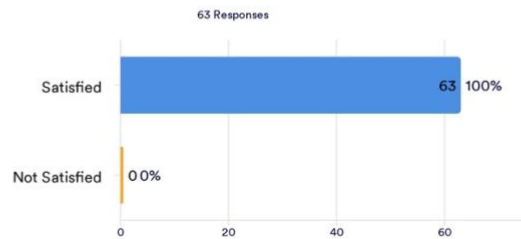


Stakeholder Evaluation of QA&IE Unit

The QA&IE Unit provided comprehensive reports on Faculty, Staff and Student Surveys

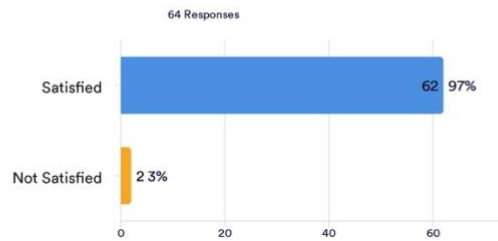


The meeting minutes system facilitated documentation and retrieval of decisions taken in our committee meetings

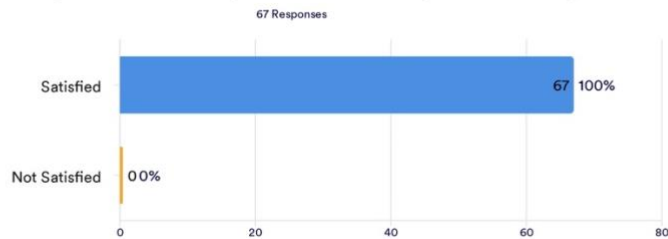


Stakeholder Evaluation of QA&IE Unit

The QA&IE Unit follows up on the implementation of all the actions planned at the program and college levels.



Reports and policies are easily accessible through the QA&IE platform



Stakeholder Evaluation of QA&IE Unit

What do you like most about the QA&IE Unit?

Data
QA&IE unit is continuously striving to build an efficient method of regulating quality parameters applicable for all programs under the university.
The current documentation process ...
I really appreciate the QA&IE unit for several reasons. Firstly, their dedication towards ensuring the quality and excellence of our work is truly admirable. Secondly, its innovative approach for new and better ways to improve our processes, which has led to some significant improvements in our workflow. Finally, I believe that the close and mutual productive communication between the QA&IE unit and the college has been key to our success.
Support on policy making and provides guidance on data collection for ministry Great support for the CGPA conversion table. Creation of faculty/Staff CV portal
I can tell you that the QA&IE unit plays an important role in ensuring the quality and integrity of data and information used in various applications and systems. Their work helps to prevent errors and inconsistencies, ensuring that the end-users of the systems they support have access to accurate and reliable information. This is a critical function in today's data-driven world, and it's important to have skilled professionals like those in the QA&IE unit who are dedicated to this task.
Digitalization of the Quality Assurance process
The continuous improvement.
Very approachable, help required ready to help at any time. Communication and rapport is very good. Very good in updating the information's as per the requirements.
One of the best units in the university where we can discuss our concerns. The dedicated team of QA & IE is there always to guide us in the proper direction.
Very helpful and streamlined process
Detailed documentation and organization. Short videos are very useful

Stakeholder Evaluation of QA&IE Unit - Questionnaire

Please provide your suggestions for improvement

Data
<p>The documentation has increased a lot. Some days I only do documentation and there is no time to open my subject related papers/work. Please keep in mind that we are some subject experts (and not hired for only documentation). During the time of any accreditation, we are supposed to change the formatting of documents submitted 2 years back, which makes NO SENSE. Such work simply kills a lot of time which could be productive otherwise. Especially when we are supposed to show publications at the end. Research planning and implementation needs times, even if it is a questionnaire based research.</p>
<p>None. The upgrading of system is appreciated and should continue.</p>
<p>More Faculty development workshops for QA members and hours of workshops for newer applications.</p>
<p>It would be beneficial if the QA&IE unit could organize more workshops to help faculty and staff improve their understanding and awareness of any change in the online QA&IE unit platform. In addition, it would be helpful if the QA&IE unit could tailor their platforms to meet the specific needs of each college.</p>
<p>More frequent discussions with respective stakeholders for submission of CHEDS or any data submission. Time-time evaluation or inspection</p>
<p>I can suggest some general areas where QA&IE units can improve: Enhancing communication and collaboration: Effective communication and collaboration between team members are essential for the success of any QA&IE Unit. Team members should have open lines of communication and collaborate on all aspects of the project to ensure that everyone is working towards a common goal. Continuous Learning and Improvement: The field of Quality Assurance is constantly evolving, and it is important for QA&IE Units to keep up with the latest developments and best practices.</p>
<p>More faculty and staff training</p>
<p>More workshop on effective utilizing QA resources. Please use and send student/faculty surveys at the appropriate time preferably at the end of 14-15 rather than during the middle of semester</p>
<p>Policies sections are not downloadable. Organizing more university level workshops (other than for implementing new system)</p>
<p>Difficult to get feedback from students. Too many feedbacks. Can think of reducing & make it more comprehensive</p>

16. Areas for Improvement and Actions Taken/To be Taken:

Action Plans for the AY 23/24

Areas for improvement	Pending from the last AY	Action taken/to be taken	Deadline	Current Status
Faculty and Staff requested more faculty development and training workshops about the new applications, any significant update in the QA portal and/or CHEDS submission	No	Conduct 2 workshops per semester.	January 2024	Pending
	No	Conduct training sessions for the newly joined faculty members	November 2024	Pending
No digital solution to document student focus groups	No	Add student focus groups as an option to the meeting minutes application	September 2023	Addressed

Too many surveys sent to students.	No	- To merge/reduce surveys	September 2023	Addressed: - The university services survey was already merged with mentorship evaluation survey and hostel survey. - Students is evaluating each faculty one time per year regardless the number of courses taught by him/her
Surveys are sent in the middle of the semester	No	Ensure sending the surveys by the end of the semester	9/2023	Addressed - the surveys of Spring 2023 were distributed in weeks 12-13 of the semester.

Action Plans for the AY 22/23 and their Level of Achievement

Areas for improvement	Pending from the last AY	Action taken/to be taken	Deadline	Current Status
Survey reports take time to be published on the document bank.	Yes	Most of the reports will be available online with real-time access to all faculty and staff.	1/2023	Addressed - Reports are available online with real-time access to all faculty and staff.
To improve the university services based on the faculty, staff and student feedback.	No	To develop, publish and implement action plans for improvement based on faculty, staff and student feedback on university services.	6/2023	Under processing
Some faculty members are mentors for more than 20 students and cannot meet them 3 times per semester as requested by the college.	No	To reduce the mentor-mentee official meeting to a minimum of one per semester.	12/2022	Addressed – One meeting only per semester is required, except for students at-risk, two meetings are required.
Faculty appraisal survey are too long and exhausting.	No	To inform faculty members that all the fields in the form are not compulsory.	4/2023	Faculty members have been informed that all the fields in the

				form are not compulsory.
Applications are frequently changed and updated which is sometimes confusing to some faculty members.	No	- To make sure that changes are essential and cannot be avoided. - To have more orientation sessions and/or videos for any new application.	3/2023	Addressed – Only, necessary updates/upgrades have been done.
Achievement of practical and clinical learning outcomes are not captured.	No	To have a digital course blueprint that reflects all course elements consolidated.	6/2023	Under construction
Deadlines are sometimes unrealistic.	Yes	Preliminary deadlines are shared with college Deans and getting their feedback before finalizing these deadline.	4/2023	Addressed - Deadlines are now decided after consulting program directors
Graduation report is too long and has unnecessary sections	No	To create a template for the graduation report and share it with the program directors.	10/2022	Addressed – Concise template is shared on the QA&IE portal (Link)
Policy changes may not widely disseminated.	No	To review and operationalize the policy of policy dissemination (GMU-POL-S01-006).	12/2022	Addressed – Online system has been developed to track policy review and dissemination (Link). The policy has been updated accordingly
Caspio report is not exportable as PDF	No	All Caspio report to be exportable as PDF.	11/2022	Addressed - All Caspio reports now can be exported as PDF.

Action Plans for the AY 21/22 and their Level of Achievement

Area for Improvement	Pending from the last AY	Action to be taken	Deadline	Current Status
Job description document needs revision	No	Revising the job description document	January 2022	30% of the JDs are reviewed
Terms of Reference of many committees needs revision	No	Revising the terms of reference document	March 2022	100% of the TORs are reviewed

Assigning close deadlines to complete tasks requested by the unit	No	Creating an annual calendar for deadlines of all tasks	September 2021	Deadlines are now decided after consulting program directors
Online faculty development session needs improvement in terms of quality of embedded questions, video duration, and the time of releasing the course	No	All the suggested improvements will be considered in the coming course (Moodle)	September 2021	Face-to-face sessions replaced the online sessions
Revising the data before sharing with Colleges	No	Creating an online form to control and revise all data produced by the unit before sharing with colleges	July 2021 (Done)	Addressed (Data becomes published only on the document bank or through interactive dashboard, not shared by emails)
Benchmarking at the program level is not well developed	No	Follow-up with program directors on benchmarking at the program level	December 2021	Partially addressed (5 programs have regional benchmark values with LAU)
Course files and program effectiveness report are revised by the College QA&PE committee, but this did not happen in all colleges.	No	Follow-up with College QA&PE Committee to revise course files and program effectiveness report	January 2022	The submission applications for course files and program effectiveness reports have been updated to ensure that they are reviewed at the college level

Action Plans for the AY 20/21 and their Level of Achievement

Problem Description	Action to be taken	Responsibility	Deadline	Current Status
More staff needed	1 more staff to be recruited	VCQ&GE	Sept 2020	Addressed - Dr. Ibrahim has been recruited in October 2020.
Workload form is confusing	Online database will be established to facilitate communication and make it easy for all to understand the meaning of each item in the form	Director QA&IE Unit	Nov. 2020	Addressed – Teaching assignment and workload application is used

				to collect workload information.
To improve response to Employer survey of GMU graduates	<ul style="list-style-type: none"> - The QA&IE UNIT will coordinate with MoE for conducting the Employer survey. - The colleges with the support of the Alumni Office to collect data about employers of their alumni and contact the employers to build communication channel and collect their feedback. 	<ul style="list-style-type: none"> - Associate Director- QA&IE Unit - Colleges - Alumni Office 	Mar 2021	Partially addressed (more improvement needed) – Employers’ data are being continuously updated.
Communication with colleges	Members of QA&IE committee will coordinate communication between the QA&IE Unit & colleges	VCQGE	Oct 2020	Addressed – The QA&IE Committee members coordinate well between the unit and all colleges
Support to colleges in terms of training	The QA&IE Unit will conduct workshops periodically on CHEDS submission, preparing the action taken reports and using the online QA&IE platform	Director QA&IE Unit	Dec 2020	Addressed – At least 3 workshops are conducted per year. Extra sessions are offered to college/dept/faculty as per their needs.
Timely sharing of reports	The QA&IE Unit will create a cloud for sharing all reports	Associate Director - QA&IE Unit	Nov. 2020	Addressed – reports are live now (immediately available)
To close the loop of quality enhancement	Submission of the Colleges Action Taken Reports and meeting minutes to the QA&IE Unit for following up.	Director QA&IE Unit	Dec. 2020	Addressed through the program effectiveness reports, college annual reports and the meeting minutes system