

# INSTITUTIONAL EFFECTIVENESS AND QUALITY ASSURANCE MANUAL

Fatima College of Health Sciences

Abu Dhabi (UAE) - November 2017

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#### **Document Revision Form**

# Institutional Effectiveness Unit – Institutional Effectiveness and Quality Assurance (IE & QA) Manual

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1	20/07/2016	Revised by Mr Saleh Al Da'ajeh – Institutional Effectiveness Dept. / Institute of Applied Technology.	Dr. Daryl Cornish, FCHS, Director	August 1st, 2016
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# **Definitions and Acronyms**

ACTVET	Abu Dhabi Centre for Technical and Vocational Education and Training		
CAA	The UAE Commission for Academic Accreditation		
CLO	Course Learning Outcomes		
FCHS	Fatima College of Health Sciences		
HR	Human Resources		
IAT	Institute of Applied Technology		
IDOP	Individual Department Operational Plan		
IE	Institutional Effectiveness		
KPI	Key Performance Indicator		
PLO	Program Learning Outcomes		
QA	Quality Assurance		
SLO	Student Learning Outcomes		
SMART	Specific; Measureable; Attainable; Relevant; Time-Bound		



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# 1. Introduction

At Fatima College of Health Sciences (FCHS), Institutional Effectiveness (IE) is the college-wide continuous process of planning and outcome assessment. The main focus of this process is to monitor the progress of FCHS in achieving its vision, missions, key values, goals and objectives.

FCHS's approach to quality assurance is based on its Vision, Mission, Key Values, Goals and Objectives. In order for any quality system to fully function, it needs to be owned by the people by whom it is operated, and this has been the broad aim of FCHS in integrating its approaches into its systems and processes. In a climate which seeks continuous improvement, systems will naturally adapt to external change and in response to the annual assessment of quality which is the self-assessment process.

#### 1.1 FCHS Vision, Mission, Key Values, Goals and Objectives

#### **Vision Statement:**

"Fatima College of Health Sciences aims to be a preeminent and leading provider of qualified national healthcare academics and professionals regionally, through the pursuit of excellence in teaching, research and community service."

#### **Mission Statement:**

Fatima College of Health Sciences is committed to promote academic and professional excellence compliant with international standards, providing comprehensive and learner student-centred Health Sciences academic programs based on best practice, Fatima College of Health Sciences will graduate knowledgeable, and skillful and innovative professionals who will contribute effectively to the healthcare sector in the UAE. A culture of research will be established through fostering an enquiry-based ethos and contemporary facilities to ensure that the needs of the students, health sector and community is scientifically addressed"



# Fatima College of Health Sciences is committed to:

- Educate, train, and graduate health care professionals and scientists.
- Provide state-of-the-art educational and research environment and to utilize state-of-the-practice instructional and training methods and services.
- Grant qualifying certificates for graduating students completing their graduation requirements in accordance with national qualifications requirements.
- Provide educational and health care professional consultancy services.
- Consolidate the continuous development of knowledge-based economy of the United Arab Emirate by offering multiple educational programs and degrees in health care disciplines.

#### **Key Values:**

In pursuit of its mission, Fatima College of Health Sciences maintains the following key values for its day-to-day operations and code of conduct:

- **Innovation:** Empowerment of employees, encouragement of creative thinking and collaboration with institutions to enhance their effectiveness and ability to manage the ongoing change.
- Flexibility: Ability to proactively respond to all labour market changes and evolutions.
- **Professionalism:** Ethical values and results oriented in order to provide optimal work experience.
- **Excellence:** Develop a quality management system to better control, manage, and continually improve the dynamic elements that are considered critical to policy and in the performance of its activities.
- **Integrity:** Adhere, in its relationship with all stakeholders, to our policies and standards with honesty, openness, transparency, accountability, and consistency.



# Goals:

The FCHS Goals derived from the FCHS Mission's Commitment statements and include the following:

- *Goal 1:* Deliver high quality education and training in order to produce competent and highly skilled employment ready graduates, health care professionals and scientists.
- **Goal 2:** Provide state-of-the-art educational and research environment and to utilize up-to-date instructional and training strategies as defined by institutional research, institutional and program effectiveness and research output.
- **Goal 3:** Grant qualifying certificates to graduating students who have met the requirements of nationally accredited programs in accordance with the national qualifications' standards.
- **Goal 4:** Engage stakeholders to ensure professional alignment of education and health care services through bi-annually advisory committee meetings where stakeholders provide the chair.
- *Goal 5:* Scan the market and develop new programs as needed for the sustainable future of the UAE healthcare workforce.

# **Objectives:**

Derived from the FCHS Vision, Mission, Goals and FCHS Strategic Plan 2016-2020, the FCHS Objectives, including the target statements for each objective, are as follows:

**Objective 1:** Increase the number of Emirati students enrolled in Health-Care disciplines throughout its campuses.

Target statements:

- By the end of year 2020, total student enrolment in each entity of Fatima College of Health Sciences will reach 90% of the Fatima College of Health Sciences' full capacity.
- Ongoing and by 2020 Fatima College of Health Sciences will continue to increase the number of graduating students.
- Ongoing and by 2020, Fatima College of Health Sciences will continue to increase the quality of its educational and training services.



**Objective 2:** Align curriculum and programs to meet labor market of Health-Care sector needs and requirements.

Target statements:

- By the end of 2020, Fatima College of Health Sciences educational and training programs will be complying by 100% with the Commission of Academic Accreditation (CAA) accreditation standards' and will adhere to the national and international qualification/certification requirements.
- From the commencement of academic year of 2016/2017 Fatima College of Health Sciences will establish additional strategic relationships with key stakeholders from the healthcare sector to work towards fulfilling Health Care sector demands and requirements.
- From the commencement of academic year of 2016/2017 Fatima College of Health Sciences will increase the number of professional development events and social extracurricular activities.

*Objective 3:* Increase the Emiratization ratio in the Fatima College of Health Sciences.

Target statements:

- By the end of 2020, Fatima College of Health Sciences will continue to increase the opportunities for national manpower to join their administrative and academic staff.
- By the end of 2020, Fatima College of Health Sciences will continue to decrease the turnover rate and to increase the professional development opportunities for national manpower employees.



**Objective 4:** Reduce the overhead operational cost and the cost per student *Target statements:* 

- By the end of 2020, Fatima College of Health Sciences will reduce the cost per student.
- By the end of 2020, the Fatima College of Health Sciences will continue to decrease operational expenses and increase the rate of achieved revenues.

FCHS Vision, Mission, Key Values, Goals and Objectives are published in the FCHS Catalogue, Policies and Procedures Manual, Student Handbook, Faculty and Staff Handbook and website. They are echoed in the strategic and operational plans as well as the curriculum reviews to ensure alignment. The FCHS Director's Executive Committee (formerly known as FCHS Board) is responsible for creating and updating Vision, Mission, Key Values, Goals and Objectives and to ensure their relevance. FCHS recommends changes to the IAT Board of Trustees for final approval. Once Board approval is received, all official documentation (including the website) must be changed and all students, faculty and staff should be notified.

# 1.2 FCHS Institutional Effectiveness (IE), Quality Improvement (QI) and Quality Assurance (QA)

FCHS IE and QI Frameworks, as well as the Quality Assurance approach provide a structured and systematic approach to ensure institutional effectiveness is achieved.

# 1.2.1 FCHS Institutional Effectiveness (IE) Framework

# FCHS IE is based on four pillars, namely:

The *first pillar* is the mission which describes the purpose of FCHS;

The second pillar is the vision which describes what FCHS wants to become;

The *third pillar* is the strategic plan which describes how to achieve the vision and mission, and

The *fourth pillar* is the assessment and its results which describes how we are doing in terms of achieving the vision and mission of FCHS.



# Institutional effectiveness involves a minimum of four steps:

- 1. Establishing a clearly defined vision and mission.
- 2. Establishing goals and objectives consistent with the mission, vision and strategic plan.
- 3. Developing and implementing tools to evaluate the extent to which key values have been achieved.
- 4. Using the results of evaluations to improve the outcomes of programs and services.

To ensure the achievement of institutional effectiveness, all IE activities are envisioned to be achieved within the FCHS IE Framework (Figure 1).

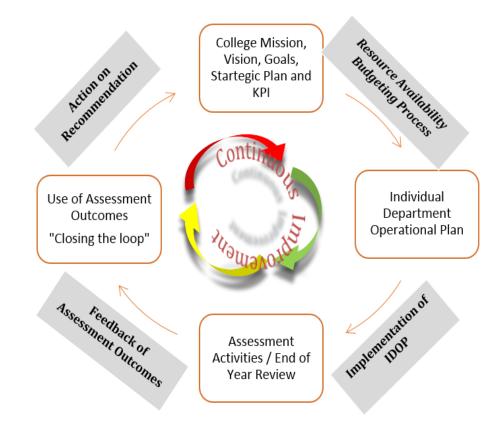


Figure 1: FCHS Institutional Effectiveness Framework



# 1.2.2 Quality Improvement Framework

FCHS's Quality Procedures and strategies are annually reviewed, and evolve in line with the principles of continuous improvement. This task is primarily the responsibility of the FCHS Director's Executive Committee (DEC), under the chairmanship of the Director.

FCHS has a comprehensive team and committee structure and a published schedule for meetings. Terms of reference or key task areas are identified for each team and responsibilities for quality assurance arrangements and audit or assessment are described and published. As far as possible, operational teams such as departments or service teams are empowered to take responsibility for quality in their areas of activity, with cross-FCHS committees and groups such as FCHS Staff committee and Student Liaison committee monitoring and coordinating activities.

Other working groups may be sometimes established to drive forward particular areas. An example would be a Performance Management Group which may work to establish procedures for monitoring student attendance and progress in the light of data from the FCHS's management information system.

A further group may meet to discuss teaching and learning strategies, and the sharing of good practice between staff which will enhance provision in addition to the emergence of specific strategies which may be adopted across FCHS to tackle, for example, poor attendance.

FCHS has worked hard to systematize, to identify key areas of work where it wishes to assure quality, to integrate or adapt structures accordingly and to meet the demands of external agencies such as the Ministry of Higher Education and any overseas awarding bodies. FCHS is also working to identify and agree quality criteria and standards against which performance can be measured. What will emerge, and continue to evolve, is a systematic review cycle involving action planning, implementation and monitoring of all aspects of provision and services.



The review of teaching and learning in FCHS is undertaken by the Curriculum and Quality Committee. FCHS's quality assurance framework and overall curriculum provision are overseen by this committee which regularly monitors the academic performance of FCHS against agreed targets.

FCHS uses both internal and external auditors to ensure that its systems are robust and that its work complies with the required standards. The internal auditor reports his/her findings to the Manager for Quality Assurance.

In addition to the major focus on Teaching, Learning and Achievement FCHS has developed a wide range of processes that allow it to both monitor performance and ensure that data are interpreted and analyzed to contribute to wider performance improvement initiatives in the area of Institutional Effectiveness. The FCHS Quality Improvement Framework is presented in Figure 2.

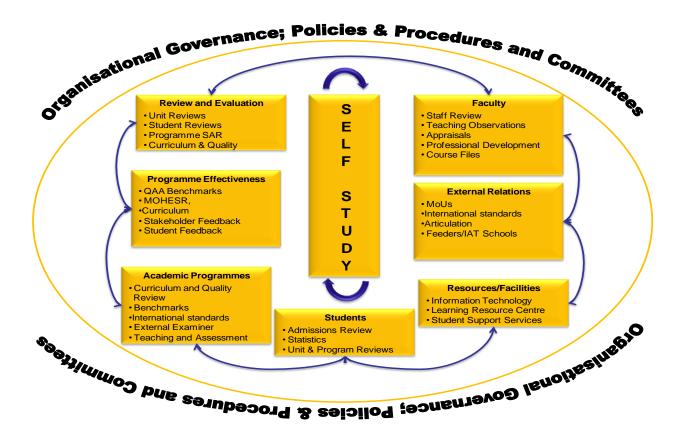


Figure 2: Quality Improvement Framework



# 1.2.3 Quality Assurance

FCHS's Planning and Quality Assurance is based on the Plan-Do-Review-Improve (PDRI) model of quality assurance and improvement, and consists of the following linked elements:

- a planning framework
- a planning and review cycle
- a budget model that supports implementation of the strategic priorities
- Faculty and Administrative reviews
- professional accreditation
- planning, evaluation and review of programs, courses and teaching
- stakeholder feedback
- annual performance reviews of senior managers

# 1.2.3.1 Planning Framework

The FCHS's planning framework consists of a series of linked plans and policies that guide the implementation of FCHS's strategic priorities. This framework consists of:

- i. FCHS's Strategic Plan that sets targets benchmarked against national and international standards; and
- ii. a cascading model in which the Strategic Plan and Organizational Targets are used to drive the and Strategic Action Plan, operational plans (IDOPs – Individual Departmental Operational Plans) and key performance indicators within FCHSwide portfolios of learning and teaching, and those of academic groups and administrative divisions

Plans are agreed and implemented through each faculty and support division. Progress towards targets is reviewed through FCHS's annual planning and review cycle.



# 1.2.3.2 Planning and Review Process

FCHS has implemented a strategic and operational planning and review process for the review and accomplishment of faculty and support department plans consisting of an evidence-based, strategic review of performance against key performance indicators, the identification of desirable improvements, integrated operational planning, budgeting, and implementation of strategic actions. Strategic plans operate on a five-year cycle, whereas operational plans operate on a one-year cycle. All operational plans clearly specify actions, responsibilities and budget provisions.

The Planning Process occurs in line with a published planning and budgeting timetable as follows:

- Review (continuous) the annual planning process is continuous and commences with an annual strategic review of performance against the FCHS's key performance indicators (KPIs) by FCHS Director. Additional scheduled faculty and departmental level meetings are scheduled to review operational issues, student performance, program effectiveness and opportunities for improvement.
- FCHS Director meets with each of the managers responsible for faculties and support departments, to consider areas in which there are gaps in program performance relative to targets, with a view to planning and resourcing improvement actions.
- Improvement (continuous) if necessary, each faculty and administrative support department updates its plan in the light of the review of performance gaps, to focus on areas where the need for improvement is greatest. Where improvement is identified the process of implementation will be monitored and recorded through FCHS's Quality System.
- Operational Planning and Implementation (June) This process discusses and implements FCHS's strategic plan, including actions designed to achieve priorities for improvement, assign responsibilities for implementation to specified managers, provide key performance indicators against which to evaluate progress, and allocate budget resources in support of FCHS's strategic and operational objectives. FCHS's plans are developed in consultation with senior managers in each of the faculties and support departments.



# 2. Strategic Plan (2016-2020)

ACTVET, the regulatory organization for IAT and FCHS, produce a 5-year Strategic Plan and KPI targets. These are to drive the Strategic and operational plans within IAT and FCHS and the individual departments and administrative divisions. The Director and Institutional Research Supervisor should review and add the relevant information from the plan and the specific FCHS KPIs into the current 5-year Strategic plan. Once the Strategic plan has been updated, it should be emailed to HoDs to provide them directions when developing their Individual Department Operation Plan (IDOP).

# 2.1. Strategic Priorities

#### Fatima College of Health Sciences has the following strategic priorities:

- i. Increase the number of Emirati students enrolled in Health –Care disciplines throughout its campuses.
- ii. Align curriculum and programs to meet labor market of Health-Care sector needs and requirements.
- iii. Increase the Emiratization ratio in the Fatima College of Health Sciences.
- iv. Reduce the overhead operational cost and the cost per student.

(Refer to Appendix 1 - FCHS Strategic Plan 2016-2020)

#### 2.2. Strategic Action Plan to achieve FCHS Strategic Priorities

To ensure that the Strategic Plan 2016 - 2020 will be achieved in 2020, a Strategic Action Plan was formulated to drive the process (Table 1). To support this process, short term (1-2 years), medium term (2-3 years) and long term (3-4 years) goals were identified.



# Table 1: Strategic Action Plan (2016 - 2020)

	Goals	Objectives	Time Frame
		1.1 Increase the number of Emirati students participating in the	Short
		health care sector throughout all FCHS campuses	Long
		1.2 Increase community, students and guardian satisfaction	Short
		and perception of healthcare professionals as future career	
		1.3 Improve community stakeholder awareness,	Short, Medium,
		understanding and engagement with healthcare sector	Long
1.	Increase the Number of Emirati	1.4 Increase and expand FCHS programs to generate multiple	Long
1.	Healthcare Professional Manpower to	level qualifications and pathways to successful learning	
	Meet Healthcare Services Sector	1.5 Establish partnership with healthcare stakeholders to	Medium
	Demands	provide viable healthcare pathways for new and existing	
	Domando	FCHS students and graduates	
		1.6 Identify viable industry employment sectors and design	Medium, Long
		and deliver new programs	
		1.7 Implement a formal evaluation system to measure	Short
		stakeholder satisfaction for quality improvement	
		1.8 Direct the development of teams to successfully participate	Short
		in international and regional competitions	
2.	Increase the Quality of FCHS	2.1 Ensure programs are accredited as per the CAA	Short, Medium
	Educational Services and Academic	2.2 Ensure compliance of all programs with QFE requirements	Short
	Programs Outcomes by Getting	2.3 Ensure programs are accredited by world class	Medium, Long
	them Accredited, Licensed, and/or	international accreditation body	
	Certified		
•		3.1 Ensure responsiveness of programs in meeting changing	Medium, Long
3.	Align the Curriculum and Proposed	demands of health care sector and the labour market	
	Programs with Health Care Sector	3.2 All programs meet health care sector's requirements for	Short, Long
	Needs, Professional Skills	placement in related jobs and careers	
	Requirements and Labour Market	3.3 In collaboration with the Alumni office, the industrial	Short, Medium,
	Demands	advisory Office will conduct annual survey measuring	Long
4	In second the Newsbarn of Enviration	employer satisfaction	Madium
4.	Increase the Number of Emirati	4.1 Develop and implement plan to achieve 10% employment	Medium, Long
	Teachers/ Lecturers in the TVET	of Emiratis	
-	and Healthcare IAT Academies	5.1 Increase the number of students per class	Medium, Long
		5.2 Utilize video conferencing technology to conduct class for	· · ·
		• •	Long
		remote campuses 5.3 Increase administrative staff productivity	Medium Long
5.	Optimize Operational Cost and	5.4 Utilize digital media and environmental friendly resources	Medium, Long Short, Medium
	Enhance FCHS Sustainability		
		for FCHS business processes 5.5 Increase focus on utilizing digital e learning resources and	Medium, Long
			Medium, Long
1		replace traditional assessment approaches by automated	
-		processes	Chart Madium
6.	Contribute Effectively in Community	6.1 Number of events organized and hosted by FCHS	Short, Medium
	Services and Activities	6.2 Percentage of students participate in the support of healthcare establishments	Short, Medium
		nealthcare establishments	

(Source: Appendix 2 – FCHS Strategic Action Plan 2016-2020)



#### 2.3. Roles and Responsibilities to Achieve the Strategic Plan

Parties involved to achieve the FCHS Strategic Plan include boards, committees, Director, Associate Director Academic Affairs, Heads of Departments and IE Supervisor.

#### 2.3.1. Boards and Committees

All committees recognized by FCHS will have a charter which defines the authority of their establishment and bylaws which define their structure including member-ship, terms of services, meeting frequency, quorum, voting rules, and reporting procedures.

It is common for a chairperson (or simply "chair") to organize a committee. This is done through an agenda which is usually distributed in advance. The chair is responsible for running the meetings such as keeping the discussion on the appropriate subject, recognizing members (calling on them to speak), and calling for votes after a debate has taken place. The chair is responsible for deciding how formal the committee's processes will be (within the guidelines of their charter).

A record of the discussion and decisions of the meeting should be recorded by a person designated as the secretary of the committee. For committees that meet regularly, the minutes of the most recent meeting are often circulated to committee members before the next meeting, and are available to the membership. Committees may meet on a regular basis, often weekly, monthly, or quarterly, or meetings may be called irregularly as the need arises.

#### 2.3.1.1. Overview and Structure

The boards and committees responsible to achieve the FCHS Strategic Plan are presented in Figure 3.

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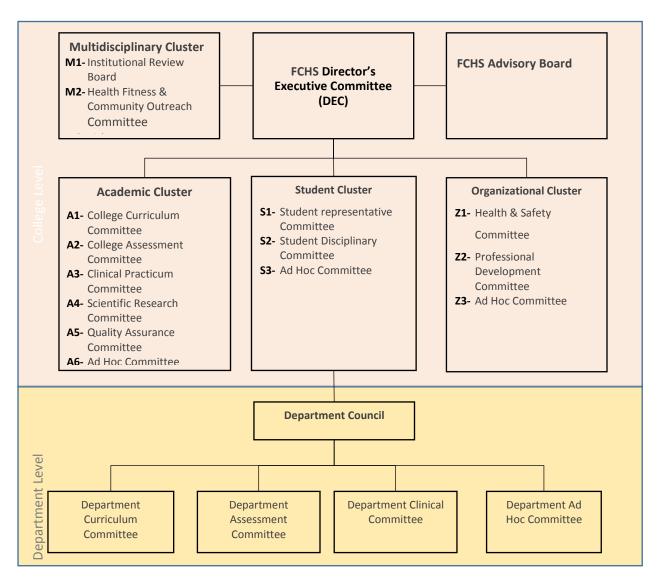


Figure 3: FCHS Boards and Committees

# 2.3.1.2. College Level Committees

The numerous committees at College level to assist with the achievement of the FCHS Strategic Plan, as well as the mandate for each committee is presented in Table 2.



# Table 2: College Level Committees

ID	Committee Title	Mandate
	Fatima College Of Health	Provides strategic, business and academic leadership and oversees the overall
Sciences Director's Execut		activities of FCHS.
	Committee (DEC)	
		Consists of community leaders who provide counsel, professional networking, and
		community connections to promote and support the objectives of FCHS and its
	FCHS Advisory Board	program interests to the FCHS Director's Executive Committee (DEC).
A - A	Academic Cluster	
		It reviews all curricular proposals, including addition and deletion of courses, changes
	College Curriculum	in course numbering, in credit hours, and in course descriptions. The committee
A1	Committee	reviews the establishment of new majors and all new degree programs. The
		committee also oversees the regularly scheduled reviews of academic programs.
	College Assessment	Monitors the assessment processes of FCHS against agreed targets or benchmarks.
A2	Committee	
		The committee oversees the clinical practicum and internship issues for all FCHS
		students. The committee prepare agreements that need to be signed by FCHS with
A3	Clinical Practicum Committee	Health partners to set the stage ready for FCHS students to perform their clinical
		practicum.
	Scientific Research	This committee explores the methods to initiate research in FCHS departments and
A4	Committee	the methods to disseminate findings
		This committee will be responsible for promoting quality assurance through various
		means. This committee will also be responsible for advising FCHS Director's
		Executive Committee (DEC) on policy and strategy for academic standards, quality
A5	Quality Assurance Committee	assurance and enhancement in relation to all taught programs. This committee will be
		the authorized body to co-ordinate the FCHS's compliance with the CAA regulations.
A6	Ad Hoc Committee	They will be formed upon the need.
	Multidisciplinary Cluster	
		This committee is responsible for reviewing proposals for studies planned to be
		carried out wholly or partially at FCHS by FCHS staff or non FCHS staff. They
M1	Institutional Review Board	evaluate compliance with international and local ethical standards and norms; assess
	(IRB) Committee	impact on staff, institutions, subjects, and resources; and recommend regarding
		approval, or otherwise, of planned study or research.
		This committee is responsible for the strategic planning for programs and activities in
	Health, Fitness And	the areas of health, fitness, and community outreach and writing the by-laws and
M2	Community Outreach	regulations for the functioning of the programs. Subcommittees are responsible for the
	Committee	day-to-day operations of the programs.
		This committee is responsible for monitoring and reviewing college risk management
М3	Risk Management Committee	process, advise on risk management strategy, policy and operations and conducts risk
		management reviews to identify college risk patterns and trends
		management reviews to identity college nor patterns and trends



# College Level Committees (continued)

ID	Committee Title	Mandate				
S-St	S-Student Services Cluster					
S1 Student Representative		This committee will be formulated once the semester starts as the student body				
51	Committee (SRC)	will be allowed to hold elections to choose members of this committee.				
S2	Student Disciplinary Committee	This committee which is headed by the manager of student services will deal with student disciplinary issues where students violate roles and regulations of FCHS				
32	(SDC)	with regard to the college building and equipment (vandalism), the staff and the students.				
S3	Ad Hoc Committee	They will be formed upon the need.				
Z - C	Z - Organizational Cluster					
Z1	Health & Safety Committee (SC)	Develops and promotes a healthy and safe environment for students, employees, and visitors to FCHS through the involvement of all individuals with regards to education, communication and safe work practices. The committee reviews all proposals for new work and provides recommendations to the Infrastructure committee.				
Z2	Professional Development Committee (PDC)	This committee oversees the staff professional developments issues. Its responsibility to locate workshops, conferences, or seminars that will enhance the staff's capability of teaching. In addition the committee might itself organize workshops for FCHS staff.				
Z3	Ad Hoc Committee	Will be formed upon the need				

# 2.3.1.3. Department Level Committees

Department level committees include four (4) standing committees as presented in Table 3.

Table 3: Department Level Committees

Committee Title	Mandate		
	This committee includes all faculty of respective departments who teach theory and		
Department Council	practice. Their duties are to design and plan the methods of administering courses and		
	their respective departments in best possible way. This committee also oversees the		
	teaching outcomes of courses and recommend modifications if any.		
Department Curriculum This committee oversees the curriculum choice and improvements for the res			
Committee	department courses. In addition, the committee evaluates the current curriculums.		
	Monitors the academic performance of respective department faculty against agreed		
Department Assessment	targets or benchmarks. The committee asses the marks of each semester and compare		
Committee	with other terms performances and recommends for the College Assessment Committee		
	of FCHS.		
	The committee oversees the clinical practicum and internship issues for students. The		
Department Clinical Practicum	committee interacts with local hospitals and health authority to allocate our students in		
Committee	the various health institutions for their clinical practicum and training periods. The		
	committee reports to the College Clinical Practicum committee.		



# 2.3.2. Director

The Director, contributes to the development of college strategy and policy, working with college senior management to ensure an appropriate level of consistency of implementation of College policy. Director also oversees the planning and implementation of QA and QE activities within the College.

#### 2.3.3. Associate Director Academic Affairs

Associate Director Academic Affairs, monitors, engages and ensures compliance with relevant CAA requirements. He/she in collaboration with senior academic colleagues, leads the development, publication and timely implementation of FCHS Regulatory Framework and also ensures that the requirements and expectations of regulatory bodies regarding academic standards and quality of higher education provision are met.

#### 2.3.4. Heads of Departments (HoDs)

Heads of Departments (HoDs) work together with the College educational leadership to ensure high standards of teaching and learning practice and processes. HoDs also ensures that quality management and enhancement processes operate within the Department in accordance with policies and procedures, etc., laid down in the policies and procedure manual of FCHS and that staff and, where appropriate, students of the Department are informed of such processes.

#### 2.3.5. IE Supervisor

The IE Supervisor works together with FCHS Director, Associate Director Academic Affairs and HoDs in ensuring effective implementation and assessment of IE activities. He / She plays significant role in assessing and continually improving the standards of quality in the academic programs, support, and administrative processes in line with the national and international quality standards. He / She is responsible for developing, enhancing, and maintaining information resources of all types to support decision making, planning, and reporting. He / She also assists every department in preparation for accreditation of programs in accordance with FCHS's vision and CAA requirements.



# 3. Institutional Effectiveness (IE)

The IE unit is responsible to monitor IE Activities and evaluate achievement of these activities ensure that *Closing the Loop* is achieved on annual basis (refer to *Appendix* 3 - *IE Activities' Monitoring and Evaluation Calendar*).

#### 3.1. Activities

IE Activities (Table 4) are performed at four different levels namely Strategic Institutional, College-wide, Program and Service Departments, and Personnel levels.

Table 4: Institutiona	I Research /	Activities	& Time	Frames
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Assessment Level	Academic Affairs	Student Services	Administration/ Finance	Reviewing Bodies	Time Frame
	Strategic Plan 20162-2020			• FCHS Director's	Every 5 yrs.
	Strategic Action Plan	Executive Committee	Annually		
Strategic Institutional	Vision, Mission, Key v	(DEC)	Every 5 yrs.		
	Core Documents: Fac Faculty/Staff Handboo	• IE Unit	Annually		
	Manuals: IE & QA Ma	nual, Risk Managem	ent Manual	IE Unit	Annually
Department Level (Programs & Support Services)	<ul> <li>Academic Plans</li> <li>Enrolment Management Plan</li> <li>Assessment of CLO's</li> <li>Assessment Reports</li> <li>Program Effectiveness Reviews</li> <li>IDOP Reviews</li> <li>Annual Report</li> </ul>	• Student Life Plan	<ul> <li>Financial Plan</li> <li>IT Plan</li> <li>Facilities Plan</li> <li>QA Unit Review</li> </ul>	<ul> <li>Director</li> <li>Associate Director Academic Affairs</li> <li>Registrar</li> <li>FCHS DEC</li> <li>IE Unit</li> </ul>	Annually
Personnel	<ul> <li>Employee's Performance Evaluation Report</li> <li>Student Feedback Report About Lecturers</li> <li>Classroom Observation report</li> </ul>	<ul> <li>Performance Review Reports</li> </ul>	N/A	<ul> <li>HR Department</li> <li>HoDs</li> <li>IE Unit</li> </ul>	Annually



# 3.1.1. Strategic Institutional Level

A set of activities should be carried out to complete the Strategic Plan and Strategic Action Plan review, include:

- 1. Review of vision, mission, key values, goals and objectives
- 2. SWOT analysis
- 3. Review of existing KPIs performance and its relevance in achieving existing goals
- 4. Review of goals and setting of new KPI where required
- 5. Establishment of priority initiatives to achieve goals
- 6. Setting targets
- 7. Use of data to recognize excellence and support a model for continuous improvement

All core documents and manuals should be updated annually to ensure that all include updated information about FCHS.

# 3.1.2. Department Level (Programs and Support Services)

Departmental level activities include the Individual Departmental Operational Plan (IDOP), Program level activities, as well as Support Services activities.

# 3.1.2.1.Individual Department Operational Plan (IDOP)

The primary focus of the Individual Department Operational Plan (IDOP) is to set targets for the year ahead, the achievement of which will contribute to the advancement of the FCHS and specifically the FCHS Strategic Plan. Staff members across the department are accountable for performance against the targets established in the IDOP. The immediate priorities and operational issues identified in



the IDOP are informed by the FCHS Strategic Plan and shaped by the medium and long-term goals and strategies in the FCHS Strategic Action Plan. Targets will be benchmarked against national (CAA, QFE) and international standards, as well as their corresponding professional accreditation expectations/requirements. Comprehensive reporting of performance against the formulated plan is a key part of the department's accountability cycle (ensuring accountability). FCHS provided a template for reporting on each departments IDOP (refer to *Appendix 4 – Individual Departmental Operational Plan [IDOP Template]*).

Plans are written by the Head of Department. All departmental staff will have the opportunity to contribute to the plans. Achievement (progress) of the previous Academic Year's IDOP and the FCHS Strategic Action Plan should be reviewed first before writing the IDOP. A draft should be disseminated to all department faculty and staff so they have an opportunity to read it and consider the impacts for them and can reply with recommendations for improvement. Faculty and staff involvement are likely to increase commitment to the final outcome of achievement. If a faculty or staff member does not provide feedback by the reasonable and communicated deadline set, then their lack of response indicates acceptance. Final plans are annually submitted to the IE Supervisor, Associate Director Academic Affairs and the Director. HoDs, with the assistance of faculty and staff, are responsible or meeting the goals, objectives, and actions mentioned in the IDOP.

#### Key Elements of IDOP:

The IDOP is a highly focused document. Departments should develop their own annual plans and their own operational priorities and targets. Among the myriad decisions that will be required at many levels for the smooth running of the department and college during the year, only a limited number have the strategic institutional significance to require specific targets in the IDOP.

The list of key elements of IDOP includes the following:

1. Goals – must be aligned to the strategic key values of the college, and are broad enough to cover the main areas of responsibility



- 2. SMART Objectives -- describe what the unit wants to accomplish specifically
- 3. Enabling Strategies -- action items that will enable the unit to achieve the objectives
- Resources budgets, personnel time etc., needed for achieving the goal and objective(s)
- 5. Responsibility -- designate who ensures it is undertaken
- 6. Timeline--Indicate when data will be collected and analyzed, when reports will be available, and/or when the task will be accomplished.
- 7. Expected Outcomes -- describe how the unit knows if the objective is accomplished, the outcomes should be specific, and measurable,
- Assessment Measures Target(s) or criteria that can be used to evaluate the quality of the outcome so that a determination can be made whether the objective is met or not.

**Note:** Any goals of the current strategic plan that apply, and all applicable requirements from the CAA requirement must be incorporated into department objectives.

#### Characteristics of an IDOP:

An IDOP should complies with the following characteristics:

- 1. Clearly stated with specific and measurable outcomes.
- Assessment should be systematic using suitable methods to determine to what extent the expected outcomes are met. These methods may be direct or indirect, quantitative or qualitative.
- 3. The assessment results should be used to improve the performance of academic programs and administrative units of the College.



A set of activities should be carried out to complete Individual Department Operational Planning and ensure alignment with the FCHS Strategic Action Plan. These activities include the following:

- 1. Identify / review goals according to the FCHS Strategic Action Plan' objectives.
- 2. Establishing SMART objectives to achieve goals.
- 3. Identify actions to achieve objectives.
- 4. Allocating responsibilities for goals, objectives, and actions.
- 5. Making Budget provisions where applicable.

A template has been designed to document this activity (refer to Appendix 2: Individual Department Operational Plan **[IDOP])**.

# 3.1.2.2. Program Level

Program level activities include the assessment of CLOs and PLOs achievement, the course review process, the assessment moderation process, program effectiveness review, Annual Program Report, as well as course files archiving.

# 3.1.2.2.1 Assessment of CLOs and PLOs Achievement

Annual assessment of achievement of Course Learning Outcomes (CLOs) and Program Learning Outcomes (PLOs) is imperative to ensure monitoring and evaluation of a Program Effectiveness achievement. This process includes mapping of final examination CLOs achievement (summary data of all campuses involved) against PLOs. This assessment is documented as an indicator of Program Effectiveness achievement (refer to Section 3.1.2.2.4).



# 3.1.2.2.2 Course Syllabi Review Process

An annual Course Syllabi Review process (Figure 4) is conducted to ensure that all delivered courses maintain a specific standard of quality. At the end of each semester the course coordinators complete a *Course Report (Lecturer Review)* (*Appendix 5: FCHS Course Report [Lecturer Review] Template*) for courses presented during that semester.

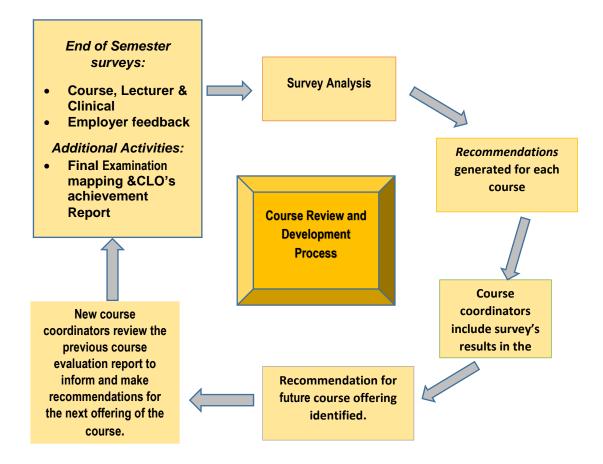


Figure 4: Annual Course Syllabi Review Process

#### i. Course Syllabi Update

Assessment and Marking distribution and criteria should be clearly outlined on the course syllabus. It is the responsibility of the course lecturer to review the marking criteria in class in the beginning of each academic semester. Marks distribution needs



to be justified and mapped to the course objective and course learning outcomes. The criteria must be revised by another expert staff before the beginning of each academic semester.

Two phases are involved in the process to update Course Syllabi, namely at the end of each semester and at the beginning of the semester.

#### A. Phase 1: At the end of each semester:

Course syllabi are updated based on data collected from the faculty/lecturers feedback, student feedback, societal needs and industry partners' requirements. Sources of data is presented in Table 5.

Table 5: End of Semester Data Collection

Different Methods of Data Collection	Source of Data	Appendix
1. Faculty / lectures feedback	1.1 Course review report	Appendix 5: FCHS Course Report (Lecturer Review) Template
	1.2 Final Examination Mapping and CLO's Achievement Report	Appendix 6: FCHS Final Exam vs CLO Mapping Template and Guide
	1.3 Recommendations for improvement gathered from Course Report (Lecturer Review) and through surveys conducted	Appendix 5: FCHS Course Report (Lecturer Review) Template, Section C and Section I
2. Surveys	2.1 Student Evaluation of Course, Lecturer and Clinical	Appendix XXX:
3. Achievement of the course learning outcomes (CLOs):	3.1 Final Examination questions to CLSOs using the Examination Mapping and CLO's Achievement Report	Appendix 6: Final Exam vs CLO Mapping Template and Guide

#### B. Phase 2: At the beginning of the semester.

- Course coordinators assigned to teach the following semester, review the Course Syllabus to include recommendations from the previous years' course review report.
- After the modification on the Course Syllabus has been implemented, the course coordinator sent it with the completed *"FCHS Course Syllabus Update Proposal Template* (Appendix 7) to the departmental curriculum committee for review and approval.



- Departmental Curriculum Committee members review the course syllabus for completeness using FCHS Course Syllabus Content Review Checklist (Appendix 8)
- After approval from the Curriculum Committee the front page of the approved Course Syllabus is stamped with a FCHS stamp and sent back to Course Coordinators, ready to be distributed to students.

#### 3.1.2.2.3 Assessment Moderation Process

#### End-of-term Review of Assessment Results:

Assessing the examinations, projects, assignments, and achievement of course learning outcomes is an important part of continuous quality improvement. The FCHS Assessment Committee is tasked with ensuring that each department conducts a robust review of their final assessments at the end of each semester.

Every FCHS department has an Assessment Committee. This group reviews the assessment results from each course at the end of the term. The grading matrix and lecturer's markings are essential tools of the review. Lecturers must provide a sample of the assessments and the markings across the spectrum of grades. The Committees also review prior assessment reports. The output from each committee is an end-of-term evaluation and analysis of the assessment results of courses within the programs within the departments. These are then submitted to the FCHS Assessment Committee for their review and approval. Final reports are disseminated to FCHS Director, Associate Director Academic Affairs, IE Supervisor, HoDs and relevant faculty/staff.



# Instruments/mechanisms to source information and data:

- Student grades from each assessment in each course
- Examples of moderated assessments from each course with lecturer and moderated markings
- Grading matrix
- Final Examination mapping to achievement of Course Learning Outcomes (CLOs)

#### Moderation Process

Staff members (internal moderation) form different disciplines must have a sample of assignments for the same course with marking criteria to decide the fairness and the justifications for the marking process. If there is a concern about the criteria, a discussion with the course coordinator has to be carried out in the presence of department head for decision making.

External examiners panel can provide an overall assessment for the fairness of the marking process. The panel has the right to access all course details including examinations and the course reports to provide the appropriate feedback for the institute.

Assessment moderation is applied to all assessment items including examinations and written assignments. The assessment process is as follows:

- Each course coordinator assigns a <u>moderator for each assessment item</u>. The moderator should be a lecturer who teaches the same course being moderated but is selected from a different FCHS campus.
- A <u>sample</u> comprising of 5% of the unmarked version of the students' papers (at least 5 students papers are sent to a different campus for remarking. The sample should represent a reasonable distribution of marks including scripts with top, poor, and average marks.
- The moderator <u>marks the students' papers</u> using the same marking scheme used by the first marker (initial marker) and approved by the course



coordinator, writes down his/her name with the signature on each student paper and then sends them back to the first marker (initial marker).

- The first marker (initial marker) reviews each moderated paper, compares the marks granted by the second marker to his marks, and writes a moderation report *(Appendix 9: FCHS Moderation Report)*.
- Discrepancies in moderation:
  - <u>If moderation revealed mistakes / bias</u> in the marking by the first marker (initial marker), then the first marker (initial marker) corrects the mistakes and modifies his / her marks accordingly.
  - If the discrepancy between the first marker and moderator is less than 5%, no action is taken and the original mark stands.
  - If the discrepancy is between 5% and 9%, both parties discuss the issue, review the marking process by each one, and try to agree on a final mark.
  - If no agreement is reached, the average mark of both the initial marker and the second marker is considered.
  - If the discrepancy is 10 % or more, a third marker is assigned by the course coordinator to remark the paper.
  - If any mark is changed as a result of this moderation process, then all the students' papers will be reviewed by the first marker (initial marker), and necessary changes in marks will be made.

<u>Note:</u> First marker = initial marker: Second marker = moderator; Third marker = appointed in case of discrepancy between first marker and moderator.

Marking process is preferred to be conducted anonymously (student identity is hidden) to ensure the transparency of the process. However, seen marking is expected especially in presentations, clinical and laboratory training where student has to be available for the assessment process. It is the responsibility of the course coordinator to provide student marks, marking criteria and marks feedback to the department head for further moderation and marking processes.



For final grades: A student who achieves a score of 58 or 59 for the course is automatically rounded up to 60. A student who achieves a score of 56 and 57 is allowed to reset the final exam and is given another chance to pass the course.

For the last academic semester project and research courses, a second marker has to be involved to ensure the reliability of the marking process. This is preferred to be conducted in a blinded way; the identity and the feedback from the first marker are unknown for the second marker. If there was a disagreement, a third marker has to be involved in the marking process. External examiners are preferred to ensure the quality of the student work.

# 3.1.2.2.4 Program Effectiveness Review

Review of *Program Effectiveness achievement (Appendix 10)* is a high priority for FCHS to ensure quality teaching and learning is practiced. Six indicators are currently involved to determine Program Effectiveness achievement – these indicators include IELTS Score, GPA at Program Exit, Attrition rate (%), summary Final Exam Mapping to CLOs and PLOs Achievement, Professional Licensing of Graduates as well as the Employment Rate. Conclusions in the review report are communicated to FCHS Director, Associate Director Academic Affairs and furthermore inform curriculum as part of "closing the loop". The indicators are annually reviewed to ensure that they are relevant and provide a true reflection of the effectiveness of the program.

# 3.1.2.2.5 Annual Program Report

The program review is intended to look at program goals and student outcomes and how data concerning student attainment of those outcomes are used to improve the program itself, either through changes in curriculum or delivery method, additional faculty, upgraded facilities, etc. It ensures quality and performance improvement by assessing the effectiveness of the curriculum, the teaching, and the learning. Those



compiling information and writing the reviews should consider the academic standards set and student achievement of these and the general health of the program. The *Annual Program Review Template* (*Appendix 11*) can be used to perform this activity.

The review ensures that:

- Student learning and achievement is maintained
- An evidence-based culture exists
- Organizational performance levels improve
- Teaching and learning excellence in FCHS is recognized and rewarded

The College Curriculum Committee with the assistance of the Institutional Research Supervisor and the individual Department Curriculum Committees are responsible for the Program Review process. The College Committee delegates authority to the Department Committees to conduct a review of their program.

The final product of each Program Review is a report outlining the year's successes, and areas for improvement and recommendations for that improvement. The College Curriculum Committee is responsible for ensuring that the recommendations are then implemented. Evidence should be sourced to support any program review.

In order to determine program effectiveness and opportunities for improvement, the review must include:

- Analysis of student performance particularly their achievement of learning outcomes
  - o review grades
  - o assignments
- Analysis of lecturer's performance
  - o formal observations
  - end-of-term student evaluations
- Analysis of all clinical placement components



- o site appropriateness
- o site feedback
- o preceptor appropriateness
- o preceptor feedback
- o student reflections
- Clinical Coordinator comments
- University partner feedback (where applicable)
- Industry partner feedback (where applicable)
  - Each department's and postgraduate program(s) should have an Advisory Council consists of industry partners. Use the Advisory Council to solicit feedback on the effectiveness and value of the program.
- Overall analysis of curriculum
  - o end-of-term student evaluations on course and lecturer
  - o lecturer's feedback on curriculum and instructional methodologies
  - o assessment of achievement of course and program learning outcomes
- The previous Program Review's recommendations
  - Have the recommendations been implemented? If no, why? If yes, have they been effective?

#### 3.1.2.2.6 Course Files Archiving

Course files are archived on the shared folder according to the criteria presented in *Appendix 12: Course Files Checklist*. Dr. NASIR TO ADD CHECKLIST



## 3.1.2.2.7 Surveys

Regular internal surveys of students, staff and employers are conducted in order to measure satisfaction and to identify areas in need of improvement.

Academic and support departments will carry out faculty/department-wide surveys. The results of these surveys will be reported to FCHS Director, IE Supervisor and HoDs with recommendations for improvement.

- i. Evaluation of Course (theory, clinical and lecturer) (SEC former SET and SEC)
- ii. Students' Experience
- iii. Employer Satisfaction
- iv. Learning Resource Centre (LRC)

### 3.1.2.2.8 Professional Accreditation

Professional accreditation delivers external quality assurance for FCHS's programs as it certifies that FCHS graduate meets the requirements of the approved programs and professional standards. Input from national and international authorities as well as from employers, industry and other stakeholders to program planning and review processes will help ensure the relevance of FCHS's curriculum and appropriateness of graduate competencies.



## 3.1.3. Support Services

### 3.1.3.1. Student Monitoring

FCHS places considerable importance on the ability to track and monitor students' progress and to use data to assist students in monitoring their own progress and learning.

Systems are operated by teaching staff and Academic Advisors, who play a key role in helping students in managing their performance. FCHS's management information team plays a crucial role in the collection, collation and reporting of information. The key features of the process are noted below:

- An electronic registration system is kept on the Banner System. Any student whose performance or attendance is giving cause for concern is referred to the Academic Advisor and Student Counselor. All queries and outcomes are logged by Academic Advisors in the students' personal file, and parents or employers are informed as judged appropriate according to the disciplinary procedures
- On at least two occasions in the year, information on performance, in the form
  of achieved grades, is collected, along with further information on attendance,
  effort and participation in classes. This data is entered onto FCHS's
  management information system by subject staff, with support from registry. All
  staff have access to this data base. Staff are able to examine the attendance
  and performance patterns of every student in every class on their program, and
  to generate attendance statistics for any class over any time period they wish.
  A copy of the data is given to students by their Academic Advisor.
- Issues surrounding performance are discussed at reviews, which take place twice a year. Reviews are timed to precede the distribution of formal reports.
- A list of students with an attendance of below 80% is produced weekly and is monitored by senior Lecturers



- A management review of students at risk of failure or severely underachieving is held twice a year. The Director works closely with Head of Departments, the Student Counsellor, and Academic Advisors to agree appropriate remedial actions for these students. The disciplinary procedure and study contracts are used, detailing specific targets and actions.
- Registry work closely with staff to track students who leave FCHS, and to followup and investigate retention issues.
- All staff have full access to the main student database on a read-only basis, and are encouraged to be proactive in using the information in the database to underpin aspects of curriculum and student management.

### 3.1.3.2. Student Counsellor

Clear descriptions exist which reflect the range of work and skills expected of Lecturers and Academic Advisors. Training is provided to strengthen skills available within the team, and needs are annually evaluated by the Student Counselor. Lecturers and Academic Advisors\' performance is overseen by the Heads of Department.

The Student Services Team, consisting of the Student Counselor, Academic Advisors and the Senior Officer for Academic Affairs, meets regularly to review both students' performance and its own performance as a specialist team. Performance indicators such as attendance and retention, provided by registry, are used as part of this evaluation process.

The Student Counselor works closely with FCHS and Student Liaison committee in the development of policy and procedures related to student affairs. More information on the quality assurance arrangements in this area is available in the QA manual.



## 3.1.3.3. Resource Learning Centre

Resource Learning Centre has developed its own policy and service standards against which it measures its activities and effectiveness. The effectiveness of the library is assessed as a part of the year-end course questionnaire.

## 3.1.3.4. IT Services (Computer Services)

The IT (computer services) team ensures that the IT facilities in FCHS, both on the Academic and Administrative sides, are maintained at a high standard and are improved as hardware and software develops.

### 3.1.3.5. Finances

The Financial Management of FCHS is the direct responsibility of the Director. The Director is responsible for providing the Senior Management Team with regular detailed updates on performance against budget and is responsible for bringing relevant financial issues to the Board's attention. Financial targets are set as part of the Operational Planning process and performance towards these is monitored and reported by the Director.

FCHS's budget model supports implementation of the declared strategic priorities by ensuring close alignment between resources and these priorities and identifying areas for strategic investment. The overall budget is agreed in early summer, and budget holders reviewed for the coming year. All budget holders submit a budget request to the budget controller, who negotiates and agrees the budget based on zero based budget principles. The Budget Holder then produces an expenditure plan to assist the Director to compile a Master Budget showing monthly income and expenditure. The Director is responsible for the management of all departmental expenditure.

FCHS's financial and administrative systems are subject to rigorous scrutiny by the internal auditors. A rolling audit program is agreed with the auditors to ensure full



coverage of all important and sensitive areas of FCHS's activity. The IAT's Audit Committee receives the internal audit reports and agrees appropriate action with the Senior Management Team.

The Associate Director Academic Affairs' office manages the student records system, attendance systems, performance monitoring systems, examinations and all external returns. Staffing in the Associate Director Academic Affairs' office is reviewed each year, to ensure that the service needs of FCHS can effectively be met. FCHS is committed to the development of its entire staff, as indicated in its quality principles.

### 3.1.3.6. Health and Safety

The Manager of Support Services has overall responsibility for Health and Safety in the FCHS. He chairs the Health and Safety Committee, which meets regularly as part of FCHS's committee structure.

Regular checks are undertaken with to ensure that safety standards are fully adhered to. FCHS has comprehensive Health and Safety procedures that cover the breadth of FCHS 's activity, including a Health and Safety Policy statement which is revised annually. Particular attention has been paid to Disaster Recovery procedures.

Health and safety issues are an important part of the student induction process, both from a subject and a personal Lecturer point of view. FCHS operates a no-smoking policy, and staff and students adhere to this rigidly. Health and Safety training is undertaken by all staff as part of their induction.

All visits and excursions out of FCHS involving students are approved by the Director and risk assessments are undertaken prior to approval being granted.

The overall responsibility for estates lies with the Manager of Support Services. Much of the day to day responsibility is delegated to the on-site maintenance technicians. FCHS has a rolling program of planned maintenance to ensure that the buildings and facilities remain of a good standard. A budget is also set for 'routine maintenance' to address daily wear and tear on the buildings.



### 3.1.3.7. Security

FCHS contracted a Security Company to provide 24 hour security guard services. Security cameras are sited at strategic points throughout the building and around the perimeter. Development of FCHS estate and decisions surrounding FCHS's property strategy and particular projects is the remit of the IAT head office based Facilities staff. Students and staff are issued with identity cards, which they may be asked to produce at any time. All cars parked on are checked by security guards.

#### 3.1.4. Personnel Level

## 3.1.4.1. Continuous Professional Development to Support Excellence in Educational Activities / Professional Development

High standards for effective teaching are a high institutional priority. FCHS offers faculty and staff support through a variety of services, including individual and departmental consultations on any topic related to teaching, Classroom observation, and workshops on effective teaching methods. Additionally, faculty have the opportunity to participate in conferences. Departments should document all professional development activities on a monthly basis.

### 3.1.4.2 Academic and Non-Academic Staff Performance Review

Faculty and staff performance reviews are significant annual activities to ensure staff are competent for the positions appointed which will enhance institutional effectiveness.



## 3.1.4.2.1 Academic Staff Performance Review

Maintaining and improving teaching and learning is a top priority at FCHS. The purpose of the formal performance evaluation is to correct and enhance job performance and to use the evaluation as basis for decisions on contract renewal, compensation and promotion. Teaching staff are reviewed annually in line with IAT macro-policies such as the guidelines provided in the IAT Professional Development Teaching Evaluation Process Policy and Academic Appointment Policy.

### Summary of the staff performance review process:

- Review meetings are conducted annually with the employee that will include:
  - A developmental plan agreed by the staff and line manager.
  - Agreement between the line manager and staff member about any changes in the staff member duties or assignments.
  - Line manager and employees shall establish objectives at the beginning of each performance year or upon recruitment.
- The performance of novice employees shall be evaluated in the probationary period and as required.
- The performance of each employee shall be evaluated at least once a year normally by the employee's line manager, before end of each Academic Year or annually towards the end of each year of service
- Feedback from the employee's subordinates and peers, including student feedback where relevant, shall be considered in assessing the employee's performance.
- The employee's performance evaluation, including any requirements for improvement or development, shall be reviewed with the employee preferably semi-annually. Any dispute between the Head of Program and employee regarding the outcome of the review shall be referred to the FCHS Director.



- Each lecturer will undergo an annual formal classroom assessment to evaluate teaching practices, student learning, lesson effectiveness and where necessary identification of areas for improvement or training. This is led by the Head of Department.
- All full-time teaching staff new to FCHS are observed by their Head of Department and the Director in the first half-term as part of their probationary period at FCHS. Peer observation is encouraged, both for new members and experienced staff, as a way of spreading expertise and boosting confidence to try new approaches.

HoDs of each department are responsible for ensuring that this review process is ongoing throughout the Academic Year and that each faculty is reviewed annually. The FCHS Director is responsible for ensuring each Head of Department is reviewed.

## 3.1.4.2.2 Non-Academic Staff

Non-academic staff include staff assigned to the Registrar's Office and Student Services, as well as Administrative Assistants, Librarians and the Nurse. Their ability to provide excellent support and administrative processes to the academic staff is vital to ensure the College is operating at its optimal level.

This is an ongoing review process throughout the Academic Year. The Manager of Student Services is responsible for ensuring that all Student Services staff, Registrar's Office, IT, and the Nurse are reviewed. The Associate Director Academic Affairs is responsible for reviewing the Librarians.



## 3.1.4.2.3 Instruments / mechanisms to source Information and Data

The IAT Performance Appraisal Form is used for staff evaluation. The process includes:

- Review meetings are conducted annually with the employee that will include:
  - A developmental plan agreed by the staff and line manager.
  - Agreement between the line manager and staff member about any changes in the staff member duties or assignments.
  - Line manager and employees shall establish objectives at the beginning of each performance year or upon recruitment.
- The performance of novice employees shall be evaluated in the probationary period and as required.
- The performance of each employee shall be evaluated at least once a year normally by the employee's line manager, before end of each Academic Year or annually towards the end of each year of service

Completed reviews are shared with staff and recommendations for improvement are added to the developmental plan agreed to at the beginning of the Academic Year. For those improvements not yet achieved, they should be included in the new development plan for the new Academic Year.

The IE Unit oversee implementation of these activities which focus on various data gathering and analysis activities to provide information to support decision-making and ensure quality improvement of processes.

## 3.2. Closing the Loop

Closing the loop is the last phase in the IE cycle and involves making decisions about how to respond to shortcomings that have been identified through assessment data.



Moreover, it is a dynamic process that involves shared feedback and collaborative reflection from all functions. This begins first with making all units within institution aware of assessment findings and then organizing discussions around how to make improvements. Disseminating assessment findings is the first step. This is done through Annual Report, Institutional Effectiveness Report and Annual Fact Book. Once this has been accomplished then respective function or units must decide what changes are needed and how they are going to make them. When making plans for modifications, every function should consider that changes should be manageable in terms of available time and resources. It is important not to make too many changes at once because it will be difficult to manage. Finally, it is important to remember that improvements are generally gradual and cumulative in nature rather than all of a sudden, so it is advisable to have review mechanism in place to ensure that improvement plans are implemented as planned.

This step is typically where the assessment effort at times gets derailed. If the analysis is not compelling and sufficiently granular, teams involved in assessments are often unable to reach consensus on which actions might be indicated by the data. Unable to even agree on a set of possible actions, no action is taken and the program fails to "close the loop." To be successful at this step, the assessment team needs to present the data to relevant stakeholders who can take action in a form that is sufficiently granular so that a set of actions can be developed.

To ensure success of this step, the review of IDOP should include two sections aside from analysis of goal and objective progress.

- a) Progress Review of previous recommendations: The previous IDOP review's recommendations should be analysed using the documented information and data on the progress. Have the recommendations been implemented? If no, why? If yes, have they been effective?
- b) **Recommendations section:** Recommendations for improvement are an essential component of a review. It is then part of the Responsible Person's role to ensure implementation of those recommendations. Action plans and



persons responsible for those action plans should be established. Progress is to be documented.

### Assessment Activities or End of Year Review:

At the end of each Academic Year, the respective department should review the progress and achievement of objectives described in the IDOP and Strategic Action Plan. The annual review of IDOP results in departmental annual report. HoDs should share this report with FCHS Director, Associate Director Academic Affairs and IE Supervisor. The IE Supervisor review all FCHS core documents and annually published the FCHS Fact book for the completed academic year based on the Departmental Annual Report and other necessary data like enrolment, graduates etc. collected from various other departments and reviews the performance against the ACTVET/IAT KPIs and the College's own KPIs along with FCHS, Director.

### 4. IE Internal Audit

The IE unit is responsible to monitor IE Activities and evaluate achievement of these activities ensure that *Closing the Loop* is achieved on annual basis (refer to *Appendix 3 - IE Activities' Monitoring and Evaluation Calendar*).

## 5. Sharing Evidence of Institutional Effectiveness

Institutional and program-level goals are communicated to the campus community and public via publicity materials and web pages. Assessment and their use are discussed within departments and shared with their respective heads. They are also shared with the FCHS Director's Executive Committee (DEC) through Annual Report. Relevant portions of the data are made available to accreditation bodies. More specific assessment results and results of studies of institutional effectiveness are shared with



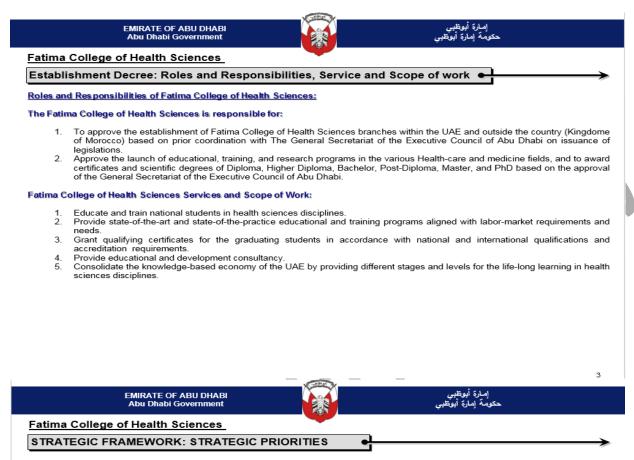
general off-campus audiences at the discretion of the department/unit producing them and/or the Director. Such information may be used in publicity materials, press releases and web pages.

## 6. Sharing Evidence of Institutional Effectiveness

This process of IE will establish priorities within a more interconnected practice of planning, resource allocation, and budgeting. Central to this improvement will be the College heightened commitment to improve the teaching/learning environment and the quality of services to our students, staff, and faculty.

This will also foster a culture of assessment across campus and instill the importance of using assessment outcomes in all levels of planning and budgeting. The outcome of assessment will enable FCHS to come up with annual goals in line with the strategic plan, including the creation and adoption of campus-wide learning goals, the utilization of assessment data at all levels and to encourage the sharing of data-driven decision making as best practices.





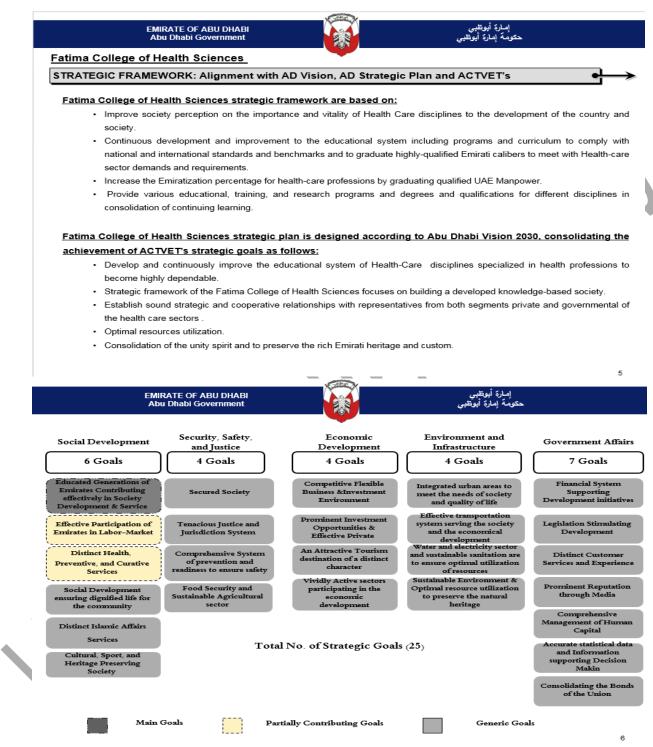
Fatima college of health sciences was established in 2006. Currently, Fatima College of Health Sciences has four campuses that are distributed on Abu Dhabi Emirate and Ajman. The overwhelming objective of Fatima College of Health sciences is to educate and graduate highly-qualified Emiratis in health-care profession. Fatima College of Health Sciences provides students with nationally accredited and internationally recognized health-care programs at various levels. Hence, Fatima College of Health sciences focuses on enriching the health-care sector with high Emirati caliber that could contribute effectively to the development of the country and the service of the society.

Fatima College of Health Sciences fosters the continuing education of national Emirati students by providing them with the opportunity to continuing learning and education throughout the various scientific degrees in multiple health sciences disciplines starting from Diploma, Higher Diploma, Bachelor, Post-Diploma, Master, and PhD. The unique educational and training system of Fatima College of Health Sciences provides the opportunity for Emirati students to chose studying in one of the undergraduate programs such as: nursing, pharmacy, physiotherapy, radiology, and paramedics. Furthermore, Fatima College of Health Sciences the opportunity for Emirati education for post-graduate level in Health sciences in two disciplines: Master Degree in Nursing, and Post-Diploma in clinical and Diabetes studies.

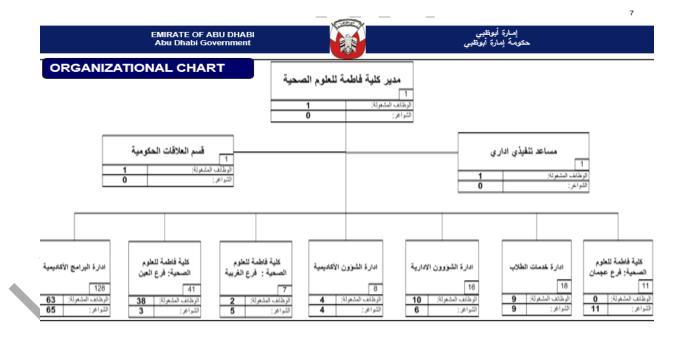
The distribution of all academies' campuses was made to serve both geographical nature and demographical variables of the country. This distribution was made to provide an equal educational opportunities for young Emirates and to serve the convenience of recruiting more Emirati to the join Health-Care education stream. The vision and mission of the Fatima College of Health Sciences is centered on establishing and calibrating its educational system to conform to national and international standards and benchmarks and to consolidate the country's knowledge-based economy and to serve the UAE Society by graduating generations of Emirati health-care professionals.

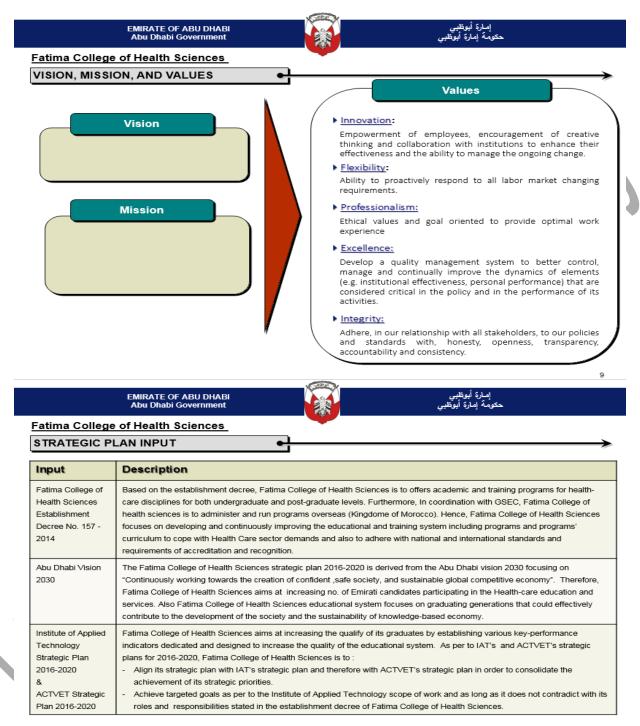
Fatima College of Health Sciences has the following strategic priorities:

- 1) Increase the number of Emirati students enrolled in Health -Care disciplines throughout its campuses.
- 2) Align curriculum and programs to meet labor market of Health-Care sector needs and requirements.
- 3) Increase the Emiratization ratio in the Fatima College of Health Sciences.
- 4) Reduce the overhead operational cost and the cost per student.



امارة ايوتليني حكومة إمارة أيوتليني atima College of Health Sciences TRATEGIC GOALS: Alignment with AD Vision, AD Strategic Plan and ACTVET's					
Fatima College o Strategic Goal	of Health Sciences Program	Contribution Descri Coordinating Authority	ption Fatima College of Health Sciences Contribution		
Educated Generations of Emirates Contributing effectively in Society Development & Service	Developing Alternative – Non-traditional Educational Streams (Health Sciences Disciplines)	Abu Dhabi Centre for Technical and Vocational Education and Training	<ul> <li>To educate and train national candidates in Health Sciences disciplines specialized in Health-Care is considered as one of the main objectives for which the Fatima College of Health Sciences was first established for.</li> <li>Hence, developing and continuously improving the Health-Care education an training system to cope with evolutional trends in labor-market and to adhere with national and international accreditation and recognition standards and requirements is considered as one of the college's vital operations. Therefore the relationship that bonds the Fatima College of Health Sciences with this strategic program/goal of the Emirate of Abu Dhabi can be described as operational as a partial part of the comprehensive coordination plan of the Ab Dhabi Center for Technical and Vocational Education and Training.</li> <li>The Fatima College of Health Sciences continues to achieve the following aspects of this strategic program.</li> <li>Increase number of qualified national manpower working in Health-Care profession.</li> <li>Continuously promote for Health Care professions as a successful and promising career-path for national manpower.</li> <li>Align the educational system including programs and programs' curriculur to cope with evolutionary trends in health-care sectors and labor market demands.</li> <li>Encourage and Increase number of opportunities for national manpower to join the college academic staff and crew.</li> </ul>		





STRATEGIC PI	LAN INPUT
Input	Description
Strategic Analysis of the Fatima College of Health Sciences (SWOT)	Fatima College of Health Sciences has conducted a strategic analysis study defining aspects in which Fatima College of Health Sciences is considered strong and competitive, aspects in which Fatima College of Health Sciences requires further improvements are also identified. Opportunities to serve Fatima College of Health Sciences scope of work is identified in this study. Nevertheless, aspects in which Fatima College of Health Sciences identifies as threats and might hinder its progress are taken into consideration when designing Fatima College of Health Sciences strategic plan. The workshop included all strategic partners, management and senior personnel of the college and its academies.
TAWTEEN Council Strategic Plan	Complete description in order to support the nationalization/ Emiratization of Fatima College of Health Sciences and its academies post and also to qualify Fatima College of Health Sciences graduates to meet with labor-market requirements and demands.
Workshops, Series of Meetings, and Strategic partners' plans.	<ul> <li>Though series of meetings, workshops, and discussion, strategic partners input to the strategic plan is described below:</li> <li>Strategic partners' current and future needs and expectations from Fatima College of Health Sciences and its programs.</li> <li>Collaboration opportunities that focuses on increasing the quality of Fatima College of Health Sciences educational system and graduates and also to reduce the overhead cost.</li> <li>Define the joint development projects between the Fatima College of Health Sciences and its' strategic partners.</li> </ul>





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Fatima College of Health Sciences

STRATEGIC PARNTERS

Strategic Partner	Fatima College of Health Sciences requirements from Strategic Partner	Strategic Partner requirements from the Institute of Applied Technology	Type of the Relationship
Institute of Applied Technology	Strategic and administrative support, that is, strategic and administrative framework is developed between the two entities embracing requirements to increase the quality of Health-care education and training and the quality of operational services.	Fatima College of Health Sciences is to execute strategic policies as long as it does not contradict with the operational scope of the college. Furthermore, Fatima College of Health Sciences is to provide Institute of Applied Technology directorate with necessary data and information and to commit to the standards identified.	administrative
Health Care Sector	Identify the needed specializations in Health Care disciplines in addition to providing the required number of students, and students incentives.	Commit to national and international standards while educating and training students . Prepare and motivate students to effectively participate in the work-environment and accommodating its settings. Provide necessary data and information as agreed upon.	Collaborative

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إمارة أيوظيي حكومة إمارة أيوظيي

	EMIRATE OF ABU DHABI Abu Dhabi Government		إماره الوطبي حكومة إمارة أيوظبي	
<sup>-</sup> atima Coll	lege of Health Sciences			
STRATEGI	C PARNTERS •			
Strategic Partner	Fatima College of Health Scie requirements from Strategic Pa		ategic Partner requirements from the Institute of Applied Technology	Type of th Relationsh
TAWTEEN Council	Comprehensive description for Tawteen str and policies. Furthermore, Tawteen council contributes to the educational process by pr incentives for national students and also to labor-market demands and requirements.	roviding with confirm addit	na College of Health Sciences is to provide ational and training programs that are aligned labor-market demands and requirements. In ion, the college is to provide the Tawteen cil with necessary information and data.	Consistency
Ministry of Hig Education and Scientific Research		e ministry state d licen	na College of Health Sciences commits to d procedure and approach for academic sing and programs accreditations. Also to ide the ministry with required information and	Consistency / Regulatory
				1:
	EMIRATE OF ABU DHABI Abu Dhabi Government		إمــارة أبوظبى حكومة إمارة أبوظبي	1
Fatima Coll				1
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	Abu Dhabi Government			1
	Abu Dhabi Government lege of Health Sciences C ANALYSIS	ety awareness of lopment of the	حكومة إمارة أبوظبي	nanpower – ( Lac academia, Iow esearch studies egic planning of
STRATEG	Abu Dhabi Government  Iege of Health Sciences C ANALYSIS   Strength  National initiatives encouraging national studen Health-Care disciplines by increasing the socie how vital these disciplines are vital to the devel country. Comprehensive and well integrated systems su	ty awareness of lopment of the upporting the to exchange stakeholders. strategic partners	حکومة إمارة أبوتلبي Weaknesses - Difficulties in recruiting qualified national r of qualified national manpower to work in incentives). - Absence of accurate database and field-re supporting the improvement and the strat	nanpower – ( Lac academia, low esearch studies egic planning of mies. e capabilities to
STRATEGI Concerned Sector	Abu Dhabi Government  Iege of Health Sciences CANALYSIS  CANALYSIS  National initiatives encouraging national studer Health-Care disciplines by increasing the socie how vital these disciplines are vital to the devel country.  Comprehensive and well integrated systems su continuous improvement scheme.  Continuous and open communication channels expertise and data with health-care sector key- High-level of collaboration between FCHS and	ty awareness of lopment of the apporting the is to exchange stakeholders. strategic partners sectors . graduating high- ind suggestions.	كويدة إمارة أبرتقبي     Weaknesses     Oifficulties in recruiting qualified national r of qualified national manpower to work in incentives).     Absence of accurate database and field-re supporting the improvement and the stratk Health Care education and training acade     Some strategic partners does not have the accommodate students in their field trainin - Increased working load and working overt administrative and academic crew of Fatir Health Sciences.	nanpower – ( Lac academia, low esearch studies egic planning of mies. e capabilities to ng course. ime for both na College of

	EMIRATE OF ABU DHABI Abu Dhabi Government	إمارة أبوتلبي حكومة إمارة أبوتلبي
	C ANALYSIS	
SIRAIEGI		
	Opportunities	Threats
Concerned Sector	<ul> <li>Evolutionary growth on health-care sector, hence, increased employment and sponsorship opportunities for Fatima College of Health Sciences' graduates.</li> </ul>	Poor community awareness of the importance of Health Care disciplines and professions disciplines to the development of the country.     Continuous and unstable changes in labor-market job-skills related requirements.     Lack of Qualified national-manpower to work in academia.
Partners	Exchange of expertise and information.     Collaborative projects are successfully executed.     Attract more representatives to support students with     scholarships and training programs.     Continuous support from IAT.     Outsource some of the business processes for increased quality     and reduced overhead cost.	<ul> <li>Some strategic partners from the concerned sectors has gender specific scholarship criteria.</li> </ul>
Services Provided	<ul> <li>Optimal resources utilization through re-qualifying failed students.</li> <li>Vary in financial sources to increase FCHS income through the increased number of licensed training programs and centers.</li> </ul>	<ul> <li>Strong competition from opponent organizations recruiting national students.</li> </ul>
Key Enablers	Simplify business processes procedures and document control process for the continuous internal improvement.     Launch awards and prizes to encourage employees for innovation and dedication.     To become applied research and center of innovation for Health Care disciplines.	- Recreation services requires further investments.

EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظبي حكومة إمارة أبوظبي	
Fatima College of Health Sciences			
STRATEGIC PLAN 2016 - 2020	•		

#### List of Priorities

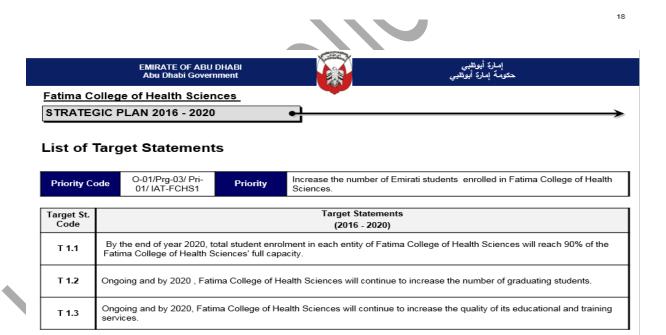
Priority Code	Priority	Priority Category	Outcome(s) (Only for Output Priorities)
O-01/Prg-03/ Pri- 01/ IAT-FCHS1	Increase the number of Emirati students enrolled in Fatima College of Health Sciences	Human Development	<ul> <li>Annual increment in enrolled students.</li> <li>Annual increment in Fatima College of Health Sciences products.</li> <li>Increased number of training programs and training options.</li> </ul>
O-01/Prg-03/ IAT/ Pri-02/ IAT- FCHS2	Align the curriculum and proposed programs with Health Sector demands and requirements.	Service Delivery	<ul> <li>Health Care Educational system supply is aligned with Labour Market demand.</li> </ul>
O-01/Prg-03/ IAT/ Pri-03/ IAT- FCHS3	Increase the number of Emirati employees working in administrative and academic staff of Fatima College of Health Sciences	Human Development	<ul> <li>Increased number of qualified Emirati Health Care experts, and future teachers/instructors.</li> <li>Increased number of qualified Emirati participating in administrative staff of Fatima College of Health Sciences.</li> </ul>
O-01/Prg-03/ IAT/ Pri-04/ IAT- FCHS4	Reduce Operational cost and Cost Per student and increase Fatima College of Health Sciences readiness for business continuity.	Human Development, Process & Technology	<ul> <li>Reduced Cost Per Student (CPS)</li> <li>Reduced overhead operational cost (time and money) and utilize resources in an environment-friendly way.</li> <li>Risk Management and Business Continuity Plan.</li> </ul>

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#### List of Target Statements

-01/Prg-03/ Pri- )1/ IAT-FCHS1				
Support continu	uous learning and	to build a sustainable knowledge-based economy.		
	Increase no. of national students enrolled in Health Care disciplines throughout the Fatima College of Health Sciences branches/campuses.			
	Fatima College of Health Sciences (FCHS – All Campuses): Total No. of national students enrolled for the academic year ( 2015-2016 / Q1) is 1031 student, and 766 student for the academic year of 2014-2015.			
The underlying	The underlying challenge is to attract national students to enroll in Health-Care disciplines.			
	Graduating well educated generations capable of carrying out their responsibilities toward the country and the society and to effectively work in technical, vocational, and health care professions.			
	Promote for Fatima College of Health Sciences Health-Care programs and participate in promotion campaigns to increase the community awareness and perception on these disciplines vitality to the development of the society.			
	11/ IAT-FCHS1 Support contin Increase no. of branches/camp Fatima Colleg year ( 2015-20 The underlying Graduating we to effectively w Promote for Fa	Priority       Support continuous learning and       Increase no. of national students       branches/campuses.       Fatima College of Health Scien       year (2015-2016 / Q1) is 1031 st       The underlying challenge is to att       Graduating well educated genera       to effectively work in technical, vol       Promote for Fatima College of Health Scien		



QA : Quality Assurance . - Fatima College of Health Sciences

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Fatima College of Health Sciences			
STRATEGIC PLAN 2016 - 2020	•		$\rightarrow$

#### List of Key Performance Indicators (KPI)

Target Code	T1.1	Target Statement	By the end of year 2020, total student enrolment in each entity of Fatima College of Health Sciences will reach 90% of the Fatima College of Health Sciences' full capacity.
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KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency
0-01/KPI - 20/ACTVET	Percentage of national students enrolled in scientific, Health Care, technical and/or vocational disciplines.	Total number of Emiratis enrolled in scientific majors (engineering, medicine and health sciences, information technology, and science) in the year / Total Emiratis enrolled in the same year * 100%.	Annually – academic year
P1-T1.1/ KPI 1.1.4	Number of national students enrolled in Health-care disciplines in post-secondary academies	Total number of national students enrolled in Health-care disciplines compared to Fatima College of Health Sciences campuses' capacity.	Annual – Based on Academic Year



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Fatima College of Health Sciences			
STRATEGIC PLAN 2016 - 2020	•		$\rightarrow$

#### List of Key Performance Indicators (KPI)

KPI Co	ode	Des cription	Source	Pattern	KPI Type	Baseline 2014	2016	2017	2018	2019	2020	
0-01/KF 20/ACT\		Percentage of students enrolled in scientific technical and vocational disciplines.	Student Services	Increasing	Strategic	%100	%100	%100	%100	%100	%100	
P1-T1.1/		Number of national students enrolled in Health-care disciplines in Fatima	Student			Strategic	%35	%52	%58	%65	%71	%77
1.1.4		College of Health Sciences	Services			766	1140	1280	1420	1560	1700	

KPI:P1-T1.1/KPI 1.1.4 - 2015 measurement is 1031 student.

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KPI Code         Key Performance Indicator (	t Ongoing and by 2020, Fatima College of Health Sciences will continumber of graduating students.	
	Calculation Method	Evaluation Frequency
O-01/Prg- 3/ACTVET/Pri- 1/OKPI - 5/ACTVET No. of graduating national students from Fatima Colle of Health Sciences	No. of graduates from Fatima College of Health Science from various health-care disciplines from both undergraduate and post-graduate levels for branches of emirate of Abu Dhabi and the Northern Emirate	Annually – academic year
O-01/KPI - 21/ACTVET Percentage of graduating national students from the identified scientific disciplin	(No. of national graduates from scientific disciplines / Total No. of national graduates of the same year.) *100%	Annually – academic year
AC/P1-2 AC/P1-2 HAAD gualifying exam.		Annually – Academic year

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Fatima College of Health Sciences         STRATEGIC PLAN 2016 - 2020         List of Key Performance Indicators (KPI)												
KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2015	2017	2018	2019	2020		
O-01/Prg- 3/ACTVET/P ri-1/OKPI - 5/ACTVET	No. of graduating national students from Fatima College of Health Sciences	Student Services	Increasing	Strategic	8	209	338	317	357	423		
0-01/KPI - 21/ACTVET	Percentage of graduating national students from the identified scientific disciplines.	Student Services	Increasing	Strategic	100%	100%	100%	100%	100%	100%		
AC/P1-2	FCHS - QA	Increasing	Strategic	ND	50%	60%	70%	80%	90%			

\*This KPI measurement/ projection includes Fatima college of health sciences campuses in both Abu Dhabi Emirate and Northern Emirate.

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EMIRATE OF ABU DHABI Abu Dhabi Government	إمارة أبوظيي حكومة إمارة أبوظيي	
Fatima College of Health Sciences		

STRATEGIC PLAN 2016 - 2020

#### List of Key Performance Indicators (KPI)

 Target Code
 T1.3
 Target Statement
 Ongoing and by 2020, Fatima College of Health Sciences will continue to increase the quality of its educational and training services.

KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency	
P1-T1.3/ KPI 1.3.1	Students' and trainees' satisfaction rate on the quality of Fatima College of Health Sciences educational and training services.	Students and trainees satisfaction survey.	Annually	
O-01/Prg- 3/ACTVET/P ri-1/OKPI - 7/ACTVET	Guardians and Parents acceptance rate on Health-Care disciplines as future career-path for their youngsters.	Parents and Guardians Satisfaction Survey	Annually	

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Fatima College of Health Sciences         STRATEGIC PLAN 2016 - 2020         List of Key Performance Indicators (KPI)											
KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2015	2017	2018	2019	2020	
P1-T1.3/ KPI 1.3.1	Students' and trainees' satisfaction rate on the quality of Fatima College of Health Sciences educational and training services.	QA	Increasing	Strategic	75%	76%	77%	78%	79%	80%	
O-01/Prg- 3/ACTVET/P ri-1/OKPI - 7/ACTVET	Guardians and Parents acceptance rate on Health-Care disciplines as future career-path for their youngsters.	QA	Increasing	Strategic	ND	%5+	%5+	%5+	%5+	%5+	

	///		25
EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظبي حكومة إمارة أبوظبي	
Fatima College of Health Sciences			
STRATEGIC PLAN 2016 - 2020	•		$\rightarrow$

#### List of Target Statements

	1/Prg-03/ IAT/ 2/ IAT-FCHS2	Priority	Align the curriculum and proposed programs with Health Sector demands and requirements.				
Basic Information	Align curriculur professional sk		accommodate Health-Sector quantitative demands, qualifications, and required				
Current Status:			culum are designed in collaboration with designated Health Care representatives and also to accommodate Health Sector qualification requirements and quantitative demands.				
Challenges	The underlying curriculum.	The underlying challenge is meet various conflicting demands and qualification requirements for a program and its curriculum.					
Contribution to Abu Dhabi Strategic Plan			tions capable of carrying out their responsibilities towards the development of the country work in health care sector.				
Strategic Framework		Increase level of collaboration between Fatima College of Health Sciences and Health Care Sector representatives and to expedite the effort for attracting health care sectors stakeholders to be a part of program curriculum design and review efforts.					

	Abu Dhabi Gover	nment	حكومة إمارة أبوطبي					
atima C	ollege of Health Scier	nces						
STRATE	GIC PLAN 2016 - 2020	1	•					
ist of	Target Statement	s						
Priority C	ode O-01/Prg-03/ IAT/ Pri-02/ IAT-FCHS2	Priority	Align the curriculum and proposed programs with Health Sector demands and requirements.					
Target St.			Target Statements					
Code			(2016 - 2020)					
T 2.1	the Commission of Acader	nic Accreditation	Ith Sciences educational and training programs will be complying by 100% with (CAA) accreditation standards' and will adhere to the national and/or ments for training and qualifying programs.					
T 2.2		arious key-stake	015/2016, Fatima College of Health Sciences will continue to establish additional holders from health-care sectors to work towards fulfill ng Health Care sector					
	By the beginning of the academic year of 2015/2016, Fatima College of Health Sciences will continue to increase number of professional development events and social extracurricular activities.							

EMIRATE OF ABU DHABI Abu Dhabi Government	إمـارة أبوتلبي حكومة إمارة أبوتلبي	
Fatima College of Health Sciences		
STRATEGIC PLAN 2016 - 2020		$\rightarrow$

#### List of Key Performance Indicators (KPI)

Target Code	T 2.1	By the end of 2020, Fatima College of Health Sciences educational and training programs will be complying by 100% with the Commission of Academic Accreditation (CAA) accreditation standards' and will adhere to the national and international qualification/certification requirements.

KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency		
P2-T2.2/ KPI 2.2.2	Percentage of training programs aligned with framework of national qualification authority.	Percentage (Census Data): (No. of training programs aligned with National Qualification Authority framework / Total No. of training programs) * 100%.	Annually		
P1-T1.2/ KPI 1.2.1	No. of programs that are of level 6 and 7 according to the classification of National qualification authority <b>and</b> has course articulation agreement.	the classification of National qualification authority and Percentage (Census Data). (No. of programs with			
AC/P1	Percentage of accredited post-secondary (Undergraduate & Post-graduate) programs by the Commission of Academic Accreditation – Ministry of Higher Education and Scientific Research	A=(B/C)*100% ; A: Percentage of CAA accredited programs. B= No. of CAA accredited programs. C= Total No. of programs.	Annually		
P1-T1.2/ KPI 1.2.2	Percentage of nationally and/or internationally recognized and/or licensed training/ qualifying programs provided by Fatima College of Health Sciences.	Census Data: No. of training and qualifying programs launched. Percentage: A=(B/C)*100%; A: Percentage of CAA accredited programs. B= No. of CAA accredited programs. C= Total No. of programs.	Annually		
P2-T2.2/ KPI 2.2.1	Percentage of Fatima College of Health Sciences academic programs that includes field-training as a part of its curriculum.	Percentage: : A=(B/C)*100% ; A: Percentage academic programs with field-training. B= academic programs with field training. C= Total No. of programs.	Annually		

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STRAT	EMIRATE OF ABU DHABI Abu Dhabi Government College of Health Sciences TEGIC PLAN 2016 - 2020 f Key Performance Indic	• ators	(KPI)			يُوطّيي اردَ أيوطّ <i>يي</i>	إمارة أ حكومة إما			<b>→</b>	
KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2016	2017	2018	2019	2020	
P2-T2.2/ KPI 2.2.2	Percentage of training programs aligned with framework of national qualification authority.	QA	Increasing	Strategic	ND	80%	85%	90%	95%	100%	
P1-T1.2/ KPI 1.2.1	No. of programs that are of level 6 and 7 according to the classification of National qualification authority and has course articulation agreement.	QA	Increasing	Strategic	FCHS: 100%	100%	100%	100%	100%	100%	
AC/P1	Percentage of accredited post-secondary (Undergraduate & Post-graduate) programs by the Commission of Academic Accreditation – Ministry of Higher Education and Scientific Research	QA	Increasing	Strategic	Strategic FCHS: 70% 90% 100% 100%		100%	100%			
P1-T1.2/	Percentage of nationally and/or internationally recognized and/or				Percent: ND	100%	100%	100%	100%	100%	
KPI 1.2.2	licensed training/ qualifying programs provided by Fatima College of Health Sciences	QA	Increasing	Strategic	No.: ND	7	8	8	8	8	
P2-T2.2/ KPI 2.2.1	Percentage of Fatima College of Health Sciences academic programs that includes field-training as a part of its curriculum	QA	Increasing	Strategic	100%	100%	100%	100%	100%	100%	



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Fatima College of Health Sciences

STRATEGIC PLAN 2016 - 2020

#### List of Key Performance Indicators (KPI)

EMIRATE OF ABU DHABI Abu Dhabi Government

 
 Target Code
 T 2.2
 Target Statement
 By the beginning of the academic year of 2015/2016, The Fatima College of Health Sciences will continue to establish additional strategic relationship with various keystakeholders from health-care sectors to work towards fulfill ng Health Care sector demands and requirements.

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KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency
P2-T2.2/ KPI 2.2.3	Percentage of training programs that are established based on an agreement with one of Fatima College of Health Sciences/ IAT strategic partners	A=(B/C)*100%; B: No. training programs provided/sponsored by IAT strategic partner(s). C:Total No. of Training programs.	Annually
P2-T2.2/ KPI 2.2.5	Annual growth in newly established strategic partnerships and agreements with Key-stakeholders from various concerned sectors.	A=(B/C) *100% B: No. of newly established partnerships and agreements. C: Total No. of strategic partnerships and agreements.	Annually
P1-T1.3/ KPI 1.3.2	Percentage of students covered by external scholarship	Percentage (Census Data) : (B/C)*100% B: No. of sponsored students C: total no. of students	Annually

atima Col	A	MIRATE OF ABU DHAB bu Dhabi Government Health Sciences		إمارة الوظبي حكومة إمارة أبوظبي		
		2016 - 2020	•			
ist of K	ey Per	formance Inc	licators	(KPI)		
Target Code	rget Code T 2.2 Target Statement By the beginning of the academic year of 2015/2016, The Fatima College of Health Sciences will continue to establish additional strategic relationship with various key- stakeholders from health-care sectors to work towards fulfill ng Health Care sector demands and requirements.					
KPI Code	Ke	ey Performance Indicator	(KPI)	Calculation Method	Evaluation Frequency	
P2-T2.1/ KPI 2.1.1 Percentage of Fatima College of Health Sciences graduates who have secured a job or continued their education			A=((B+C)/D)*100% B: No. of FCHS Graduates who have secured a job. C: No. of FCHS Graduates who have continue their education. D: Total No. of FCHS Graduates for a given year.	Annually		
P2-T2.1/ KPI 2.1.2 Employers satisfaction rate on the level professionalism of Fatima College of Health Sciences graduates/prospect employees.		e of Health	Employer satisfaction survey.	Annually		
P2-T2.4/ KPI 2.4.2	2.4/ KPI Annual growth in the mount of research and			A= (( B-C)/C) *100% B: Amount of grants provided this year	Annually	

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إمارة أيوظيي حكومة إمارة أيوظيي

EMIRATE OF ABU DHABI Abu Dhabi Government

Fatima College of Health Sciences

STRATEGIC PLAN 2016 - 2020

### List of Key Performance Indicators (KPI)

KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2016	2017	2018	2019	2020		
P2-T2.2/ KPI 2.2.3	Percentage of training programs that are established based on an agreement with one of Fatima College of Health Sciences/ IAT strategic partners	IL&P	Increasing	Strategic	ND	%90	%95	%100	%100	%100		
P2-T2.2/ KPI 2.2.5	Annual growth in newly established strategic partnerships and agreements with Key-stakeholders from various concerned sectors.	IL&P	Increasing	Strategic	ND	5%+	5%+	5%+	5%+	5%+		
P1-T1.3/		Percentage of students covered by	Percentage of students covered by				10%	%15	%20	%25	%30	%35
KPI 1.3.2		IL&P	Increasing	Strategic	103 Student.	171	256	355	468	595		
P2-T2.1/ KPI 2.1.1	Percentage of Fatima College of Health Sciences graduates who have secured a job or continued their education	IL&P	Increasing	Strategic	ND	%90	%90	%95	%95	%95		
P2-T2.1/ KPI 2.1.2	Employers satisfaction rate on the level of professionalism of FCHS graduates/prospect employees.	IL&P	Increasing	Strategic	ND	5%+	5%+	5%+	5%+	5%+		
P2-T2.4/ KPI 2.4.2	Annual growth in the mount of research and graduation projects grants provided from external bodies.	IL&P	Increasing	Strategic	ND	5%+	5%+	5%+	5%+	5%+		
										32		

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EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظبي حكومة إمارة أبوظبي				
Fatima College of Health Sciences STRATEGIC PLAN 2016 - 2020		<b></b>				
List of Key Performance Indicators (KPI)						

Target Code	T 2.3	Target Statement	By the beginning of the academic year of 2015/2016, Fatima College of Health Sciences will continue to increase number of professional development events and social extracurricular activities.
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KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency	
P2-T2.4/ KPI 2.4.4	No. of national and international competitions categories Fatima College of Health Sciences student-teams will compete in.	No. of categories of the Emirate Skills competition the students are competing in.	Annually	
P2-T2.3/ KPI 2.3.3				
P2-T2.4 / KPI 2.4.3	Ratio of Fatima College of Health Sciences students participating in community services and social extracurricular activities	<ul> <li>A= (B/C)*100%,</li> <li>B: No. of Students participating in community services and social events in a given year;</li> <li>C: Total Number of students enrolled in an entity for a given year.</li> </ul>	Annually	

EMIRATE OF ABU DHABI Abu Dhabi Government		إمـاريَ أبوتليي حكومةً إمارة أبوتلبي
Fatima College of Health Sciences		
STRATEGIC PLAN 2016 - 2020	•	>

#### List of Key Performance Indicators (KPI)

KP/ Code	Description	Source	Pattern	KPI Type	Baseline 2014	2015	2017	2018	2019	2020
P2-T2.4/ KPI 2.4.4	No. of national and international competitions categories Fatima College of Health Sciences student- teams will compete in.	ACTVET / IAT-DSS	Increasing	Strategic	2015=1 category		1		1	
P2-T2.3/ KPI 2.3.3	No. of professional development events organized and/or hosted by Fatima College of Health Sciences	IAT-DSS	Increasing	Strategic	ND	5%+	5%+	5%+	5%+	5%+
P2-T2.4 / KPI 2.4.3	Ratio of Fatima College of Health Sciences students participating in community services and social extracurricular activities	IL&P	Increasing	Strategic	FCHS: 20%	%25	%30	%35	%40	%45

IL&P : Industrial Liaison and Partnership Dept. – Institute of Applied Technology Directorate. DSS: Directorate of Support Services – Institute of Applied Technology Directorate. IE: Institutional Effectiveness Dept. – Institute of Applied Technology Directorate

		IRATE OF ABU nu Dhabi Govern			إمارة أبوتلبي حكومة إمارة أبوتلبي
Fatima Colleg STRATEGIC F List of Tarc	PLAN	2016 - 2020		•	
Priority Code	0-01/	Prg-03/ IAT/ IAT-FCHS3	Priority		f Emirati employees working in administrative and na College of Health Sciences
Basic Informatio	n			stematic approach to recru lege of Health Sciences.	it qualified national manpower to work in administration post
Current Status:			anpower working in ege of Health Scie	administrative post of nces is: 70%	<ul> <li>National manpower constitutes a percentage of 2% of the academic staff of Fatima College of Health Sciences.</li> </ul>
Lack of qualified national-manpower.     National manpower avoid academic careers.     Low incentives and increased work-load and hours.     National manpower has alternative competitive options from other organizations.					
Contribution to Abu Dhabi Strategic Plan Contribution to the achievement of Abu Dhabi vision 2030.					
Strategic Framework Increase the opportunities for national manpower to join Fatima College of Health Sciences as full or part-time and also to encourage post-graduate national students to join the Fatima College of Health Sciences academic part-timers.					

EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظبي حكومة إمارة أبوظبي	
Fatima College of Health Sciences	-		
STRATEGIC PLAN 2016 - 2020	•		$\rightarrow$

#### List of Target Statements

Priority Co	ode O-01/Prg-03/ IAT/ Pri-3/ IAT-FCHS3	Priority	Increase the number of Emirati employees working in administrative and academic staff of Fatima College of Health Sciences					
Target St. Code								
T 3.1	By the end of 2020, Fatima College of Health Sciences will continue to increase the opportunities for national manpower to join their administrative and academic staff.							
T 3.2	By the end of 2020, Fatima College of Health Sciences will continue to decrease the turnover rate and to increase the professional development opportunities for national manpower employees.							

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EMIRATE OF ABU DHABI Abu Dhabi Government		إمـارة أيوتلبي حكومة إمارة أيوتلبي	
Fatima College of Health Sciences STRATEGIC PLAN 2016 - 2020			
List of Key Performance Indicato	ors (KPI)		

Target Code	T 3.1	Target Statement	By the end of 2020, Fatima College of Health Sciences will continue to increase the opportunities for national manpower to join their administrative and academic staff.
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KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency
P3	Emiratization ratio for Fatima College of Health Sciences	Ratio of National-manpower in administrative post.     Number of Emirati Admin Employees / Total number of     Admin Employees in the same year*100 %     Ratio of National-manpower filling academic post.     Number of Emirati Teachers (faculty) in FCHS/ Total     number of teachers (faculty) in FCHS of the same year *     100%	Annually

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EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظيي حكومة إمارة أبوظيي	
Fatima College of Health Sciences			
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#### List of Key Performance Indicators (KPI)

KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2016	2017	2018	2019	2020
P3	Emiratization rate for Fatima College of Health	IAT-DSS	Increasing Strategic		Academic National- Manpower: 2%	%2	%4	%6	%8	%10
	Sciences	HR		sing Strategic .	Administrative National- Manpower: 69%	74%	79%	84%	89%	90%

EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظبي حكومة إمارة أبوظبي	
Fatima College of Health Sciences			
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#### List of Key Performance Indicators (KPI)

Target Code T 3.2		By the end of 2020, Fatima College of Health Sciences will continue to decrease the turnover rate and to increase the professional development opportunities for national manpower employees.
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KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency
P4-T4.3 /KPI 4.3.2	Turn-over rate	Number of IAT- system employees (Faculty & Administrative) who left during the year (for any reason such as resignation or termination)/ Total number of IAT- system employees (Faculty & Administrative) On-Board (in the payroll) of the same year.	Annually
P4-T4.3 /KPI 4.3.1	Employee satisfaction rate	Employee satisfaction survey	Annually
0-23/KPI - 05/ACTVET	Personal Professional Development Plans for national manpower.	The total number of Fatima College of Health Sciences Administrative Emirati staff who have development plans prepared for them during the year + total number of Fatima College of Health Sciences administrative Emirati staff	Annually
0-23/KPI - 06/ACTVET	National manpower who have attended a professional development course.	The total number of Fatima College of Health Sciences Emirati staff who went for training within a year (without repetition) + total number of Fatima College of Health Sciences Emirati staff.	Annually



List of Key Performance Indicators (KPI)

KPI Code	Description	Source	Pattern	КРІ Туре	Baseline 2014	2016	2017	2018	2019	2020
P4-T4.3 /KPI 4.3.2	Turn-over rate	IAT-DSS/ HR	Decreasing	Strategic	13%	12%	10%	9%	9%	9%
P4-T4.3 /KPI 4.3.1	Employee satisfaction rate	IAT-DSS/ HR	Increasing	Strategic	%66	%69	%72	%75	%78	%80
0-23/KPI - 05/ACTVET	Personal Professional Development Plans for national manpower.		Increasing	Strategic	ND	%25	%45	%65	%85	%100
0-23/KPI - 06/ACTVET	lational manpower who have ttended a professional evelopment course.		Increasing	Strategic	10%	%50	%60	%70	%80	%80

EMIRATE OF ABU DHABI Abu Dhabi Government		إمارة أبوظيي حكومة إمارة أبوظيي	
Fatima College of Health Sciences			
STRATEGIC PLAN 2016 - 2020	•		$\rightarrow$

#### List of Target Statements

Priority Code		rg-03/ IAT/ AT-FCHS4 Priority Reduce Operational cost and Cost Per student and increase Fatima College Health Sciences readiness for business continuity.						
Basic Information	ı	Reduce the o	verhead operationa	al cost and	cost per student.			
Current Status:		CPS excluding expenditure Chapter-3:         CPS excluding expenditure (Chapter 3) and the cost associated with students stipend, uniform, transportation, and electronic devices.           FCHS: 133,887         FCHS: 113,474						
Challenges		Maintain a	Maintain and improve the educational and training services' quality with reduced budget.					
Contribution to A Dhabi Strategic F		- Reduce the overhead cost on the Abu Dhabi Government.						
Strategic Framew	vork	Execute a systematic admission policies and procedures for candidates and to centralize some of logistic services. In addition, Fatima College of Health Sciences is to develop a business continuity plan for all of its business processes						

لمارة أبوظبي Abu Dhabi Government Fatima College of Health Sciences STRATEGIC PLAN 2016 - 2020

#### List of Target Statements

Priority Co	ode O-01/Prg-03/ IAT/ Pri-04/ IAT	Priority	Reduce Operational cost and Cost Per student and increase institution readiness for business continuity.				
Target St. Code							
T 4.1	By the end of 2020, Fatima College of Health Sciences will reduce the cost per student.						
T 4.2	By the end of 2020, Fatima College of Health Sciences will continue to decrease operational expenses and increase the rate of achieved revenues.						

إمارة أبوتلبي Abu Dhabi Government جكومة إمارة أبوتلبي									
	Fatima College of Health Sciences								
List of Key Performance Indicators (KPI)									
Target Code	T 4.1	Target Statement	By the end of 2020, Fatima College of Health Sciences will reduce the cost per student.						

KPI Code	Key Performance Indicator (KPI)	Calculation Method	Evaluation Frequency	
		<ul> <li>Total Cost per students excluding the expenditure cost (Chapter -3) and the IAT-directorate expenses/cost</li> </ul>		
P4-T4.1	Cost per student	<ul> <li>Total Cost per Student excluding the expenditure cost, stipend cost, transportation cost, uniform cost, and electronic devices cost., directorate expenses/cost.</li> </ul>	Annually	

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# Appendix 2 – FCHS Strategic Action Plan 2016 – 2020

			FCHS Strategic Actio (2016 - 2020)	n Plan				
Objectiv	ve 1.1: Inc	the Number of Emirati Healthc crease the number of Emirati st						Progress
(SHUKT		DNG TERM) Increase outreach programs at the schools (Emirates skills, Health and fitness, promotional visits at schools.	Student intake	<ul> <li>Registrar</li> <li>Student services</li> </ul>	Nov 2016	May 2018	<ul> <li>Records of number of students/ visited schools</li> <li>Survey</li> </ul>	40%
		Facilitate progression of national students towards completion and to decrease the % of attrition	<ul> <li>Increase in the number of national graduates and decrease student dropout rates</li> <li>Employer satisfaction rate</li> <li>No. of FCHS graduates who secured job or continues education</li> </ul>	$\mathbb{R}$	Sept 2016	July 2018	<ul> <li>Reports on admission/ attrition</li> <li>Employer satisfaction survey</li> </ul>	40%
		Increase the number of open days at the college to twice per annum	Documentation of the events	<ul> <li>Student Services Manager</li> </ul>	Aug 2017	May 2018	<ul> <li>Event calendar</li> </ul>	50%
FCHS (1)	Т1 (К1)	Increase relationship building with local schools to drive career aspirations- to make it more attractive	<ul> <li>Increase number of students in FCHS from those visited schools</li> <li>Increase presence of FCHS in school activities throughout the year</li> </ul>	<ul> <li>Student Services Manager</li> <li>HoDs</li> </ul>	Oct 2016	May 2018	Documenta tion of arrangeme nts and events	50%
		Streamlining admission criteria through articulation, fast track and direct entry		<ul> <li>FCHS Registrar</li> <li>Head of GRU</li> </ul>	Sept 2016	May 2018	<ul> <li>Policy in Student handbook</li> <li>Survey</li> </ul>	60%
		Optimize marketing and branding of FCHS	<ul> <li>Media</li> <li>Social Media</li> <li>Search engine optimization</li> <li>Website</li> </ul>	<ul> <li>Communica tion Department</li> </ul>	Sept 2017	Aug 2019	<ul> <li>Social media presence</li> <li>Updated website</li> </ul>	40%
		Market to parents and guardians health-care disciplines as acceptable career pathway	<ul> <li>Parents and guardian survey</li> </ul>	Communicati on Department	Sept 2017	Aug 2018	Survey     results	10%
		Facilitate measure for student satisfaction	<ul> <li>Student satisfaction survey</li> </ul>	FCHS Registrar	Sept 2016	July 2018	<ul> <li>Survey Results</li> </ul>	50%

<b>FCHS Strateg</b>	ic Action	Plan 2016	-2020	(continued)	)

FCHS	Target St. Code	Action Item		Responsibility	Start Date	End Date	Evidence	Progress	
Goal 1: Increase the Number of Emirati Healthcare Professional Manpower to Meet Healthcare Services Sector Demands (continued) Objective 1.2: Increase community, students and guardian satisfaction and perception of healthcare professionals as future									
	career (SHORT TERM)								
	Т1 (К)	Increase the number of open days at the college to twice per annum	Documentation of the events	<ul> <li>Students Services Manager</li> </ul>	Aug 2017	May 2018	Event     calendar	50%	
FCHS( 3)		Increase relationship building with local schools to drive career aspirations- to make it more attractive	<ul> <li>Increase number of students in FCHS from those visited schools</li> <li>Increase presence of FCHS in school activities throughout the year</li> </ul>	<ul> <li>Students Services Manager</li> <li>HoDs</li> </ul>	Oct 2016	May 2018	<ul> <li>Documentati on of arrangement s and events</li> </ul>	50%	
		Increase awareness about health science professions through FCHS presence at national events	<ul> <li>List of annual events</li> <li>Attendance documentation</li> <li>Showcase events and results on social medical and FCHS website</li> </ul>	<ul> <li>Students Services Manager</li> <li>Communica tions</li> </ul>	Sept 2016	July 2018	Reports	60%	
	ve 1.3: Im <sub>l</sub> [/ LONG T	prove community stakeholder ERM)	awareness, understandin	g and engageme	ent with	healthca	ire sector		
	Т1 (К)	Increase the number of open days at the college to twice per annum	Documentation of the events	<ul> <li>Students Services Manager</li> </ul>	Aug 2017	May 2020	<ul> <li>Event calendar</li> <li>Evidence of Annual Reports</li> </ul>	50%	
FCHS( 3)		Increase relationship building with local schools to drive career aspirations- to make it more attractive	<ul> <li>Increase number of students in FCHS from those visited schools</li> <li>Increase presence of FCHS in school activities throughout the year</li> </ul>	<ul> <li>Students Services Manager</li> <li>HoDs</li> </ul>	Oct 2016	May 2020	<ul> <li>Documentati on of arrangement s and events</li> <li>Evidence of Annual Reports</li> </ul>	50%	
		Increase awareness about health science professions through FCHS presence at national events	<ul> <li>List of annual events</li> <li>Attendance documentation</li> <li>Showcase events and results on social medical and FCHS website</li> </ul>	<ul> <li>Students Services Manager</li> <li>Communica tions</li> </ul>	Sept 2016	July 2020	Reports	60%	

FCHS Strategic Action Plan 2016-2020	(continued)
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FCHS Priority Code	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
(continu	ed) ve 1.4: Inc	the Number of Emirati Healthcarrent rease and expand FCHS progr						learning
		Increase number of CAA accredited undergraduate health science programs i.e. Psychology	<ul> <li>Number of undergraduate programs increase 20%</li> </ul>	<ul><li>Director</li><li>HoDs</li></ul>	Sept 2016	May 2020	<ul> <li>Meeting minutes</li> <li>Start of program</li> </ul>	10%
		Increase number of CAA accredited postgraduate health science programs i.e. Master Degree in Health (including a specialty i.e. Critical Care Nursing)	Number of Post graduate programs increase 20%	<ul><li>Director</li><li>HoDs</li></ul>	Sept 2016	May 2020	<ul> <li>Meeting minutes</li> <li>Start of the program</li> </ul>	10%
		Build-in articulation in all programs	All programs have articulation processes	<ul> <li>Director</li> <li>HoD</li> <li>Student Services Manager</li> </ul>	Sept 2016	May 2018	Articulation     Document	50%
FCHS (1)	T1 (K1); T2 (K1)	Ensure sponsorship for most students	<ul> <li>50% students awarded sponsorships</li> </ul>	<ul> <li>Snr Manager: Government Relations</li> <li>Student scholarship committee</li> </ul>	Janu ary 2017	July 2020	<ul> <li>Number of scholarship awarded/an num</li> </ul>	20%
		Employ career advising policies to facilitate bi-annual career advising sessions and to ensure effective pathways identification	100% students receive bi-annual career advising	<ul> <li>Academic Advisor</li> <li>Career counselor</li> </ul>	Sept 2016	July 2020	<ul> <li>Record of career advising</li> <li>Career events</li> <li>Student Survey results</li> </ul>	
		Streamline transition to practice pathways for graduates i.e. Internships	<ul> <li>Surveys reflect that more than 75% of graduates experience a smooth transition</li> </ul>	<ul> <li>HoD</li> <li>Snr Manager Government Relations</li> </ul>	Sept 2016	July 2020	<ul> <li>Record of the career advising</li> <li>First destination survey (alumni)</li> </ul>	40%
	$\bigcirc$							

FCHS Driority	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress			
(continu	Goal 1: Increase the Number of Emirati Healthcare Professional Manpower to Meet Healthcare Services Sector Demands ( <i>continued</i> ) Objective 1.5: Establish partnership with healthcare stakeholders to provide viable healthcare pathways for new and existing										
		nd graduates (MEDIUM TERM)			iouro pu	linajo					
		Build-in articulation in all programs	<ul> <li>All programs have articulation processes</li> </ul>	<ul> <li>Director</li> <li>HoD</li> <li>Student Services Manager</li> </ul>	Sept 2016	May 2018	Articulation     Document	50%			
	T1	Ensure sponsorship for most students	<ul> <li>50% students awarded sponsorships</li> </ul>	<ul> <li>Senior Manager: Government Relations Student scholarship committee</li> </ul>	Janu ary 2017	July 2018	<ul> <li>Number of scholarship awarded/ annum</li> </ul>	20%			
FCHS (1)	(K1), T2 (K1)	Employ career advising policies to facilitate bi-annual career advising sessions and to ensure effective pathways identification	100% students receive bi-annual career advising	<ul> <li>Academic Advisor</li> <li>Career counselor</li> </ul>	Sept 2016	July 2018	<ul> <li>Record of career advising</li> <li>Career events</li> <li>Student Survey results</li> </ul>				
		Streamline transition to practice pathways for graduates i.e. Internships	<ul> <li>Surveys reflect that more than 75% of graduates experience a smooth transition</li> </ul>	<ul> <li>HoD</li> <li>Snr Manager Government Relations</li> </ul>	Sept 2016	July 2018	<ul> <li>Record of the career advising sessions</li> <li>First destination survey (alumni)</li> </ul>	40%			



FCHS Deigerite	Target St. Code	Action Item		Responsibility	Start Date	End Date	Evidence	Progress
Goal 1: (continue	ed)	the Number of Emirati Healthc	•					
		International partnership with world-class healthcare educator and service providers	Program proposals	<ul> <li>Director</li> <li>HoDs</li> <li>Industry &amp; Partnership senior manager</li> </ul>	Sept 2016	July 2020	Partnership documents	30%
FCHS (1)	T1 (K1)	Increase the number of apprenticeship programs by 2020	<ul> <li>Number of apprenticeship programs</li> </ul>	<ul> <li>Director</li> <li>HoDs</li> <li>Industry &amp; Partnership senior manager</li> </ul>	Sept 2016	July 2020	<ul> <li>Partnership document</li> <li>Record of students training</li> <li>Increase number of apprentice- ship sites</li> </ul>	40%
		Establish partnerships with healthcare sectors to provide viable healthcare pathways in the governments and private sector	<ul> <li>Number of apprenticeship programs</li> <li>Provide sponsored places to at least 75% of students by 2019</li> <li>Provide job opportunities of at least 75% of students</li> <li>Create career and advisory council and alumni services office at each campus</li> </ul>	Director     HoDs     Industry &     Partnership     senior     manager	Sept 2016	July 2018	<ul> <li>First Destination survey results (alumni)</li> <li>Employment data of FCHS graduates</li> </ul>	50%
Objectiv	<mark>/e 1.7: Im</mark> j	plement a formal evaluation sy Implement a formal employer	<ul> <li>vstem to measure stakeho</li> <li>Documentation of</li> </ul>		<b>for qua</b> Sept	<mark>lity impr</mark> July	• Employer	<mark>TERM)</mark> 50%
		satisfaction survey with students while on clinical placement	survey and analysis of results	<ul> <li>Industry &amp; Partnership Manager</li> </ul>	2016	2018	survey data	
	$\sim$	Implement a formal employer satisfaction survey with students after employment	<ul> <li>Documentation of survey and analysis of results</li> </ul>	<ul> <li>Industry &amp; Partnership Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>Employer survey data</li> </ul>	20%
FCHS (1)	T2 (2)	Implement a student satisfaction survey to assess FCHS curriculum, teaching and facilities	<ul> <li>Satisfaction survey result</li> <li>Percentage of responding students</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>Student satisfaction survey data</li> </ul>	40%
		Implement an exit survey	<ul> <li>Survey results analysis</li> </ul>	● HoD	Sept 2016	July 2018	<ul> <li>Exit survey data</li> </ul>	20%
		Implement an alumni survey	<ul> <li>Survey results analysis</li> </ul>	<ul> <li>Industry &amp; Partnership Manager</li> <li>Alumni Office</li> </ul>	Sept 2016	July 2018	<ul> <li>First destination survey (Alumni)</li> </ul>	40%

FCHS	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
Goal 1: (continue)	ed)	the Number of Emirati Healthc						
FCHS (1)	T3 (K1)	Participate in regional competitions (think science, emirates skills, Khalifa fund and others	<ul> <li>Awards/Medals/recog nitions achieved in</li> <li>World Skills International competition</li> </ul>	<ul> <li>Director</li> <li>HoD</li> <li>Student Services Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>Number of awards</li> <li>Participation data</li> </ul>	75%
		Participate in international competitions (World skills)	<ul> <li>Number of awards, medals</li> </ul>	• HoDs	Sept 2016	July 2018	<ul> <li>Number of awards</li> <li>Participation data</li> </ul>	75%
License	d, and/or				omes b	y Getting	g them Accredited	,
Objectiv	<mark>/e 2.1: En</mark>	sure programs are accredited			N	5.4		0.01
		Apply for final accreditation for the bachelor of Nursing (BSc Nursing)	Document submitted to CAA	HoD     Nursing	Nov 2017	May 2018	<ul> <li>Document submitted to CAA</li> </ul>	0%
		Apply for initial accreditation for the bachelor of Nursing - Bridging program in Morocco	Document submitted     to CAA	HoD     Nursing	2015	2018	<ul> <li>Document submitted to CAA</li> <li>First response to ERT submit</li> </ul>	70%
		Apply for substantive changes for the BSc of nursing program (New Campuses)	Document submitted     to CAA	<ul> <li>HoD Nursing</li> </ul>	Aug 2016	Aug 2017	<ul> <li>Document submitted</li> <li>FCHS first response to ERT submit</li> </ul>	80%
FOUS		Apply for initial accreditation for the Master of Science in Renal Nursing (MSc in Renal Nursing)	<ul> <li>Document submitted to CAA</li> </ul>	HoD     Nursing	May 2018	Dec 2018	<ul> <li>Document submitted to CAA</li> </ul>	
FCHS (2)	T1 K1	Modify curriculum to ensure benchmarking, localization and contextualization of all academic programs	Document submitted to CAA	<ul><li>Director</li><li>HoD</li></ul>	Nov 2016	Feb 2018	<ul> <li>Initial proposal submitted and presented internally</li> <li>Revision of modified curricula in process</li> </ul>	70%
		Apply for substantive changes/curriculum modification for all Bachelor programs	<ul> <li>Document submitted to CAA</li> </ul>	<ul><li>Director</li><li>HoD</li></ul>	Nov 2017	May 2018	<ul> <li>Document submitted to CAA</li> </ul>	0%
		Apply for final accreditation for the Pharmacy Program	Document submitted to CAA	HoD     Pharmacy	Nov 2017	May 2018	<ul> <li>Document submitted to CAA</li> </ul>	0%
		Apply for final accreditation for the Physiotherapy Program	Document submitted to CAA	HoD Physio- therapy	Nov 2018	May 2019	<ul> <li>Document submitted to CAA</li> </ul>	0%

FCHS	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
License	d, and/or	the Quality of FCHS Education Certified (continued)					g them Accredited	,
Objectiv	<u>/e 2.1: En</u>	sure programs are accredited Apply for final accreditation for the Radiology and Medical Imaging Program	Document submitted to CAA	· · · · · · · · · · · · · · · · · · ·	Nov 2018	d) May 2019	Document submitted to CAA	0%
		Apply for final accreditation for the Emergency Health Program	Document submitted to CAA	<ul> <li>HoD Emergenc y Health</li> </ul>	Nov 2018	May 2019	<ul> <li>Document submitted to CAA</li> </ul>	0%
		Ensure program effectiveness	<ul> <li>Course learning outcomes - Program learning outcomes mapping</li> </ul>	• HoDs	Sept 2016	Janu ary 2017	<ul> <li>Mapping Document</li> </ul>	100%%
			Course learning outcomes - Graduate skills/QFE CORE SKILLS MAPPING	• HoDs	Sept 2016	Janu ary 2017	<ul> <li>Mapping Document</li> </ul>	100%%
FCHS (2)	T1 K1	Ensure a rigorous system of quality assurance and enhancement for course and program	<ul> <li>Program teaching, learning and assessment processes and review, e.g. moderation</li> </ul>	• HoDs IE Unit	Sept 2016	Aug 2018	<ul> <li>Moderation Reports</li> <li>QA policies in manual</li> <li>Assessment and curriculum committee minutes</li> </ul>	50%
		Recruit and retain high- quality discipline-specific teaching staff	<ul> <li>Qualified staff in accordance department requirements</li> <li>Terminal degree qualified staff in field of teaching</li> </ul>	<ul> <li>Director</li> <li>Human Resources</li> <li>HoDs</li> </ul>	Sept 2016	Aug 2018	<ul> <li>Records of qualifications of existing and newly recruited staff</li> <li>Increase PhD qualified staff %</li> </ul>	80%
		Ensure staff progression and development	Attendance to professional development events	HoDs     Director	Sept 2016	Aug 2018	<ul> <li>Records of Professional development attendance</li> </ul>	70%
		Engage in a rigors system of peer-review and self- evaluation in instructional activities	<ul> <li>Peer observation reports</li> <li>Self-evaluation annual report</li> </ul>	<ul> <li>HoDs Staff</li> </ul>	Sept 2016	Aug 2018	<ul> <li>Reports</li> </ul>	
FCHS (2)	T2 K1	Conduct Curriculum/QFE mapping for each course of each academic program	<ul> <li>Matrix mapping in Curriculum document Mapping in the course syllabus (Course Guide)</li> <li>Appendix to department annual report</li> </ul>	<ul><li>Director</li><li>HoDs</li></ul>	Sept 2016	July 2017	<ul> <li>Hard copy present in Program Curriculum files</li> <li>Soft copy on FCHS shared folder</li> </ul>	100%

FCHS Priority Code	Target St. Code	Action Plan 2016-20		Responsibility	Start Date	End Date	Evidence	Progress
		the Quality of FCHS Educatior	al Services and Academic	c Programs Outo	omes b	y Getting	them Accredited	,
		Certified (continued)		(0110.07.75.014)				
Objectiv		sure compliance of all program All delivered programs are mapped to QFE	<ul> <li>Matrix mapping in Curriculum document Mapping in the course syllabus (Course Guide) Appendix to department annual report</li> </ul>	Oirector/Ho     Ds all     academic     programs	Sept 2016	July 2017	<ul> <li>Hard copy present in Program Curriculum files</li> <li>Soft copy on FCHS shared folder</li> </ul>	100%
		All New Programs, including MSc in Renal Nursing, will be mapped to QFE	<ul> <li>Matrix mapping in Curriculum document Mapping in the course syllabus (Course Guide)</li> <li>Appendix to Dept. annual report</li> </ul>	Director/Ho     Ds all     academic     programs	Sept 2016	July 2018	<ul> <li>Hard copy in Program Curriculum files</li> <li>Soft copy in FCHS shared folder</li> </ul>	25%
FCHS (2)	T2K1	Assessment strategies are aligned with the mapping of the current courses	<ul> <li>Matrix mapping in Curriculum document Mapping in the course syllabus (Course Guide)</li> <li>Appendix to department annual report</li> </ul>	<ul> <li>Director/Ho Ds all academic programs</li> </ul>	Sept 2016	July 2017	<ul> <li>Hard copy present in Program Curriculum files</li> <li>Soft copy on FCHS shared folder</li> </ul>	100%
		All courses submitted to departmental curriculum committee for approval before course delivery	<ul> <li>Document copies in Management</li> <li>Emails</li> </ul>	<ul> <li>HoD</li> <li>Dept. Chair of curriculum committee</li> </ul>	Sept 2016	May 2018	<ul> <li>Approval documents</li> </ul>	75%
		FCHS Curriculum committee to validate compliance with the mapping to the QFE requirements- each semester	Curriculum Committee     Report	Chair of FCHS Curriculum Committee Director	Sept 2016	May 2018	<ul> <li>Bi annual compliance report</li> <li>Lecturer course evaluation report</li> </ul>	75%
Objecti	ve 2.4: En	sure programs are accredited	by world class internation	nal accreditation	body (N	IEDIUM		
FCHS		After final accreditation, each program will identify a suitable international accrediting body	<ul> <li>Report listing suitable accrediting bodies for each program</li> </ul>	Head of Career Programs	Janu ary 2018	July 2020	<ul> <li>Report listing suitable accrediting bodies for each program</li> </ul>	0%
(2)	T3 K1	FCHS will develop a process to apply for relevant accreditation	<ul> <li>Procedures document</li> </ul>	<ul> <li>IE &amp; QA supervisor</li> </ul>	Nov 2018	July 2020	<ul> <li>Procedure Document with IE unit</li> </ul>	0%
		Apply for international accreditation	<ul> <li>Initial application submit</li> </ul>	Director	Nov 2018	July 2020	Report submit	0%

FCHS Priority Code	Target St. Code	Action Plan 2016-20	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
Market Objecti	Demands ve 3.1: En	Curriculum and Proposed Pro sure responsiveness of progra						
(MEDIU	IM / LONG			L				
		Program review, evaluation and action for changing needs required for the discipline	<ul> <li>Annual program review</li> </ul>	<ul> <li>HoDs</li> <li>Course Coordinators</li> </ul>	Sept 2016	Aug 2018	<ul> <li>Course Evaluation Reports</li> <li>Annual Program Review</li> </ul>	Ongoing (50%)
		Curriculum alignment, contextualization and modernizing to meet changing healthcare needs	<ul> <li>Curriculum localization proposal</li> </ul>	• HoDs	Janu ary 2016	Janu ary 2018	<ul> <li>Report submission to the board</li> </ul>	25%
FCHS	Т1 (К1)	Engage in activities that bridge the theory-practice gap	<ul> <li>Curriculum content and facilities (Lab and clinical)</li> </ul>	• HoDs	Sept 2016	July 2018	<ul> <li>Updated Curriculum content and facilities (Lab and clinical)</li> </ul>	25%
(3)		Engage in pedagogical research to evaluate and improve teaching and learning	Research output	<ul> <li>HoDs</li> <li>Research Committee</li> </ul>	Sept 2016	July 2018	<ul> <li>Number of Research Proposals</li> </ul>	20%
		Engage stakeholder feedback and input into curriculum design, review and development	• No. of stakeholders in collaboration with FCHS and positive inputs (No. of strategic relationships with key stakeholders)	• HoDs	Sept 2016	July 2018	<ul> <li>Number of Stakeholder Meeting Stakeholder meeting minutes Survey of stakeholder feedback</li> </ul>	
		Program response to labor market demands	Market research	<ul><li>Consultant</li><li>HoDs</li></ul>	May 2017	July 2018	<ul> <li>Proposal submitted to Director General Office</li> </ul>	50%
Objectiv		programs meet health care se		lacement in relat	ed jobs	and care	eers (SHORT TER	Ń)
		Programs to ensure effective placement- academic balance	<ul> <li>Review theory- placement map</li> </ul>	• HoDs	Annu ally		• Map	50%
FCHS	T1 (K1)	Increase student participation in health service	<ul> <li>Employability within 6 months of graduation</li> </ul>	<ul> <li>Government Relation Manager</li> <li>Director</li> </ul>	Sept 2016	Aug 2018	<ul> <li>First destination survey (Alumni Survey)</li> </ul>	40%
(3)		Develop methods to measure the impact of clinical placement to students' future employment	<ul> <li>% of employers satisfied with healthcare education and student preparedness for employment</li> </ul>	<ul> <li>Government Relation Manager</li> <li>Director</li> <li>HoDs</li> </ul>	Sept 2016	Aug 2018	<ul> <li>Employer Surveys</li> <li>Stakeholders surveys</li> <li>Meeting minutes</li> </ul>	30%

FCHS Priority Code	Target	Action Item		Responsibility	Start Date	End Date	Evidence	Progress
Market Objectiv	Demands ve 3.3: In	Curriculum and Proposed Pro (continued) collaboration with the Alumni ction (SHORT/MEDIUM TERM)						d Labor
FCHS (3)	Т1 (К2)	Implement a formal employer survey to assess satisfaction with students while on internship Implement a formal employer survey to assess satisfaction with students after employment	<ul> <li>Documentation of survey and analysis of results</li> <li>Documentation of survey and analysis of results</li> </ul>	<ul> <li>Industry &amp; Partnership Manager</li> <li>Industry &amp; Partnership Manager</li> </ul>	Sept 2016 Sept 2016	Aug 2018 Aug 2018	Survey data     Survey data	60% 40%
		the Number of Emirati Teacher						
Objecti	ve 4.1: De	velop and implement plan to a Contact the local agencies to identify the availability of qualified and experienced Emirati professional as teachers/lecturers	<ul> <li>Human Resource/ Recruitment Dept. records on numbers of national employees</li> </ul>	of Emiratis (LON FCHS Director, Manager of Recruitment	G TERM Sept 2016	July 2020	Number of Emirati employees in FCHS	15%
	T1	Review the financial package of prospective Emirati employees	<ul> <li>Human Resource/Recruitment department records on the numbers of national employees</li> </ul>	Human Resources/ Finance Department	Sept 2016	July 2020	Contracts	15%
		Identify the barriers that prevent nationals from joining FCHS workforce	• Survey	Human     Resources/     Finance     Department	Sept 2016	July 2020	Survey Data	5%
FCHS		Explore the options to appoint Emirati professionals as adjunct lecturers at Fatima College	Auditing policies	<ul> <li>Respective department heads, HR department</li> </ul>	Sept 2017	July 2020	<ul> <li>Increased number of Emirati hires in some departments</li> </ul>	15%
(4)		Increase opportunities for FCHS graduates to return as part time/ full time employees	<ul> <li>No. of graduates working with FCHS</li> </ul>	Respective department heads, HR department	Sept 2016	July 2020	<ul> <li>Number of graduates working at FCHS</li> </ul>	10%
	T3.1	Develop a systematic approach to recruiting qualified national manpower to administrative and academic posts at FCHS	<ul> <li>Developed policies and procedures</li> </ul>	<ul> <li>Respective department heads, HR department</li> </ul>	Sept 2016	July 2020	Policy HR     Document	25%
	T3.2	Decrease turnover rates by increasing professional development opportunities to national employees	<ul> <li>Emiratization ratio via employer satisfaction survey, Personal professional development plan for national manpower</li> <li>No. Emirati who attended professional development courses.</li> </ul>	<ul> <li>Respective department heads,</li> <li>HR department</li> </ul>	Sept 2016	July 2020	<ul> <li>Professional Development plan for Emirati staff</li> <li>Attrition data</li> </ul>	10%

FCHS	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
		Operational Cost and Enhance						
FCHS (5)	T1,T2, T3	rease the number of students Optimize the class room schedules using scheduling assistant computer packages	<ul> <li>Percentage of room utilization</li> <li>Schedule additional sessions</li> <li>Evening sessions</li> </ul>	<ul> <li>HoD</li> <li>Student Services Manager/ Registrar</li> <li>Facilities Coordinator</li> </ul>	Sept 2016	Aug 2020	• Facilities analysis	25%
		Introducing shift system in the program	<ul> <li>Percentage of room utilization</li> </ul>	<ul> <li>HoD</li> <li>Student Services Manager</li> </ul>	Sept 2017	Aug 2020	<ul> <li>Feasibility study of adding shifts to programs</li> </ul>	10%
Objectiv	ve 5.2: Uti	lize video conferencing techno	ology to conduct class for	r remote campus	es.			
FCHS (5)	T1,T2, T3	Update the current videoconferencing software to accommodate multiple users	<ul> <li>Identify courses suitable for video conferencing, Establish a telematic system, 50% of classes conducted in remote campuses will be held using video conferencing technology,</li> </ul>	coordinator • HoDs	May 2017	Aug 2020	Procurement     register	20%
		Provide videoconferencing facilities in lecture halls as appropriate	<ul> <li>Percentage of equipped Vs non equipped classroom</li> </ul>	<ul> <li>Facilities coordinator</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Procurement register</li> </ul>	10%
Objectiv	ve 5.3: Inc	rease administrative staff pro						
		Provide training to the existing administrative staff	<ul> <li>Professional development log</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Professional development log</li> </ul>	10%
		Capacity building and mentorship to newly joined administrative staff	<ul> <li>No. of tasks processed per person</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Productivity checklist</li> </ul>	70%
FCHS (5)	T1,T2, T3	Reduce the time frame to respond to student queries	Productivity checklist	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Productivity checklist</li> </ul>	40%
		Establish productivity checklist	Productivity checklist	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Productivity checklist</li> </ul>	10%
		Measure employer satisfaction	Annual staff appraisal	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	Aug 2020	<ul> <li>Annual staff appraisal</li> </ul>	50%

FCHS Priority Code	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progress
Goal 5:		Operational Cost and Enhance		,				
Objectiv	ve 5.4: Uti	lize digital media and environr		1	•	r	1	
		To explore the possibility of changing some of the examination format from paper based to computer based	<ul> <li>% of computer based examination formats in a given academic year</li> </ul>	<ul> <li>Facilities manager</li> <li>HoDs</li> <li>IT Coordinators</li> <li>Chair of Assessment Committee</li> </ul>	Sept 2017	Aug 2018	• Feasibility study	0%
FCHS	T1,T2,	Improve the scope of use and efficiency of learning management system.	<ul> <li>Percentage of course work, assessment and feedback using learning management</li> <li>system</li> </ul>	<ul> <li>IT Manager</li> <li>Registrar</li> <li>Director</li> <li>Procure- ment</li> </ul>	Sept 2016	Aug 2018	Implementatio     n of new     learning     management     system	20%
(5)	T3	Enhance the efficiency of digital learning resources in the library	<ul> <li>Increase of digital learning resources relative to previous academic year (AY 2015-16)</li> </ul>	• Librarian	Sept 2016	Aug 2018	<ul> <li>Librarian resources Log</li> </ul>	25%
		Conduct a longitudinal study over 3 years of the digital learning resources available and used	<ul> <li>Results of the longitudinal study</li> </ul>	• Librarian	Sept 2016	Aug 2019	Study results	10%
		Use of on-line or soft-filing systems for FCHS documents	<ul> <li>Increase in the number of soft filing and online documentation</li> </ul>	<ul> <li>IT coordinators</li> <li>Director</li> </ul>	Sept 2016	Aug 2018	<ul> <li>Presence of an online repository of FCHS documents</li> </ul>	5%
-		rease focus on utilizing digita	l e learning resources and	d replace traditio	nal asse	essment	approaches by au	tomated
process		Increase the number of digital e-learning resources	Number of eLearning resources relative to the previous academic year	Librarian	Sept 2016	Aug 2017	New E- learning resources log	50%
FCHS (5)	T1,T2,	Introduce online learning platforms such as gale courses, MOOC etc. for professional development of staff and students	<ul> <li>% of e-learning platforms relative to AY 2015-16</li> </ul>	• Librarian	Sept 2016	Aug 2018	Presence of resources in the library	5%
	Т3	Automate assessment tools by using efficient LMS	<ul> <li>Percentage of automated assessment tools relative to previous academic year.</li> </ul>	<ul> <li>IT</li> <li>Manager of Administrati on</li> <li>Director</li> <li>HoDs</li> <li>Teaching staff</li> </ul>	Sept 2016	Aug 2017	<ul> <li>Implemented new learning management system</li> </ul>	20%

FCHS Priority Code	Target St. Code	Action Item	Performance Measure	Responsibility	Start Date	End Date	Evidence	Progre
		e Effectively in Community Se						
Objectiv	<b>7e 6.1: Nu</b> T1	mber of events organized and To engage students and staff involvement and attendance in workshops and conferences	• Tally of staff/students attendance in workshops and conferences held on	Students     Services     Manager	Sept 2016	July 2018	Calendar of events	40%
		Increase the number of workshops and activities	<ul> <li>an annual basis</li> <li>% increase in the number of workshops and activities relative to previous year</li> </ul>	Students Services Manager	Sept 2016	July 2018	Calendar of events	20%
FCHS (6)	T1(K1)	To develop and execute policies regarding compulsory 25 hours community activities per student per year	<ul> <li>Mandatory 35 hours community service per student per year</li> </ul>	Students Services Manager	Sept 2017	July 2018	Community service proposal Records of community service	10%
		To encourage community health promotion projects via student and staff involvement	Tally of health     promotion events	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>FCHS Calendar of events</li> </ul>	25%
		To create awareness on public health imperatives among students, staff and communities	<ul> <li>No. of events and activities that highlight public health awareness</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	Calendar of     events	25%
Objectiv	/e 6.2: Pei	rcentage of students participa	te in the support of health	ncare establishm	ents			
		Increase FCHS staff/student participation in healthcare organizations	Student/staff     participation in     healthcare institutions     events	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>Participation records</li> </ul>	50%
FCHS (6)	T2	To encourage social responsibility among students by field visits to institutions catering to the needs of vulnerable patients	<ul> <li>% of students participating in community services by conducting field visit to health care establishments</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	Report on FCHS student filed visits	50%
		Voluntary participation on the job training programs at healthcare establishments	<ul> <li>% of students participating</li> </ul>	<ul> <li>Students Services Manager</li> </ul>	Sept 2016	July 2018	<ul> <li>Participation log.</li> </ul>	20%
	SHORT T	ERM: 1-2 Years	MEDIUM TERM: 2-3 Y	ears	Ĺ	ONG TE	RM: 3-4 Years	S

# Appendix 3: IE Activities' Monitoring and Evaluation Calendar

	Activity				Tin	neline	•					
#	Activities	Aug	Sep	Oct	Nov	Dec	Jan	Feb	Mar	Apr	May	Ju
1.	Internal Audit (by IE Unit)				Х							
2.	Strategic Action Plan Achievement Review											х
	FCHS Core Documents Update: Fact Book, Catalogue, Policies & Procedures,						•					х
3.	Faculty/Staff Handbook, Student Handbook FCHS Manuals Update:											v
4.	IE & QA Manual, Risk Management Manual											Х
5.	Individual Department Operational Plan (DOP)											Х
6.	Risk Register & Progress Report											Х
7.	Program Effectiveness Report											
8	Annual Program Report		Х									
9.	Employee Performance Appraisal Progress											
10.	Course Files Archiving		X Sum				X S1					X S2
11.	Course Surveys				X S1				X S2			X Sur
12.	Student Experience Survey (SES)				х				х			
13.	Exit Level Survey											
14.	Employer Survey								Х			
15.	LRC Survey			Х								

### Appendix 4: Individual Department Operational Plan

### Department name:

### Academic Year:

# Section 1: Planning (to be completed at the beginning of the Academic Year)

gic Plan: Goal S	Statement					
Assessment Measures (Target[s])	Enabling Strategies	Timeline	Resources	Responsible Person(s)	Expected Outcomes	IE Review
gic Plan: Goal S	Statement					
Assessment Measures (Target[s])	Enabling Strategies	Milestones (DD/MM/YY)	Resources	Responsible Person(s)	Deliverable (Output)	IE Review
	Assessment Measures (Target[s]) gic Plan: Goal S Assessment Measures	Measures (Target[s]) gic Plan: Goal Statement Assessment Measures Strategies	Assessment Measures (Target[s])       Enabling Strategies       Timeline         gic Plan: Goal Statement	Assessment Measures (Target[s])       Enabling Strategies       Timeline       Resources         gic Plan: Goal Statement	Assessment Measures (Target[s])       Enabling Strategies       Timeline       Resources       Responsible Person(s)         gic Plan: Goal Statement       Milestones       Resources       Responsible         Assessment Measures       Enabling Strategies       Milestones       Resources       Responsible	Assessment Measures (Target[s])       Enabling Strategies       Timeline       Resources       Responsible Person(s)       Expected Outcomes         gic Plan: Goal Statement       Milestones       Resources       Responsible       Deliverable         Assessment Measures       Enabling Strategies       Milestones       Resources       Responsible       Deliverable

### Section 2: Assessment (to be completed end of the Academic Year)

2.1 Assessment of Goals & Objective Set during IDOP Planning

		What worked			Were the		
Was the SMART	What is the final	well within the	Was the	Were the	expected		
objective	assessment	Enabling	timeline	resources	outcomes delivered? What	Recommendations	IE
met?	measure	Strategies	followed?	sufficient?	is the quality?	(if applicable)	Revi
Y/N	(target)?	and what			Any unexpected		
		did not			outcomes?		
		work well?					
Goal from I	FCHS Strategic	Plan: Goal Sta	atement				
		What worked			Were the		
	What is the	well within			expected		
Was the SMART	final	the	Was the	Were the	outcomes	Recommendations	IE
objective	assessment	Enabling	timeline	resources	delivered? What	(if applicable)	Revi
met?	measure (target)?	Strategies and what	followed?	sufficient?	is the quality? Any unexpected		
	(largel)?	did not			outcomes?)		
		work well?			,		
			*				

# 2.2 Progress review of Previous Recommendation(s)

Was the recommendation implemented? Y/N	What is the final assessment measure (target) for recommendation?	What worked well within the Enabling Strategies and what did not work well?	Was the timeline followed?	Were the resources sufficient?	Were the expected outcomes delivered? What is the quality? Any unexpected outcomes?	Recommenc s (if applica
					$\mathbf{V}$	
			7			

Appendix 5 – FCHS Course Report (Lecturer Review) Template



\_ Department (Name of Department)

Program (Name of Program)

# **Course Report (Lecturer Review)**

#### Important:

- All course reports within the \_\_\_\_\_ Program must be submitted by the Course Coordinator to the Head of Program <u>before</u> the last date of each semester, preferably at the Assessment Committee Meeting.
- 2. Course report summary of previous years need to be included in the course syllabus change request form, as supportive evidence.
- 3. A soft copy of the course report needs to be sent to the curriculum committee and a hard copy included in the course file.
- 4. The course report should include all items as listed below.

Course Code:	Course Name:	
Program Level:	Credit hours:	
Semester:	Academic Year:	
Course Coordinator:		
Campus Lecturer(s): AD	AA	
AJ	AG	
Course report <u>submitted</u> by the Cou	rse Coordinator	
Name in Print:	Signature:	Date:
Course report <u>received by</u> the Head	of the Program:	
Name in Print:	Signature:	Date:
A. BRIEF COURS	E DESCRIPTION (Briefly as per cou	rse syllabus)
	. , .	

Pre-requisites		A	opropria	teness						
	YES	No	lf	no, sug	gestion	ns for c	hange			
C. SUMMARY OF										
(Copy from previo	ous course rej	port, as pei	section	n l of ti	nis rep	ort)				
Recommendations	Acti	on Taken			Res	olution	1			
D. APPROPRIATENESS	OF COURSE L	EARNING C		/IES to	Progra	am Ou	tcome	es		
		EARNING C		AES to	Progra	am Ou LO6	tcome			
D. APPROPRIATENESS Program Outcomes	OF COURSE L QFE Strand									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									
	QFE									

	Topics Tau	ight	No. of He	ours / Week
Planned		Actual	Planned	Actual
eaching/ Learning St	rategies			
Strateg	SY	N	o. of Hours / Week	
		Planned	Act	ual
Lectures				
Laboratory Sessi				
Clinical placemer	nt			
Others				
		()		
o. of Students compl The course: nal Grades Summar	- N		; AJ	; AG
The course:	y (in percenta;	ge)		
The course:	- N		; AJ	; AG
The course: nal Grades Summar Maximum Marks	y (in percenta;	ge)		
The course: nal Grades Summar Maximum Marks Minimum Marks	y (in percenta;	ge)		
The course: nal Grades Summar Maximum Marks Minimum Marks Mean	y (in percenta;	ge)		
The course: nal Grades Summar Maximum Marks Minimum Marks	y (in percenta;	ge)		
The course: nal Grades Summar Maximum Marks Minimum Marks Mean Percentage Passed	y (in percenta;	ge)		

### G. APPROPRIATENESS OF TEXTBOOKS AND OTHER LEARNING RESOURCES

Resources		Approp	riateness
	YES	No	If no, suggestions for change
Textbook Resource			
Classroom/ Lab Facilities			
Clinical facilities			
Other			

# H. APPROPRIATENESS OF ASSESSMENT INSTRUMENTS TO LEARNING OUTCOMES

Assessment Items	%	LO1	LO2	LO3	LO4	LO5	LO6	L07
Quizzes	10%							
Midterm Exam	20%							-
Final Exam	40%							
Assignment (Other)	30%							
Clinical Placement	P/F							
Others								

### I. PLANNING FOR THE NEXT COURSE OFFERING

Student feedback:

Summary Recommendations of the Course Report (to be taken into consideration for the next time the course is offered):

Recommendations	Action Taken	Date
	Recommendations	Recommendations     Action Taken

# Appendix 6 – FCHS Final Exam vs CLO Mapping Template and Guide Appendix 6.1 FCHS Final Exam vs CLO Mapping Template

Department			Pharmacy Course code															
Exam type							Course	name										
Semester			Semester 2 20	16-2017				coordinator										
														•				
Questions (MCQ)	Difficulty Index (D()			Learning Ob								Allocated Mark	Exam Result (%	Quest (MCQ)	Difficulty Index (D()	Mark	Exam Result %	Ave % based on Di
		LO.1	LO.2	LO.3	LO4	LO.5	LO.6	L0.7	LO.8	L0.9	L.0.10		Correct)				Correct	
Q1																		
02																		<u> </u>
03																		L
04			L			<u> </u>												<u> </u>
Q5																		<u> </u>
Q6																		<u> </u>
07																		<u> </u>
Q8 Q9																		
																		<u> </u>
Q10						<u> </u>												<u> </u>
011																		<u> </u>
Q12																		<u> </u>
Q13 Q14																		<u> </u>
015																		<u> </u>
Q15																		<u> </u>
015																		<u> </u>
Q17																		L
Q18																		<u> </u>
Q19																		
Q20																		
021																		<u> </u>
022																		L
Q23 Q24																		<u> </u>
																		<u> </u>
025																		<u> </u>
Q26																		<u> </u>
Q27																		
0,28																		<u> </u>
Q29 Q30																		<u> </u>
4,30																		
Questions (MCQ)	Difficulty Index (DI)	10.1	LO.2	Learning Ob	ijectives (LO	) as per the	LO.6	juide	LO.8	L0.9	L.0.10	Allocated Mark	Exam Result (% Correct)	Questio ns (MCQ)	Difficulty Index (DI)	Mark	Exam Result % Correct	Ave 9 based on D
Q1		0012	1008	1018	191	1010	2010	10411	and a	1.4.4	20150		Contraction				Correct	<u>├</u>
														<u> </u>				<u> </u>
Q2						<b></b>												L
03																		
Q4																		
Q5																		
Q6																		
Q7																		
Q8														<b>—</b>				<u>├</u>
													<u> </u>	<b>—</b>		$\vdash$		<del> </del>
Q9																		
Q10																		
Learning Ob	ojectives																	

#### Exam Result Mapping to CLOs



Learning Objectives
Table -1:
At the end of this unit students will be eble to:
101.
102.
103.
104.
105.
106.
107.
108.
109.
1010.

### FCHS Final Exam vs CLOs Mapping Template (continued)

4 Difficulty index:

6

Table -2: The MCQs of each exam paper should contain:	Abbreviation
<ul> <li>30 - 35 % of low difficulty questions (knowledge)</li> </ul>	L
<ul> <li>50 % of medium difficulty questions (analysis)</li> </ul>	м
<ul> <li>15 - 20 % of high difficulty questions (application based)</li> </ul>	н

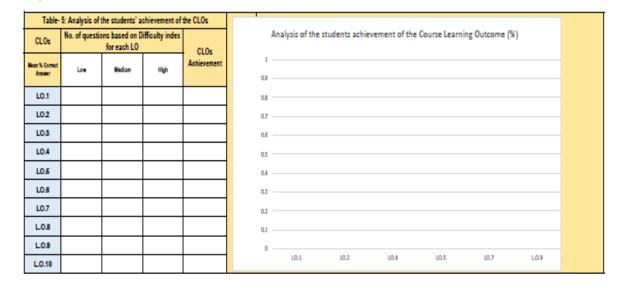
Table-8: Diffic	oulty Index – Dru	g Delivery II Exa	m - Sem 2 2018/						
-	Asher Hon	MCQ	Actual SAQ*	SAQ	Mean %	Di	fficulty Index - Drug Delivery II Exam - Sem 2		
Difficulty of MCQ	Actual MCQ No.	Marks	No	Marks	(SAQ+ MCQ)	High	2016/2017		
Low									
Medium						Medium			
High						Low			
							0	10	

#### Analysis of Students Responses

a. Supportive document: Student Response Report (you can use the Scantron Machine to produce this report for the MCQs students' answers )

Table -4: Stu	dents Response Percentage	(Correct Answers % )		1	entage can)						
Difficulty Index	MCQ Students response %	8AQ Students response %	response to total	Fraction 3AQ response to total marks (100-x/Total mark = 100- y)	Employ 040		0.9 0.8 0.7 0.6 0.5 0.4				
Low							0.3 0.2				
Medium						F	0.1 0				
High								Low	Medium	High	

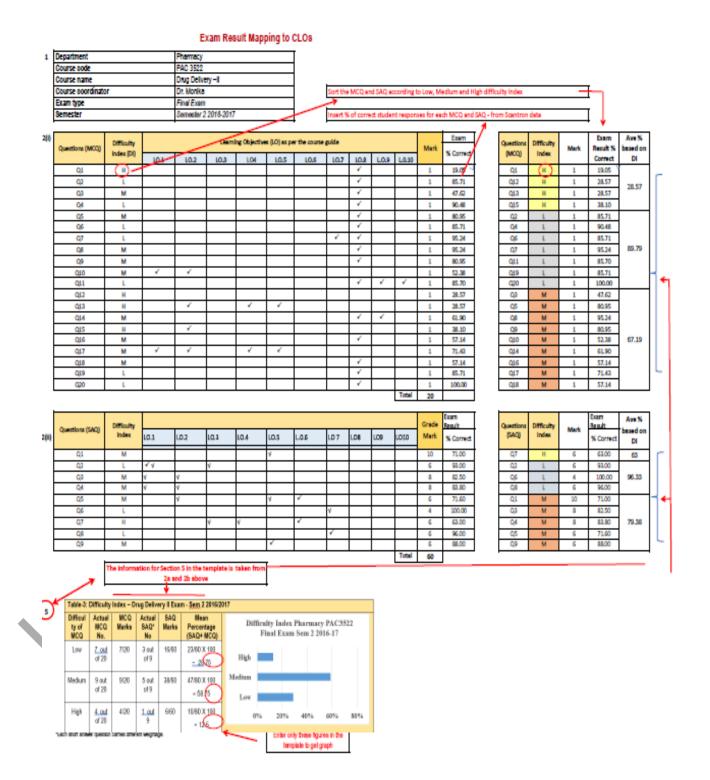
7 Analysis of the students' achievement of the CLOs



8 Conclusion

Issue 2. Revision 1

### Appendix 6.2 - FCHS Final Exam vs CLO Mapping Guide



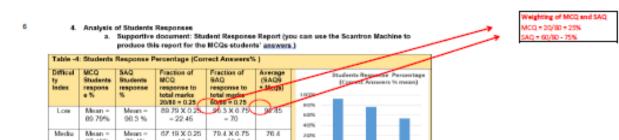
#### FCHS Final Exam vs CLOs Mapping Template (continued)

= 16.8

28.57 X 0.25

= 59.6

63 X 0.75 -



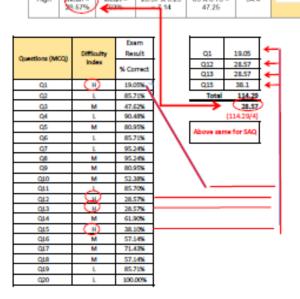
ON

54.4

Low

Medium

High



70.4%

Mean -

m

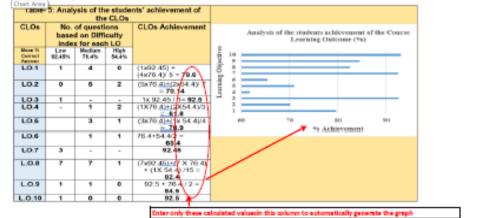
High

67.464

Mean -

7 Analysis of student's achievment of CLOs

5. Analysis of the students' achievement of the CLOs



8 Conclusion

Discuss results of student respones to each CLO, ETC

>

### Appendix 7 – FCHS Course Syllabus Update Proposal Template

### PROGRAM COURSE UPDATE PROPOSAL TEMPLATE

#### *Guidelines for completion of document:*

- a. The following information is required for all course change proposals.
- b. It is to be completed by the course coordinators in each course.
- c. To facilitate the review / approval process, please use the headings below as indicated.
- d. Submit one (1) Course Change form per course.
- e. Remove the italicized explanations below each heading in the document before submission.
- f. If the document is completed by hand and not typed, use black permanent ink pen only.
- g. After completion, please submit the completed form, along with the amended course profile, and supportive documents as required, to the respective committees, for review and approval.
- 1. Program:
- 2. Course Number:
- 3. Credit Value:
- 4. Course Title:

#### 5. Recommendations of Previous Course Report:

Ī	Recommendations	Action Taken	Resolution

### 6. Type of Course Change(s) (indicate all that apply):

Course number	Assessment strategy (please specify –	item/	weightage/)	
Credit value	Assessment strategy (please specify -	criteria/	description)	
Course title	Clinical component			
Course description	Study chart			
Pre/co-requisite	Other (please specify)			

#### 7. Effective Date of Proposed Change(s):

#### 8. Academic Rationale:

Please indicate how the proposed change will contribute to the academic objectives of the course/program (rationale for proposed change)



### 9. Proposed Course Information: (please add rows as required)

E	xisting Course Information	Proposed Course Information
	(change from)	(change to)
Submitted by:		
Course Coordinato	or Name: Sig	natureDate
Decision outcome	t /to be completed ofter the curriculum of	ommittee meeting – whether the change was approved or
not)	a (to be completed after the curriculum c	Similitee meeting – whether the change was approved of
Approved	Not Approved	Further Discussion Required
Comments by the	Curriculum Committee	

### Reviewed and Approved by the Head of the Program

Name:	Signature	Date	
Final Approval by the Direct	or of the College		4
Name:	Signature	Date	5
c			
V.			

### Appendix 8 – FCHS Course Syllabus Content Review Checklist

PROGRAM

# **Checklist for Course Syllabus**

#### Important:

- 1. All course syllabi must be submitted to the Curriculum Committee **<u>before</u>** the last date of the semester.
- 2. The course Syllabus should include all items as listed in this checklist.

Course Code: Cour Semester:	rse Name: Academic	Year:					
Course Syllabus <u>sent</u> by Course Coo	Course Syllabus <u>sent</u> by Course Coordinator:						
Name in Print:	nber: _			Date:			
Syllabus received and reviewed by curriculum committee member:							
Name in Print:	nber: _			Date:			
Content	checklist		Yes	No	NA	Comments	
1. Course specific name and code is	s appropriate						
2. The academic year and semester	r, on the first page is upd	ated					
3. The course profile follows the ap	propriate format throug	hout					
4. The course credits including brea	akup is correct						
5. The pre-requisites and co-requis	ites follow the program	structure					
6. The course coordinators/instruct	tor details are filled in.						
7. The list of contents on page 4, is	updated						
8. Any sentences added/removed v	within the profile is highl	ighted with					
rationale							
9. Contact hours (section 1.4) is up	odated as per latest time	tables					
10. Textbook Resources are updated	d (Course coordinator che	eck – Y/N )					
11. Assessment strategy for the cou	rse is approved by the as	sessment					
committee							
11.1 Assessment strategy	11.1 Assessment strategy due dates are appropriately						
distributed throughout the s	distributed throughout the semester.						
11.2 Clinical component (	(if applicable) is included						
11.3 No errors apparent i	in the assessment summa	ary table					

11.4	The assessment criteria (section 1.9) to pass the course								
has b	has been approved previously (Course coordinator check – Y/N)								
12. The colle	12. The college and program graduate attributes have been mapped								
13. Policies a	and guidelines related to assignment submission and								
academi	ic misconduct have been included								
14. The appr	ropriate study chart is included								
14.1	The weekly dates are updated								
14.2	The weekly themes are included with updated								
refer	erences								
14.3	Assessment dates are highlighted								
14.4	Clinical weeks are included and highlighted								
15. In section	on 3.2 – Assessment details – All the tables are filled in with								
appropri	iate information								
16. The infor	ormation in section 3.2 is consistent with the information								
provided earlier in section 1.8 – assessment summary									
17. The writt	17. The written assignment and oral presentation marking rubrics is								
elaborat	elaborated and approved by the assessment committee (Course								
coordina	ator check – Y/N )								

### Appendix 9 – Moderation Report

#### XXXXXXX Department

#### **Marking Moderation Template**

#### Semester X, 201X-1X

Course Code:	Course Name:
Campus:	Course Coordinator:
Course Instructor/s:	Number of Students Attended Assessment:
Type of Assessment Task:	Weightage:
Marker Name/s:	Moderator's Name:

#### I. <u>Process Overview:</u>

- **Purpose:** To ensure that the marking of assessment tasks is accurate and consistent with the marking guide.
- Applicability: Assessment tasks with a value greater or equal to 20% of the total course grade.
- *Timing:* The marking moderation process must be completed prior to results announcement.
- **Documentation:** A copy of the completed and signed Marking Moderation Template should be included in the Course File.

#### II. Moderation Sample:

The assessment sample should include a minimum of 6 corrected scripts (2 randomly collected from each grade level; Low, Medium, and High) from each campus. The assessment sample should be independently marked by the moderator with reference to the assessment marking guide supplied by the course coordinator.

ſ	Assessment Tasks Sample	Student ID	Marker's Mark	Moderator's Mark	Percent Difference Between Marker's and Moderator's Marks
	Low grade				
	Low grade				
	Medium grade				
	Medium grade				
	High grade				
	High grade				

#### III. Moderation Summary:

Please provide a brief explanation of the moderation outcome for this assessment task.

#### IV. Action Taken:

□ No

#### □ Yes (provide details)

Please provide a brief explanation of the action taken based on the guide present in the next page.

#### <u>Guide</u>

- The difference between the marker and moderator marks should not be more than 5% for written exams and 10 % for written assignments.
- ✓ If the difference between the two marks is more than the aforementioned, the marker and moderator shall discuss and agree on the final mark. This shall apply to all assessments scripts and not just the moderated sample.
- ✓ If no agreement was reached between the marker and moderator, the department assessment committee chair of shall appoint a second moderator to scrutinize the assessment sample and advise on the final mark. The final decision on the assessment mark is for the department assessment committee in light of the advice of the second moderator. If mark change was agreed on by department assessment committee, this shall apply to all assessment scripts and not just the moderated sample.

#### V. Others

#### Computer-Based Marking (Scantron):

Marking moderation is conducted by preparing another answer key on Scantron sheet and then re-marking a sample of students Scantron answer sheets relative to the answer key. The Scantron reports of the recorrected sample should be included with the marking moderation template.

<u>Written Assignments</u>: Turnitin report containing the highlighted similarity sections should be included with the marking moderation template.

#### VI. Signatures

	Description	Name	Signature	Date
	Marker			
	Moderator			
<u> </u>				

### Appendix 10– Program Effectiveness Achievement Review

### XXXXX Department

### Program: XXXXX

### **Program Effectiveness Achievement Review**

Date: DD/MM/YEAR

1. Overview

### This document provide the following information about the XXXProgram

### Effectiveness:

- IELTS Score
- GPA at Program Exit
- Attrition rate (%)
- Summary Final Exam Mapping to CLOs and PLOs Achievement
- Professional Licensing
- Employment Rate

The Key Performance Indicators (KPIs) as depicted by the Program Effectiveness Indicators for the XXX Program is according to the KPIs in the following Table .

KPI #	Program Effectiveness KPIs	KPI Target Benchmark	KPI Actual Benchmark	KPI Internal Benchmark	KPI Analysis / Conclusion	KPI New Target Benchmark
<b>-</b> -	IELTS Score minimum score of 5					
2.	GPA at Program Exit					
3.	Attrition rate (%)					
4.	Summary Final Exam Mapping to CLOs 4.1 CLO achievement					
5	4.2 PLO achievement Professional Licensing					
6.	Employment Rate					

### 2. IELTS Score

Narrative about lowest, highest and average IELTS score for the XXX Program

			-							
Campus	IELTS Score of BSc Nursing Graduates									
	Lowest	Highest	Total Average							
Abu Dhabi										
Al Ain										
Total Ave										

### Table 2: IELTS Score of XXX Graduates – AY 20XX-20XX

### 3. GPA at Program Exit

Narrative about lowest, highest and average GPA for the XXX Program

Table 3: GPA of XXX Graduates – AY 20XX-20XX

Campus	GPA of BSc Nursing at Program Exit								
Campus	Lowest	Highest	Total Average						
Abu Dhabi	2.18	3.72	2.99						
Al Ain	2	3.7	2.63						
Total Ave			2.8						

### 4. Attrition Rate (%)

Narrative should include total number of graduates, locals vs nonlocals (numbers and %), retention and attrition rate (%).

### Table 4: Total Number of Graduates AY 2016-2017

Campus \ Program	Pre-Registra	ition (BSN-4)		gistration lging)	Total per Campus			
	Local	Non-Local	Local	Non-Local	Local	Non-Local		
Abu Dhabi								
Al Ain								
Total								

### 5. Summary Final Exam Mapping to CLOs and PLOs Achievement

A summary of the final examination mapping to CLOs was performed as an indicator of program effectiveness.

### 5.1. Summary Final Exam Mapping to CLOs and PLOs Achievement

Table 4: Final Exam Mapping to CLOs Achievement

		XXX Program Courses																				
	Level						Level					Level										
CLOs	Course	Course	Course	Course																		
1																						
2																						
3																						
4																						
5																						
Course Ave%																						
Level Ave %																						
Program Ave %																						

### 5.2 PLOs Achievement

Course Learning Objectives (CLOs) Achievement (%) should mapped against the PLOs to determine the level of achievement to ensure that program effectiveness can be determined. Provide the average PLO achievement in %.

PLOs		XXX Program Courses																				
					Leve		-		-	Level								Level				
	Course	Course	Course	Course																		
PLOs Ave%																						
Level Ave %																						
Program Ave %																						

Table 5: Program Courses vs PLOs Achievement

### 6. Professional Licensing

Narrative about number of graduates, % with HAAD Licensure, % Graduates whom failed HAAD Licensure Table 6: Professional Licensing of AY2015-2016 graduates (Cohort #)

Number of Graduates	% Graduates with HAAD Licensure	% Graduates failed HAAD Licensure

### 7. Employment Rate

Narrative about number of graduates, % with HAAD Licensure, % Graduates whom failed HAAD Licensure and Employment %.

<b>T</b> I I A <b>D</b> ( )			
Table 6: Protessi	onal Licensing of A	Y2015-2016 a	raduates (Cohort 5)
10010 01 1 101000		1 2010 2010 9	

Number of Graduates	% Graduates with HAAD Licensure	% Graduates failed HAAD Licensure

### 8. Employment Rate

Narrative about number of graduates, % with HAAD Licensure, % Graduates whom

failed HAAD Licensure and Employment %.

Table 7: Employment Rate

AY 2015 – 2016 (Cohort 6)									
Number of Graduates	% Graduates with HAAD	% Graduates failed HAAD	% Employment						
	Licensure	Licensure							
	AY 2016 - 2017	(Cohort 7)							
Number of Graduates	% Graduates with HAAD Licensure	% Graduates failed HAAD Licensure	% Employment						

### Appendix 11 – Annual Program Report Template

### Department name:

Category:

Academic Department

### Administrative Department

Please respond to the following question in detail and attach appendices with supporting documentation where appropriate

### **Section 1: Executive Summary**

Please include the following in this section

- Distinctive mission or purpose statement of the department (if available) or general description.
- Executive summary of activities and departmental highlights for the academic year, particularly in the areas of planning and assessment.
- A brief progress report on implementation of Individual Department Operational Plan and outcomes over the last year or any new initiatives.
- The key assessment/programmatic enhancement initiatives for the year.

### Section 2: Department Profile Summary

Please include brief profile of the department and provide data and data source for the following:

#	Data Title	D	ata Repo	rt	Data Source
1	Staff Head Count				
2	Faculty Head Count				
З	Student Head Count				
4	Student Retention				
5	Student Faculty Ratio				
6	Graduation Count for current year				
7	Student Graduation Rate for Last 3 Year	YYYY	YYYY	YYYY	

*Note:* Administrative or support departments are required to provide data for "*Staff Head Count*" only.

### Section 3: Goals for Current Academic Year

Please include the following in this section.

- A general description of the department's planning process for identifying goals and strategies.
- The top goals for the academic year, and associated strategies / initiatives that have been utilized to address the goals.

*Note:* Remember, to get this data from "*Individual Department Operational Plan*" document prepared at the beginning of the current academic year.

### Section 4: Budget for Current Academic Year

Please write brief narrative of your department's budget and expenditures for the academic year, including an assessment of the adequacy of the budget to support the strategic goals / initiatives of the department.

### Section 5: Outcome Assessment

Please demonstrate detailed closed-loop assessment practices by completing the table below to address the following questions.

- · Which outcomes department assessed this academic year
- The assessment method(s) that department used for each outcome
- The results of the assessment
- What the department will do as a result of the assessment

### 4.1 Student Learning Outcomes:

Course	Learning Outcome 1. List every Student Learning outcome/ competency for Courses offered this academic year	<ul> <li>Data Collection &amp; Procedures (&amp; benchmarks)</li> <li>1. What assessment tools and/or methods will you use to determine achievement of the learning outcome?</li> <li>2. Describe how the data from these tools and/or methods will be/have been collected.</li> <li>3. Explain the procedure to analyse the data.</li> </ul>	Results of Evaluation 1. What were the findings of the analysis?	<ul> <li>Use of Evaluation Results</li> <li>1. List any specific recommendations.</li> <li>2. Describe changes in curriculum, courses, or procedures that are proposed or were made/ are being made as a result of the program learning outcome assessment process.</li> </ul>

### 4.2 Department Outcomes:

Department Outcomes What outcomes does the Department measure to demonstrate departments achievements and improvements (Goals)	<ul> <li>Data Collection &amp; Analysis</li> <li>1. What assessment tools and/or methods will you use to determine if user outcomes are met?</li> <li>2. Describe how the data from these tools and/or methods will be/have been collected.</li> <li>3. Explain the procedure to analyse the data.</li> </ul>	Results of Evaluation What were the findings of the analysis?	<ol> <li>Use of Evaluation Results</li> <li>List any specific recommendations.</li> <li>Describe changes or procedures that are proposed or were made/ are being made as a result of the user outcome assessment process.</li> </ol>

### Section 6: Risk Assessment

Please include brief risk profile of the department and provide data for the following:

#	Data Title	Data Report
1	Number of risks identified	
2	Number of risks ranked as High or Medium during initial risk assessment	
3	Number of risk ranked as High or Medium after Risk Treatment	
4	Number of risks identified and listed in risk register but not treated	

Please list all **High** and **Medium** risks using the following table:

#	Risk Statement	Risk Ranking Initial Assessment	Risk Ranking After Risk Treatment

### Section 7: Community Engagement

Please provide the details of community engagement activity undertaken by department using the table below:

Name of Community Engagement Activities	activit	te of y & # of ours # of Hours	Place of activity	Purpose of activity	Departments role/tasks during that activity	Value of the activity (Departments opinion)

### **Section 8: Summary of Achievements**

In this section, please narrate using a list of achievements in teaching, research, and service, as well as any student achievements that should be highlighted. Where applicable, remember to include community engagement activities and/or achievements.

### **Section 9: Supporting Documents**

Please attach all source documentation referenced in your Annual Report (e.g. Post relevant department meeting minutes as well as copies of any tools such as surveys, test or portfolio evaluation rubrics, etc.) that the department uses to collect and evaluate data about key performance or student learning achievement.

Provide copies of any department-generated reports in which summarizes assessment results and decision-based departmental actions during the academic year. Provide supporting documentation that demonstrates "full-circle" planning, assessment, reflection, and action (i.e., continuous process of improvement) such as proposals for new courses/programs, proposals for course or program revisions/enhancements, and any other department-generated reports in which you summarize assessment results and information/data-based departmental actions including evidence of improvement stemming from follow-up studies of actions taken before the academic year.

<b>Report Prepared by:</b> Name:	Designation
	Designation:
Date:	Signature:
Papart Approved by	
Report Approved by:	
Name:	Designation:
Date:	Signature:
$\sim$	

Appendix 12 – Course File Checklist **DR. NASIR TO ADD** 

## Appendix 13 – FCHS Unified Course Survey

# **Course Survey**

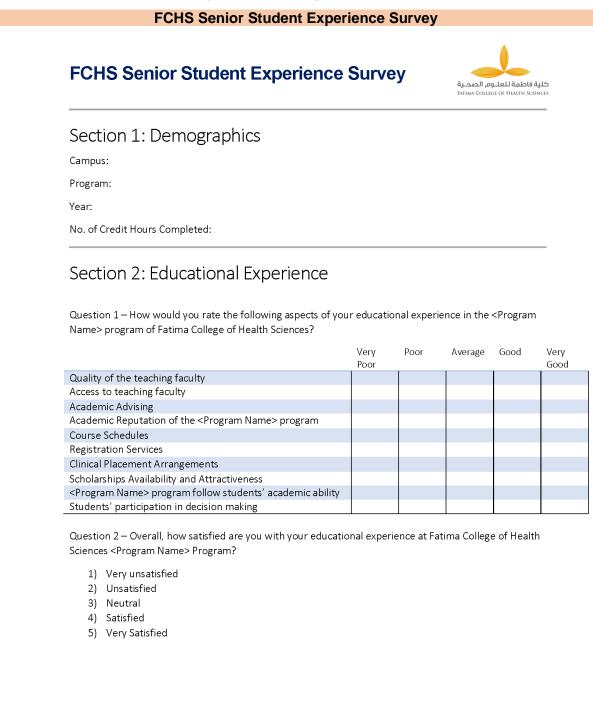
### How much do you agree or disagree with the following statements:

No	nuch do you agree or disagree with the following s Question	Strongly	Agree	Neutral	Disagree	Strongly
		Agree			Ŭ	Disagree
		ted question	าร	-	-	
1	The course was organized and aligned with the course syllabus (guide).					
2	The course learning outcomes (CLOs) were made clear and covered.					
3	The course learning resources (handouts, text book, videos, etc.) were accessible, updated and helpful.					
4	The course assignments and examinations were appropriate for the level of this course.					R
5	The course increased my interest in my field of study.					
6	The course instruction and activities engage students in interactive learning environment.					
		ated questio	ns			1
1	The lecturer demonstrated knowledge of the subject matter.					
2	The lecturer used a variety of teaching methodologies to demonstrate the course objectives (e.g. problem solving, group discussions, student presentations, project, etc.).	0				
3	The lecturer explained concepts clearly and understandably.					
4	The lecturer provided prompt and clear feedback on course assignments and examinations.					
5	The lecturer was committed to class as per the schedule; beginning and ending classes on time.					
6	The lecturer motivated and encouraged students to participate and learn interactively (questions, discussion and participation).					
7	The lecturer was helpful and showed genuine concern for the students.					
	Self-evalua	tion question	ns			
1	I contributed productively during different course activities.					
2	I am satisfied with this course and it met my expectations.					
3	I did my part to learn as much as possible in this course and broadened my knowledge.					
4	Overall, I am satisfied with this course.					

 $\triangleright$ 

Further comments or suggestions that might help to improve this course in the future:

### Appendix 14 – Senior Student Experience Survey



Page 1 | 4

## FCHS Senior Student Experience Survey



Question 3 – Is there anything else you'd like to share about educational experience with the <Program Name> program in Fatima College of Health Sciences.

Please share your feedback on educational experience

### Section 3: Learning Resources and Facilities

Question 4- How would rate the following learning resources/facilities at your campus:

	Very Poor	Poor	Average	Good	Very Good
Laboratories and Equipment					
Laboratory Access					
<program name=""> Textbooks/ Library resources</program>					
Career Counseling and Placement					
Co-curricular activities and clubs in the <program name=""></program>					
program					
Learning Management System (Moodle)					
Information Technology (Internet Access, Computers,					
Printers, etc.)					
Book store					

Question 5- Is there anything else you'd like to share about your satisfaction with the learning resources and facilities of the <Program Name> program in Fatima College of Health Sciences.

Please share your feedback on learning resources and facilities

Page 2 | 4

## FCHS Senior Student Experience Survey



### Section 4: Campus Environment and Services

Question 6- How would rate the following aspects of the campus environment and services:

	Very Poor	Poor	Average	Good	Very Good
Extracurricular, sporting and recreational facilities					
Students clubs and societies (Campus level)					
Campus Safety and Security					
Canteen Services					
Campus Clinic					
Cleanness of the Campus					
Transportation Services					

Question 7– Is there anything else you'd like to share about your satisfaction with the campus environment and services.

Please share your feedback on Campus Environment and Services

## Section 5: Skills Development

Question 8 – To what extent has your program of study developed your:

	Very Limited	Limited	Average	High	Very High
Critical thinking skills					
Verbal and written communication skills					
Ability to work as part of a team					
Confidence to learn independently					
Knowledge and skills in <program name=""> and</program>					
healthcare					
Ability to pursue a career in <program name=""> or</program>					
related healthcare professions					
Ability to obtain the qualifying license to practice					
<program name=""></program>					

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## FCHS Senior Student Experience Survey



Question 9 – Upon graduation, do you intend to:

□ Start your career as a professional < Program Profession > in a health care facility.

 $\Box$  Continue your post-graduate degree in <Program Name> in Fatima College of Health Sciences.

 $\Box$  Continue your post-graduate degree in another educational establishment.

🗌 Other \_

Question 10 - How would you rate your employment opportunities as a professional <Program Profession> upon graduating from Fatima College of Health Sciences?

□ Poor (Employment opportunities are very limited and very challenging).

Average (Employment opportunities are not different from any other health-care discipline).

□ Good (Employment opportunities exists and my education will support me to be recruited as a professional <Program Profession> for any health care facility in the UAE).

 $\Box$  Do Not Know (I have no idea about the employment opportunities, and I am not sure how my education in Fatima College of Health Sciences / <Program Name> Program will support my future career).

Question 11– In your opinion, how can the FCHS <Program Name> program be more attractive to national students to enroll in?

Please share with us your thoughts on how to make the <Program Name> program more attractive to national students to enroll in.

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# Appendix 15 – FCHS Employer Satisfaction Survey

Employers Satisfaction FCHS
Fatima College Of Health Sciences
Thank you for taking the time to complete this questionnaire. The information provided will be kept confidential and used in a summarized form only. The survey is intended to assist Fatima College of Health Sciences in preparing graduates for the work environment and enable them to better serve your organization and industry needs.
1. Company/ Organization name
2. Name of Person completing survey
3. Job title of Person completing survey
4. How many staff members does your company/organization employ
11-50
51-100
0 101-300
301-500
500+
5. How long has your company/organization been established
O Up to 2 years
O 2-5 years
O 6-10 years
Over 11
Please check the box which best indicates your level of satisfaction with our graduates based on your experience and as demonstrated by their competencies and performance in each of the following:
1



6. General /Communic	ation skills:				
	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Oral communication skills	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Written communication skills	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Numeracy	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Capacity to acquire knowledge and develop skills	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Capacity to analyze and solve problems	$\bigcirc$	0	0	$\bigcirc$	0
7. Maturity and Adapta	bility:				
	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Broad general knowledge	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
Capacity to understand different viewpoints	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
Ability to develop innovative ideas or identify new opportunities	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	$\bigcirc$
Ability to operate in an international and multicultural context	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Capacity to work autonomously	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
8. Teamwork and interp	oersonal skills:				
	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Capacity for co- operation and teamwork	$\bigcirc$	$\bigcirc$	0	$\bigcirc$	$\bigcirc$
Getting on well with colleagues and co- workers	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Collaborating effectively with colleagues to complete tasks	$\bigcirc$	0	$\bigcirc$	$\bigcirc$	$\bigcirc$

. Technical skills and o	domain-specific kr	nowledge:			
	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Using knowledge of concepts and principles to understand new workplace problems	0	0	0	0	0
Understanding the fundamentals of their field /profession	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	0
Effective use of technologies	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Applying technical skills in a workplace context	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Observing professional and ethical standards	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
.0. Employability:		Ordefield	bibl	Disastisfied	Mary Diagoth find
Ability to cope with work pressure and stress	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Capacity to be flexible and adaptable	0	0	$\bigcirc$	0	0
Ability to manage their time and meet deadlines	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Understanding how to use research to solve problems	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
Managerial and leadership skills	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$	$\bigcirc$
1. Based on your exp neet your company's r		Fatima College of	f Health Scienc	es improve the g	raduate's skills to
.2. Based on your exp Sciences					
Very Satisfied	Satisfied	Neutral	D	issatisfied	Very Dissatisfied
$\bigcirc$	$\bigcirc$	0		$\bigcirc$	0