

SHAHEED ZULFIQAR ALI BHUTTO MEDICAL UNIVERSITY

Institutional Performance Enhancement Report (IPER)



Review of Institutional Performance and Enhancement (RIPE)

Assessment Year:

College/Institute:

Executive Summary

The Institutional Performance Enhancement Report (IPER) of [Name of Affiliated Institute/College] has been prepared in accordance with the Quality Assurance Agency (QAA), Higher Education Commission (HEC) guidelines under the Review of Institutional Performance & Enhancement (RIPE) framework aligned with PSG-2023.

This report presents a comprehensive self-evaluation of the Institute/College against the sixteen (16) RIPE Standards, covering governance, academic quality, student support, research, institutional integrity, and continuous quality improvement mechanisms.

The affiliated Institute/College operates under the academic and regulatory oversight of Shaheed Zulfiqar Ali Bhutto Medical University (SZABMU) and complies with all relevant statutory, regulatory, and accreditation requirements. The internal quality assurance functions are managed through the Affiliated Institute Quality Assessment and Effectiveness (aIQAE), which ensures systematic monitoring, evaluation, and continuous improvement of academic and administrative processes.

[Name of Institute/College] offers programs in (Field of Program and Number) _____ at undergraduate/postgraduate levels and serves _____ number of students with _____ number of faculty members. The Institute is committed to delivering high-quality education aligned with SZABMU's vision, national healthcare priorities, and stakeholder expectations.

The IPER covers institutional governance, strategic planning, academic programs, student support services, research and innovation, integrity mechanisms, resource management, and quality assurance systems.

The evaluation was conducted through:

- Review of institutional policies and regulatory documents
- Analysis of academic, administrative, and financial records
- Stakeholder consultations (faculty, students, administration)
- Assessment of Self-Assessment Reports (SARs) and action plans
- Verification of documentary evidence aligned with RIPE standards

The Affiliated Institute Quality Assessment and Effectiveness (aIQAE), coordinated the process, ensuring systematic documentation, evidence mapping, and reflective analysis.

Key Strengths Identified

E.g.

- Clearly articulated vision and mission aligned with SZABMU and national higher education priorities.
- Transparent governance and effective leadership structure.
- Merit-based admissions and standardized assessment system.
- Structured curriculum aligned with regulatory requirements (PM&DC/HEC as applicable).
- Functional aIQAE with documented Self-Assessment Reports (SARs).
- Student support mechanisms, including academic advising and grievance redressal.
- Compliance with anti-plagiarism, ethics, and integrity policies.

Areas for Enhancement

E.g.

- Strengthening research culture and external funding acquisition.
- Digital transformation of academic and examination processes.
- Expansion of faculty development initiatives.
- Improved industry and community engagement linkages.
- Enhanced documentation and KPI-based performance tracking.

Quality Assurance & Continuous Improvement Plan

E.g.

The aQAE has implemented systematic Self-Assessment mechanisms, stakeholder feedback processes, and action-tracking systems. Recommendations from previous reviews have been incorporated into the institutional action plan with defined timelines and responsible offices.

The Institute remains committed to:

- Strengthening outcome-based education implementation
- Enhancing research and innovation capacity
- Expanding stakeholder engagement
- Institutionalizing data-driven decision-making

Conclusion

The self-assessment demonstrates that **[Name of Institute/College]** substantially complies with the RIPE standards and maintains structured quality assurance practices under the oversight of SZABMU. The Institute is committed to continuous quality improvement and sustainable institutional growth in alignment with HEC-QAA requirements and PSG-2023 standards.

This IPER reflects the collective efforts of faculty, administration, students, and stakeholders in promoting academic excellence, institutional integrity, and continuous enhancement.

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<input type="checkbox"/> Student representation is ensured in academic and quality decision-making forums.	54
<input type="checkbox"/> Remedial and developmental academic support mechanisms are implemented. Functional grievance redressal system resolves student issues timely.	54
<input type="checkbox"/> Equal access to co-curricular and extracurricular resources is ensured.	54
<input type="checkbox"/> Basic support facilities (library, cafeteria, counselling, health, common rooms) are available.....	54
<input type="checkbox"/> SCALE is established with a formal constitution and QA participation.	54

□ Student feedback is systematically collected and used for improvement.	54
□ Student support staff are qualified and receive capacity building.	54
□ Adequate academic, career and counselling support services are accessible.	54
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STANDARDS AND EVIDENCES CHECKLIST

STANDARD 1: Vision, Mission, Goals & Strategic Planning

EOI	Description	Required Evidence	Status (✓ / ✗)
1.1	Vision & Mission formally approved	Approved Vision & Mission document, Syndicate/Senate minutes	<input type="checkbox"/>
1.2	Public availability	Website screenshots, Prospectus	<input type="checkbox"/>
1.3	Strategic Plan aligned with mission	Strategic Plan (2023–2028), KPI document	<input type="checkbox"/>
1.4	Stakeholder involvement	Meeting minutes, consultation reports	<input type="checkbox"/>
1.5	Monitoring of strategic goals	Annual progress reports, KPI dashboards	<input type="checkbox"/>

STANDARD 2: Governance, Leadership & Organization

EOI	Description	Required Evidence	Status (✓ / ✗)
2.1	Defined governance structure	Organogram, Statutes	<input type="checkbox"/>
2.2	Roles & responsibilities	TORs of committees	<input type="checkbox"/>
2.3	Regular statutory meetings	Meeting minutes	<input type="checkbox"/>
2.4	Transparent decision-making	Policy documents, approval records	<input type="checkbox"/>
2.5	Performance review of leadership	Evaluation reports	<input type="checkbox"/>

STANDARD 3: Institutional Resources & Planning

EOI	Description	Required Evidence	Status (✓ / ✗)
3.1	Adequate human resources	Faculty list, HEC compliance sheets	<input type="checkbox"/>
3.2	Financial planning	Annual budget	<input type="checkbox"/>
3.3	Infrastructure adequacy	Infrastructure inventory	<input type="checkbox"/>
3.4	Resource allocation process	Budget approval minutes	<input type="checkbox"/>
3.5	Resource monitoring	Annual financial reports	<input type="checkbox"/>

STANDARD 4: Audit & Finance

EOI	Description	Required Evidence	Status (✓ / ✗)
4.1	Internal audit system	Internal audit reports	<input type="checkbox"/>
4.2	External audit compliance	Auditor General report	<input type="checkbox"/>
4.3	Procurement transparency	Procurement policy	<input type="checkbox"/>
4.4	Financial accountability	Financial statements	<input type="checkbox"/>
4.5	Risk management	Risk management policy	<input type="checkbox"/>

STANDARD 5: Affiliated Colleges / Institutions

EOI	Description	Required Evidence	Status (✓ / ✗)
5.1	Affiliation policy	Affiliation statutes	<input type="checkbox"/>
5.2	Academic oversight	Inspection reports	<input type="checkbox"/>
5.3	QA mechanisms	SARs of affiliated colleges	<input type="checkbox"/>
5.4	Performance monitoring	Annual review reports	<input type="checkbox"/>
5.5	Compliance tracking	Compliance checklist	<input type="checkbox"/>

STANDARD 6: Internationalization & Global Engagement

EOI	Description	Required Evidence	Status (✓ / ✗)
6.1	Internationalization policy	Approved policy	<input type="checkbox"/>
6.2	MOUs & agreements	Signed MOUs	<input type="checkbox"/>
6.3	Exchange programs	Mobility records	<input type="checkbox"/>
6.4	Joint research/publications	Research collaboration records	<input type="checkbox"/>
6.5	International QA participation	Membership certificates	<input type="checkbox"/>

STANDARD 7: Faculty Recruitment, Development & Support

EOI	Description	Required Evidence	Status (✓ / ✗)
7.1	Transparent recruitment policy	Recruitment policy	<input type="checkbox"/>
7.2	Qualification compliance	Faculty CVs	<input type="checkbox"/>
7.3	Faculty development programs	FDP reports	<input type="checkbox"/>
7.4	Performance appraisal	Evaluation forms	<input type="checkbox"/>
7.5	Support services	HR policies	<input type="checkbox"/>

STANDARD 8: Academic Programmes & Curricula

EOI	Description	Required Evidence	Status (✓ / ✗)
8.1	Curriculum approval process	Academic Council minutes	<input type="checkbox"/>
8.2	OBE alignment	CLO-PLO mapping	<input type="checkbox"/>
8.3	Periodic review	Curriculum review reports	<input type="checkbox"/>
8.4	Industry/regulatory alignment	PM&DC compliance	<input type="checkbox"/>
8.5	Course documentation	Course outlines	<input type="checkbox"/>

STANDARD 9: Admission, Progression, Assessment & Certification

EOI	Description	Required Evidence	Status (✓ / ✗)
9.1	Transparent admission policy	Admission policy	<input type="checkbox"/>
9.2	Merit-based selection	Merit lists	<input type="checkbox"/>
9.3	Assessment regulations	Examination rules	<input type="checkbox"/>
9.4	Secure exam system	SOPs	<input type="checkbox"/>
9.5	Certification process	Degree issuance policy	<input type="checkbox"/>

STANDARD 10: Student Support Services

EOI	Description	Required Evidence	Status (✓ / ✗)
10.1	Academic advising	Advisory records	<input type="checkbox"/>
10.2	Counseling services	Counseling policy	<input type="checkbox"/>
10.3	Hostel & facilities	Hostel policy	<input type="checkbox"/>
10.4	Grievance redressal	Complaint logs	<input type="checkbox"/>
10.5	Career guidance	Career office reports	<input type="checkbox"/>

STANDARD 11: Teaching, Learning & Community Engagement

EOI	Description	Required Evidence	Status (✓ / ✗)
11.1	Teaching methodologies	Teaching policy	<input type="checkbox"/>
11.2	Clinical/community exposure	Outreach records	<input type="checkbox"/>
11.3	Student feedback system	Survey reports	<input type="checkbox"/>
11.4	Teaching evaluation	Evaluation forms	<input type="checkbox"/>
11.5	Innovation in pedagogy	Workshop reports	<input type="checkbox"/>

STANDARD 12: Research, Innovation & Industrial Linkages

EOI	Description	Required Evidence	Status (✓ / ✗)
12.1	Research policy	Approved policy	<input type="checkbox"/>
12.2	Research funding	Grant records	<input type="checkbox"/>
12.3	Publications	HEC recognized journal list	<input type="checkbox"/>
12.4	ORIC functioning	ORIC reports	<input type="checkbox"/>
12.5	Industry collaboration	MoUs with industry	<input type="checkbox"/>

STANDARD 13: Fairness & Integrity

EOI	Description	Required Evidence	Status (✓ / ✗)
13.1	Anti-plagiarism policy	Turnitin reports	<input type="checkbox"/>
13.2	Code of conduct	Policy document	<input type="checkbox"/>
13.3	Harassment policy	Committee notifications	<input type="checkbox"/>
13.4	Ethics review board	ERB meeting minutes	<input type="checkbox"/>
13.5	Disciplinary procedures	Case records	<input type="checkbox"/>

STANDARD 14: Public Information & Transparency

EOI	Description	Required Evidence	Status (✓ / ✗)
14.1	Updated website	Website screenshots	<input type="checkbox"/>
14.2	Public access to policies	Online policy repository	<input type="checkbox"/>
14.3	Prospectus availability	Prospectus copy	<input type="checkbox"/>
14.4	Public reporting	Annual reports	<input type="checkbox"/>
14.5	Data transparency	Institutional statistics	<input type="checkbox"/>

STANDARD 15: Institutional Effectiveness & QA

EOI	Description	Required Evidence	Status (✓ / ✗)
15.1	aIQAE structure	aIQAE notification	<input type="checkbox"/>
15.2	SAR completion	SAR reports	<input type="checkbox"/>
15.3	Internal audits	Audit reports	<input type="checkbox"/>
15.4	Performance indicators	KPI reports	<input type="checkbox"/>
15.5	Improvement tracking	CQI action logs	<input type="checkbox"/>

STANDARD 16: Continuous Quality Improvement (CQI) & Cyclical EQA

EOI	Description	Required Evidence	Status (✓ / ✗)
16.1	CQI framework	CQI policy	<input type="checkbox"/>
16.2	Action plan implementation	Action tracking sheets	<input type="checkbox"/>
16.3	RIPE preparation process	IPER documentation	<input type="checkbox"/>
16.4	Monitoring mechanism	Progress review reports	<input type="checkbox"/>
16.5	Follow-up on recommendations	Compliance reports	<input type="checkbox"/>

SECTION – 1

Institutional Overview

i. Institutional Background and History

Name of Institute/College: _____

Year of Establishment: _____

Affiliation with SZABMU Since: _____

[Name of Institute/College] was established in _____ with the objective of _____. Since its inception, the Institute has progressively expanded its academic offerings, infrastructure, and student intake to meet regional and national healthcare and education needs.

Major Milestones

- Establishment of the Institute:
- Affiliation with SZABMU:
- Launch of first undergraduate/postgraduate program:
- Accreditation by the relevant regulatory body:
- Establishment of aIQAE:
- Other significant achievements:

The Institute continues to evolve in alignment with SZABMU’s academic policies and national higher education reforms.

ii. Institutional Charter/Act, Statutes, and Regulations

a. Summary of Charter/Act and Regulatory Framework

As an affiliated Institute/College under Shaheed Zulfiqar Ali Bhutto Medical University (SZABMU), the institution operates under:

- SZABMU Act/Charter: [Insert Web Link]
- SZABMU Statutes: [Insert Web Link]
- SZABMU Regulations & Academic Rules: [Insert Web Link]
- Affiliation Regulations (if applicable): [Insert Web Link]

The institute's operational act and policies:

- College/ Institute Act/Charter: [Insert Web Link]
- College/ Institute Statutes: [Insert Web Link]
- College/ Institute Regulations & Academic Rules: [Insert Web Link]

The charter defines the powers, functions, governance structure, academic responsibilities, and regulatory framework applicable to affiliated institutions. The statutes and regulations provide operational guidelines related to admissions, examinations, faculty appointments, and quality assurance.

b. Amendments (if applicable)

The following amendments have been incorporated in the Charter/Statutes (if applicable):

- Amendment Year: _____
- Summary of amendment:

- Amendment Year: _____
- Summary of amendment:

Weblinks to updated documents:
 [Insert Updated Charter Link]
 [Insert Updated Statutes Link]

The Institute ensures compliance with all revised statutes and regulations issued by SZABMU and relevant authorities.

iii. Governance Structure

a. Syndicate / Board of Governors (BOG)

The governance oversight of the Institute is exercised through SZABMU statutory bodies and/or the Institute’s Board of Governors (if applicable).

Composition of Syndicate/BOG:

- Chairperson: _____
- Member(s): _____
- Nominee(s) of SZABMU: _____
- External Member(s): _____
- Secretary: _____

The BOG/Syndicate is responsible for strategic direction, policy approval, and institutional oversight.

b. Key Statutory Forums

The following statutory forums function at the University/Institute level:

Forum Title	Role / Responsibility
Academic Council	Approval of curricula, academic regulations
Board of Studies	Curriculum development and review
Finance & Planning Committee	Budget approval and financial oversight
Examination Committee	Assessment and certification oversight
Ethics Review Board (ERB)	Research ethics approval
Disciplinary Committee	Student/faculty disciplinary matters

c. Statutory Positions and Officers

Position	Name	Key Responsibilities
Principal/Dean		E.g. Academic & administrative head
Vice Principal		Academic coordination
Director aIQAE		Quality assurance oversight
Controller of Examinations		Examination management
Registrar (if applicable)		Administrative coordination
Treasurer/Finance Officer		Financial management

iv. Vision, Mission, and Values (Official/Approved)

Vision

[Insert officially approved Vision statement]

Mission

[Insert officially approved Mission statement]

Core Values / Institutional Ethos

E.g.

- Academic Excellence
- Integrity and Transparency
- Professionalism
- Community Service
- Innovation and Research
- Accountability

Institutional Goals

E.g.

- Ensure high academic standards
- Promote research and scholarly activity
- Enhance student learning experience
- Strengthen community engagement
- Institutionalize quality assurance mechanisms

v. Strategic Aims and Priorities

E.g.

The Institute's strategic aims focus on safeguarding academic standards and enhancing learning opportunities through:

- Implementation of Outcome-Based Education (OBE)
- Regular curriculum review aligned with regulatory requirements
- Faculty development and capacity-building initiatives
- Structured student support and mentoring systems
- Research enhancement and publication growth
- Digitalization of academic and examination systems
- Strengthening internal quality assurance through aIQAE

These priorities align with SZABMU's Strategic Plan and national higher education priorities.

vi. Challenges in Implementation

E.g.

While implementing regulatory and quality requirements, the Institute has encountered certain challenges:

- Resource limitations (financial and infrastructure constraints)
- Delays in regulatory updates or external approvals
- Need for enhanced faculty training in OBE and digital systems
- Increasing compliance documentation workload
- Balancing academic expansion with quality assurance requirements

To address these challenges, the Institute has adopted phased implementation plans, capacity-building programs, and strengthened coordination with SZABMU and regulatory bodies.

SECTION – 2 Demonstrated Strength in Quality Management

2.1 Institutional Experience in Managing Quality and Standards

Shaheed Zulfiqar Ali Bhutto Medical University (SZABMU) has established a structured and systematic framework for the management of academic quality and standards through its Institutional Quality Assessment and Effectiveness (IQAE). The aIQAE operates under approved university statutes and functions as the central coordinating body at [Name of Affiliated Institute] for Program-level Self-Assessment Reports (SARs) Institutional performance monitoring, Compliance with HEC-QAA and PSG-2023 requirements, Academic audits and quality reviews

- Monitoring and documentation of corrective and preventive actions at the institutional level
For affiliated institutes, quality assurance functions are performed through the Affiliated Institute Quality Assessment and Effectiveness (aIQAE) units. These units operate under the oversight of SZABMU's IQAE and are responsible for:
 - Conducting SARs at the program level
 - Monitoring implementation of QA policies
 - Ensuring compliance with university and HEC standards
 - Submitting periodic quality performance reports
- Over the years, SZABMU has helped us transition from compliance-based QA practices to a Continuous Quality Improvement (CQI) driven framework, emphasizing evidence-based decision making, measurable KPIs, and structured follow-up mechanisms.

2.2 Outcomes of Previous Reviews

a. Results / Outputs & Outcomes of Previous External and Internal Review

E.g.

The institute has undergone multiple internal and external quality reviews, including:

- Program-Level Accreditation Reviews (PMDC, HEC, Nursing Council, etc.)
- Internal Academic Audits
- Self-Assessment Cycles under IQAE

Key Outputs Identified:

- Strengthening of academic governance structures
- Standardization of program approval processes
- Revision of curricula in line with national frameworks
- Establishment of documented QA policies and SOPs
- Enhanced documentation and evidence management

Key Outcomes Achieved:

- Improved compliance with HEC-QAA standards
- Strengthened academic monitoring systems
- Enhanced student feedback integration
- Formalization of Closing-the-Loop practices
- Increased institutional readiness for external evaluations

b. Institutional Response to Previous Reviews

E.g.

Following each review, the Institute has:

- Developed structured Action Plans with timelines and responsible officers
- Approved corrective measures through statutory bodies (Academic Council/Syndicate)
- Assigned monitoring responsibility to IQAE
- Conducted follow-up reviews to assess implementation status
- Documented evidence of compliance and improvement

The university ensured that review recommendations were not treated as compliance exercises but translated into measurable improvements in academic delivery and governance.

2.3. Major Changes Since the Last Review

a. Summary of Major Changes

E.g.

Since the last external/internal review, [Institute Name] has implemented the following major reforms:

- Alignment with PSG-2023 and Revamped QAA Framework
- Strengthening of aIQAE structure and documentation systems
- Introduction of digital record management for QA documentation
- Capacity building workshops for faculty and QA staff

b. Addressing Previous Recommendations & Building on Good Practices

E.g.

Recommendations from previous reviews were addressed through:

- Policy revisions and approvals via statutory forums
- Strengthening internal audit mechanisms
- Structured implementation tracking through IQAE
- Enhanced stakeholder engagement (faculty, students, external reviewers)
- Integration of good practices into formal SOPs

Identified good practices were institutionalized through:

- Documentation in QA manuals
- Incorporation into Strategic Plan
- Formal approval in the Academic Council
- Replication across affiliated institutes

c. Action Plans and Closing the Loop Mechanism

E.g.

The institute follows a structured Closing the Loop (CTL) framework:

1. Identification of gaps through SARs / Reviews
2. Development of Corrective Action Plan
3. Assignment of responsibility and timeline
4. Monitoring through aIQAE meetings
5. Evidence submission by the concerned department
6. Verification of implementation
7. Reporting to the Academic Council/Syndicate and IQAE, SZABMU.

All action plans are documented and archived both in hard and soft form.

SECTION-3

EFB Template (E: Existing Practices, F: Future Practices & B: Best practices)

STANDARD 1: VISION, MISSION & STRATEGIC PLANNING

Expectation: The institution's vision, mission, and subsequent goals define its purpose and drive institutional activities through strategic planning within the context of national higher education priorities, regional and local requirements, and the needs of students and the wider group of stakeholders.

Expectation outcome indicators (EOIs)

The institution should:

- Ensure that the institution's vision and mission are conceived and developed in consultation with the broader stakeholders.
- Ensure that the institution's vision, mission, and goals are consistent with the provisions in the charter, including territorial and academic jurisdictions.

- Ensure that the institution’s mission and goals serve as the foundation for all its activities
- Have a strategic plan to drive all the activities of the institution and provide directions for future plans of the HEI, including resource allocation priorities, and develop a relevant, effective, and coherent ecosystem for excellence
- Maintain a well-documented strategic plan linking institutional vision and mission to that of the faculty and departmental level, ensuring effective implementation through defined SMART goals and key performance indicators (KPIs).
- Practice an effective approach to the planning and evaluation of its provision, including the management of its academic resources appropriate to the needs of its students and their wider group of stakeholders
- Convey the importance of the systematic evaluations of mission, goals, and strategic planning to inform decision-making by ensuring stakeholders are well informed.

Indicative Evidence:

1. Vision & Mission

- University Act / Charter (mission extract)
- Approved Vision & Mission Statement (Syndicate/BoG)
- University Prospectus / Website (published mission)
- Office Memorandum / Notification adopting Mission

2. Strategic Planning

- Institutional Strategic Plan (e.g., 2025–2027)
- Departmental Action Plans (aligned to mission)
- KPI Dashboard / Performance Scorecard
- Mapping: Institutional Mission → Department Goals/KPIs
- Strategic Planning Committee TORs & Minutes

3. Review of Mission & Goals

- Strategic Planning Committee Reports (mission/goals review)
- Academic Council / Syndicate / BoG Minutes
- Institutional Self-Assessment Report (Mission section)
- Stakeholder Feedback Analysis Report
- Periodic Goals Review Report (IQAE (QEC) / P&D Section)

4. Implementation Coordination

- QEC Annual Performance Evaluation Report
- Strategic Plan Progress Reports (Quarterly/Bi-Annual)
- Coordination / Deans Committee Minutes
- Action Tracking Register / KPI Dashboard
- Implementation Assignment Orders / Notifications

5. Dissemination & Commitment

- Mission Dissemination Plan / Communication Strategy
- Orientation Program Reports (faculty & students)
- Department Circulars / Notifications (Mission circulation)
- Evidence of Mission Visibility (photos, website, prospectus)
- Awareness Survey Report (faculty & students)
- Institutional Initiatives Reports (awards, seminars)
- Governing Body / Syndicate / BoG Minutes (mission discussion)

E: Existing Policies & Practices: Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.		
Standard 1: Vision, Mission & Strategic Planning Expectation: The institution’s vision, mission, and subsequent goals define its purpose and drive institutional activities through strategic planning within the context of national higher education priorities, regional and local requirements, and the needs of students and the wider group of stakeholders.		
Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.	Indicative Evidence Documentary Evidence against each initiative/practice.	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., The institution has established a formally approved Vision and Mission statement through a consultative process involving the Board of Governors, Academic Council, and key stakeholders. The statements reflect the institution's commitment to national higher education priorities and regional socio-economic needs.	E.g., • University Act/Charter/Ordinance (Extract) • Notification of Approved Vision & Mission • Official University Prospectus (Printed/Soft) • Screenshot of Vision/Mission on the official website • Minutes of BoG/Syndicate meeting approving the Mission	E.g., Annexure-xx
F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard-1: Expectation: The institution’s vision, mission, and subsequent goals define its purpose and drive institutional activities through strategic planning within the context of national higher education priorities, regional and local requirements, and the needs of students and the wider group of stakeholders.		

<p>B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.</p>		
<p>Standard-1: Expectation: The institution’s vision, mission, and subsequent goals define its purpose and drive institutional activities through strategic planning within the context of national higher education priorities, regional and local requirements, and the needs of students and the wider group of stakeholders.</p>		
<p>Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.</p>	<p>Indicative Evidence Policy/ Document of or for the described best practice (if any)</p>	<p>Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)</p>
<p>The institution has developed and operationalized a structured, end-to-end "Mission to Action" Cascade Model that systematically translates the institutional Vision and Mission into Departmental Missions, Annual Divisional Goals, Individual Employee Performance Objectives, and Student Chapter Projects.</p> <p>Why it is a Best Practice:</p> <ul style="list-style-type: none"> • Innovative: Integrates QA, HR performance management, and student affairs under one strategic umbrella. • Effective: 100% of departments and 95% of faculty/staff now have performance objectives explicitly linked to the Institutional Mission (evidenced by annual appraisals). • Replicable: The methodology is documented as a procedural manual and has been presented at two HEC QEC Conferences as a replicable model for other universities. • Sustainable: Embedded in the university's Performance Management System (PMS) and LMS. 	<p>"Institutional Mission Cascade & Alignment Policy" (Version 2.0, 2024) "Mission to Action: Implementation Guide for Departments & Individuals." Comparative Analysis Report of Mission Alignment (2022 vs. 2024)</p>	<p>E.g., Annexure-xx</p>

STANDARD 2: GOVERNANCE, LEADERSHIP, AND ORGANIZATION

Expectation: The institution has an inclusive governance system that facilitates the fulfilment of its mission and goals and strengthens institutional effectiveness and integrity. Leaders have a clear and ambitious vision for providing high-quality, inclusive education and training to all. This is realized through adherence to the act/charter, well-prescribed statutes as per the requirements of the charter, rules, policies, and regulations, with strong institutional mechanisms, practices, shared values, and is ultimately led by the Vice Chancellor, ensuring meaningful contributions by all the statutory authorities.

Expectation outcome indicators (EOIs)

The institution should:

- Ensure that the system of organization and governance in the university is responsive to the present and future needs of the organization
- Ensure that the system of organization and governance is consistent with the power and functions and other requirements given in the charter and statutes, rules, regulations and policies
- Ensure that the system of organization and governance exercises prudence in policy development and decision-making processes in the best interests of all the stakeholders in general, and that of students in particular
- Ensure that the system of organization and governance has elements of good governance such as rule of law, accountability, effectiveness and efficiency, transparency, equity, and inclusion
- Create and sustain an environment which enables teaching, learning and scholarship that promotes high-quality teaching and learning and promotes genuine, impactful research culture
- Create and sustain an environment which promotes provision that is appropriate to the surrounding industry and the aspirations of its students
- Create and sustain an environment which enables the effective functioning of all programmes, and enables students to progress and achieve their learning objectives
- Create and sustain an environment in which students and other stakeholders participate in the governance system
- Have leadership that focuses on improving faculty's subject and pedagogical knowledge to enhance the teaching of the curriculum and the appropriate use of assessment; the practice and subject knowledge of staff are built up and improve over time
- Have leadership that aims to ensure that all learners complete their programmes of study; they provide the support for faculty and staff to make this possible
- Have leadership that engages effectively with students and wider stakeholder groups
- Have leadership that engages with their faculty and staff and are aware and take account of the main pressures on them; they are realistic and constructive in the way that they manage faculty and staff, including their workload
- Have well-defined institutional mechanism to make each non-academic/service department - including registrar's office, library, examination department, student affairs, career counselling, it department, transportation department, hostel management, cafeteria management - conduct well-structured surveys to get students and faculty feedback and to improve their services based on the feedback provided by the stakeholders
- Have a well-thought-out business automation and digital transformation policy and process to increase institutional productivity and efficiency and to provide quality services to stakeholders in general, and students in particular.

Indicative Evidence:

1. Governance Framework & Legislation

- University Act / Charter / Presidential Ordinance
- University Statutes (Chancellor/Governor approved)
- Rules & Regulations (Governance & Administration)
- Service Statutes / Terms & Conditions for Faculty/Staff
- Financial Regulations & Procurement Rules
- Scheme of Studies / Academic Regulations
- Delegation of Financial & Administrative Powers / Authority Matrix

2. Governing Body Establishment & Member Selection

- Notification of Constitution of Syndicate / Board of Governors / Board of Trustees
- Appointment & Selection Policy for Governing Body Members (TORs, Tenure, Nomination)
- Chancellor's Nomination / Appointment Letters for Governing Body Members
- Fit-for-Purpose Criteria Document (Skills, Expertise, Diversity)
- Search / Nomination Committee Reports

3. Governance Effectiveness Assessment

- Institutional Performance Evaluation Report / Self-Assessment

- QEC Annual Report (Governance Effectiveness Section)
- External Audit / Review Report on Governance Structures
- Governing Body Self-Assessment Survey Report
- Minutes of Syndicate / BoG Meetings (Governance Review Agenda)

4. Conflict of Interest & Ethics

- Conflict of Interest Policy (Approved by Syndicate/BoG)
- Code of Ethics / Conduct for Governing Body, Faculty & Staff
- Declaration of Interest Forms (Signed by Members & Leadership)
- Conflict of Interest Register / Disclosure Log
- Notification for Annual Submission of Conflict of Interest Statements

5. Records of Statutory Body Meetings

- Minutes of Syndicate / BoG Meetings (Agendas, Discussions, Resolutions)
- Minutes of Academic Council Meetings
- Minutes of Board of Faculty / Board of Studies Meetings
- Minutes of Finance & Planning Committee Meetings
- Minutes of Selection Board / Appointment Committee Meetings
- Action Taken Reports on Resolutions

6. Student Participation in Governance

- Constitution / TORs for Student Council / Union (SCALE)
- Notifications on Nomination/Election of Student Representatives
- Minutes of Statutory Bodies showing Student Attendance & Contributions
- Student Feedback Policy & Mechanism for Decision-Making
- Annual Student Affairs / Council Activities Report
- Orientation / Training Report for Student Representatives

7. Governing Body Roles & Activities

- Roles & Responsibilities of Syndicate / BoG Members (TORs)
- Annual Report of Vice Chancellor / Rector to Governing Body
- Attendance Register of Governing Body Meetings
- Annual Calendar of Statutory Bodies Meetings
- Annual Report on Official Activities of Governing Body Members

8. Leadership Commitment

A. Shared Vision & Mission:

- VC / Rector Vision Statement & Strategic Direction Document
- Minutes of Leadership Retreat / Strategic Planning Workshop
- Performance Agreements / KPIs of Senior Leadership linked to Mission
- Declarations of Commitment to Mission (Signed by Leadership & Governing Body)

B. Student Success (Retention, Achievement, Employment):

- Student Retention & Success Policy
- Annual Report on Student Progression, Graduation & Dropout Analysis
- Career Counseling & Placement Office Annual Report
- Alumni Tracking / Graduate Destination Survey Report
- Student Support Programs Report (Advising, Remedial, Mental Health)

C. Staff Development:

- Faculty Development Program (FDP) Policy & Annual Report
- Staff Training & Professional Development Plan
- Promotions & Tenure Track Policy
- Faculty Achievement & Recognition Awards Report

D. Engagement with Industry & Society:

- ORIC / Industrial Liaison Annual Report (Industry partnerships, MoUs)
- Community Engagement / Outreach Policy & Activity Report
- Advisory Boards / Industrial Consortia Minutes & TORs
- Report on Contributions to SDGs / Social Impact Initiatives
- Employer Satisfaction / Feedback Survey Report

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 2: Governance, leadership, and organization		
Expectation: The institution has an inclusive governance system that facilitates the fulfilment of its mission and goals and strengthens institutional effectiveness and integrity. Leaders have a clear and ambitious vision for providing high-quality, inclusive education and training to all. This is realized through adherence to the act/charter, well-prescribed statutes as per the requirements of the charter, rules, policies, and regulations, with strong institutional mechanisms, practices, shared values, and is ultimately led by the Vice Chancellor, ensuring meaningful contributions by all the statutory authorities.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
Adoption of a shared leadership development program for all statutory authorities to enhance strategic decision-making, leadership skills, and alignment with institutional mission.	Leadership Development Program Policy; Attendance Records; Training Evaluation Reports	E.g., Annexure-xx

STANDARD 3: INSTITUTIONAL RESOURCES AND PLANNING

Expectation: The human, physical, virtual/technological, financial, and information resources of an institution are appropriate, sufficient, and accessible to realize its institutional mission and goals.

Expectation outcome indicators (EOIs)

The institution should:

- Have a strong institutional mechanism to plan, develop, and review the available infrastructure, and other academic or non-academic resources to ensure the availability of adequate means and arrangements to enable students to develop their academic, personal, and professional potential
- Have institutional policies and mechanisms for infrastructure planning, development, execution, monitoring, and evaluation
- Have adequate and readily accessible academic and non-academic resources to provide quality learning opportunities to all students and to allow them to complete their studies
- Have adequate and readily accessible technological/virtual resources that enable students to achieve their learning objectives
- Demonstrate effective and efficient utilization and continued development of these resources to enable students to achieve their learning objectives
- Create and sustain an environment in which students and other stakeholders are able to give feedback about the resources used for teaching and learning

1. **Indicative Evidence:**
2. **Relevant policy documents and practices and their implementation**
 - Financial Management & Budget Policy (Approved by Syndicate/BoG)
 - HR / Recruitment & Selection Policy
 - Procurement Policy & Procedures Manual (PPRA compliant)
 - Asset Management & Inventory Control Policy
 - Laboratory & Equipment Usage Policy
 - Library Resource Development Policy
 - IT Infrastructure & Digital Resources Policy
 - Annual Implementation Status Report on Resource Policies
 - Compliance Reports / Audit Certificates
3. **Review reports of institutional resources, fundraising, and grant activities**
 - ORIC Annual Report (Fundraising & Grants Section)
 - Endowment / Development Directorate Annual Report
 - External Grants & Contracts Register
 - Fundraising Campaign Reports (Alumni/Corporate/Philanthropic)
 - QEC Review Report on Resource Utilization & Fundraising
 - Donor Reporting & Compliance Files
 - MoUs / Agreements with Funding Agencies
4. **Review of periodic reports of institutional planning, assessment, and budget**
 - Annual Budget Book / Budget Estimates (Approved)
 - Revised Budget Statements (Mid-Year / Quarterly)
 - Annual Audit Report (External Auditor)
 - Audit Paras & Management Replies / ATR
 - Finance & Planning Committee Minutes (Budget Review)
 - Budget Utilization Certificate (Head-wise Expenditure)
 - Five-Year Development / Rolling Plan
 - QEC Annual Performance Review Report (Resource Planning Section)
5. **Review reports of work of institutional committees on resource management**
 - TORs: Finance & Planning Committee, Procurement Committee, Asset Disposal Committee, Works & Physical Planning Committee
 - Committee Meeting Minutes (resource allocation / procurement / replacement decisions)
 - Action Taken Reports (ATR) on committee resolutions
 - Notifications regarding constitution of resource committees
6. **Review reports of resource availability, allocation, and planning linkage**
 - Resource Mapping / Availability Statement (Faculty, Infrastructure, Equipment, Finances)
 - Strategic Plan Resource Allocation Matrix
 - ADP vs. Actual Expenditure Report
 - QEC Report on Resource Gap Analysis
 - Resource Allocation Criteria Document
 - Departmental Resource Requisition & Allocation Records
 - Planning & Development Branch Quarterly Progress Report
7. **Review reports of transparency of contracts and agreements**
 - Contract Management Policy & Procedure Manual
 - Tender Notices / Public Procurement Advertisements
 - Register of Contracts & Agreements
 - Signed Contracts / Agreements (Sample)
 - Transparency / Procurement Review Reports
 - PPRA Compliance Certificates
 - Vendors' Performance Evaluation Reports
 - Asset Sharing Agreements (Inter-departmental / Inter-university MoUs)
 - Audit Report Extracts on Contract Transparency

8. **Review reports of endowment policies and procedures**
 - Endowment Fund Policy / Trust Deed (Approved)
 - Endowment Fund Investment & Utilization Procedures
 - Endowment Fund Annual Report (Receipts, Investments, Disbursements)
 - Endowment Committee TORs & Minutes
 - Audit Report of Endowment Fund
 - Endowment-funded Scholarships / Chairs / Research Grants Report
 - Donor Agreements / Bequest Documents
9. **Review reports of resource management**
 - Annual Report – Registrar / Director Administration (Infrastructure & Physical Resources)
 - Annual Report – Treasurer / Director Finance (Financial Resource Management)
 - Library Annual Report (Collection, Usage, Digital Resources)
 - IT Directorate Annual Report (Hardware, Software, Network)
 - Laboratory & Equipment Utilization Report
 - Transport & Fleet Management Report
 - Hostel & Residential Facilities Management Report
 - Energy Conservation & Utilities Management Report

<ul style="list-style-type: none"> • E: Existing Policies & Practices: Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations. 		
<p>Standard 3: Institutional resources and planning Expectation: The human, physical, virtual/technological, financial and information resources of an institution are appropriate, sufficient and accessible to realize its institutional mission and goals.</p>		
<p>Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.</p>	<p>Indicative Evidence Documentary Evidence against each initiative/practice.</p>	<p>Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)</p>
<p>E.g., The institution has established comprehensive policies and procedures for managing its human, physical, technological, financial, and information resources, ensuring they are sufficient, accessible, and aligned with the institutional mission and goals. This includes formal resource allocation frameworks, committee-based oversight, and periodic review mechanisms.</p>	<p>E.g., Financial Management & Budget Policy (Approved by Syndicate/BoG)</p> <ul style="list-style-type: none"> • HR / Recruitment & Selection Policy • Procurement Policy & Procedures Manual (PPRA Rules compliant) • Asset Management & Inventory Control Policy • Laboratory & Equipment 	<p>E.g., Annexure-xx</p>

	Usage Policy • Library Resource Development Policy • IT Infrastructure & Digital Resources Policy • Annual Implementation Status Report on Resource Policies • ORIC Annual Report (Fundraising & Grants Section) • Annual Budget Book / Budget Estimates (Approved)	
F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard 3: Institutional resources and planning Expectation: The human, physical, virtual/technological, financial and information resources of an institution are appropriate, sufficient and accessible to realize its institutional mission and goals.		
Initiatives the HEI will take (Practice/Policy) to effectively meet this Standard & Expectation	Proposed Timelines	Responsible Office/Officer
E.g., Formalize partnerships with industry, funding agencies, and alumni to mobilize additional financial and technological resources.	E.g., Q1–Q2 2026	E.g., Director Finance, Director IT, Registrar, Director ORIC

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 3: Institutional resources and planning Expectation: The human, physical, virtual/technological, financial and information resources of an institution are appropriate, sufficient and accessible to realize its institutional mission and goals.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Best Practice against the given Standard & expectation Integrated Resource Planning & Monitoring System: The institution has implemented a centralized, digital resource management system linking strategic planning, budgeting, faculty allocation, laboratory and IT infrastructure, and library resources. This system ensures real-time monitoring of resource utilization, identifies gaps, and supports evidence-based decision-making for institutional development. It also enables alignment of resources with academic priorities, faculty development, and student support services.	<ul style="list-style-type: none"> • Resource Allocation & Utilization Policy • IT-based Resource Management Dashboard Manual • Annual Resource Audit Report • Minutes of Planning & Development Committee approving the system • QEC/Planning Branch report on effective implementation 	E.g., Annexure-xx

STANDARD 4: AUDIT AND FINANCE

Expectation: The institution ensures its future financial viability and has a robust auditing system to give confidence in the integrity of its financial performance.

Expectation outcome indicators (EOIs)

The institution should:

- Operate a financially robust plan which balances income and expenditure to create an annual surplus
- Produce robust financial forecasts based on sound strategic planning, which ensures the future financial viability of the institution
- Operate rigorous and independent scenario and contingency planning to ensure that sustainable levels of cash flow and investment are maintained

- Operate a funding system that provides value for money and works for students
- Have a well-thought-out policy to maintain and grow an endowment fund (private sector)
- Provide at least 10% of students with financial support; fee exemptions and scholarships on a needs basis have well-defined policies and/or institutional mechanisms for their annual accounts to be audited by competent auditors
- Have an institutional mechanism to take all the statutory positions, including deans, on board for the necessary annual budgeting.

Indicative Evidence

- 1. Financial plans linked to strategy**
 - Approved Annual Budget 2025-26 (linked to Strategic Plan priorities)
 - Extract of Strategic Plan showing budget alignment
- 2. Three-year financial plans with projected surplus**
 - Three-Year Budget Estimates (2023–24 to 2025–26) – Summary sheet with projected surplus
 - Finance Committee Minutes approving 3-year projections
- 3. Profit & loss and balance sheets (last 3 years)**
 - Audited Annual Financial Statements (2022–23, 2023–24, 2024–25)
 - Three-Year Comparative Financial Summary (1-page management overview)
- 4. Cash flow forecasts (next 3 years)**
 - Cash Flow Forecast Summary (2026–27, 2027–28, 2028–29) approved by Finance Committee
- 5. Capital expenditure (historical and forecasts)**
 - Annual Development Programme (ADP) 2024-25 – Capital Projects List
 - Statement of Fixed Assets / Capital Expenditure (Last 3 Years, Audited Accounts)
- 6. Scenario modelling for value for money**
 - Feasibility Study / Cost-Benefit Analysis Report (sample project)
 - Procurement Value for Money Statement (comparative cost analysis)
- 7. Financial auditor reports**
 - External Audit Reports (Last 3 Years) with Management Letters
 - Audit Paras & Management Replies (latest year) – Summary
 - Audit Committee Meeting Minutes (latest meeting)
- 8. Endowment fund policy (if applicable)**
 - Endowment Fund Policy / Trust Deed (approved by BoG)
 - Endowment Fund Summary Statement – corpus, earnings, utilization
- 9. Scholarships & fee exemptions policy**
 - Scholarships & Financial Aid Policy (approved)
 - Annual Scholarship Award Summary (number of beneficiaries, total amount, categories)
 - Fee Concession / Exemption Notification (current year rates)

<ul style="list-style-type: none"> • E: Existing Policies & Practices: Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations. 		
<p>Standard 4: Audit and finance Expectation: The institution ensures its future financial viability and has a robust auditing system to give confidence in the integrity of its financial performance.</p>		
<p>Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.</p>	<p>Indicative Evidence Documentary Evidence against each initiative/practice.</p>	<p>Reference/Annexure- (Provide Ref. document or annexure no. where evidence is placed)</p>

<p>E.g., The institution has established a robust financial management and auditing framework, including approved annual budgets, multi-year financial planning, and internal and external audit mechanisms to ensure transparency, compliance, and sustainability.</p>	<p>E.g.,</p> <ul style="list-style-type: none"> • Approved Annual Budget (linked to strategic priorities) • Three-Year Budget Estimates and Financial Projections • Audited Annual Financial Statements (last 3 years) • Internal Audit Reports and Audit Committee Minutes • External Audit Reports with Management Replies • Endowment Fund Policy and utilization statements • Scholarships & Financial Aid Policy and summary of awards • Fee Concession / Exemption Notifications 	<p>E.g., Annexure-xx</p>
<p>F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.</p>		
<p>Standard 4: Audit and finance</p> <p>Expectation: The institution ensures its future financial viability and has a robust auditing system to give confidence in the integrity of its financial performance.</p>		

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 4: Audit and finance Expectation: The institution ensures its future financial viability and has a robust auditing system to give confidence in the integrity of its financial performance.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Implementation of a rolling three-year financial planning and forecasting system integrated with strategic priorities, ensuring long-term financial sustainability and effective resource allocation.	Three-Year Budget Estimates, Strategic Plan Extracts, Finance Committee Minutes	E.g., Annexure-xx

STANDARD 5: AFFILIATED COLLEGES/INSTITUTIONS

Expectation: The university takes ultimate responsibility for academic standards and the quality of learning opportunities for the programmes that it provides, allows, and accredits, irrespective of where these are delivered or who provides them.

Expectation outcome indicators (EOIs)

The institution should:

- Have a strategic approach to delivering learning opportunities with others; appropriate levels of resources (including staff) are committed to the activities to ensure that the necessary oversight is sustained
- Have policies and procedures to ensure that there are adequate safeguards against financial impropriety or conflicts of interest that might compromise academic standards or the quality of learning opportunities; consideration of the business case is conducted separately from approval of the academic proposal
- Have governance arrangements at appropriate levels for all learning opportunities which are not directly provided by the university; arrangements for learning to be delivered, or support to be provided, are developed, agreed and managed in accordance with the formally stated policies and procedures of the university
- Assess risks of each arrangement to deliver learning opportunities with others at the outset and review subsequently periodically; appropriate and proportionate safeguards to manage the risks of the various arrangements are determined and put in place

- Have a written and legally binding agreement, or other document, setting out the rights and obligations of the parties, which is regularly monitored and reviewed; the authorized representatives of the university sign it before the relevant activity commences
- Take responsibility for ensuring that it retains proper control of the academic standards of awards where learning opportunities are delivered with others; no serial arrangements are undertaken without the express written permission of the university, which retains oversight of what is being done in its name
- Retain responsibility for ensuring that students admitted to a programme who wish to complete it under their awarding authority can do so if the college withdraws from an arrangement or if the university decides to terminate an arrangement
- Ensure that the standards of any of its awards involving learning opportunities delivered by others are equivalent to the standards set for other awards that it confers at the same level; they are also consistent with Pakistani national requirements
- Fulfill the requirements of any accreditation council or professional, statutory, and regulatory body that has approved or recognized the programme or award, in relation to aspects of its delivery and any associated formal agreements; the status of the programme or award in respect of accreditation council recognition is made clear to prospective students
- Approve module(s) and programmes delivered through an arrangement with another college through processes that are at least as rigorous, secure, and open to scrutiny as those for assuring quality and academic standards for programmes directly provided by the university
- Ensure that colleges involved in the assessment of students understand and follow the assessment requirements approved by the university for the components or programmes being assessed in order to maintain their academic standards
- Ensure that modules and programmes offered through other colleges are monitored and reviewed through procedures that are consistent with, or comparable to, those used for modules or programmes provided directly by them
- Ensure that they have effective control over the accuracy of all public information, publicity, and promotional activity relating to learning opportunities delivered with others, which lead to their awards.

Indicative Evidence:

1. Strategy & Governance Documents

- University Statutes and Governance Structure
- Affiliation Policy & Regulations
- Syndicate Approval of Affiliation Framework
- Academic Council Resolution on Affiliated Colleges
- Organogram showing Affiliation Governance

2. Developing, Agreeing & Managing Learning Arrangements with Affiliated Colleges

- Affiliation Agreement / MoU with Colleges
- Affiliation Application Evaluation Report
- Inspection Committee Report for Affiliation Grant
- Affiliation Renewal Review Report
- TORs of Affiliation/Inspection Committee
- College Compliance Report against Affiliation Conditions

3. Responsibility for Academic Standards & Equivalence

- Policy on Academic Standards for Affiliated Colleges
- Curriculum Equivalence & Approval Minutes (BoS/Academic Council)
- Examination & Assessment Policy for Affiliated Colleges
- Paper Moderation & Result Verification Reports
- External Examiner Appointment Letters & Reports

4. Quality Assurance Arrangements

- QA Policy for Affiliated Colleges
- Affiliated Colleges QA Manual / Framework

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 5: Affiliated colleges/institutions Expectation: The university takes ultimate responsibility for academic standards and the quality of learning opportunities for the programmes that it provides, allows, and accredits, irrespective of where these are delivered or who provides them.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Conducting annual academic audits and monitoring visits to ensure compliance with curriculum standards, teaching quality, and learning resources.	E.g., Audit Reports; Academic Visit Reports; Improvement Action Taken Reports	E.g., Annexure-xx

STANDARD 6: INTERNATIONALIZATION OF HIGHER EDUCATION AND GLOBAL ENGAGEMENT

Expectation: Universities should have cross-national visibility, manifested through academic mobility, institutional collaboration, and participation through various global engagement initiatives.

Expectation outcome indicators (EOIs)

The institution should:

- Establish formal international collaborations through MoUs covering academic exchange, joint research, governance learning, and QA enhancement.
- Integrate international QA best practices by participating in global QA networks and implementing outcomes through institutional policies.
- Develop institutional capacity and documentation for international programme and institutional accreditation.
- Promote and support student and faculty academic mobility through structured exchange mechanisms.
- Implement policies for admission of international students and recognition of international credit transfers in line with HEC regulations.
- Adopt an institutional policy for MOOCs recognition and credit transfer within academic programmes.
- Participate in national and international university ranking frameworks using verified institutional data.

Indicative Evidence:

1. Policy Documents

- Internationalization Policy (Approved)
- Academic Mobility Policy (Student & Faculty)
- International Credit Transfer Policy
- Policy for Admission of International Students
- MOOCs Recognition & Credit Transfer Policy
- International Accreditation Readiness Framework
- Global Engagement Strategy Document

2. Agreements & MoUs

- Signed MoUs with International Universities
- MoU Activity/Implementation Reports
- Joint Research Agreement Documents
- Faculty Exchange Agreement Letters
- Student Exchange Agreement Letters

3. QA Networks & Capacity Building

- Membership Certificate – International QA Network (e.g., INQAAHE)
- Participation Certificates – International QA Workshops/Trainings
- QA Benchmarking Visit Reports
- Policy Revision Notes based on International QA Learning
- IQAE Internationalization Meeting Minutes

4. Accreditation Readiness

- Self-Study Report for International Accreditation
- Gap Analysis Report against International Standards
- Accreditation Action Plan
- Correspondence with International Accrediting Bodies

5. Mobility Records

- List of Outbound Faculty Exchange
- List of Outbound Student Exchange
- List of Inbound International Students
- Travel Grants / Funding Approval Letters
- Post-Mobility Experience Sharing Reports

6. International Students & Credit Transfer

- Admission Notifications – International Students
- Equivalence Committee Minutes (Credit Transfer Cases)
- HEC NOC for International Students (if applicable)
- Transcript Evaluation Reports

7. MOOCs Implementation

- LMS/MOOC Integration Policy Document
- List of Approved MOOCs for Credit Transfer
- Student MOOC Completion & Credit Award Records
- Academic Council Minutes (MOOC Approval)

8. Rankings

- Ranking Participation Data Submission Reports
- QS/THE Data Submission Evidence
- Institutional Ranking Analysis Report
- Ranking Improvement Strategy Document

- **E: Existing Policies & Practices:** Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.

<p>Standard 6: Internationalization of higher education and global engagement Expectation: Universities should have cross-national visibility, manifested through academic mobility, institutional collaboration, and participation through various global engagement initiatives.</p>		
<p>Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.</p>	<p>Indicative Evidence Documentary Evidence against each initiative/practice.</p>	<p>Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)</p>
<p>E.g., Establishment of MOUs and collaboration agreements with international universities and research institutions to facilitate faculty/student exchanges and joint research.</p>	<p>E.g., Signed MOUs; Collaboration Agreements; Memorandum Exchange Records</p>	<p>E.g., Annexure-xx</p>
<p>F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.</p>		
<p>Standard 6: Internationalization of higher education and global engagement Expectation: Universities should have cross-national visibility, manifested through academic mobility, institutional collaboration, and participation through various global engagement initiatives.</p>		
<p>Initiatives the HEI will take (Practice/Policy) to effectively meet this Standard & Expectation</p>	<p>Proposed Timelines</p>	<p>Responsible Office/Officer</p>
<p>E.g., Develop joint online courses and webinars in collaboration with international institutions for global learning exposure.</p>	<p>E.g., Q1–Q2 2026</p>	<p>E.g., Director ORIC / Director IT & Digital Learning</p>

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 6: Internationalization of higher education and global engagement Expectation: Universities should have cross-national visibility, manifested through academic mobility, institutional collaboration, and participation through various global engagement initiatives.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Launch of a structured faculty mobility program including sabbaticals, visiting lectureships, and research residencies abroad to enhance pedagogical and research capabilities.	E.g., Faculty Mobility Program Policy / Annual Participation Reports	E.g., Annexure-xx

STANDARD 7: FACULTY RECRUITMENT, DEVELOPMENT, AND SUPPORT SERVICES

Expectation: The institution’s processes for recruitment, development, and retention of teaching staff are fair and transparent and suitable to the accomplishment of its institutional mission and goals.

Expectation outcome indicators (EOIs)

The institution should:

- Recruit, retain, and develop qualified faculty to ensure quality teaching and impactful research aligned with institutional goals.
- Implement transparent recruitment procedures with mandatory teaching demonstrations and communication skill assessment.
- Provide structured faculty orientation on governance, statutes, academic regulations, pedagogy, and assessment practices.
- Establish continuous faculty development and capacity-building mechanisms.
- Offer career progression pathways and retention support for high-quality faculty.
- Ensure faculty qualifications meet HEC and regulatory body requirements.
- Maintain relevant teaching, clinical/industrial exposure, and professional experience of faculty.
- Ensure adequate full-time qualified faculty strength for each programme as per HEC standards.

Indicative evidences

1. Recruitment & Appointment

- Faculty Recruitment Policy (Approved)

- Advertisement Copies & Shortlisting Criteria
- Selection Board Minutes
- Teaching Demonstration Evaluation Forms
- Appointment Letters (Full-time/Adjunct)
- 2. Qualification & Compliance**
 - HEC Faculty Eligibility Compliance Sheet
 - Faculty CV Dossiers (Verified)
 - PM&DC/Relevant Council Faculty Recognition (if applicable)
 - Equivalence/HEC Attestation Records
- 3. Orientation & Induction**
 - Faculty Orientation Programme Schedule
 - Orientation Attendance Records
 - Induction Handbook for Faculty
 - Governance & Statutes Briefing Materials
- 4. Faculty Development**
 - FDP/CPD Policy Document
 - FDP Annual Plan & Reports
 - Training Attendance Certificates
 - Pedagogical Skills Workshop Reports
 - Assessment & OBE Training Records
- 5. Performance Evaluation**
 - Faculty Performance Appraisal Policy
 - Annual Performance Evaluation Forms
 - Teaching Effectiveness Review Reports
 - Peer Review of Teaching Reports
 - Student Feedback Analysis – Faculty Wise
- 6. Research & Scholarship**
 - Faculty Publication List (HEC Recognized)
 - Research Grants Award Letters
 - ORIC Faculty Research Productivity Report
 - Community/Clinical Research Records
- 7. Career Development & Retention**
 - Promotion & Tenure Policy
 - Promotion Board Minutes
 - Study Leave / Scholarship Approval Letters
 - Faculty Retention & Incentive Policy
- 8. Faculty Strength & Workload**
 - Programme-wise Faculty-Student Ratio Report
 - Workload Allocation Sheets
 - Full-time vs Part-time Faculty List
 - HEC Faculty Requirement Compliance Report
- 9. Industry/Clinical Exposure**
 - Clinical/Industry Attachment Letters
 - CME/Workshop Participation Records
 - Professional Practice Licenses (where applicable)
- 10. Impact Analysis (Quality Linkage)**
 - Faculty Profile vs Student Results Analysis Report
 - CLO/PLO Achievement vs Faculty Qualification Report
 - Teaching-Research Correlation Analysis

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 7: Faculty recruitment, development, and support services Expectation: The institution’s processes for recruitment, development, and retention of teaching staff are fair and transparent and suitable to the accomplishment of its institutional mission and goals.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Transparent Faculty Recruitment & Selection: Adoption of a digitalized recruitment portal with clear eligibility criteria, scoring rubric, and selection committee oversight to ensure fairness and merit-based hiring.	E.g., Faculty Recruitment Policy; Recruitment Portal Records; Selection Committee TORs	E.g., Annexure-xx

STANDARD 8: ACADEMIC PROGRAMS AND CURRICULA

Expectation: In order to secure academic standards, and to safeguard students’ interest, the degree awarding institutions should ensure that the requirements of the National Qualification Framework for Pakistan and similar international best practices are met by positioning their qualifications at the appropriate level and ensuring that programme learning outcomes align with the qualification descriptor in the Framework and naming qualifications in accordance with the titling conventions specified in the Framework. The academic programmes offered by the institution are designed to be consistent with its mission and goals and reflect the needs of students, employers, and wider society. Institutions should tailor their academic programmes and teaching in such a way that students and teachers can engage in addressing the pressing local and global issues and challenges.

Expectation outcome indicators (EOIs)

The institution should:

- Academic regulations define credit, assessment and qualification award processes.
- Programmes align with international standards and develop strong subject competencies.
- Adequately qualified full-time faculty are assigned to each programme.
- Faculty are supported through evaluation, development, and innovative teaching practices.
- Curricula embed critical thinking, creativity, collaboration, and communication skills.
- Each programme has approved policies for delivery, assessment, monitoring and record keeping.
- Programme approval processes ensure alignment with NQF and institutional frameworks.
- Regular programme monitoring through SAR ensures achievement of national standards.
- Self-PREE is conducted for curriculum effectiveness and continuous improvement.
- Automated systems track graduate outcomes, exam reliability and competency evidence.

- Programme design ensures achievement of intended learning outcomes.
- Programmes are aligned with student, employer and societal needs.
- Qualifications are clearly mapped to the appropriate NQF level and communicated.
- Programmes follow outcome-based and competency-based education models.

Indicative Evidences

1) NQF mapping matrix (Programme vs NQF levels)

- Academic regulations handbook (assessment & credit rules)
- Programme specification files/module outlines
- Board of Studies (BoS) minutes
- Academic Council minutes (programme approval)
- Programme design & development policy
- Programme monitoring & review policy
- External examiner reports
- Programme objectives & PLO document
- Theory–practice balance mapping report
- NQF alignment approval notification
- Student learning outcomes (CLO–PLO mapping)
- Graduate tracer study report (6-month employment)
- Self-Assessment Reports (SAR)

2) Self-PREE reports

- Curriculum review committee minutes
- Faculty allocation & workload statements
- OBE implementation policy
- Examination board minutes
- LMS result analytics report
- Employer feedback survey report
- Alumni feedback report

3) Programme review action plan (CQI)

- Course files (course outline, assessment, CLO attainment)

- **E: Existing Policies & Practices:** Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.

Standard 8: Academic programs and curricula

Expectation: To secure academic standards, and to safeguard students’ interest, the degree awarding institutions should ensure that the requirements of the National Qualification Framework for Pakistan and similar international best practices are met by positioning their qualifications at the appropriate level and ensuring that programme learning outcomes align with the qualification descriptor in the Framework and naming qualifications in accordance with the titling conventions specified in the Framework. The academic programmes offered by the institution are designed to be consistent with its mission and goals and reflect the needs of students, employers, and wider society. Institutions should tailor their academic programmes and teaching in such a way that students and teachers can engage in addressing the pressing local and global issues and challenges.

Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.	Indicative Evidence Documentary Evidence against each initiative/practice.	Reference/ Annexure- (Provide Ref. document or annexure no. where

		evidence is placed)
E.g. , Curriculum designed through stakeholder consultations (employers, alumni, industry experts, and faculty) to reflect societal, regional, and global needs.	E.g. , Minutes of Curriculum Committee Meetings; Stakeholder Consultation Reports; Curriculum Approval Forms	E.g. , Annexure-xx
F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard 8: Academic programs and curricula		
Expectation: In order to secure academic standards, and to safeguard students’ interest, the degree awarding institutions should ensure that the requirements of the National Qualification Framework for Pakistan and similar international best practices are met by positioning their qualifications at the appropriate level and ensuring that programme learning outcomes align with the qualification descriptor in the Framework and naming qualifications in accordance with the titling conventions specified in the Framework. The academic programmes offered by the institution are designed to be consistent with its mission and goals and reflect the needs of students, employers, and wider society. Institutions should tailor their academic programmes and teaching in such a way that students and teachers can engage in addressing the pressing local and global issues and challenges.		
Initiatives the HEI will take (Practice/ Policy) to effectively meet this Standard & Expectation.	Proposed timelines	Responsible office/Officer
E.g. , Conduct regular stakeholder consultations (employers, alumni, industry experts, international partners) for curriculum revision to align with NQF and emerging societal needs.	E.g. , Q1–Q2 2026	E.g. , Dean of Faculty, Heads of Departments, aIQAE

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.

Standard 8: Academic programs and curricula

Expectation: In order to secure academic standards, and to safeguard students’ interest, the degree awarding institutions should ensure that the requirements of the National Qualification Framework for Pakistan and similar international best practices are met by positioning their qualifications at the appropriate level and ensuring that programme learning outcomes align with the qualification descriptor in the Framework and naming qualifications in accordance with the titling conventions specified in the Framework. The academic programmes offered by the institution are designed to be consistent with its mission and goals and reflect the needs of students, employers, and wider society. Institutions should tailor their academic programmes and teaching in such a way that students and teachers can engage in addressing the pressing local and global issues and challenges.

Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Stakeholder-Driven Curriculum Revision: Regular engagement with alumni, industry partners, professional bodies, and international collaborators to revise programmes to meet emerging local and global needs.	E.g., Minutes of Stakeholder Consultation Meetings; Revised Programme Documents; Feedback Analysis Reports	E.g., Annexure-xx

STANDARD 9: ADMISSION, PROGRESSION, ASSESSMENT, AND CERTIFICATION

Expectation: Institutions consistently apply predefined and published regulations covering all phases of the student life cycle. Higher education institutions operate equitable, valid, and reliable processes of assessment, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.

Expectation outcome indicators (EOIs)

The institution should:

- Admissions select students aligned with institutional mission and programme requirements.
- Transparent, merit-based and inclusive admission policy is implemented.
- Progression policy supports independent learning and academic development.
- Certification and credit award follow approved learning outcome achievement.
- Robust examination system ensures valid, reliable and outcome-based assessment.
- Assessment scheduling effectively measures learning and supports progression.
- Clear SOPs for marking, grading and result compilation are implemented.

- Internal and external moderation ensures fairness and standardization.
- Timely and constructive feedback is provided to improve student learning.
- A transparent academic appeal and grievance mechanism is operational.

Indicative Evidences

- 1) **Admission policy & prospectus**
Admission committee minutes
Merit lists & enrolment statistics
Entry test policy/test result reports
Marketing & outreach plan
- 2) **Progression policy document**
Promotion rules notification
Student handbook (academic regulations)
Advisory & mentoring programme record
- 3) **Assessment & examination policy**
Controller of Examinations SOP manual
Assessment schedule/date sheets
Paper setting & vetting committee minutes
Marking & grading policy
Result notification samples
- 4) **Moderation committee minutes**
External examiner appointment letters
External examiner reports
- 5) **Reassessment/improvement exam policy**
Result gazette & transcript format
Degree award & certification policy
- 6) **Academic appeals policy**
Appeal committee minutes
- 7) **Scholarship & financial aid policy**
Financial aid award lists
Scholarship review report
- 8) **Student support services reports**
Attrition/dropout analysis report
Retention & progression statistics
- 9) **Assessment rubrics & CLO–PLO assessment files**
Course files (assessment tools & feedback)
Student feedback on assessment report

- **E: Existing Policies & Practices:** Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.

Standard 9: Admission, progression, assessment, and certification

Expectation: Institutions consistently apply predefined and published regulations covering all phases of the student life cycle. Higher education institutions operate equitable, valid, and reliable processes of assessment, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.

Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.	Indicative Evidence Documentary Evidence against each initiative/practice.	Reference/Annexure- (Provide Ref. document or annexure

		no. where evidence is placed)
E.g., Transparent Admission Policy: Published admission criteria, eligibility requirements, and merit-based selection procedures applied consistently across all programmes.	E.g., Admission Policy Document; Prospectus (Printed / Online); Admission Guidelines; Application Forms; Selection Committee Minutes	E.g., Annexure-xx
F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard 9: Admission, progression, assessment, and certification		
Expectation: Institutions consistently apply predefined and published regulations covering all phases of the student life cycle. Higher education institutions operate equitable, valid, and reliable processes of assessment, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.		
Initiatives the HEI will take (Practice/ Policy) to effectively meet this Standard & Expectation.	Proposed timelines	Responsible office/Officer
E.g., Digitalized Admission & Enrollment System: Implement a fully online, transparent, and mobile-friendly admission portal integrating eligibility checks, merit calculation, and application tracking.	E.g., Q1–Q2 2026	E.g., IT Directorate, Admission Office, Admin office

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 9: Admission, progression, assessment, and certification Expectation: Institutions consistently apply predefined and published regulations covering all phases of the student life cycle. Higher education institutions operate equitable, valid, and reliable processes of assessment, which enable every student to demonstrate the extent to which they have achieved the intended learning outcomes for the credit or qualification being sought.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Fair Appeals & Feedback Mechanism: Online portal for submission of grade appeals, feedback, and complaints with defined response timelines and follow-up mechanism.	E.g., Appeals & Grievance Policy, Portal Guidelines, Feedback Resolution Reports	E.g., Annexure-xx

STANDARD 10: STUDENT SUPPORT SERVICES

Expectation: The institution demonstrates adequate and efficient student support services that enable students to achieve their educational goals, facilitate the overall process of achieving the institutional mission, and safeguards student’s physical and mental health.

Expectation outcome indicators (EOIs)

The institution should:

- Student representation is ensured in academic and quality decision-making forums.
- Remedial and developmental academic support mechanisms are implemented.
Functional grievance redressal system resolves student issues timely.
- Equal access to co-curricular and extracurricular resources is ensured.
- Basic support facilities (library, cafeteria, counselling, health, common rooms) are available.
- SCALE is established with a formal constitution and QA participation.
- Student feedback is systematically collected and used for improvement.
- Student support staff are qualified and receive capacity building.
- Adequate academic, career and counselling support services are accessible.
- Safe, inclusive and accessible physical and virtual learning environments are maintained.

- Active student societies and recreational facilities are available.
- Alumni engagement policy and functional alumni association are operational.

Indicative Evidences

- 1) **Student representation policy (IQC/BoS/BoF)**
Student member nomination notifications
Student feedback policy & survey reports
- 2) **Remedial classes schedule & attendance record**
Academic advising policy & mentoring logs
- 3) **Student grievance policy & SOP**
Grievance committee minutes & resolution register
Online complaint portal reports
- 4) **Co-curricular activity policy**
Sports & societies budget record
Event participation reports (male/female)
- 5) **Library usage statistics & resource inventory**
Cafeteria management contract / inspection reports
Student common room allocation order
Counselling services policy & session logs
Health centre SOP / first aid & ambulance MoU
- 6) **SCALE constitution & notification**
SCALE meeting minutes & activity reports
- 7) **Student satisfaction survey reports**
Action taken reports on student feedback
- 8) **Support staff qualification records**
Training & capacity building reports (student services staff)
- 9) **Career counselling policy & placement reports**
Internship facilitation record
Lab & learning resource access logs
- 10) **Campus safety policy**
Anti-harassment policy & committee records
Facility accessibility report (PWD compliance)
- 11) **Student societies list & registration notifications**
Annual society's activity report
- 12) **Alumni policy document**
Alumni Association Constitution
Alumni database & tracer study report
Alumni engagement event reports
- 13) **Student handbook (support services section)**
Prospectus (student facilities section)
Student Support Services Annual Report

- **E: Existing Policies & Practices:** Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.

Standard 10: Student support services Expectation: The institution demonstrates adequate and efficient student support services that enable students to achieve their educational goals, facilitate the overall process of achieving the institutional mission, and safeguards student's physical and mental health.

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 10: Student support services Expectation: The institution demonstrates adequate and efficient student support services that enable students to achieve their educational goals, facilitate the overall process of achieving the institutional mission, and safeguards student’s physical and mental health.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Enhanced extracurricular, leadership, and community engagement opportunities for holistic student development.	E.g., Student Clubs & Activities Policy; Annual Activity Report; Event Participation Records	E.g., Annexure-xx

STANDARD 11: IMPACTFUL TEACHING AND LEARNING AND COMMUNITY ENGAGEMENT

Expectation

The institution should have a teaching and learning framework that creates a shared understanding of good teaching practices that enables every student to develop as an independent learner, study their chosen subject(s) in depth, and enhance their capacity for analytical, critical, creative thinking, and empathetic concerns for marginalized segments of society. Sustainable development goals (SDGs) provide a good guiding framework for lifelong learning and creating an equitable society. The institutional efforts should be directed towards creating impact by tailoring their teaching and learning principles in such a way that students and teachers can engage in contributing towards meeting SDGs and addressing the pressing local and global issues and challenges.

Expectation outcome indicators (EOIs)

The institution should:

- Technology-enabled teaching and digital learning infrastructure are operational.
- Pedagogical support and training for faculty are systematically provided.
- Collaborative platforms for scholarship of teaching and learning (SoTL) are established.
- Teaching practices are regularly reviewed through reflection, evaluation and research.
- Data-driven mechanisms monitor and enhance learning effectiveness.
- Students receive clear, updated information on learning opportunities and support.
- Students are oriented towards active engagement and ownership of learning.
- Structured feedback and advising enable students to monitor academic progress.
- Teaching and research are aligned with SDGs and community impact priorities.

- Institutional mechanisms promote SDG awareness and community engagement.

Indicative Evidences

- 1) **Teaching & learning policy/framework**
LMS/VLE implementation report
Smart classroom/e-learning facility inventory
- 2) **Faculty pedagogical training policy**
Faculty development workshop reports
Attendance record of teaching trainings
- 3) **Research grants for teaching innovation**
Teaching innovation project reports
Inter-departmental teaching collaboration MoUs
- 4) **Peer observation policy & observation reports**
Teaching evaluation reports
Course review committee minutes
- 5) **Learning analytics/course performance reports**
CQI reports on teaching effectiveness
- 6) **Programme & course handbooks**
Course outlines with CLOs & PLO mapping
Student orientation schedule & materials
- 7) **Student learning responsibility charter**
Code of conduct for academic engagement
- 8) **Academic advising policy**
Advising meeting logs
Mid-semester feedback reports
- 9) **SDG integration policy in the curriculum**
Community engagement policy
Service learning course outlines
- 10) **Community outreach project reports**
University-community partnership MoUs
SDG awareness seminars/event reports
- 11) **Student community service record**
Volunteer programme reports
Impact assessment of community projects
- 12) **Student feedback on teaching (SET) reports**
Action taken reports on SET

- **E: Existing Policies & Practices:** Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations.

Standard 11: Impactful teaching and learning and community engagement

Expectation

The institution should have a teaching and learning framework that creates a shared understanding of good teaching practices that enables every student to develop as an independent learner, study their chosen subject(s) in depth, and enhance their capacity for analytical, critical, and creative thinking, and empathetic concerns for marginalized segments of society. Sustainable development goals (SDGs) provide a good guiding framework for lifelong learning and creating an equitable society. The institutional efforts should be directed towards creating impact by tailoring their teaching and learning principles in such a way that students and teachers can engage in contributing towards meeting SDGs and addressing the pressing local and global issues and challenges.

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.

Standard 11: Impactful teaching and learning and community engagement

Expectation

The institution should have a teaching and learning framework that creates a shared understanding of good teaching practices that enables every student to develop as an independent learner, study their chosen subject(s) in depth, and enhance their capacity for analytical, critical, creative thinking, and empathetic concerns for marginalized segments of society. Sustainable development goals (SDGs) provide a good guiding framework for lifelong learning and creating an equitable society. The institutional efforts should be directed towards creating impact by tailoring their teaching and learning principles in such a way that students and teachers can engage in contributing towards meeting SDGs and addressing the pressing local and global issues and challenges.

Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Integration of service-learning and community engagement modules in all programs to connect learning outcomes with real societal impact.	E.g., Community Engagement Policy, Service-Learning Course Outlines, Partnership MoUs	E.g., Annexure-xx

STANDARD 12: RESEARCH, INNOVATION, ENTREPRENEURSHIP, AND INDUSTRIAL LINKAGE

Expectation: The institution ensures promotion of a culture of research, innovation, entrepreneurship, and industrial linkage in the institution through encouraging faculty and research students to make tangible contributions in resolving issues of industry and society. Also, it ensures research degrees are awarded in a research environment that provides quality learning opportunities for doing research and learning about approaches, methods, procedures, and protocols, for innovation and entrepreneurship, which takes into account social and industrial needs. This environment offers faculty and students quality opportunities and the support they need to achieve successful academic, personal, and professional outcomes.

Expectation outcome indicators (EOIs)

The institution should:

- Institutional policy for research, innovation, and entrepreneurship is approved and implemented.
- Intellectual Property Rights (IPR) policy is established and operational.
- ORIC/BIC platforms actively promote research commercialization and startups.
- Research programmes comply with NQF and institutional academic standards.

- Comprehensive regulations govern the research student lifecycle (admission → award).
- Research regulations are periodically reviewed and updated.
- Research priorities align with national, regional, and industry needs.
- Functional Research Ethics Committee reviews human-subject research.
- ASRB/BASR operates through defined SOPs and regular meetings.
- Supportive research environment with funding, labs, and supervision is available.
- Structured research training develops methodological and entrepreneurial skills.
- Entrepreneurship mechanisms comply with HEC and international best practices.
- Formal industry linkages and MoUs support collaborative research and training.

Indicative Evidences

- 1) **Institutional research policy document**
Innovation & entrepreneurship policy
Strategic research agenda
- 2) **IPR policy approval notification**
Patent facilitation SOPs
IP disclosure forms
- 3) **ORIC establishment notification**
ORIC annual performance report
BIC policy/incubation framework
Startup incubation records
- 4) **NQF alignment of the research programmes report**
PhD programme approval minutes
- 5) **PhD/MS/PG admission policy**
Supervisor allocation policy
Thesis evaluation SOPs
Plagiarism policy for research theses
- 6) **Review minutes of research regulations**
Policy revision notifications
- 7) **Thematic research priority document**
National/industry need assessment report
- 8) **ERB constitution notification**
ERB SOPs & meeting minutes
Ethical approval certificates
- 9) **ASRB/BASR notification**
ASRB meeting minutes
Synopsis/thesis approval records
- 10) **Research grant policy**
Internal research funding awards list
Lab & research facility inventory
- 11) **Research methodology workshop reports**
Graduate research training schedule
Entrepreneurship training reports
- 12) **HEC ORIC compliance report**
BIC performance review report
- 13) **Industry engagement policy**
MoUs with hospitals/industry
Joint research project agreements
Internship & industry placement records
- 14) **Research publications list (HEC recognized)**
Commercialization/licensing agreements
Technology transfer records

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 12: Research, innovation, entrepreneurship, and industrial linkage		
Expectation: The institution ensures promotion of a culture of research, innovation, entrepreneurship, and industrial linkage in the institution through encouraging faculty and research students to make tangible contributions in resolving issues of industry and society. Also, it ensures research degrees are awarded in a research environment that provides quality learning opportunities for doing research and learning about approaches, methods, procedures and protocols, for innovation and entrepreneurship, which takes into account of social and industrial needs. This environment offers faculty and students quality opportunities and the support they need to achieve successful academic, personal, and professional outcomes.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Establishment of a dedicated ORIC and Innovation & Entrepreneurship Cell to coordinate applied research, industrial collaboration, and commercialization of innovations.	E.g., ORIC Charter, Innovation & Entrepreneurship Cell Terms of Reference	E.g., Annexure-xx

STANDARD 13: FAIRNESS AND INTEGRITY

Expectation: In the management of its affairs, conduct of its programmes, and its dealings with students, faculty, governing bodies, and external quality assurance agencies involving the general public, the institution adheres to high ethical principles. Also, it should have the necessary policies and institutional mechanisms to ensure the availability of fair procedures for handling issues, complaints, and appeals, which are accessible to all: students, faculty, and administration

Expectation outcome indicators (EOIs)

The institution should:

- Institutional practices reflect ethical values stated in the mission and policies.
- Mechanisms safeguard the rights of students, faculty, and staff.
- Equality, diversity, and inclusion (EDI) are embedded in institutional policies.
- Transparent communication ensures academic and administrative integrity.
- Accessible, time-bound complaint and appeal mechanisms (including online portal) are operational.
- Integrity policies govern teaching, assessment, research, and publications.

Indicative Evidences

- 1) **Code of ethics / institutional values policy**
Mission & values dissemination report

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 13: Fairness and integrity Expectation: In the management of its affairs, conduct of its programmes, and its dealings with students, faculty, governing bodies, and external quality assurance agencies involving the general public, the institution adheres to high ethical principles. Also, it should have the necessary policies and institutional mechanisms to ensure the availability of fair procedures for handling issues, complaints, and appeals, which are accessible to all: students, faculty, and administration		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Operational Anti-Harassment Committee in line with national legislation with trained inquiry members and confidential procedures	E.g., <ul style="list-style-type: none"> • Anti-Harassment Policy • Committee notifications • Training records • Case handling SOPs 	E.g., Annexure-xx

STANDARD 14: PUBLIC INFORMATION AND TRANSPARENCY

Expectation: The institution generates and provides complete, accurate, accessible, and adequate information to its students, prospective students, regulatory bodies, other stakeholders, and intended audiences to help them in making informed decisions regarding higher education. The institution should ensure the availability of a very transparent mechanism where all the stakeholders, particularly students and faculty, have access not only to decisions made but also to the processes and procedures of decision-making.

Expectation outcome indicators (EOIs)

The institution should:

- Comprehensive, mobile-responsive website provides institutional, academic and stakeholder information.
- Public information is systematically reviewed for accuracy and currency.
- Decision-making processes and minutes are publicly accessible.
- Integrity and fairness policies are publicly available.
- Transparent, accessible complaint and appeal procedures are published.

Indicative Evidences

- 1) Official university/ Institute website (updated) Link

- 2) **BOG/Syndicate members webpage**
Statutory officers contact directory
- 3) **Faculty profile webpage link**
Departmental contact pages link
- 4) **Programme curricula & CLO/PLO webpage link**
Admission policy & fee structure webpage link
Scholarship/financial aid information page link
- 5) **Approved policies repository (statutes, SOPs)**
Online complaint/feedback portal link
- 6) **External audit report (published)**
Accreditation status page
QAA review report webpage Link
- 7) **Graduate employment statistics report**
Alumni directory & engagement webpage Link
- 8) **Quarterly/annual institutional report**
Prospectus/student handbook
Programme & module handbooks
- 9) **Student body profile report**
Campus facilities & hostel information page
- 10) **Minutes of statutory bodies (published)**
Agenda & working papers repository
- 11) **Public information review policy**
Data verification SOP for website updates

<ul style="list-style-type: none"> • E: Existing Policies & Practices: Existing Policies & Practices, initiatives, etc., towards meeting QA Standards and expectations. 		
Standard 14: Public information and transparency Expectation: The institution generates and provides complete, accurate, accessible, and adequate information to its students, prospective students, regulatory bodies, other stakeholders, and intended audiences to help them in making informed decisions regarding higher education. The institution should ensure the availability of a very transparent mechanism where all the stakeholders, particularly students and faculty, have access not only to decisions made but also to the processes and procedures of decision-making.		
Initiatives the institute has already taken (in practice/developed Policy) to meet this Standard & expectation.	Indicative Evidence Documentary Evidence against each initiative/practice.	Reference/Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Establishment of an official website providing updated information on programmes, admission criteria, fee structure, academic calendar, policies, and regulations.	E.g., Website screenshots (Programmes, Admissions, Policies pages) Prospectus (Printed/Soft)	E.g., Annexure-xx

F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard 14: Public information and transparency		
Expectation: The institution generates and provides complete, accurate, accessible, and adequate information to its students, prospective students, regulatory bodies, other stakeholders, and intended audiences to help them in making informed decisions regarding higher education. The institution should ensure the availability of a very transparent mechanism where all the stakeholders, particularly students and faculty, have access not only to decisions made but also to the processes and procedures of decision-making.		
Initiatives the HEI will take (Practice/ Policy) to effectively meet this Standard & Expectation.	Proposed timelines	Responsible office/Officer
E.g., Develop and approve a Comprehensive Public Information & Transparency Policy covering disclosure standards, frequency of updates, and information accuracy protocols	E.g., Q4 2026	E.g., aIQAE in coordination with the Admin Office

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 14: Public information and transparency Expectation: The institution generates and provides complete, accurate, accessible, and adequate information to its students, prospective students, regulatory bodies, other stakeholders, and intended audiences to help them in making informed decisions regarding higher education. The institution should ensure the availability of a very transparent mechanism where all the stakeholders, particularly students and faculty, have access not only to decisions made but also to the processes and procedures of decision-making.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Integrated Institutional Transparency Portal providing real-time access to policies, programme details, accreditation status, QA reports, KPIs, and governance decisions in a single digital repository	E.g., Transparency Portal screenshots, SOP for information upload, user access logs	E.g., Annexure-xx

STANDARD 15: INSTITUTIONAL EFFECTIVENESS, QUALITY ASSURANCE, AND ENHANCEMENT

Expectation: The institution has a robust system for monitoring and evaluating institutional effectiveness, quality assurance, and enhancement that is made public and forms part of its strategic management. Internal quality assurance procedures should help in evaluating its effectiveness and promote continuous improvement, and realize its institutional mission and achieve its institutional goals.

Expectation outcome indicators (EOIs)

The institution should:

- Continuous quality improvement policy and mechanisms are established and implemented.
- Departments and programmes systematically collect and use performance data for improvement.
- Students and stakeholders actively participate in internal quality assurance processes.
- QA procedures comply with national and international standards.
- Action plans from programme reviews are monitored for implementation.
- Policies are developed through stakeholder engagement and shared governance.
- Central body (IQC) coordinates preparation for external QA and fosters quality culture.
- Syndicate/BOG are informed of QA outcomes and provide oversight for institutional enhancement.

Indicative Evidences

F: Future Practices (commitments); Future Initiatives, Practices, and policies, etc., towards meeting QA Standards and expectations.		
Standard 15: Institutional effectiveness, quality assurance, and enhancement		
Expectation: The institution has a robust system for monitoring and evaluating institutional effectiveness, quality assurance, and enhancement that is made public and forms part of its strategic management. Internal quality assurance procedures should help in evaluating its effectiveness and promote continuous improvement, and realize its institutional mission and achieve its institutional goals.		
Initiatives the HEI will take (Practice/ Policy) to effectively meet this Standard & Expectation.	Proposed timelines	Responsible office/Officer
E.g., Automation of QA Processes through a Digital QA Management System (SAR tracking, CES, KPI dashboards, CQI monitoring)	E.g., 6-09 2026	E.g., aIQAE, IT Directorate

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 15: Institutional effectiveness, quality assurance, and enhancement Expectation: The institution has a robust system for monitoring and evaluating institutional effectiveness, quality assurance, and enhancement that is made public and forms part of its strategic management. Internal quality assurance procedures should help in evaluating its effectiveness and promote continuous improvement, and realize its institutional mission and achieve its institutional goals.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., KPI-based Departmental Performance Scorecards linked with annual planning, resource allocation, and recognition mechanisms	E.g., Departmental KPI reports, Annual Performance Reviews, Incentive/Recognition Policy	E.g., Annexure-xx

STANDARD 16: CQI AND CYCLICAL EXTERNAL QUALITY ASSURANCE

Expectation: Institutions are required to have robust continuous quality improvement (CQI) mechanism to institutionalize a strong quality culture. Institutions should undergo external quality assurance in line with the Pakistan precepts on a cyclical basis. In order to have a successful external review, institutions should strengthen their internal quality assurance processes and prepare for external review.

Expectation outcome indicators (EOIs)

The institution should:

- Implement a well-defined CQI policy using a PDCA (Plan-Do-Check-Act) cycle in all institutional decision-making.
- Strengthen internal QA through collaborative and consultative CQI mechanisms, leveraging collective wisdom.
- Ensure the CQI mechanism includes robust follow-up and closure of feedback loops.
- Participate in external quality assurance to validate internal QA and drive improvement.
- Prepare for and participate in international accreditation processes.

Indicative Evidences

1) **CQI policy document/framework**

Internal quality assurance procedures/manuals

Self-assessment reports (SARs, RIPE, PREE)

External quality assurance reports/feedback reports

		IT

B: Best Practices (commitments): Best Practice - considered Best Practices (from Existing Practices, Initiatives, and Policies, etc.) against the given QA Standards and expectations and beyond.		
Standard 16: CQI and cyclical external quality assurance		
Expectation: Institutions are required to have robust continuous quality improvement (CQI) mechanism to institutionalize a strong quality culture. Institutions should undergo external quality assurance in line with the Pakistan precepts on a cyclical basis. In order to have a successful external review, institutions should strengthen their internal quality assurance processes and prepare for external review.		
Best Practice against the given Standard & expectation. (Note: Best practice in QA refers to exemplary approaches, strategies, or actions that have been proven effective in addressing specific challenges or achieving desired outcomes within established standards. These practices are characterized by their demonstrated impact, innovation, and potential for replication across institutions, serving as benchmarks for continuous improvement and excellence in QA processes.)	Indicative Evidence Policy/ Document of or for the described best practice (if any)	Reference/ Annexure- (Provide Ref. document or annexure no. where evidence is placed)
E.g., Implementation of a University-wide CQI Policy Framework integrating KPIs, SARs, programme review, and annual reporting to institutional leadership	E.g., CQI Policy Document; KPI Guidelines; Annual QA Cycle Manual	E.g., Annexure-xx

Section-3a: EFB Matrix

Standard	Expectation	E: Existing Practices	F: Future Practices	B: Best Practices	Indicative Evidence (Concise)
1	Vision, mission, goals define institutional purpose	Vision & mission documents; strategic planning in place	Revise and align the strategic plan with departmental goals	Periodic review & alignment with national priorities	Approval letters, meeting minutes, and strategic plan documents
2	Governance and leadership ensure institutional effectiveness	Governance manuals; defined authorities	Strengthen decision-making forums & clarity in responsibilities	Transparent delegation & monitoring	Statutes, committee terms of reference, and meeting minutes

3	Academic standards, programme development, and approval	Programme approval policy; curriculum review process	Introduce regular program self-review & benchmarking	Alignment with National Qualifications Framework	Programme approval forms, curriculum maps, SARs
4	Affiliated colleges follow institutional QA mechanisms	Affiliation agreements; QA oversight reports	Develop periodic audit & feedback mechanism for affiliates	Standardized evaluation & support	Affiliation MOUs, QA reports, audit checklists
5	Teaching & learning, student engagement, and faculty development	Teaching policies, workshops, staff training	Expand faculty development programs, innovative teaching	Mentoring & peer review culture	Workshop reports, training attendance, peer review forms
6	Internationalization & global engagement	MOUs, QA network membership	Promote student/faculty exchange, joint research	International ranking & accreditation	MOUs, exchange lists, QA memberships, ranking reports
7	Faculty recruitment, development, and support services	Recruitment policy; faculty orientation; appraisal system	Continuous capacity building & career support	Incentive & recognition for research/teaching excellence	Recruitment records, faculty handbook, training records
8	Academic programmes & curricula	Programme/module specs; assessment regulations	Curriculum update with international benchmarking	Competency-based & outcomes-led programs	Curriculum maps, NQF mapping, programme handbooks
9	Admission, progression, assessment, certification	Admission policy; assessment SOPs	Enhance transparency, feedback mechanism, appeals	Student-centered assessment & progression	Admission records, assessment policies, feedback reports
10	Student support services	Student counselling, SCALE forum, library, sports	Expand mentoring, remedial programs, extracurricular support	Holistic student engagement & satisfaction	Student council constitution, counselling records, survey reports

11	Teaching & learning effectiveness; community engagement	Teaching observations; VLE; SDG projects	Encourage reflective practices, active SDG participation	Integration of scholarship & community projects	VLE logs, observation reports, SDG activity records
12	Research, innovation, entrepreneurship, industry linkage	Research policy; ORIC/BIC; MOUs with industry	Expand research output, innovation projects, entrepreneurial training	Internationally recognized research & patents	Research policies, ORIC records, industry MOUs, patent records
13	Fairness & integrity	Ethics & complaints policy; faculty handbook	Strengthen grievance redressal, online complaint system	Transparent & inclusive institutional culture	Complaints register, ethics policy, handbook
14	Public information & transparency	University website; reports; handbooks	Enhance mobile access, update feedback & alumni info	Open data & stakeholder engagement	Website screenshots, reports, and published handbooks
15	Institutional effectiveness, QA, and enhancement	aIQAE/aQEC structures; evaluation surveys	Implement cross-department QA metrics & dashboards	Culture of continuous improvement & shared governance	IQAE reports QA survey data, policy manuals
16	CQI & cyclical external QA	CQI policy; SARs, RIPE/PREE reports	Strengthen PDCA loops; prepare for international accreditation	Sustained quality culture with external validation	CQI policy, SARs, external QA reports, follow-up action reports