



## Dubai Medical College for Girls Quality Assurance and Institutional Effectiveness Report 2023-2024

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Date: 26.11.2024





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## Message from the Director

Dear DMCG Community,

I am pleased to present to you the Quality Assurance and Institutional Effectiveness report for AY 2023-2024 that provides a comprehensive overview of the quality assurance processes and initiatives undertaken by our unit to ensure the continuous improvement and effectiveness of our institution.

As the Director of Quality Assurance, it is my responsibility to oversee the implementation of quality assurance frameworks, policies, and procedures across all departments and programs. Our unit works collaboratively with faculty, staff, and administrators to develop and maintain a culture of excellence and accountability.

In this report, you will find an analysis of the key quality indicators, assessment results, and performance measures that have been collected and evaluated over the past year. These indicators are aligned with our institution's strategic goals and objectives, allowing us to track our progress and identify areas for improvement.

Additionally, the report highlights the various quality assurance initiatives that have been implemented, such as program reviews, accreditation processes, research initiatives and faculty development programs. These initiatives are designed to foster a culture of continuous improvement, ensuring that our institution remains at the forefront of educational excellence.

I would like to express my gratitude to all the stakeholders who have contributed to the success of our quality assurance efforts. Their dedication and commitment to maintaining high standards have been instrumental in the achievements outlined in this report. I would also like to thank all members of my Unit who have worked tirelessly to support and enhance the quality of education and services provided by our institution.

Thank you for your continued support and commitment to quality assurance.

Sincerely,

Director of Quality Assurance and Institutional Effectiveness Unit

Dubai Medical College for Girls



## 1. About Dubai Medical College for Girls

On August 1, 1986, our founder Haj Saeed bin Ahmed Al Lootah accomplished that very goal and classes began at Dubai Medical College for Girls (DMCG) with Professor Dr. Zahira H. Abdin as the founding dean. His visionary dream had become a reality.

During these formative years, the College received substantial professional support and advice from the Leicester Medical School in the United Kingdom and the Cairo Medical School in Egypt. This international contribution combined with the faculty's extensive experience led to the creation of an intensive curriculum that would incorporate the best of the world's medical practices.

Since its inception, DMCG has been fortunate to receive help from the government of Dubai's Department of Health and Medical Services under its former Director H.E. Dr. Juma Khalfan Balhoul. The departments hospitals opened their doors and welcomed DMCG students for clinical training. Our continued drive for excellence demands seamless integration between clinical and pre-clinical phases. In 2004, a Memorandum of Understanding was signed by DHA and DMCG to secure this process.

What we now know, as an outstanding educational institution, is a product of the cooperative solidarity of a group of people who put their heart and soul into it. Three decades of academic distinction have made DMCG a truly dynamic Centre of higher education par excellence.

With over 1500 graduates practicing medicine across the world and a campus that includes professors and students from over 50 different countries, DMCG has earned a reputation as one of the best institutions for medical education and a beacon of academic excellence.

In September 2022, the College ownership was transferred under "Saeed Ahmad Lootah Charity Foundation".

## 2. Executive Summary

The Quality Assurance Report of the DMCG is a comprehensive assessment of the institution's performance and adherence to quality standards. This report aims to provide an overview of the DMCG's quality assurance processes, highlight areas of strength, identify areas for improvement, and make recommendations for enhancing the overall quality of education and services provided by the DMCG

The report is based on a thorough evaluation of various aspects of DMCG including its academic programs, teaching and learning practices, research activities, student support services, infrastructure, and governance structure. It takes into account feedback from students, faculty, staff, and external stakeholders to ensure a holistic and unbiased assessment.

The primary objective of this Quality Assurance Report is to ensure that DMCG is meeting the expectations and needs of its stakeholders, including students, parents, employers, and the wider community. It serves as a tool for continuous improvement and accountability, helping the DMCG to maintain and enhance its reputation as a provider of high-quality education.

The report provides an opportunity for the DMCG to reflect on its achievements and challenges, and to identify areas where it can further enhance its performance. It also serves as a benchmark against which the DMCG can measure its progress over time.

Finally the Quality Assurance Report is a valuable resource for DMCG leadership, faculty, and staff, as it provides them with insights and recommendations to guide their decision-making and planning



processes. It also serves as a means of transparency and accountability to the DMCG's stakeholders, ensuring that their expectations are being met and their concerns are being addressed.

In conclusion, the Quality Assurance Report of the DMCG is a vital document that assesses the institution's performance and provides recommendations for improvement. It serves as a tool for continuous enhancement of the DMCG's quality standards and ensures that it remains committed to providing a high-quality education and experience for its students.

### 3. Licensure and Accreditation

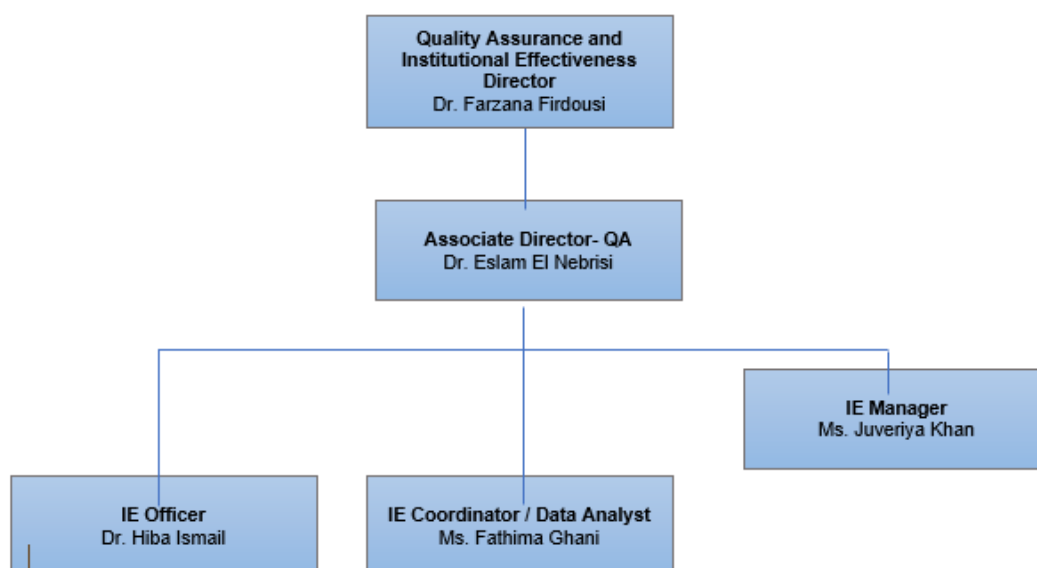
Dubai Medical College for Girls is licensed by the Ministry of Education; MBBCh/MD program is accredited by the Commission of Academic Accreditation; and the institutional licensure is valid until May 4, 2026.

- MBBCH / MD program is licensed until 17 May 2024
- DMCG received renewal of Institutional Licensure in April 2023 valid till May 2026
- MD 2+4 Curriculum was approved by CAA in August 2023

DMCG has received the following Certifications.

- ISO/IEC 27001:2013 Information Security Management system
- ISO 21001:2018 Educational Organization Management Systems
- Quality Assurance Agency (QAA) Membership

### 4. Organizational Structure of QAIE Unit





## 5. Objectives of QA & IE Unit

The Quality Assurance and Institutional Unit (QA & IE) in DMCG plays a crucial role in ensuring that the institution maintains high standards of education, student services, and overall performance. The primary goals of the Quality Assurance Unit in a college include:

1. **Enhancing Academic Excellence:** The QA & IE works towards maintaining and improving the academic quality of programs, courses, and instructional materials to ensure that students receive a high-quality education.
2. **Assessment and Evaluation:** The QA & IE establishes assessment mechanisms to measure student learning outcomes and evaluates the effectiveness of teaching methods. Regular evaluations help identify areas of improvement and ensure continuous enhancement of the educational process.
3. **Accreditation and Compliance:** The QA & IE is responsible for preparing the college for accreditation processes, ensuring compliance with accreditation standards set by external agencies. This goal helps maintain the college's reputation and ensures that it meets national or international standards.
4. **Institutional Research:** The QA & IE conducts institutional research and gathers data to support evidence-based decision-making, leading to better planning and resource allocation.
5. **Quality Enhancement Initiatives:** The QA & IE initiates projects and activities to enhance the overall quality of the college, fostering a culture of continuous improvement and innovation.
6. **Student Feedback and Surveys:** The QA & IE collects and analyses student feedback through surveys and focus groups to identify areas of concern and satisfaction, guiding improvements in various aspects of the college.
7. **Benchmarking and Best Practices:** The QA & IE compares the college's performance with other institutions and benchmarks against industry best practices to identify areas for improvement and adopt successful strategies.
8. **Institutional Reviews:** The QA & IE conducts periodic institutional reviews and self-assessments to assess the college's overall performance and identify opportunities for improvement.
9. **Continuous Improvement Planning:** The QA & IE develops and implements strategic plans for continuous improvement, outlining specific goals, action plans, and timelines to achieve excellence in all aspects of the college.
10. **Compliance with DMCG Policies and Procedures and CAA Standards**
11. **Review and update of Publications**
12. **Strategy monitoring, review, and decision support and Student learning outcome assessment and review**



## 6. Quality Assurance Process:

Quality assurance is a crucial process for enhancing quality of education in DMCG. To ensure the delivery of high-quality education and training to students. At DMCG the quality assurance process involves systematic monitoring, evaluation, and improvement of various aspects of the educational program, clinical training, and research activities.

The quality assurance process in DMCG begins with the establishment of clear goals and objectives, which are aligned with the mission and vision of the institution. These goals and objectives serve as a benchmark for evaluating the effectiveness of the educational program and its outcomes.

To ensure the quality of education, implement various mechanisms, such as curriculum assessment and review, faculty training and development, student assessment and evaluation, and continuous monitoring of the learning environment by conducting various surveys for all functional units. These mechanisms are designed to ensure that the curriculum is comprehensive, up-to-date, and relevant to the needs of the healthcare industry.

Additionally, regular evaluation of faculty performance and feedback from students contribute to the improvement of teaching methods and faculty engagement.

Student assessment and evaluation play a crucial role in the quality assurance process. DMCG employs various assessment methods, including written examinations, practical skills assessments, and clinical evaluations, to measure the knowledge, skills, and competencies of the students. These assessments provide valuable feedback to both students and faculty, allowing for continuous improvement in the teaching and learning processes.

Continuous monitoring of the learning environment is another important aspect of quality assurance in a medical college. This involves regular evaluation of facilities, resources, and support services to ensure that they meet the standards required for effective education and training. Additionally, feedback from students and faculty regarding the learning environment is collected and analysed to identify areas for improvement.

Overall, the quality assurance process in DMCG is a comprehensive and ongoing effort to ensure that students receive the best possible education and training. It involves continuous monitoring, evaluation, and improvement of various aspects of the educational program, faculty performance, student assessment, and the learning environment. By implementing effective quality assurance mechanisms, medical colleges strive to produce competent healthcare professionals who can meet the challenges of the ever-evolving healthcare industry.

### **Instruments used to assess and enhance quality assurance and institutional effectiveness:**

DMCG conducts various Surveys as a valuable instrument for assessing the quality of its teaching, student learning and stakeholders satisfaction. The surveys provide a systematic and structured approach to gather feedback from students, faculty, and staff, allowing QA & IE a comprehensive evaluation of various aspects of the college experience. By collecting data through surveys, insights are gained into the strengths and weaknesses of the programs, facilities, and services, ultimately leading to improvements in the overall quality of education provided.



One of the key advantages of using surveys at DMCG is their ability to capture the subjective experiences and opinions of stakeholders within the college community. Students, for instance, can provide valuable feedback on the effectiveness of teaching methods, the relevance of the curriculum, and the availability of resources. Faculty members can share their perspectives on institutional support, professional development opportunities, and the overall work environment. Staff members can offer insights into administrative processes, campus facilities, and support services. By analyzing these responses, QA & IE Unit identifies areas of improvement and takes targeted actions to enhance the quality of education and services provided.

Surveys also enable colleges to measure student satisfaction, which is a crucial aspect of assessing quality. By asking students about their satisfaction with various aspects of college life, such as academic support, student engagement activities, campus facilities, and overall experience, colleges can gauge how well they are meeting student expectations. This information can be used to identify areas where improvements are needed, such as enhancing student support services or expanding other opportunities. Student feedback is also used to measure the academic success, and overall satisfaction. This feedback is then be used to refine and improve the program for future cohorts.

In order to ensure the validity and reliability of survey results, DMCG surveys includes clear and concise questions, providing response options that cover the full range of possible answers, and ensuring anonymity and confidentiality to encourage honest and unbiased responses. Additionally, DMCG strives for high response rates to ensure representative data and consider conducting surveys periodically to track changes and trends over time and can identify areas of improvement and take targeted actions to enhance the overall quality of education and services provided.

The following surveys are conducted to gauge the satisfaction rates of stakeholders

## 6.1 Summary of Academic surveys results and Improvement plans.

At DMCG, a commitment to academic excellence and continuous improvement is at the forefront of our educational mission. To ensure the highest quality of education and services, we regularly conduct academic surveys and develop improvement plans based on the feedback and data collected.

All surveys reports are attached as appendices at the end of the report, improvement plans are all compiles in the Institutional Improvement plans.

### 6.1 Course Evaluation Survey

#### Methodology:

The Course Evaluation Surveys for all courses taught during Semester 1 and Semester 2, also including clinical courses, were conducted by the QA & IE Unit, through survey online using Explorance Blue platform. The survey questionnaire was divided into different themes and open-ended questions. Data was gathered, analyzed, and projected the results in tables, charts and graphs.

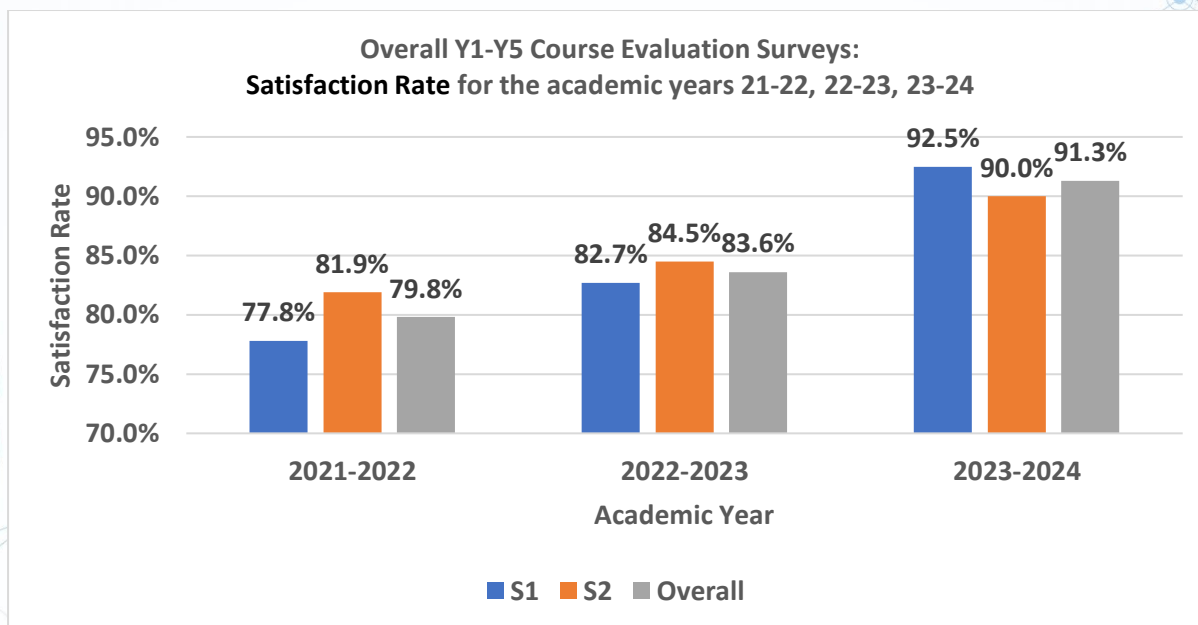
#### Results Summary Comparison with Previous Years:

**Satisfaction Rate:** DMCG was able to attain an overall satisfaction rate of 91.3% for Academic year 2023-2024 as compared to 83.6% in AY 2022-2023 and 79.8% in AY 2021-2022.





Satisfaction Rate			
Academic Year	Semester 1	Semester 2	Overall
2020-2021	73.0%	77.5%	75.3%
2021-2022	77.8%	81.9%	79.8%
2022-2023	82.7%	84.5%	83.6%
2023-2024	92.5%	90%	91.3%

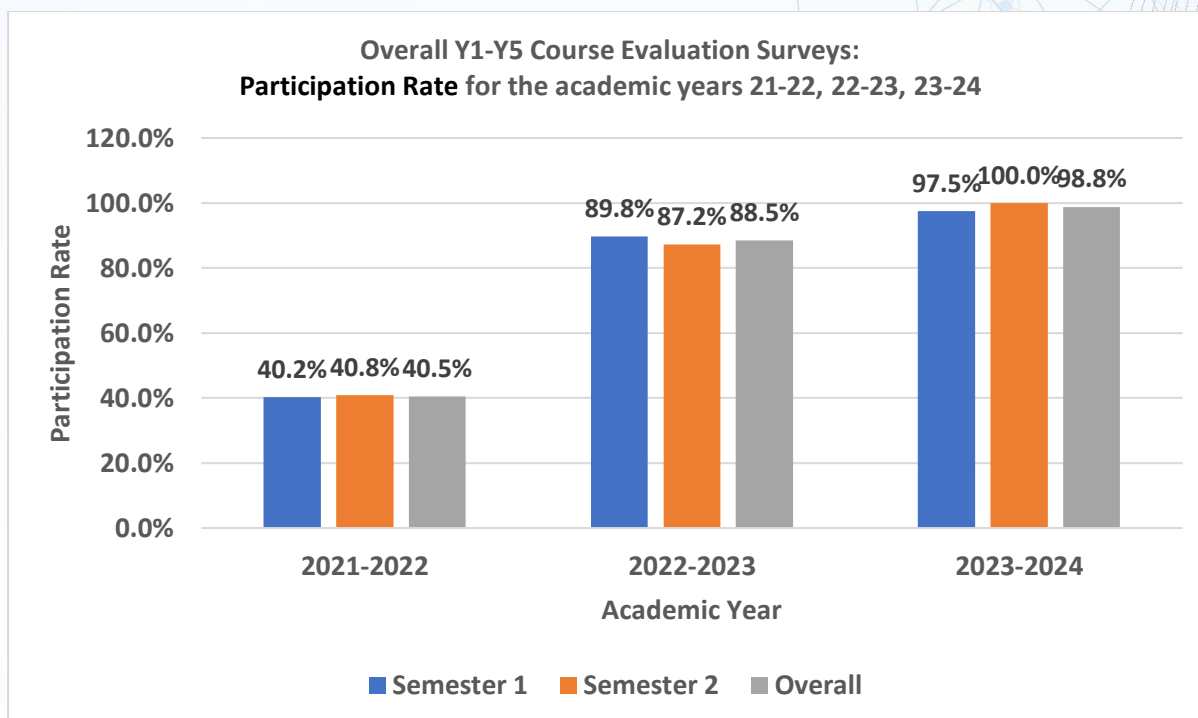


**Participation rate:** DMCG has ensured that the participation rate for the surveys is more than 70 % to ensure that the results are indicative of the true sample.

The participation rate was 98.8% for the Academic year 2023-2024 as compared to 88.5% in AY 2022-2023 and 40.5% in AY 2021-2022.

Participation Rate			
Academic Year	Semester 1	Semester 2	Overall
2020-2021	48.9%	30.5%	39.7%
2021-2022	40.2%	40.8%	40.5%
2022-2023	89.8%	87.2%	88.5%
2023-2024	97.5%	100%	98.8%





#### B. Thematic Analysis:

- Courses of MD Year 1 Semester 2: Faculty Performance received the highest satisfaction rate of 91.9%.

Themes	Overall Courses
Course Structure and Delivery	84.2%
Tutorials/Practical Sessions	83.5%
Faculty Performance	91.9%
<b>Overall Satisfaction Rate</b>	<b>86.5%</b>

- Courses of MBChB Clinical Sciences Year 3-5 Semester 2: Faculty Performance and Clerkship received the highest satisfaction rate of 95.1% and 90.6% respectively.

Themes	Overall Clinical Courses
Course Structure and Delivery	80.2%
Simulation	83.9%
Clerkship	90.6%
Preceptors	85.9%
Faculty Performance	95.1%
<b>Overall Satisfaction Rate</b>	<b>87.1%</b>



## Recommendations:

- All categories scored >80% satisfaction rate. However, any student statement within each category scoring <80% satisfaction rate and student comments of concern are addressed, and an action plan is formulated.

QA & IE Unit will follow up with the Academic Affairs Office to ensure that the action plan is implemented.

Attached appendices contains the complete course evaluation reports.

## 7. Summary of non-academic surveys and Improvement plans

### 7.1. Surveys analysis and data

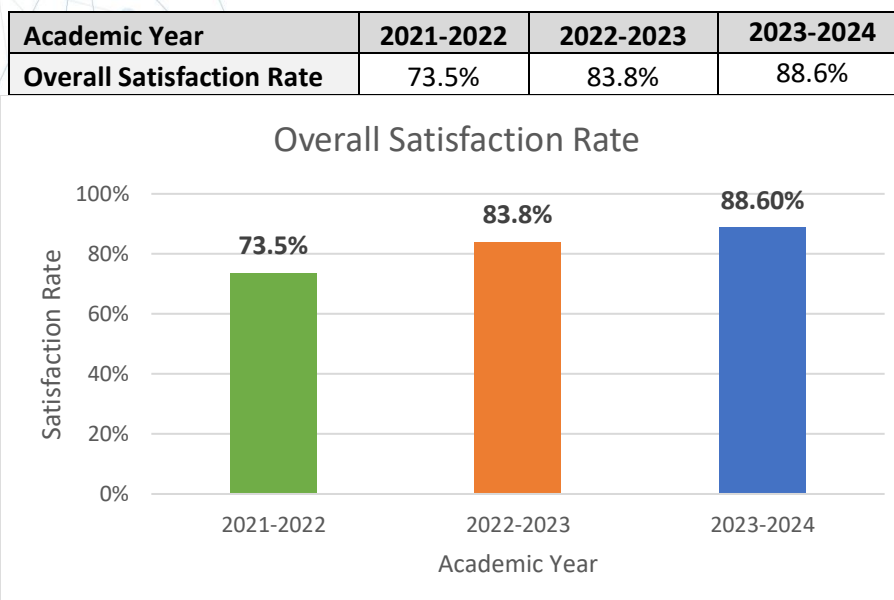
#### 7.1.1 Faculty Satisfaction Survey

#### 1. Methodology:

The Faculty Satisfaction Survey was conducted by the QA & IE Unit online using Explorance Blue. The survey comprised of **3** demographic questions, **52** close-ended questions and **3** open-ended questions. Data was retrieved, analysed and projected the results in tables, charts and graphs.

#### 2. Results summary comparison with previous years:

- A. **Satisfaction Rate:** DMCG was able to attain a satisfaction rate of **88.6%** for the year Academic 2023-2024 as a compared to 83.8% in AY 2022-2023 and 73.5% in AY 2021-2022.

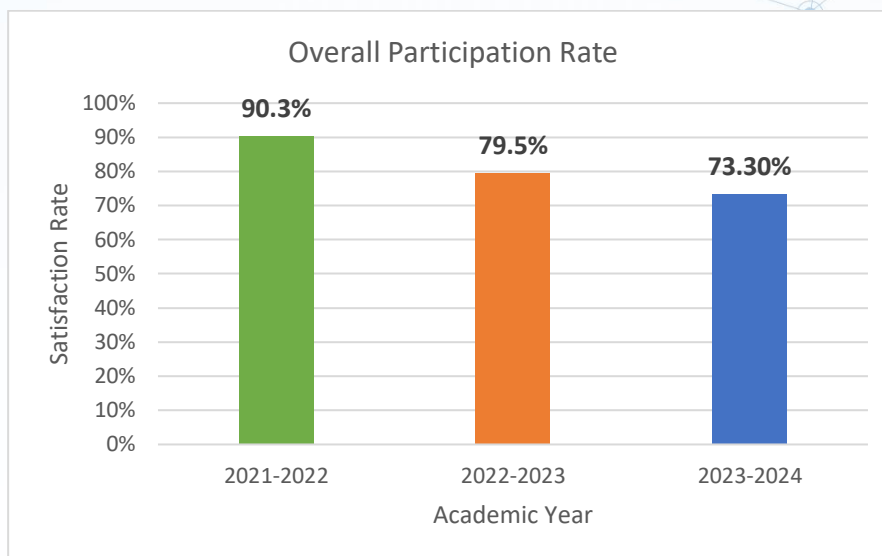


Satisfaction rate improved by +4.8% since AY 2022-2023.

**Participation rate:** The participation rate of all responses was **73.3%** for the academic year 2023-2024 as compared to 79.5% in AY 2022-2023 and 90.3% 2021-2022.



Academic Year	2021-2022	2022-2023	2023-2024
Overall Participation Rate	90.3%	79.5%	73.3%



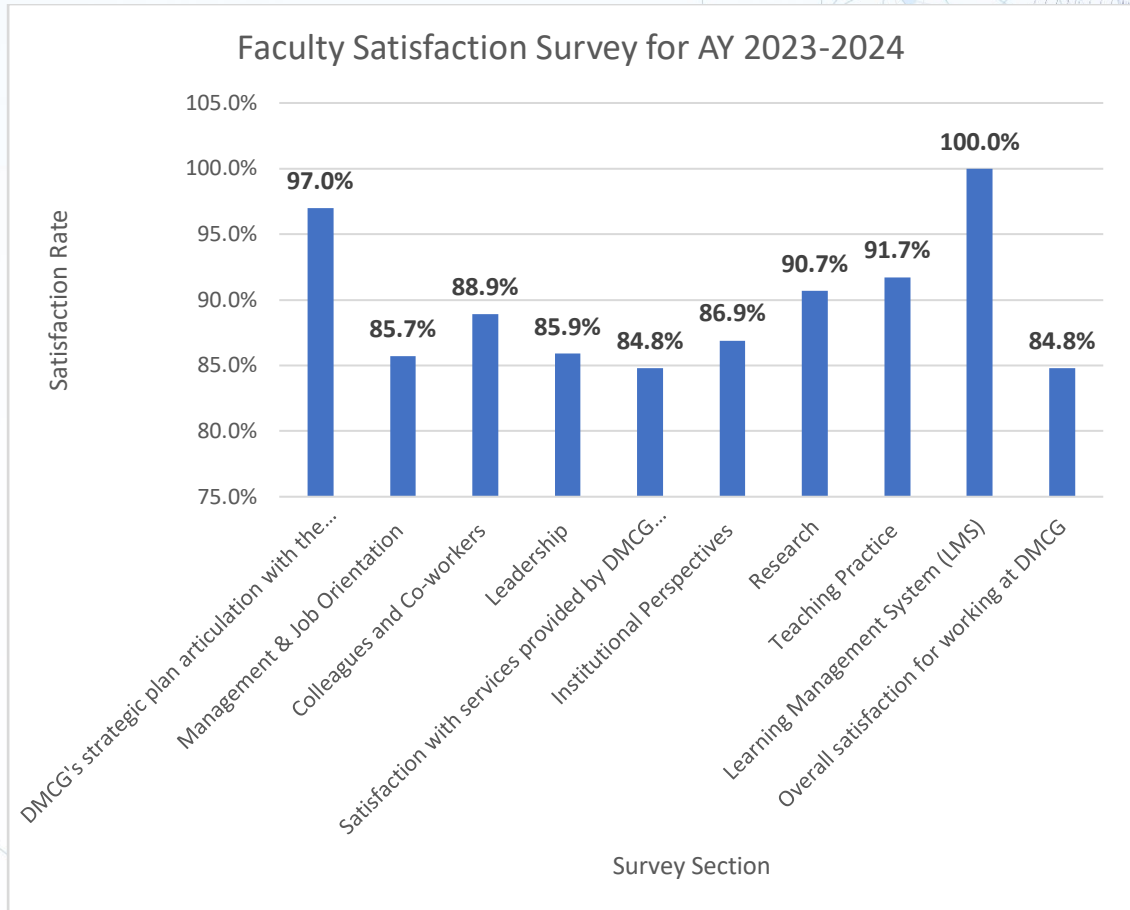
Participation rate decreased by -6.2% compared to AY 2022-2023.

- C. **Thematic Analysis and Findings:** All categories scored >80% satisfaction rate with Learning Management System (LMS), DMCG's strategic plan articulation with the institution's vision and mission, Teaching Practice, and Research scoring >90%.

Themes	Overall Average
DMCG's strategic plan articulation with the institution's vision and mission.	97%
Management & Job Orientation	85.7%
Colleagues and Co-workers	88.9%
Leadership	85.9%
Satisfaction with services provided by DMCG departments/Units	84.8%
Institutional Perspectives	86.9%
Research	90.7%
Teaching Practice	91.7%
Learning Management System (LMS)	100%
Overall satisfaction for working at DMCG	84.8%
<b>Overall Satisfaction Rate</b>	<b>88.6 %</b>

The questions that received less than 75 % need to be addressed.





#### Areas of improvement: (<80%)

- Section 5: Satisfaction with services provided by DMCG departments/Units scored average satisfaction rate of 84.8% but:
  - Quantitative findings:
    - DMCG demonstrates good communication practices 72.7%
    - Canteen Services 45.5%
  - Qualitative findings:
    - Faculty members' comments: Overall, the faculty members pointed out a range of issues and provided suggestions aimed at improving the research environment, workload distribution, survey processes, faculty development, campus facilities, communication, and governance at DMCG.

#### Recommendations:

- Foster a Positive Work Environment: Faculty members expressed concerns about the work environment, including issues related to workload, stress, and work-life balance. It is crucial to address these concerns to ensure employee satisfaction and productivity. Encouraging a positive work culture that values collaboration, recognition, and employee well-being will contribute to a more enjoyable work environment.
- Enhance mentorship programs. It is recommended mentorship initiatives, creating an inclusive environment where all employees feel valued and respected will not only improve employee satisfaction but also foster creativity and innovation.
- Strengthen Employee Recognition Initiatives: Employees expressed a desire for increased recognition for their achievements and contributions. Recognizing and appreciating



employees' efforts will not only boost morale but also motivate them to continue performing at their best.

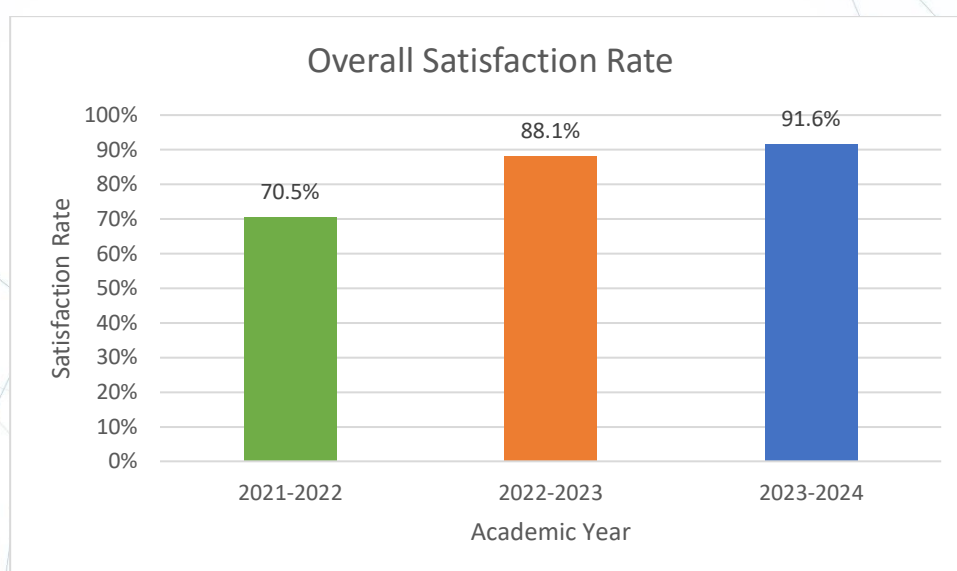
## 7.2 Staff Satisfaction Survey

The Staff Satisfaction Survey was conducted by the QA & IE Unit, who launched the survey online using Explorance Blue. The survey comprised of **36** close-ended questions and **3** open-ended comment sections. Data was retrieved, analysed and projected the results in tables, charts and graphs.

### 1. Results Summary Comparison with Previous Years:

**Satisfaction Rate:** The Staff Satisfaction Survey was conducted by the QA & IE Unit online using Explorance Blue. The survey comprised of **3** demographic questions, **38** close-ended question and **3** open-ended questions. Data was retrieved, analysed and projected the results in tables, charts and graphs.

Academic Year	2021-2022	2022-2023	2023-2024
Overall Satisfaction Rate	70.5%	88.1%	91.6%

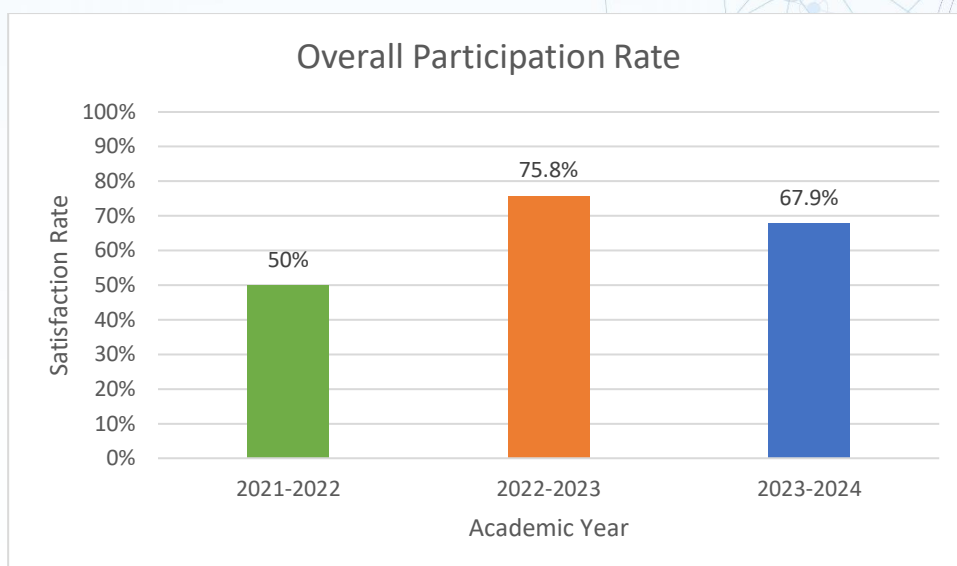


Satisfaction rate improved by +3.5% compared to AY 2022-2023.

**Participation rate:** The participation rate of all responses was **67.9%** for the academic year 2023-2024 as compared to 75.8% in AY 2022-2023 and 50% 2021-2022.

Academic Year	2021-2022	2022-2023	2023-2024
Overall Participation Rate	50%	75.8%	67.9%



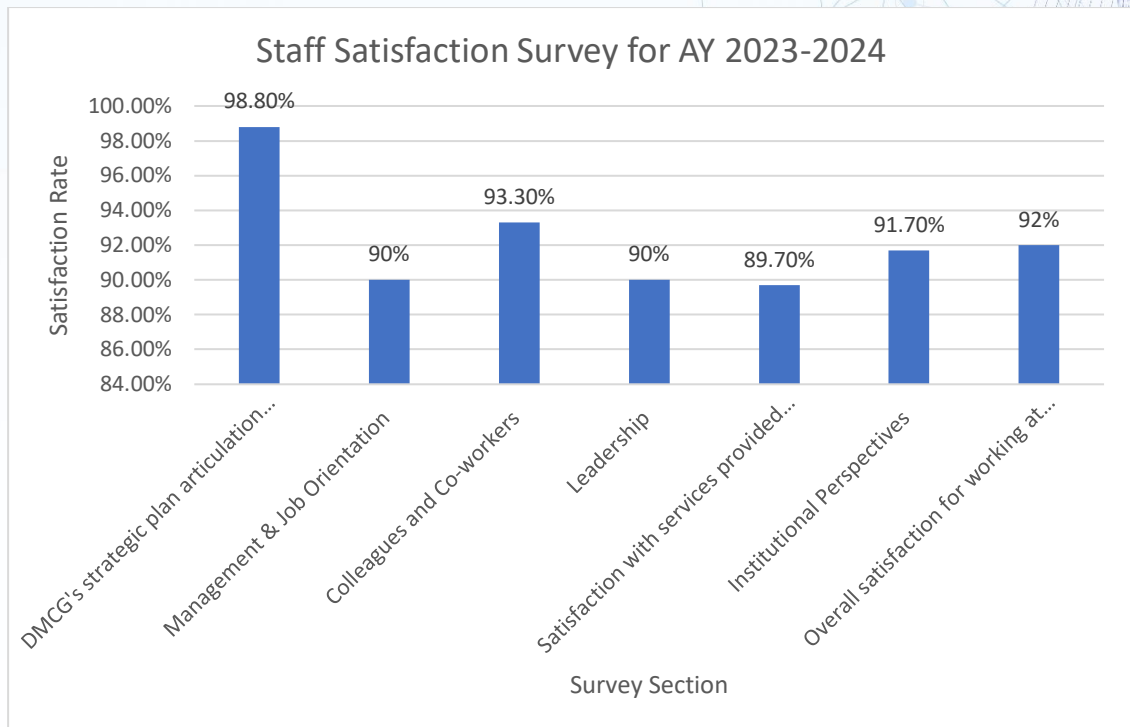


Participation rate decreased by -7.9% compared to AY 2022-2023.

**D. Thematic Analysis and Findings:** All categories scored >80% satisfaction rate with all sections scoring >90% except Satisfaction with services provided by DMCG departments/Units scoring 89.7% due to the dissatisfaction with canteen services (scoring 48%).

Themes	Overall Average
DMCG's strategic plan articulation with the institution's vision and mission.	98.8%
Management & Job Orientation	90%
Colleagues and Co-workers	93.3%
Leadership	90%
Satisfaction with services provided by DMCG departments/Units	89.7%
Institutional Perspectives	91.7%
Overall satisfaction for working at DMCG	92%
<b>Overall Satisfaction Rate</b>	<b>91.6 %</b>





#### Areas of improvement: (<80%)

- Section 2: Management & Job Orientation scored average satisfaction rate of 90% but:
  - Quantitative findings:
    - The policy for promotion is satisfactory 78%
- Section 5: Satisfaction with services provided by DMCG Departments/Units scored average satisfaction rate of 89.7% but:
  - Quantitative findings:
    - Canteen Services 48%
- Qualitative findings:
  - Staff members' comments: Overall, the staff members at DMCG provided extensive feedback on various aspects. Key themes include the need for better task allocation, fair work distribution, improved compensation and benefits, and strengthened communication and professionalism. Staff members also emphasized the importance of better campus facilities, clear administrative policies, continuous professional development, and fostering a respectful, inclusive, and collaborative work environment.

#### Recommendations from QA & IE Unit:

The overall response rate to the Staff satisfaction survey is 88.1%, all the questions have achieved more than 75% satisfaction rate, which is well above the target rate. DMCG will increase the target rate to 80% from AY 2023-2024.

These recommendations aim to address the concerns raised by the employees to improve their overall experience within the organization.

1. Foster a Positive Work Environment: Many employees expressed concerns about the work environment, it is crucial to address these concerns to ensure employee satisfaction and productivity.



2. We recommend implementing diversity training programs and initiatives that promote inclusivity, such as mentorship programs, creating an inclusive environment where all employees feel valued and respected will not only improve employee satisfaction but also foster creativity and innovation.

4. Strengthen Employee Recognition Initiatives: Employees expressed a desire for increased recognition for their achievements and contributions. Recognizing and appreciating employees' efforts will not only boost morale but also motivate them to continue performing at their best.

Implementing these recommendations will contribute to a more positive and fulfilling work experience for employees. By addressing their concerns and providing opportunities for growth and development, we can create a more engaged and productive workforce.

Action plans are to be prepared for the comments and feedback received by staff members to improve the services at DMCG.

QA & IE Unit will follow up with HR Unit to ensure that the action plan is implemented.

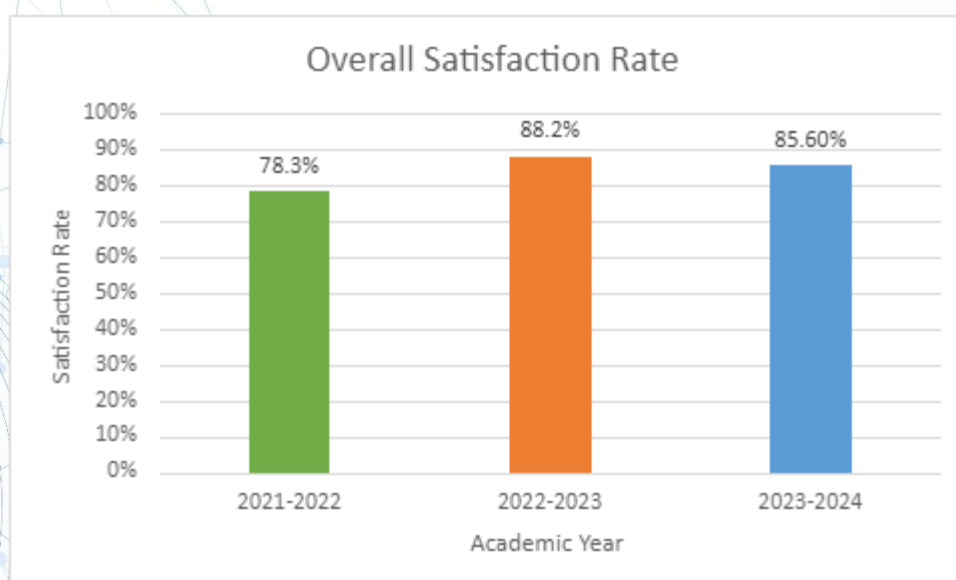
### 7.3 Students Experience Survey

The Student Experience Survey was conducted by the QA & IE Unit, who launched the survey online using Explorance Blue. The survey comprised of **87** closed-ended questions and **15** open-ended comment sections. Data was retrieved, analyzed and projected the results in tables, charts and graphs.

#### 1. Results Summary Comparison with Previous Years:

**Satisfaction Rate:** DMCG was able to attain a satisfaction rate of **85.6%** for the year Academic 2023-2024 as a compared to 88.2% in AY 2022-2023 and 78.3% in AY 2021-2022.

Academic Year	2021-2022	2022-2023	2023-2024
Overall Satisfaction Rate	78.3%	88.2%	85.6%

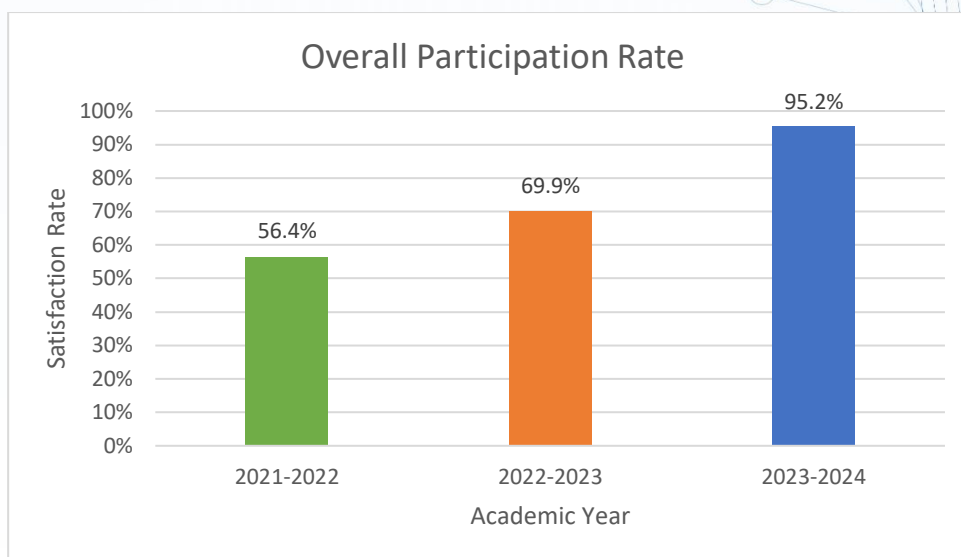


Satisfaction rate decreased by -2.6% compared to AY 2022-2023.

**Participation rate:** The participation rate of all responses was **95.2%** for the academic year 2023-2024 as compared to 56.4% 2021-2022 and 25.9% in AY 2020-2021.



Academic Year	2021-2022	2022-2023	2023-2024
Overall Participation Rate	56.4%	69.9%	95.2%



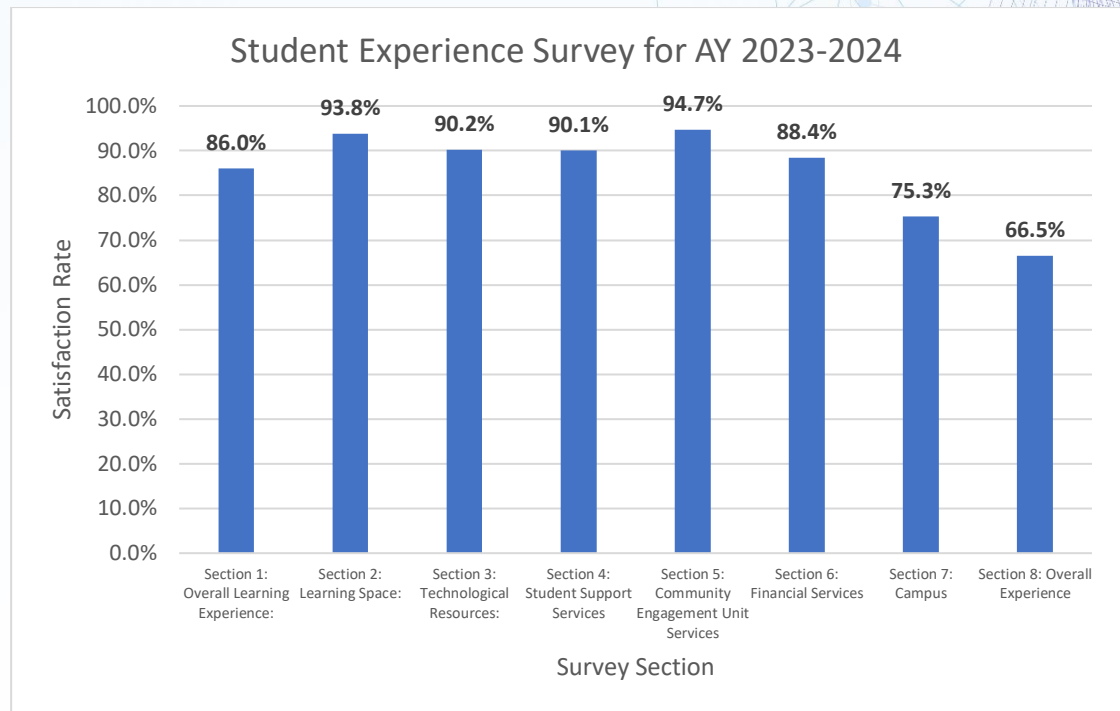
Participation rate improved by +25.3% compared to AY 2022-2023.

**Thematic Analysis and Findings:** 6 out of 8 sections scored >80% satisfaction rate with Section 5: Community Engagement Unit Services, Section 2: Learning Space (Library, Laboratories, and Simulation Center), Section 3: Technological Resources, and Section 4: Student Support Services receiving the highest scores of 94.7%, 93.8%, 90.2% and 90.1% respectively.

The two-section scoring <80% are Section 7: Campus and Section 8: Overall Experience with 75.3% and 66.5% respectively.

Themes	Average
Section 5: Community Engagement Unit Services	94.7%
Section 2: Learning Space (Library, Laboratories, and Simulation Center)	93.8%
Section 3: Technological Resources	90.2%
Section 4: Student Support Services	90.1%
Section 6: Financial Services	88.4%
Section 1: Overall Learning Experience:	86.0%
Section 7: Campus	75.3%
Section 8: Overall Experience	66.5%
<b>Overall Percentage</b>	<b>85.6%</b>





- **Section 7: Campus scored 75.3%:**

- Quantitative findings:

- 7.1: Campus Infrastructure and Services:

- The lecture halls and classrooms are well-illuminated and well-ventilated 75.1%
      - The audio-visual system in the lecture halls and classrooms is consistently operational 75.1%
      - The parking spaces are adequately available 37.2%
      - I am satisfied with the bus/transport services at DMCG 75.6%

- Qualitative findings:

- Student comments: The comments highlight several areas of concern related to the campus infrastructure and services, including the need for better food options, improved study areas, renovation of lecture halls, enhanced hygiene and cleanliness, availability of medical facilities, and overall campus development.

- **Section 8: Overall Experience scored 66.5%.**

- How would you rate your overall experience at DMCG? Positive response\* of 59.1%
  - Would you recommend DMCG to your friends and family? Positive response\* of 73.8%
  - Student comments: The comments emphasize the need for recruiting alumni for the improvement of the college, enhancement of student activities and skills, improvement of transportation services, better facilities and maintenance, refinement of academic programs and evaluation methods, and more effective financial and administrative services.

\* Positive response is the sum of (strongly agree and agree).



## 7.4 QA & IE Evaluation

Assessing the Quality Assurance and Institutional Effectiveness unit through surveys is a valuable process to ensure that the unit is meeting its objectives and contributing to the overall quality of the DMCG. The QA & IE Unit disseminates Policies and provides workshops regarding the QA & IE processes.

In the staff and faculty satisfaction survey, the question regarding the dissemination of policies to faculty and staff received average satisfaction rate of 95 %

The evaluation of the quality assurance and institutional effectiveness unit is done annually by the dean, and it refers to an assessment process conducted on a yearly basis to evaluate the quality of operations and performance within an academic institution or department.

During this evaluation, various aspects are considered, including but not limited to:

1. Lead the self-assessment and continuous improvement of the performance indicators at the college and program levels.
2. Manage the Policies and Procedures Manual, version control, and revision history.
3. Provide reports on institutional and programmatic annual reviews and outcomes assessments.
4. Communicate outcomes and achievement in the Institutional Annual Report and Program Effectiveness Report to stakeholders.
5. Coordinate the submission of licensure and accreditation documents to CAA, MOE, and other accredited bodies in an efficient and timely manner.
6. The QA and IE Unit team members pursue opportunities for continuous professional development.





## DMCG Unit Performance Review Form (2023-2024)

Unit Information			
Name of unit:	Quality Assurance and Institutional Effectiveness Unit	Performance Review Period:	Academic Year 2023-2024
Members of unit:	Dr. Farzana Firdousi Dr. Eslam El Nebrisi Dr. Heba Ismail Mrs. Juveriya Khan	Reports To:	DMCG Dean

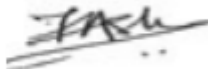
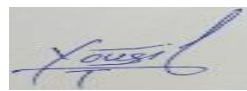
	Performance Objectives (KPIs)	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Did Not meet Expectations
<b>A.</b>	<b>Lead the Self-assessment and continuous improvement of the performance indicators at the college and the program levels (25%):</b>				
	a. Evaluate KPIs at the academic, administrative, research and structural levels.		*		
	b. Guide and monitor the different units in performing self-assessment and in using the results for planning for the next cycle. <ul style="list-style-type: none"> <li>Improve collection and compilation of course, student and faculty data.</li> <li>Facilitate departmental and unit audits to ensure compliance with CAA and MOE standards.</li> <li>Monitor timely implementation of improvement plans .</li> <li>Analyze results and create plans for improvement for achieving excellence.</li> <li>Disseminate the survey reports in a timely manner and communicates its findings and recommendations to the relevant unit and the Dean.</li> </ul>	*			
	c. Manage Policies and Procedures Manual; version control and revision history.		*		
	d. Set targets for KPIs.	*			
<b>B.</b>	<b>Provide reports on institutional and programmatic annual review &amp; outcomes assessment (25%):</b>				
	a. Conduct institutional research to measure the level of inputs (students, faculty members, staff members) and the level of outputs (graduates, etc.) as per the scheduled timeline.	*			
	b. Prepare the Institutional Annual Report and providing data to Academic Affairs Office to prepare the Program Effectiveness Report, using the survey reports.	*			



	c. Provide programs and units with analyzed data and reports for further analysis and use of the results for improvement		*		
	d. Prepare Review of strategic plan and implementation status		*		
	e. Provide a framework for internal auditing of academic and non-academic units.	*			
<b>C.</b>	<b>Feed data into strategic planning (25%):</b>				
	a. Communicate outcomes achievement in the Institutional Annual Report and Program Effectiveness Report to stakeholders.	*			
	b. Use the results of the institutional surveys to prepare proposal for improvement.	*			
<b>D.</b>	<b>Manage communication with CAA and MOE (25%):</b>				
	a. Coordinate submission of licensure and accreditation documents to Ministry in a timely manner.	*			
	b. Coordinate collection and submission of CHEDS data to the Ministry in a timely manner.	*			
	c. Prepare all CAA and MOE pre-visit documentation in a timely manner.	*			
<b>E.</b>	<b>The QA &amp; IE Unit team members pursue opportunities for continuous professional development.</b>				
		*			

**Dean Remarks:**

Members of the team are well versed in their role. They are self-motivated, dedicated, hard workers, and efficient.

QA & IE Director's Signature:		Dean's Signature:	
Date:	20/06/2024	Date:	20/06/2024

**Performance Rating Categories**

● Green Category	● Green Category	● Yellow Category	● Red Category
Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Did Not meet Expectations



## Analysis of QA & IE Unit Performance Evaluation: AY 2023-2024

	Exceeds Expectations	Meets Expectations	Partially Meets Expectations	Did not meet Expectations
<b>A. Lead the Self-assessment and continuous improvement of the performance indicators at the college and the program levels (25%):</b>				
a. Evaluate KPIs at the academic, administrative, research and structural levels.		3		
b. Guide and monitor the different units in performing self-assessment and in using the results for planning for the next cycle. <ul style="list-style-type: none"> <li>Improve collection and compilation of course, student and faculty data.</li> <li>Facilitate departmental and unit audits to ensure compliance with CAA and MOE standards.</li> <li>Monitor timely implementation of improvement plans.</li> <li>Analyze results and create plans for improvement for achieving excellence.</li> <li>Disseminate the survey reports in a timely manner and communicate its findings and recommendations to the relevant unit and the Dean.</li> </ul>	4			
c. Manage Policies and Procedures Manual; version control and revision history.		3		
d. Set targets for KPIs.	4			
<b>B. Provide reports on institutional and programmatic annual review &amp; outcomes assessment (25%):</b>				
a. Conduct institutional research to measure the level of inputs (students, faculty members, staff members) and the level of outputs (graduates, etc.) as per the scheduled timeline.	4			
b. Prepare the Institutional Annual Report and providing data to Academic Affairs Office to prepare the Program Effectiveness Report, using the survey reports.	4			
c. Provide programs and units with analysed data and reports for further analysis and use of the results for improvement		3		
d. Prepare Review of strategic plan and implementation status		3		



e. Provide a framework for internal auditing of academic and non-academic units.	4			
<b>C. Feed data into strategic planning (25%):</b>				
a. Communicate outcomes achievement in the Institutional Annual Report and Program Effectiveness Report to stakeholders.	4			
b. Use the results of the institutional surveys to prepare proposal for improvement.	4			
<b>D. Manage communication with CAA and MOE (25%):</b>				
a. Coordinate submission of licensure and accreditation documents to Ministry in a timely manner.	4			
b. Coordinate collection and submission of CHEDS data to the Ministry in a timely manner.	4			
c. Prepare all CAA and MOE pre-visit documentation in a timely manner.	4			
<b>E. The QA &amp; IE Unit team members pursue opportunities for continuous professional development.</b>	4			



#### 7.4.1 QA & IE Evaluation by the stakeholders:

Dean Evaluation :3.7/4: 92.5 %

Faculty Satisfaction Survey: 93.9%

Staff Satisfaction Survey :98.0 %

### 8. Quality Assurance at Program Level

Program competency alignment is a vital component of the curriculum alignment to ensure DMCG delivers knowledge, skills, and competency focused education. The alignment measures the competency and skills that students acquired as they progress through the 6-year program, duration. The first phase of the alignment is to collect performance data from the assessment of the relevant courses mapped to the Program learning outcomes and aligned with NQF descriptors. The mapped competency chart is reviewed by the ADAA and College Council and correlated with PLOs/CLOs/NQF matrices to ensure optimization of the assessment alignment across the program. The program learning outcomes are also aligned with Emirates Med Competency descriptors.

The competency achievement results are included in the annual program review for further analysis and discussions. Recommendations for improvements are presented to ensure DMCG graduates' readiness as medical professionals. The following table shows the achievement of CLOs and PLOs during the academic year.

#### 8.1 PLO Achievement for the AY 2023-2024

##### PLO Attainment of MD Program

MD PLO Achievement AY 2023-24	
PLO1	89.18%
PLO2	91.98%
PLO3	95.58%
PLO4	91.31%
PLO5	90.37%
PLO6	89.66%
PLO7	95.04%
PLO8	94.84%
PLO9	95.45%
<b>Average</b>	<b>92.60%</b>

##### PLO Attainment of MBBCh Program

MBBCH PLO Achievement AY 2023-24	
A1	78.25%



A2	78.25%
A3	78.25%
B1	78.25%
B2	78.25%
B3	78.41%
C1	78.25%
C2	78.25%
C3	78.25%
C4	78.25%
<b>Average</b>	<b>78.27%</b>

## 9.Key Performance Indicators of Functional Units

All KPIs are determined at the beginning of each academic year. KPIs of academic and administrative units are evaluated annually. Key areas of performance of all functional units / departments that contribute significantly to the achievement of the college's objectives are identified and targets are determined.

At the end of the academic year the key performance Indicators (KPIs) are measured through a systematic process that involves collecting relevant data, applying appropriate measurement techniques, and interpreting the results to assess the performance of specific aspects of an organization.

KPI achievement Scorecards of all Units are calculated and shared with the relevant Unit at the end of the academic year. This data is further used for Institutional effectiveness and Institutional Improvement plans.



## 9A-Link to all Functional Unit KPIs

Department/Unit	Detailed KPIs
College Performance Indicators (KPIs)	<a href="#">College Performance Indicators (KPIs)</a>
Quality Assurance and Institutional Effectiveness KPI	<a href="#">Quality Assurance and Institutional Effectiveness KPI</a>
Academic Affairs performance KPI	<a href="#">Academic Affairs performance KPI</a>
Research KPI	<a href="#">Research KPI</a>
Student and Alumni Affairs Performance KPI	<a href="#">Student and Alumni Affairs Performance KPI</a>
Library Performance KPI	<a href="#">Library Performance KPI</a>
Information Technology Performance KPI	<a href="#">Information Technology Performance KPI</a>
Community Engagement performance KPI	<a href="#">Community Engagement performance KPI</a>
Occupational Health and safety Environment KPI	<a href="#">Occupational Health and safety Environment KPI</a>

## 10. Key changes in Policies and Procedures Manual

The Policies and Procedures Manual has undergone several key revisions to enhance governance, management, faculty operations, and staff development. New details have been added to the Research and Ethics Committee, while the Benchmarking policy has been revised for better alignment with quality standards. Significant updates include revised faculty recruitment and salary policies, clarified roles and responsibilities, and adjustments to workload policies to comply with CAA Standards 2019. Professional development activities and intellectual property rights were thoroughly revised. Additionally, staff promotion policies and office hours were updated, ensuring improved operational efficiency and alignment with current practices.

New		No change	Minor Change	Thorough Editing	Major Change
Document ID: DMU/PPM	Chapter	POLICIES and PROCEDURE MANUAL		KEY CHANGES REQUIRED	
A- Governance & Management					
	A.2	Research and Ethics Committee		All committee details are added.	
Planning and Quality Assurance					
	B.6	Benchmarking at DMCG		Revised the Benchmarking policy	
Faculty and Professional Staff					
	D.1	Faculty recruitment and salary scale		Added definition of academic and Non-academic staff, emergency, sabbatical leave reviewed and revised.	
	D.2	Faculty roles and responsibilities		Revised faculty roles and responsibilities.	
	D.3	Faculty Promotion		Staff Promotion policy is incorporated	
	D.4	Faculty workload policy		Revised workload policy as per CAA Standards 2019.	
	D.6	Professional Development		Revised staff professional development activities, revised intellectual property rights.	



New		No change	Minor Change	Thorough Editing	Major Change
Document ID: DMU/PPM	Chapter	POLICIES and PROCEDURE MANUAL		KEY CHANGES REQUIRED	
	D.8	Employment & Termination of Employment policies		Revised office hours.	

## 11. Internal Quality Audits:

### 11.1 Modification to Existing Programs

- Changes to existing programs arise from CLOs reviews and Program Annual reviews.
- Changes are introduced to the program elements including Course Syllabus, Study Plan, Program Learning Outcomes, Internships, Curriculum Alignment Matrix and Admissions Requirements, Clos of the MBBCH program were revised at the beginning of the Academic Year by Associate Dean of Academic affairs

### 11.2 Academic Core Processes Compliance

DMCG is committed to establishing an effective compliance and internal control process with the objective of ensuring that academic services are planned, delivered and reviewed systematically and academic quality assurance is in place.

The scope of academic compliance will include the evaluation of compliance with established academic policies and procedures. The compliance process provides independent and objective assurance to add value and improve DMCG academic services.

Academic compliance activities are performed based on an annual audit plan, as well as at the request of the Dean The following compliance activities are conducted:

#### 11.2.1 Course File Compliance

Course File Compliance is conducted at the end each semester in all taught academic courses. Audits are conducted on E-Course File Records for each course/ module Individual compliance reports are prepared for each course/module and a summary report for all courses is disseminated to the respective module coordinators.

#### Course Assessment Compliance

Course assessment compliance report identifies compliance with DMCG's Policies for course assessment. Assessment committee conducts all assessments in compliance with DMCG Policies and standards. Assessment Committee ensures that all summative exams undergo the moderation and validation process as per the policy

#### College Compliance Audit

The compliance process is managed by the QA & IE Unit. The audit ensures that the College Leadership has conducted the required reviews during the academic year and published review reports in accordance with academic review cycle.



### Internal Core Processes Compliance

The scope of Internal compliance process is to examine current internal controls, evaluate adequacy of applicable policies and procedures, and review of effectiveness of the use of DMCG resources. The internal controls framework consists of policies, procedures and activities that safeguard the assets of the DMCG and ensure that the performance reporting of the DMCG is reliable. Internal compliance audits are performed for all functional units during the academic year.

The following compliance activities are conducted at DMCG to ensure:

#### Student Records Compliance

The QA & IE in coordination with the Student and Alumni Affairs conducts an internal audit once a year to ensure compliance with students' records policies. The audit is also conducted to meet CAA student's records compliance.

#### Information Access and Security Compliance

QA & IE Unit conducts an annual audit for established records on the ONE drive for tracking the access security log on the ONE drive by the IT team.

#### Health and Safety Compliance

QA & IE Unit conducts quarterly audit for compliance with established health and safety protocols and procedures for safeguarding the welfare of college community members. The compliance report is issued to the Dean and relevant stakeholders.

Laboratory Checklists are maintained to ensure safety measures are appropriate.

### 11.3 Quality Assurance Compliance with CAA standards (DMCG Publications)

Internal audits were conducted to confirm compliance with CAA standards and MOE HEI Framework Student and Alumni Affairs.

- a. College Catalog Audit- Annex 4
- b. Faculty Handbook – Annex 5
- c. Staff Handbook – Annex 6
- d. Student Handbook audit –Annex 7
- e. Quality Assurance Manual -Annex 8
- f. Program Specification Document – Annex 10
- g. Website Audit –Compliance Indicator 11
- h. Course Syllabi – Annex 13

### 11.4 Risk Management & Compliance

The purpose of the Risk Management Plan is to:

- Identify risk priorities.
- Implement risk control measures.
- Allocate responsibility and identify necessary resources.
- Establish a system to monitor, evaluate and report on risks.



- Balancing the cost of managing risk with the anticipated benefits.
- Proactive approach to the management of risk.
- Continuity planning in the event that critical threat is realized.

## 12. Bench marking with local and regional Institutions

### 12.1 Benchmarking of Key performance Indicators

The Quality Assurance & Institutional Effectiveness Unit conducted the benchmarking study in collaboration with Explorance. Two main sources are used in this report, CAA standards and Explorance Benchmarking Project. Data presented are for the Academic Year 2023-24. According to DMCG's Pledge of confidentiality with Explorance, other medical colleges are masked. The detailed benchmarking report is available in the appendix.

## 13. QA & IE Unit Improvement Plans for AY 2024-2025

Improvement Area	Description
<b>Centralized Operations</b>	Establish QAIE as a centralized unit across Dubai Medical University (DMU) to ensure consistent quality assurance practices.
<b>Standardization of Documentation</b>	Develop and implement standardized templates, forms, and reporting formats across departments and colleges.
<b>Policy Review Mechanisms</b>	Regularly review and update policies to align with accreditation standards and best practices.
<b>Training Programs</b>	Conduct workshops and training for faculty and staff on QA, institutional effectiveness, and accreditation.
<b>Digital Transformation</b>	Implement digital tools for tracking, analyzing, and reporting KPIs.
<b>Improved Communication</b>	Strengthen communication between QA&IE and departments for effective collaboration.
<b>Data-Driven Decision Making</b>	Enhance data collection and analysis to support evidence-based decisions.
<b>Accreditation Compliance</b>	Prioritize activities to maintain and achieve accreditation for programs and the colleges.
<b>Integration with Strategic Planning</b>	Align QA initiatives with DMU's strategic goals for cohesive institutional development.
<b>Faculty and Staff Support</b>	Provide resources and guidance to enhance understanding of QA processes.
<b>Innovative QA Practices</b>	Introduce innovative practices to advance institutional quality assurance.





Improvement Area	Description
Benchmarking	Regularly benchmark processes against regional and international standards to identify improvements.

#### 14. Appendices

- [1. Benchmarking report 2023-24](#)
- [2. Course Evaluation survey Reports 2023-24](#)
- [3. Student Experience Survey 2023-24](#)
- [4. Faculty Satisfaction survey 2023-24](#)
- [5. Staff Satisfaction survey 2023-24](#)