



College of Medicine



King Faisal University

Strategic Plan

2020-2025

December 2019



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1 Abbreviations

1. NCAAA: National Commission for Assessment and Academic Accreditation
2. EEC- HES: Education Evaluation Commission – Higher Education Sector
3. KPI: Key Performance Indicators.
4. PEST analysis: Political, Economical, Social, and Technological analysis
5. SWOT analysis: Strength, Weakness, Opportunity and Threat analysis
6. GMCA2012: Groningen Medical Curriculum Adoption 2012
7. OMR: Optical Marks Reader
8. CME: Continuing Medical Education
9. SDL: Self-Directed learning
10. MOH: Ministry of Health
11. KFU: King Faisal University
12. IT: Information & Technological



2 Foreword

I heartily endorse it and urge our campus audiences – students, faculty, staff, alumni, and global communities that we serve – to recognize where college of medicine is going.

It gives me immense pleasure to present Strategic Plan for 2020-2025. The intent of this plan is to enable college of medicine to understand where it will be focusing its compliance effort for coming five years ahead and for faculty to prepare accordingly. It is also a commitment to the university strategic plan and mission of higher education commission for the future as well as aligns with vision 2030 of the kingdom.

In this plan, we consider to continue the delivery of high-quality medical education and it would accomplish the commitments made within the strategic plan whilst improving many internal processes. We aspire to prepare students to be lifelong learners who are engaged in their communities. This plan shows us the way. Understanding and pursuing the goals in this plan now becomes the task of every college faculty and staff member.

The action plan based on involvement of different stakeholder in PESTS & SWOT analysis and review of vision, mission and values. It will also embed stronger risk and evidence-based prioritization and risk management to target our determined three basic themes for the compliance of 6 major goals.

We will collaborate across our network of the partners such as the Ministry of Health to gather intelligence and to identify other priority issues, which ultimately serve the mission of the King Faisal University in general and for the college of medicine especially.

Dr. Mohammed F. Alfarhan
Dean
College of Medicine
King Faisal University



3 Strategic Plan & Decision Making Committee

This committee was nominated in first in February 2017 then revised and reinforced in October 2019 under the honourable Dean, Dr. Mohammed Alfarhan with following members.

Dr. Abdulrahman Abdulhadi Alsultan – Academic Affairs – Vice-Dean

Dr. Abdulrahman AlMulhem – Postgraduate Studies & Research – Vice-Dean

Dr. Fahd AlWahdani – Clinical Affairs – Vice-Dean

Dr. Munira AlDayal – Female Affairs – Vice-Dean

Dr. Abdul Sattar Khan – Committee Coordinator

Dr. Habib Ahmad Qureshi

Dr. B. B. Gosai

Dr. Maujid Malik

Dr. Mohamed Yasser Ibrahim Daoud

Dr. Humaira Zareen

Dr. Naushad Abid

Dr. Doaa Elan

Ms. Sara AlRashid

Mr. Ryan Pagente

The new following members are added in the committee and some members are left for the good.

1. Dr. Fahd Alwaadani – Acting Dean
2. Dr. Naif Alhamam – Development & Community Engagement- Vice Dean
3. Dr. Emmad AlKofi
4. Dr. Abdulsalam Abdulrahim
5. Dr. Ibrahim Aljabre
6. Dr. Osama Alsaeed



4 Executive summary

This document depicts the five-year strategy for the College of Medicine (2020-2025) within the framework set by King Faisal University's Strategic plan for 2020-2025 based on the vision 2030. It is prepared in the context of the broad mission of the King Faisal University to provide quality education and lifelong learning, with encouragement of innovation and scientific research, in order to strengthen community engagement. Furthermore, it is harmonised within the context of the broader view of higher education and health care as well as the key relationships with the MOH partner.

An extensive process commenced when a strategic plan **was** revised through a strategic plan and decision making committee with the intention of informing all relevant stakeholders about the strategic plan, which shall lead to a transformation in the quality of research and education of the College of Medicine. The formed committee started with revision of vision, mission and values of the College and received consultation from all stakeholders. During the strategic planning, the PESTS & SWOT analysis have been done through the input of all stakeholders.

As a conclusion, we decided to continue with previous following three basic themes of our strategic plan in align with the strategic plan of the King Faisal University:

Theme 1: Excellence in education for future health professionals

Theme 2: Internationally recognized research in medical sciences

Theme 3: Community Engagement – A contribution to the greater good

Moreover, these basic themes classify into six (6) major goals as they were presented before and in order to achieve these goals we defined 17 key performance indicators according to the NCAA (EEC- HES) standards and sub-standards. The main future action plan determined are based on these goals and KPIs. The areas which would be considered to improve are; stakeholders' awareness, quality teaching and learning, course completion and postgraduate opportunities for staff, proper administrative support system for the students, faculty's professional development, encouragement of community services, and proper health care provision.

In conclusion, we covered all goals, which are aligned with the mission and strategic plan of King Faisal University. In addition, keeping in mind the dynamic process of strategic plan we should continue to monitor the plan and assess periodically the achievement of the goals.



5 Background and context

This document describes the 5-year strategy for the College of Medicine (2020-2025) within the framework set by King Faisal University's Strategic plan 2030. It is written in the context of the broad outlook for higher education and health care as well as the key relationships with the MOH partners.

6 About the college

The College of Medicine is one of the colleges of King Faisal University located in Al-Hofuf, Al Ahsa, Eastern Province and was established by the Royal Decree on 18/11/1421 H.

The temporary college building has been established to accommodate 1200 male and female medical students and it consists of three main buildings: First: The Central Building includes medical laboratories (Physiology, Biochemistry, Anatomy, Pathology, Pharmacology, Parasitology, Microbiology, Neuroscience, clinical skills and stimulation laboratory). Second: Male Students' Building includes lectures halls, classrooms, library, administrative offices and computer laboratory. Third: Female Students' Building includes lectures halls, classrooms, library, administrative offices, computer laboratory and female faculty offices. Apart from the main building clinical training center (CTC building) is new addition to meet clinical training requirements of the new PBL curriculum and other small group teaching.

The Dean of college heads college of medicine. Four vice Deans including Vice Dean Academic Affairs, Vice Dean Clinical Affairs, Vice Dean Postgraduate studies and Vice Dean Female Affairs along with a manager of management and Finance extend their assistance to the Dean in fulfilling the academic and administrative responsibilities. The faculty members, apart from their academic role also contribute to the administrative work as a member of college committees. These committees are: Academic plan committee, Development and quality assurance committee, Academic Affairs Committee, Post graduate studies and Scientific research Committee, Strategic planning Committee, Student activities Committee, cooperative training and community engagement Committee, Statistics and information Committee, safety and Laboratory Committee and Budget and equipment Committee.



College has following departments to run its academic and research activities.

BIOMEDICAL SCIENCES	CLINICAL NEUROSCIENCES	FAMILY & COMMUNITY MEDICINE	INTERNAL MEDICINE	OBSTETRICS & GYNECOLOGY	PEDIATRICS	SURGERY	MEDICAL EDUCATION
<ul style="list-style-type: none"> Anatomy and Histology Physiology Biochemistry Pathology Microbiology Pharmacology Forensic Medicine 	<ul style="list-style-type: none"> Neurology Psychiatry Clinical Psychology 	<ul style="list-style-type: none"> Family Medicine Community Medicine 	<ul style="list-style-type: none"> Dermatology Pulmonology Hematology Rheumatology Gastroenterology Cardiology Nephrology 	<ul style="list-style-type: none"> Obstetrics Gynaecology 	<ul style="list-style-type: none"> Neonatology Pediatrics 	<ul style="list-style-type: none"> General surgery Otorhinolaryngology Ophthalmology Orthopaedics Urology Emergency Medicine Neurosurgery Anaesthesia Radiology 	





Since the inception of college until 2012, the college was running a traditional curriculum but afterwards decision was made to introduce new innovative concepts of medical education based on learning theory. To accomplish this goal we adopted the PBL curriculum from University of Groningen, Netherland and name given to this curriculum was GMCA curriculum. This curriculum has fulfilled the needs of the students according to the vision and mission of the college and the university. It also has proved not only helpful in developing competencies and attaining program learning outcome based on strategic plan of King Faisal University but also matched with the National Competence Framework and SaudiMed. Apart from undergraduate courses college is also running a postgraduate course (Master of Science in biochemistry and molecular biology) conducted by biochemistry division.

In future College seeks to achieve its vision and mission by adopting the criteria for self-evaluation of the National Commission for Accreditation, Academic Evaluation and International Standards for its educational and training programs as control tools on the quality academic, administrative and clinical services. The staff and the faculty of the College of medicine are now committed to attain new heights of excellence for international recognition in medical education, scientific research and also in providing the state of art health care services to the community. This will be made possible through persistent and steady efforts of imparting quality medical education, inculcating acumen of scientific research, civic sense of community engagement, professionalism and last but not least turning a student into a lifelong learner with the inquest of skill and knowledge. For this sake, the College is currently striving hard to work closely with the national, regional and international academic and health faculties with a clear vision and mission depicted in the college strategic plan 2020 - 2025. More over college is working hard to contribute in KFU new identity of food security and environmental sustainability.

7 Introduction & Consultation Process












An extensive process commenced by revising previous strategic plan 2020-2025, with the intention of informing all relevant stakeholders about the strategic plan, which shall lead to a transformation in the quality of research and education of the College of Medicine. The formed committee already started with revision of vision, mission and values of the College and received consultation from different Departments during last tenure. Therefore, continue with the same narrative of vision, mission and values aligned with KFU's vision, mission and values.

The strategic plan day-Hands-on- workshop was organized with 7 CME credit hours full day activity by strategic plan committee in collaboration with Medical education department on March 17, 2018. All the faculty members were encouraged to participate in the activity. The strategic plan was the core areas for the day. The SWOT analysis for the college of medicine was planned by interactive presentation and small group discussions. The faculty members were arranged in groups after interactive presentation according to department to get fair idea of departmental SWOT and suggested future action plan.



8 Implementation process

This approach to strategic planning was built on widespread engagement with Faculty, staff, students, hospitals and administration; including:

The strategic planning teams worked parallel to each other in identifying SWOT, evidence validation and PEST trend analysis.		Parallel work to fortify time utilization.
Visits by College representatives to all governmental and private hospitals in Al Hofuf. In each visit, there was a stakeholders' survey and discussion report.		Summary of areas of strengths and areas that need improvement in our graduates were formulated.
A standardized NCAAA program student survey was distributed to all students passing more than 100 credit hours from the program.		Analysis of all the collected forms (81 male and 28 female) was done and all items were sorted to highlight areas that need improvement.
A standardized NCAAA self-evaluation scales (SES) document was distributed to all Departments where they reviewed their evaluation of all the college and program practices with supplying relevant evidence. Departmental discussion groups finalized the final version of SES.		Compilation of all views into one common college score. The Dean in the presence of strategic plan committee and Department chairpersons discussed it. Final version was prepared, discussed and endorsed in the College board.
Discussion group including Dean, Vice Deans and financial and administrative director with a group from strategic planning team to discuss administrative view in relevant points.		Conclusion was linking all college decisions, practices and activities to college mission and goals.
A branch of the strategic planning team was practicing to finish the trend analysis with all possible relevant supporting evidence		PESTS analysis done only with high officials
A branch of the strategic planning team, using the college SES and from other evidence, they extracted a list covering 10 themes, which contain 77 items as a basic stratum that was sent for all Departments and curriculum committees for commenting on the strengths, weaknesses, opportunities and threats.		SWOT analysis
Discussion groups including undergraduate and postgraduate students, and student representatives.		Amendments of SWOT analysis
Discussion at an open meeting with all Faculty and staff.		Amendments of SWOT analysis
Discussion at an open meeting with all MOH related staff.		Amendments of SWOT analysis
Prioritization and grouping of all practices that need actions to be implemented.		Re-endorsed of strategic goals



The following figure illustrates the main phases for developing the University strategic plan.

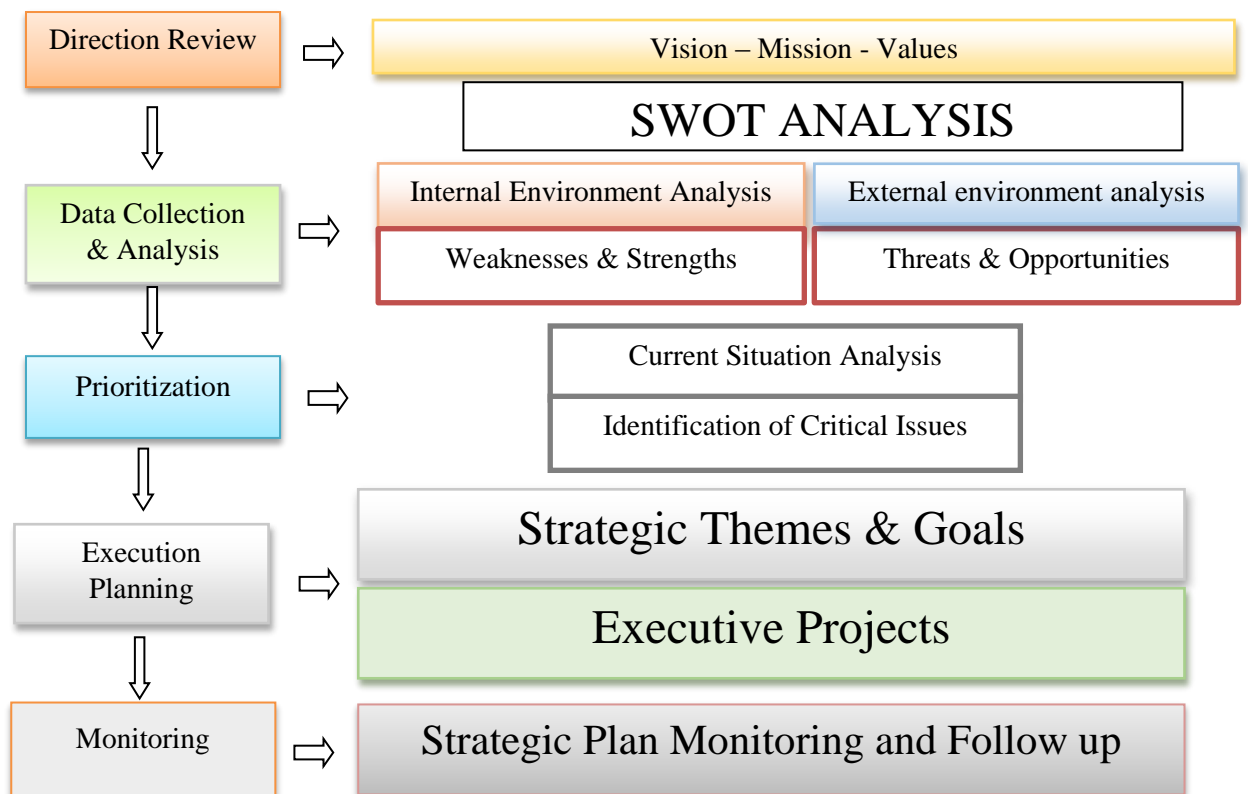


Figure (1): Steps taken for Strategic Planning 2020-25



9 Vision, Mission and Values

The vision of King Faisal University and college of medicine are aligned with the Vision 2030, which stated as follows:

“THE HEART OF THE ARAB AND ISLAMIC WORLDS, THE INVESTMENT POWERHOUSE, AND THE HUB CONNECTING THREE CONTINENTS”

College of Medicine	King Faisal University
Vision: To become a model in community engagement through excellence and international recognition in medical education, research and health care.	Vision: Excellence in education & scientific research and leadership in community engagement.
Mission: To promote higher standards in medical education, health care, research and community health services	Mission: To provide quality education and lifelong learning, Encourage innovation and scientific research, Strengthen community engagement & to prepare qualified and competent people within a motivating environment that are up to date with modern technology.
Values: 1. Islamic values 2. Excellence 3. Creativity 4. Compassion 5. Leadership 6. Responsiveness to community 7. Commitment to lifelong learning	Values: 1. Loyalty 2. Quality 3. Institutional work 4. Transparency 5. Justice 6. Innovation 7. Lifelong learning

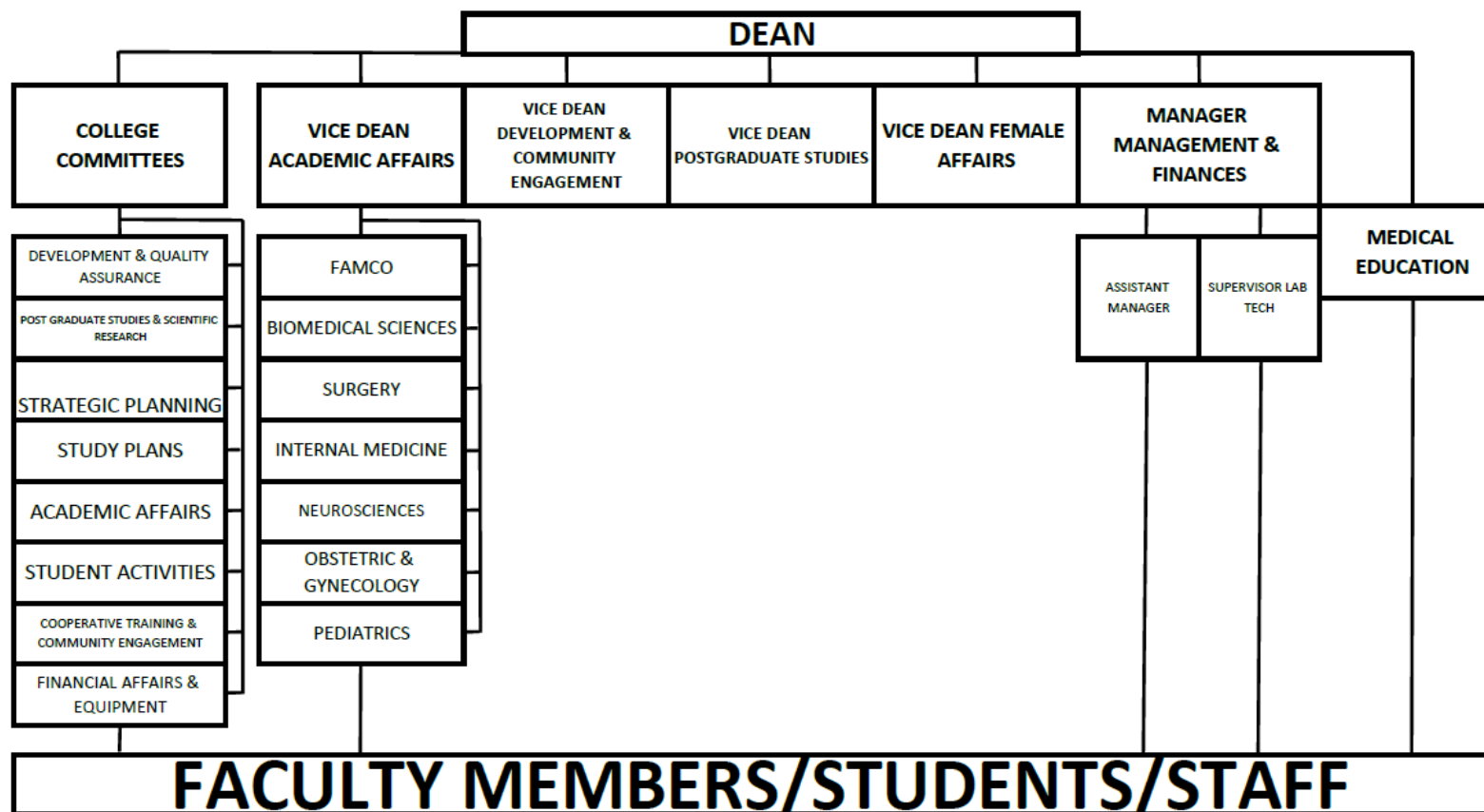
To achieve this, the college will:

1. Utilize innovative curricular applications
2. Promote self-directed and life-long learning
3. Foster leadership skills
4. Create and support a conducive environment towards meaningful research relevant to regional and international needs.
5. Liaise with local, national and international institutions to exchange and promote knowledge
6. Provide a state of the art health care service facility



KFU
جامعة الملك فيصل
KING FAISAL UNIVERSITY
جامعة ووطن.. لعملة.. واسنادامة.

**COLLEGE OF MEDICINE
ORGANIZATIONAL CHART**





10 PEST & SWOT Analysis:

10.1 5.1 A Context of change

PEST Analysis	Descriptors
<p>Political:</p> <ul style="list-style-type: none"> • Future legislations • Government policies • Funding and Grant initiatives 	<ul style="list-style-type: none"> • Self-independent universities • Curtailing budget • Increase efficiency & productivity • Encouraging privatization
<p>Economic:</p> <ul style="list-style-type: none"> • Economy growth trends • Job growth & unemployment • Customer confidence • Production levels • Inflation 	<ul style="list-style-type: none"> • Economic growth and public spending • Increased job requirements to overcome unemployment of native graduates • Confidence of stakeholders due to international standards • Quality measures to push productivity • Adjustment to overcome inflation
<p>Social:</p> <ul style="list-style-type: none"> • Lifestyle trends • Demographics • Attitude and opinions 	<ul style="list-style-type: none"> • Lifestyle health issues • Community ratios • Community attitude and opinion on Medical graduates
<p>Technological:</p> <ul style="list-style-type: none"> • Information and communication • Internet utilization for academic and career enhancement • Intellectual property issues • Web-based teaching and learning 	<ul style="list-style-type: none"> • Expansion of internet and web utilization • Regulations for web related issues • Copy right and intellectual property legislations • E-learning



11 Opportunities and Strengths

Our College has some unique opportunities and strengths, which make achieving our mission feasible.

Strengths		Opportunities
		Institutional: <ul style="list-style-type: none"> • Lot of helpful Deanships • Institutional Accreditation • Quality management system (QMS)
Curriculum: <ul style="list-style-type: none"> • Program and course specifications • Teaching, learning and assessment • Cross-disciplinary collaboration • Student support Student Centeredness • GMCA 2012 – MBBS Program 		<ul style="list-style-type: none"> • Alignment following QMS rules • Reviewing by external audits • External examiners • Accreditation steps • KFU Hospital
Faculty: <ul style="list-style-type: none"> • Balanced number and qualifications - Excellent qualifications and well versed in regards with the PBL curriculum • Faculty development programs • Recruitment policies - Development of assigned Recruitment team • Involvement of large numbers in activity 		<ul style="list-style-type: none"> • MOH consultants • RUG experts • Improving central recruitment systems
Students: <ul style="list-style-type: none"> • Appropriate performance per courses • Professionalism and SDL in new curriculum 		<ul style="list-style-type: none"> • More developing Prep year program • Central student advisory
Resources: <ul style="list-style-type: none"> • Current educational resources • IT, Labs, PBL and CTC Building • Recreation facilities 		Growing KFU resources <ul style="list-style-type: none"> • Good central organization of IT, library • The use of online software like blackboard, exams etc. • Finishing housing project • KFU Hospital
Alumni: <ul style="list-style-type: none"> • Current demonstrators 		<ul style="list-style-type: none"> • KFU Hospital • Establishment of Alumni Office
Research:		



<ul style="list-style-type: none"> • Good number per current situation • Good facilities • Student involvement • Blood diseases scientific chair 		<ul style="list-style-type: none"> • More grants • More developed facilities • Awards
<p>Community:</p> <ul style="list-style-type: none"> • CME • Consultations • Student Charity activities 		<ul style="list-style-type: none"> • Partnership administration • Financial support
<p>Departments:</p> <ul style="list-style-type: none"> • Satisfactory functions • Interdepartmental Collaboration 		<ul style="list-style-type: none"> • Official agreement with MOH
<p>Administration:</p> <ul style="list-style-type: none"> • Effective decision making • Regular meetings • College Board 		<ul style="list-style-type: none"> • Online administrative decisions system







12. Weaknesses and Threats (Challenge)

Our College recognized the following challenges, which make a foundation for formulating focused strategic goals to be achieved in the following three years.

Weaknesses		Threats
		Institutional: <ul style="list-style-type: none"> • Lot of higher administration responsibilities
Curriculum: <ul style="list-style-type: none"> • Teacher centered old curriculum • Clinical skills' development • Subjectivity and variability in assessment • Program and course action plans • Student counselling and satisfaction 		<ul style="list-style-type: none"> • Performance as compared to other colleges • Non-compliant MOH facilities • Transportation time • Local concerns of female patient exposure • Over ambitious external examiners
Faculty: <ul style="list-style-type: none"> • Faculty/student ratio • Faculty from non-academic background • Less effective /efficient training • Overlapping of duties • Increased Work and Teaching Load 		<ul style="list-style-type: none"> • Non-committed external consultants • Less incentives compared to other places • Non flexible bylaws with high attrition • Attraction by new colleges
Students: <ul style="list-style-type: none"> • Professionalism in old curriculum • Minimal College roles in selection • Increased in number per year that affects the faculty-student ratio as well as the facilities and resources available 		<ul style="list-style-type: none"> • Overcrowded MOH hospitals • Family feel threatened by new curriculum • Health counselling and advisory system • Campaigns and charity distract students
Resources: <ul style="list-style-type: none"> • Clashes in educational resources • Places for SDL • Non-compliant OMR machines • Non-compliant systematic maintenance 		<ul style="list-style-type: none"> • Non-compliant cafeteria (content and time) • Outsourcing of water supply • Delay in University Hospital starting
Alumni: <ul style="list-style-type: none"> • Unavailability of demonstrators in Departments 		<ul style="list-style-type: none"> • KFU alumni office has little database

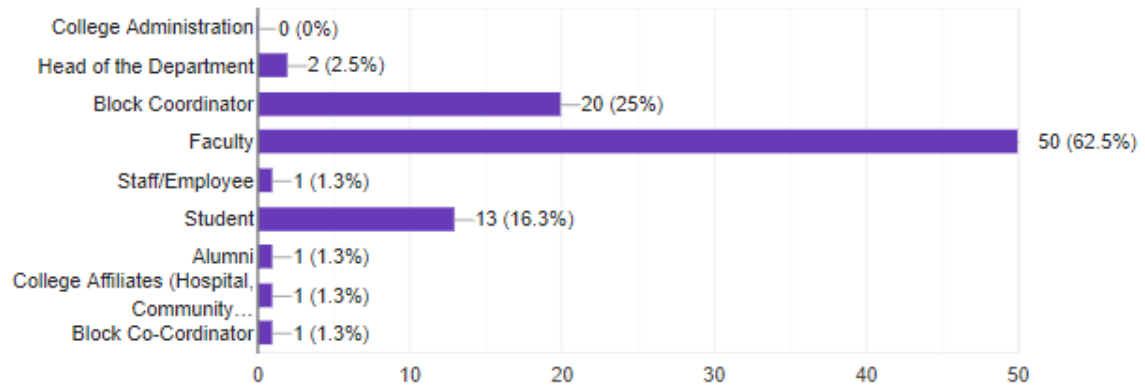


<ul style="list-style-type: none"> • No physical Alumni office that can track the progress and details of our current batches of graduates 		
Research: <ul style="list-style-type: none"> • Time availability for conducting • Interdepartmental work • Motivation for research and publishing • link of researches to college plan 		<ul style="list-style-type: none"> • Non clear refereeing of grants • Blind decisions on grants without discussion
Community: <ul style="list-style-type: none"> • Time availability for sharing • Motivation for sharing • Non-systematic ad hoc activities • Community Partnership Program 		<ul style="list-style-type: none"> • Personal relations instead of protocols •
Departments: <ul style="list-style-type: none"> • Lack of optimal cooperation and interest 		KFU bylaws not allowing incentives for Departmental board meeting
Administration: <ul style="list-style-type: none"> • Conflict and ego clashes • Non distribution of minutes of meetings 		<ul style="list-style-type: none"> • KFU bylaws not allowing incentives for college board members

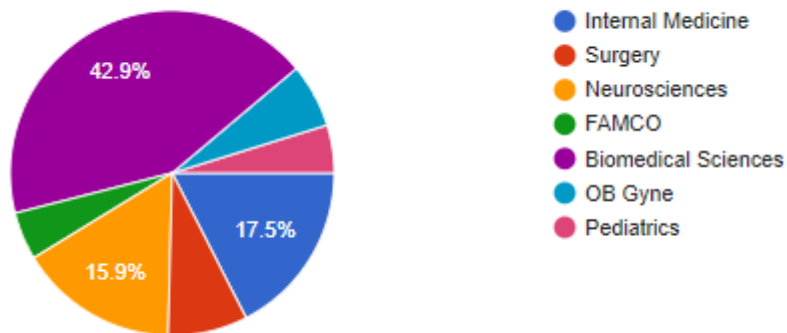


SWOT Analysis Data Statistics

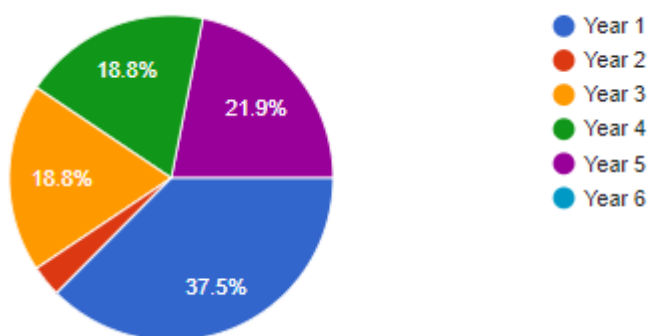
Profession



Faculty (Department)



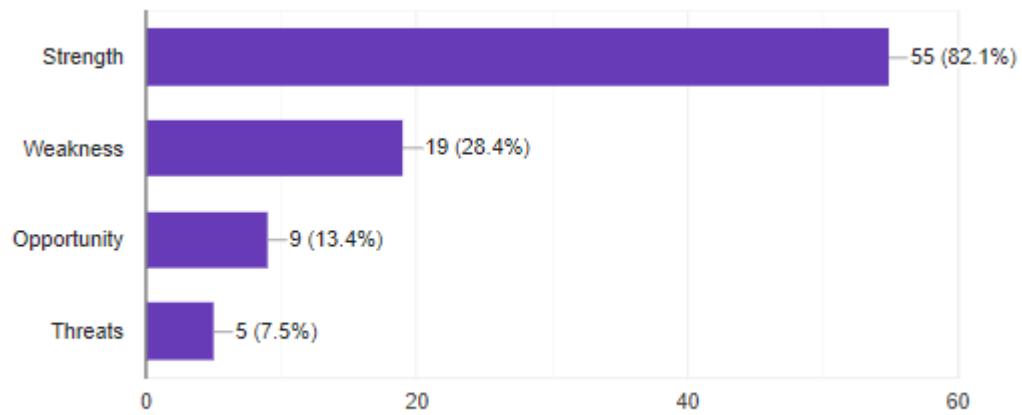
Students (Year Level)



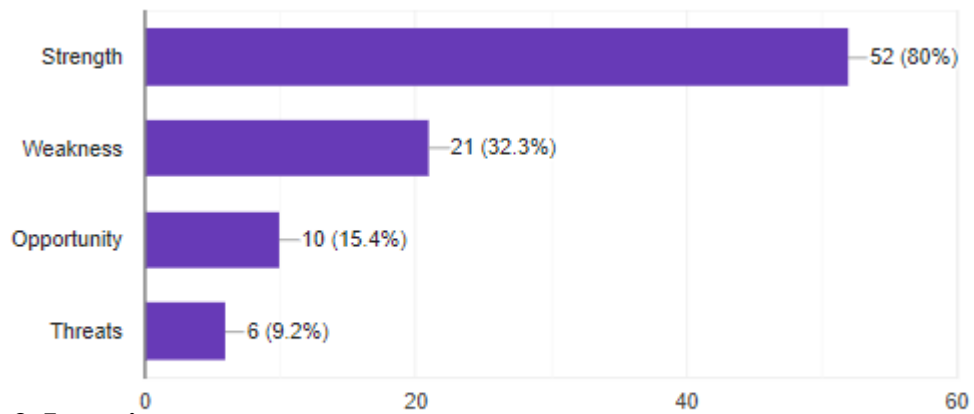


A. MBBS Program

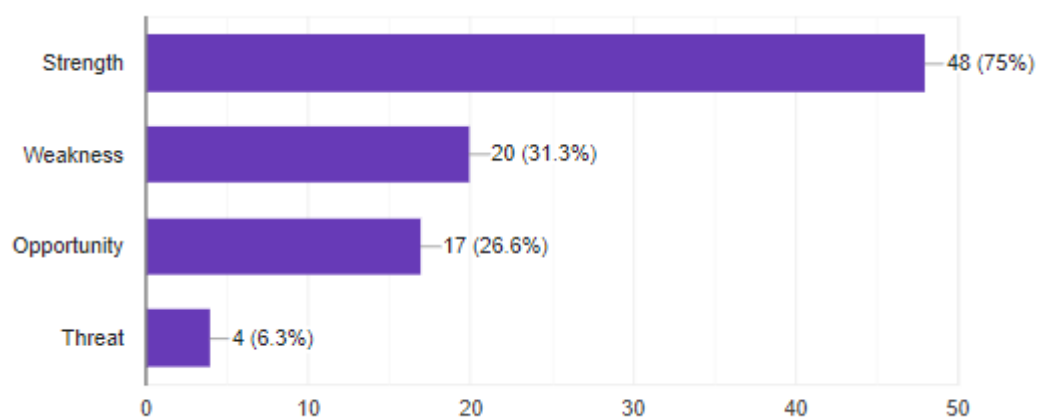
A.1. Intended Learning Outcome



A.2. Teaching

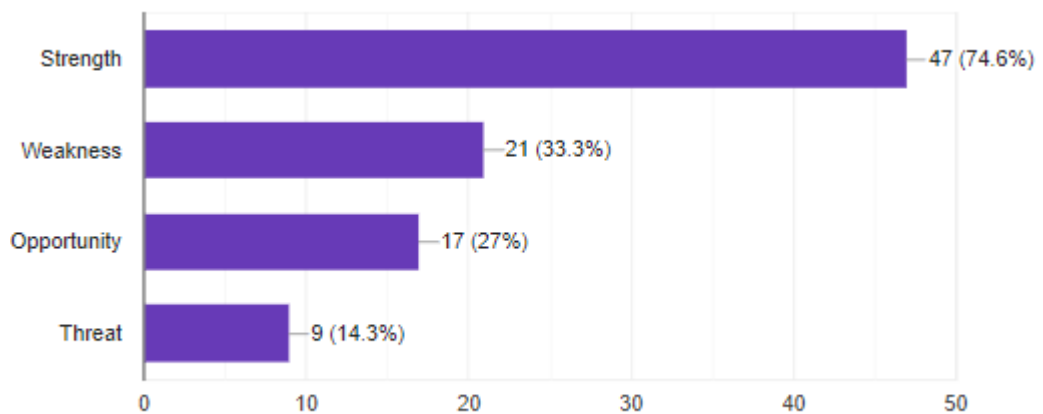


A.3. Learning

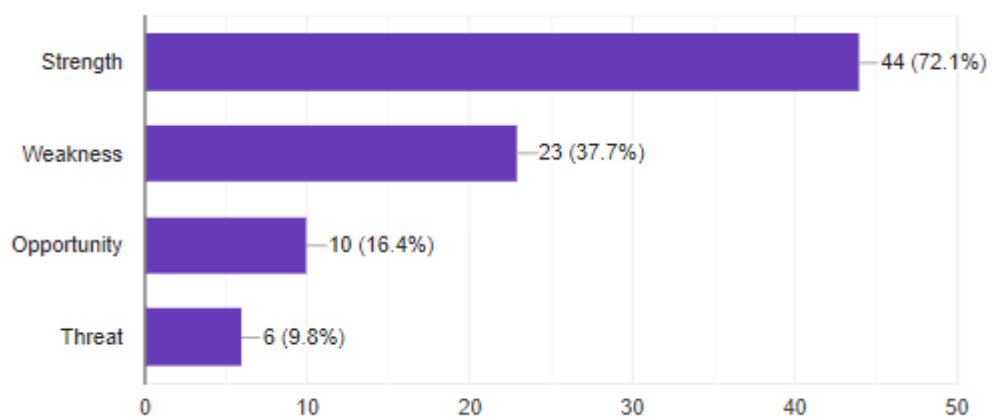




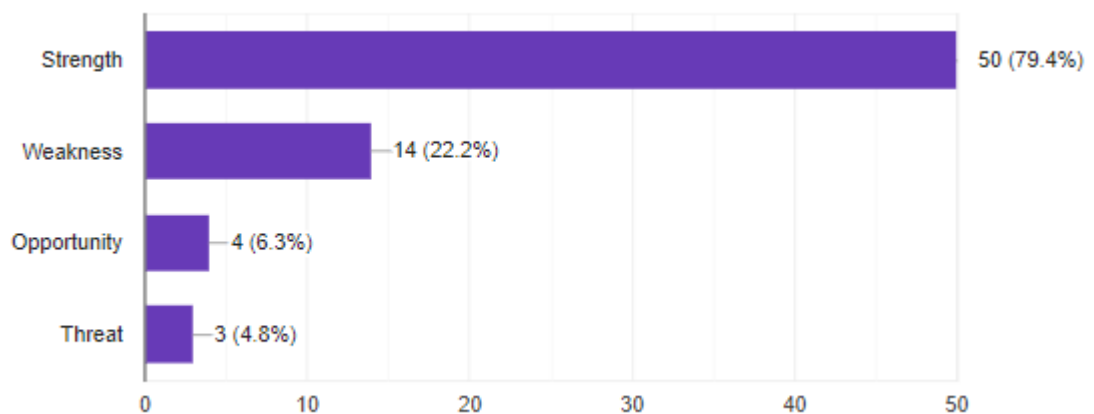
A.4. Skill Development



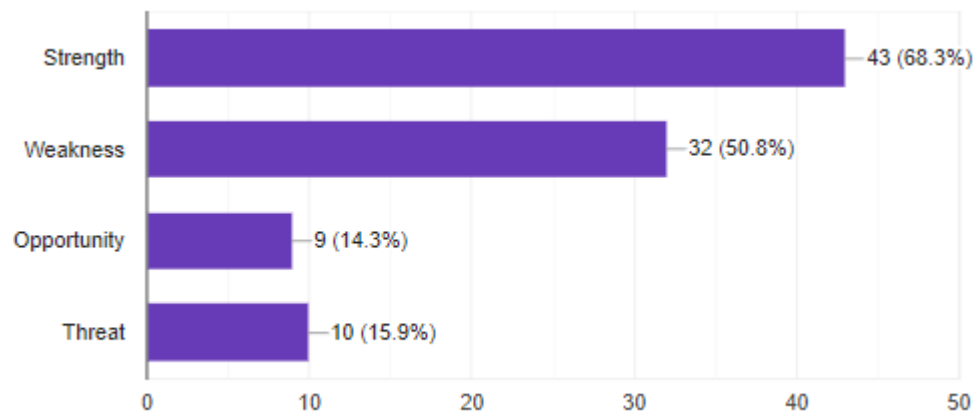
A.5. Student Centeredness



A.6. Cross Disciplinary Collaboration

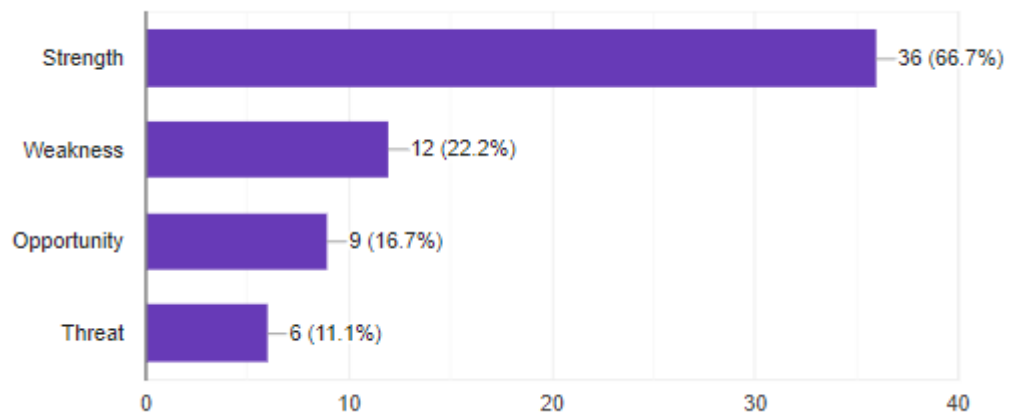


A.7. Assessment

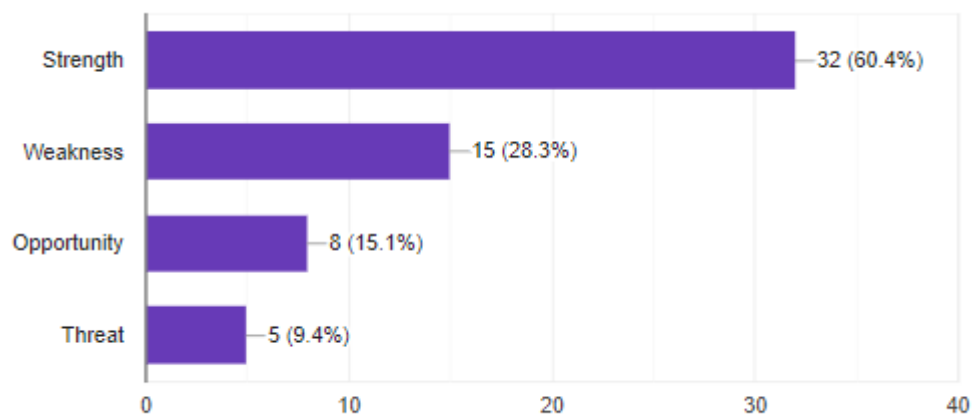




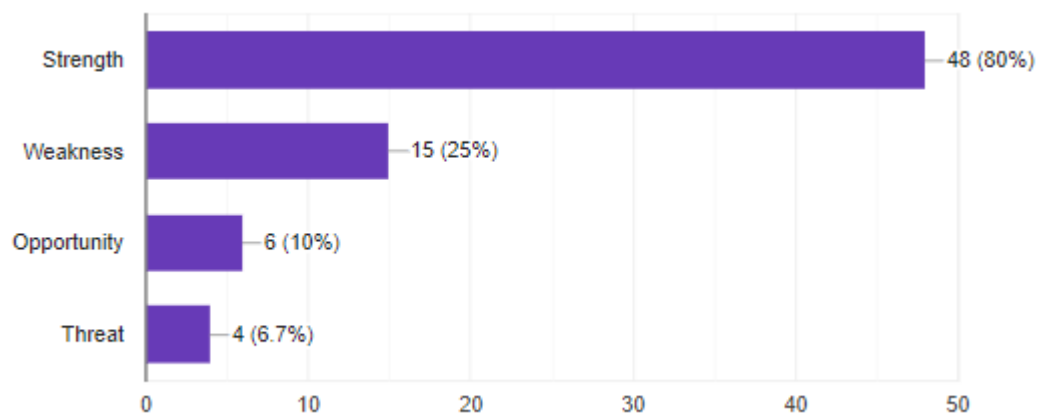
A.8. Standard Verification



A.9. Moderation

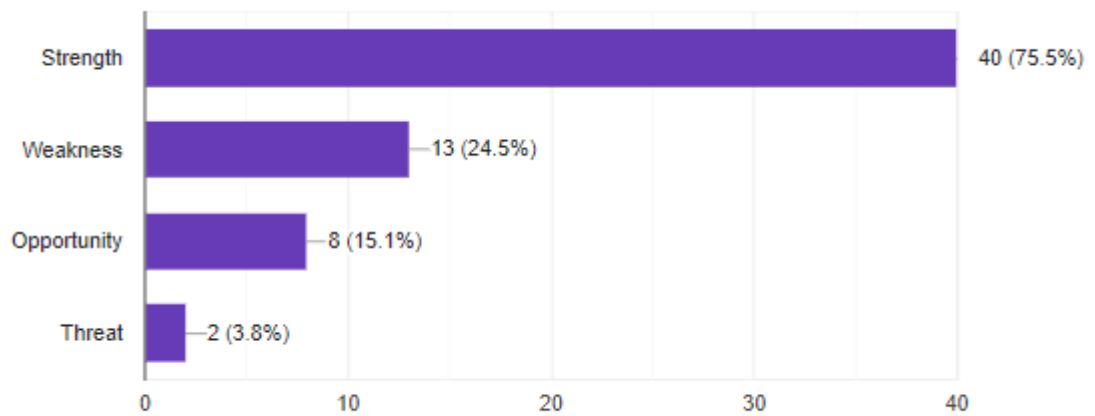


A.10. Student Support



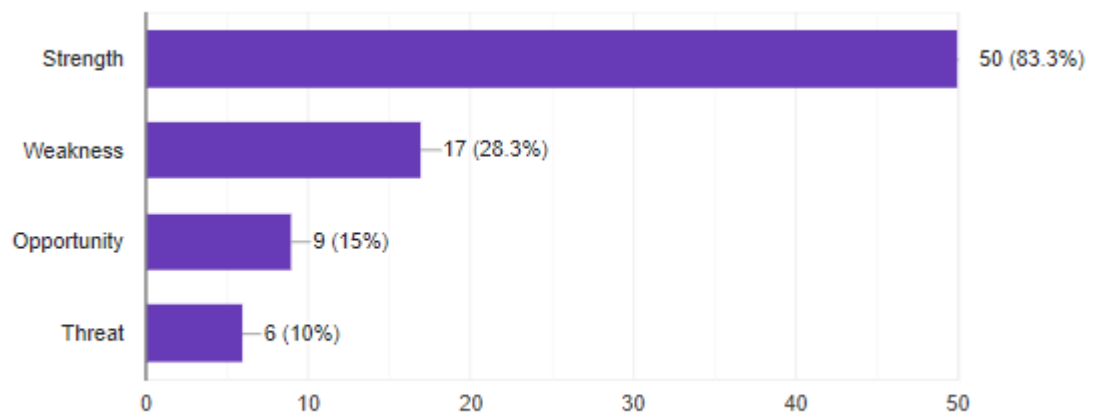


A.11. Student Satisfaction

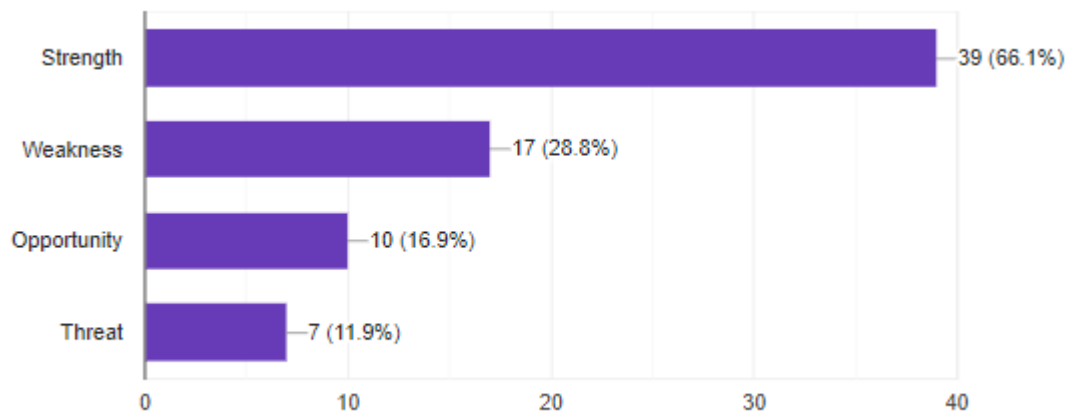


B. Faculty

B.1. Selection

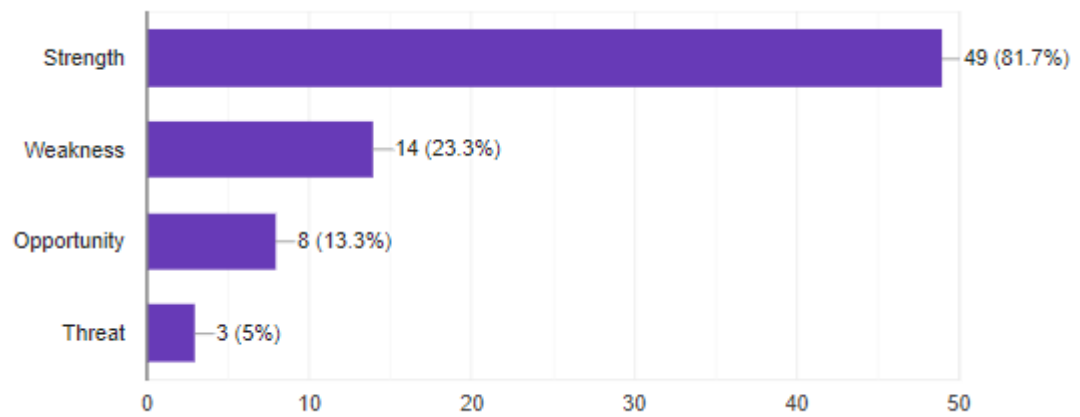


B.2. Development

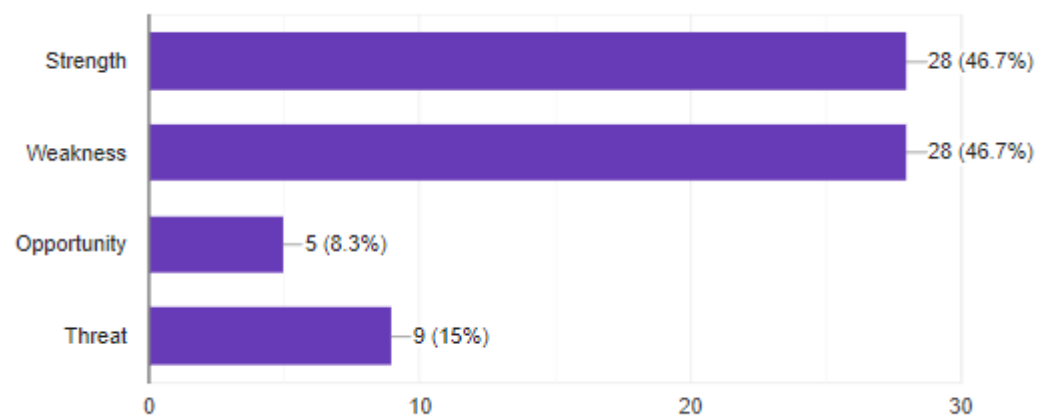




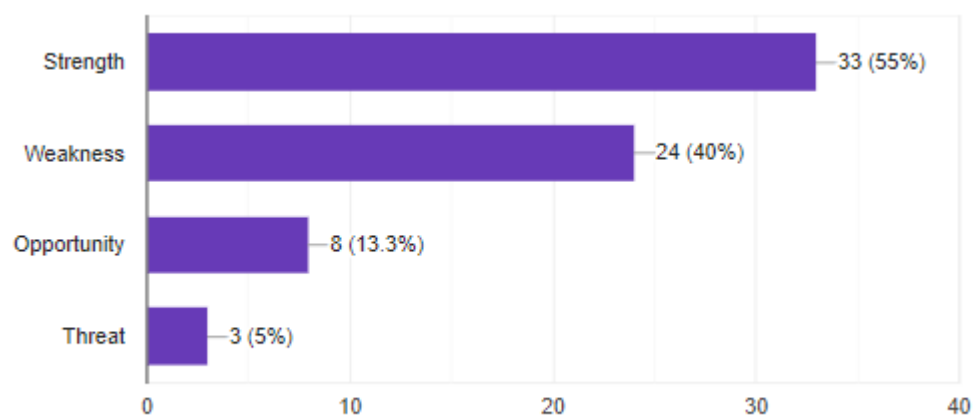
B.3. Performance



B.4. Load Satisfaction

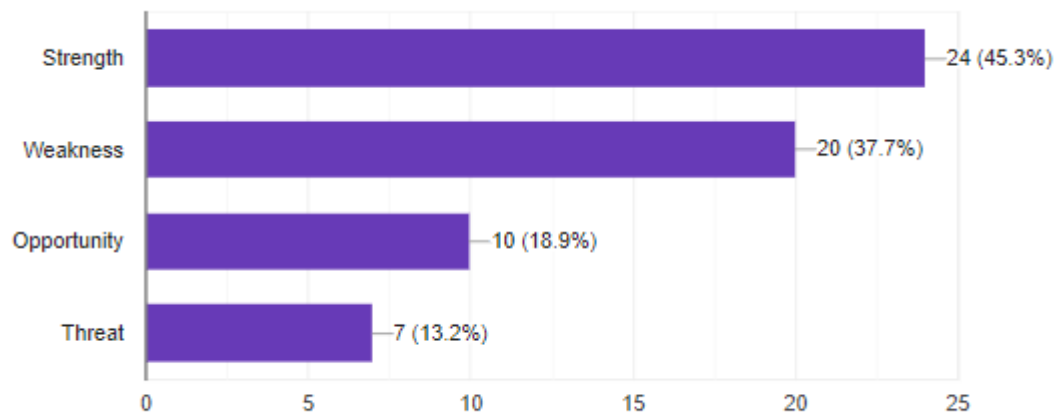


B.5. Appreciation

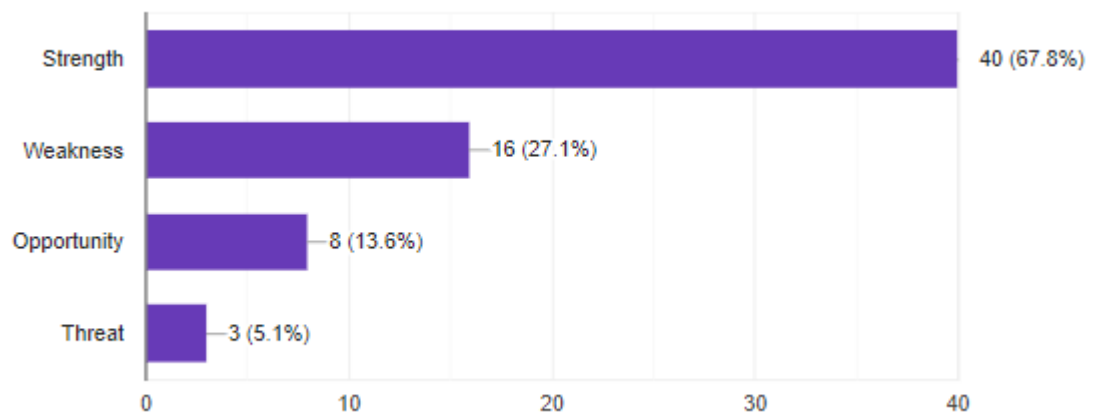




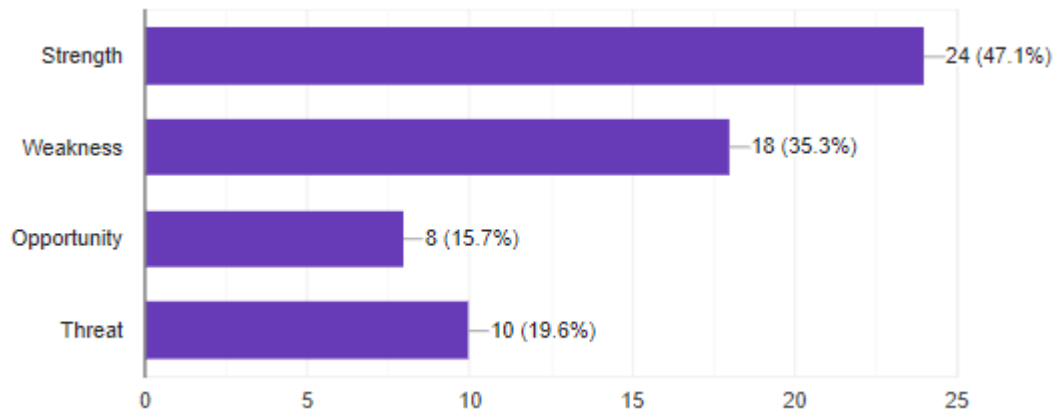
B.6. Part Time Utilization



B.7. Inter Faculty Collegiality



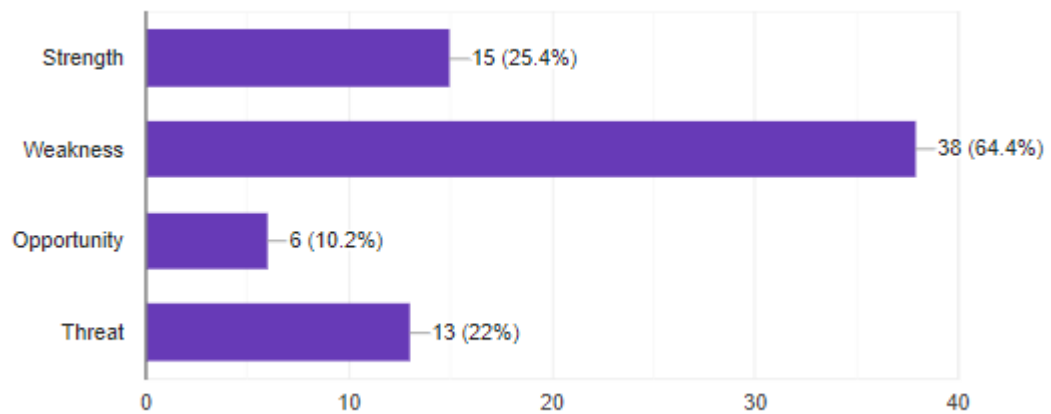
B.8. Competition Forces



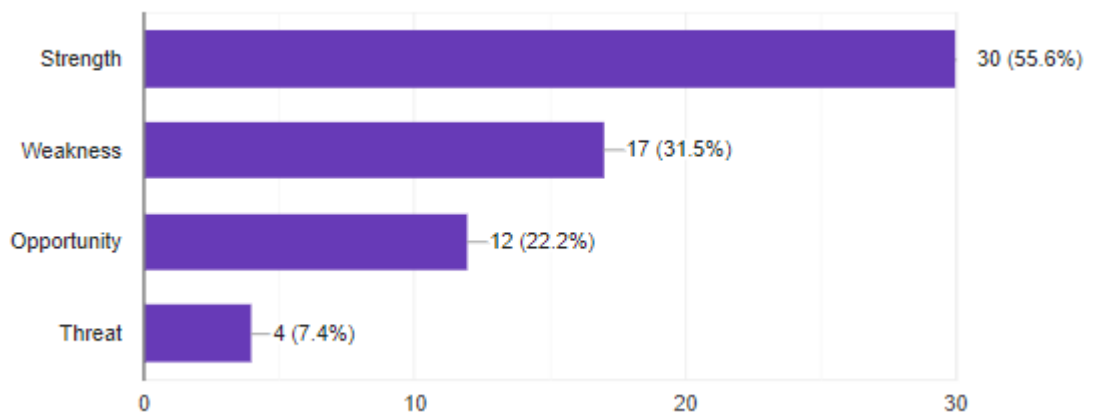


C. Student

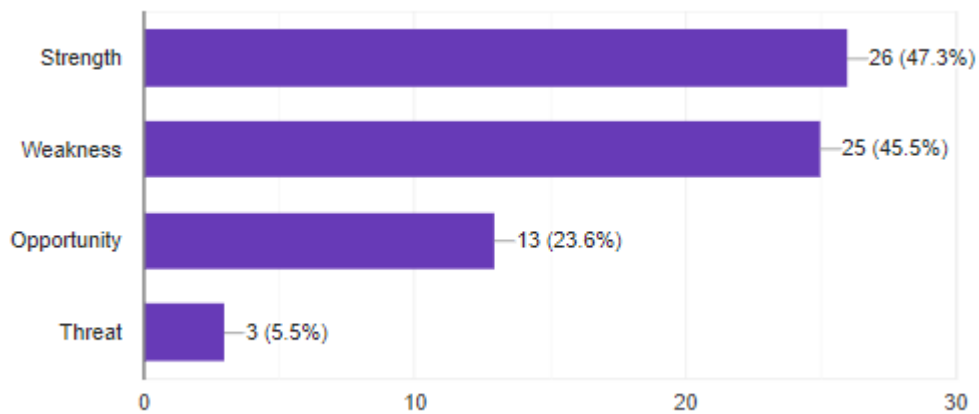
C.1. Number



C.2. Selection

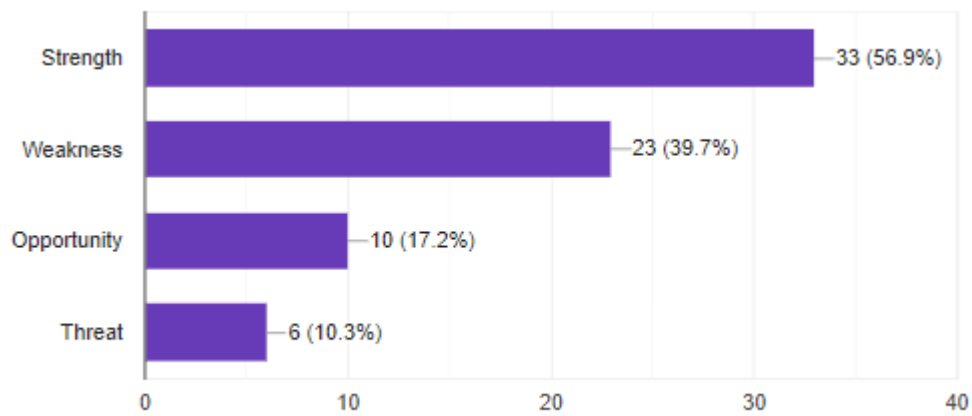


C.3. Preparation

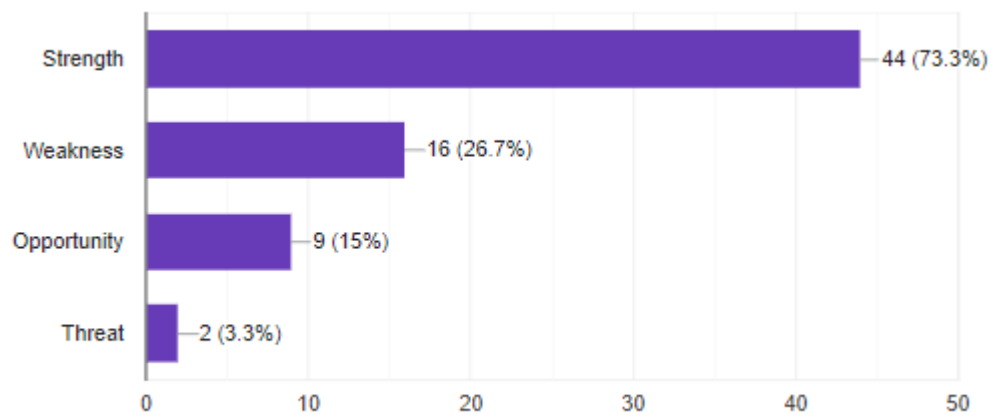




C.4. Academic Performance



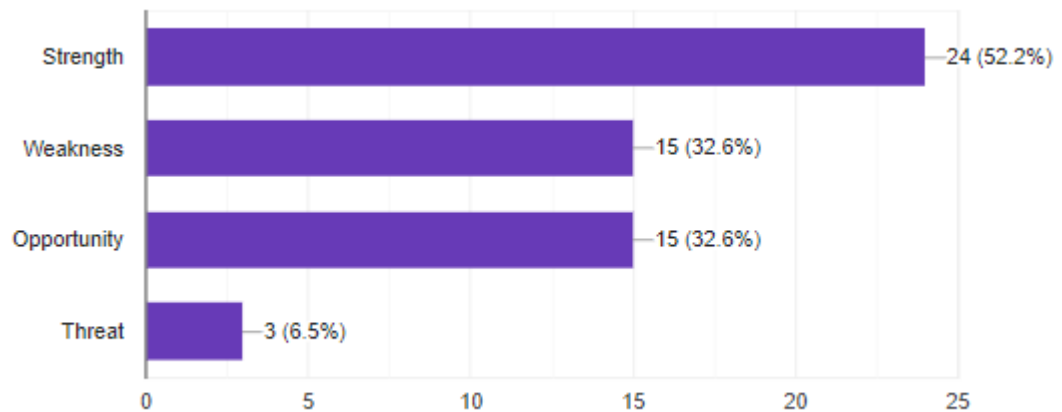
C.5. Professional Behavior



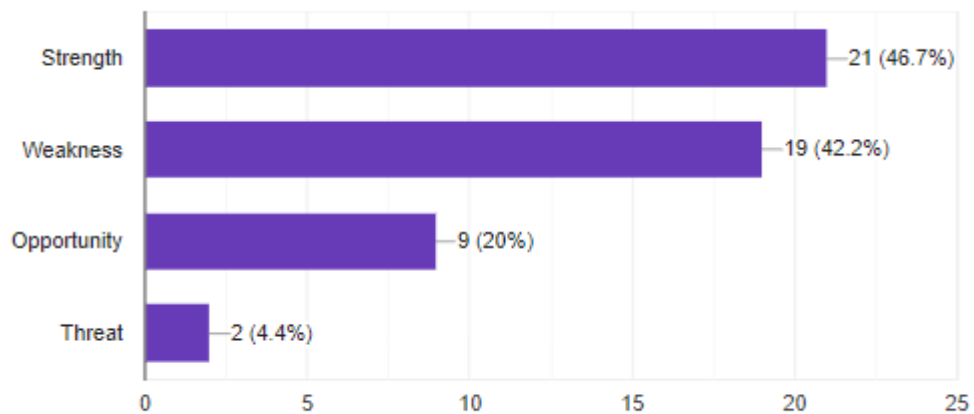


D. Alumni

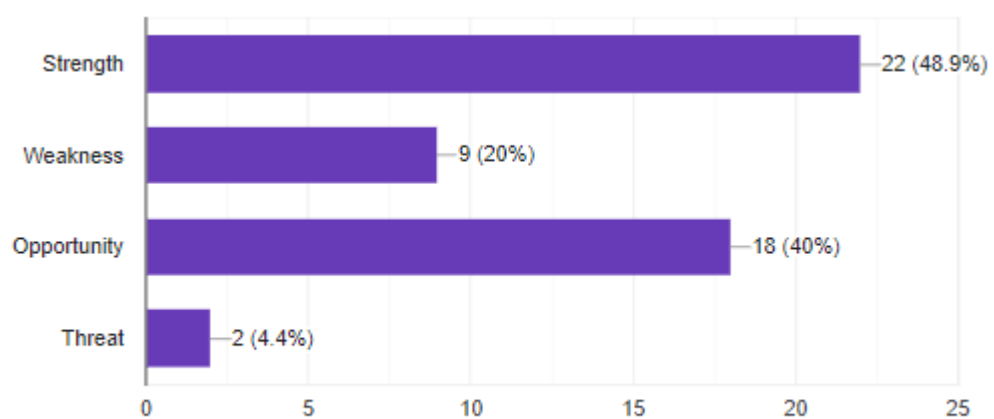
D.1. Intern and Internship



D.2. Graduate's Linkage and Feedback

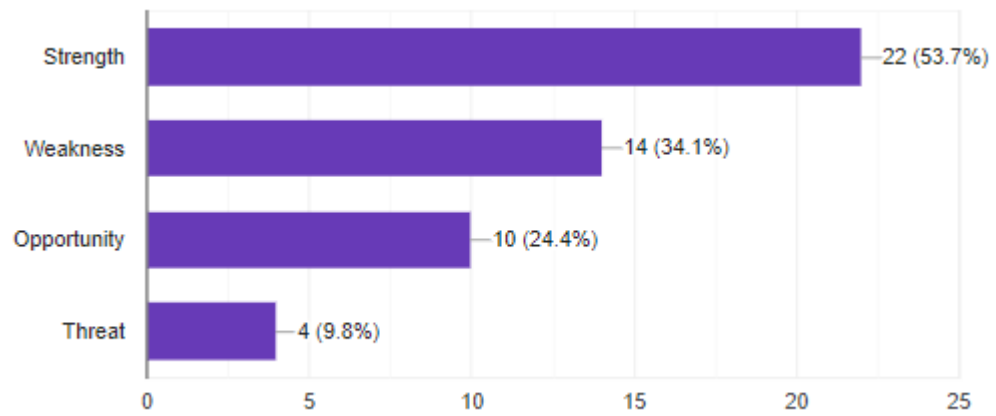


D.3. Postgraduate Career





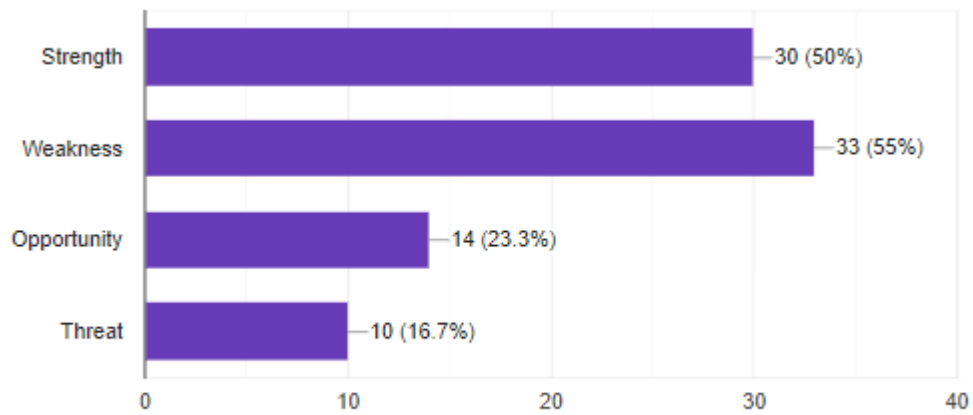
D.4. Stakeholder's Opinion



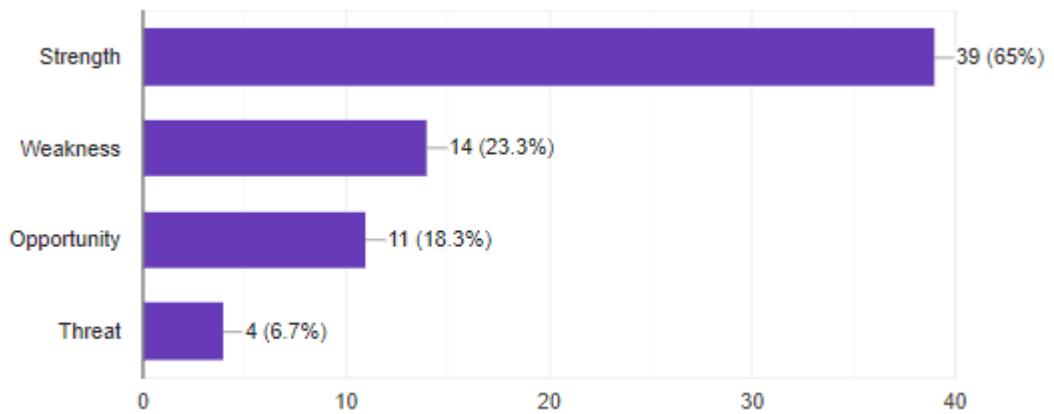


E. Research

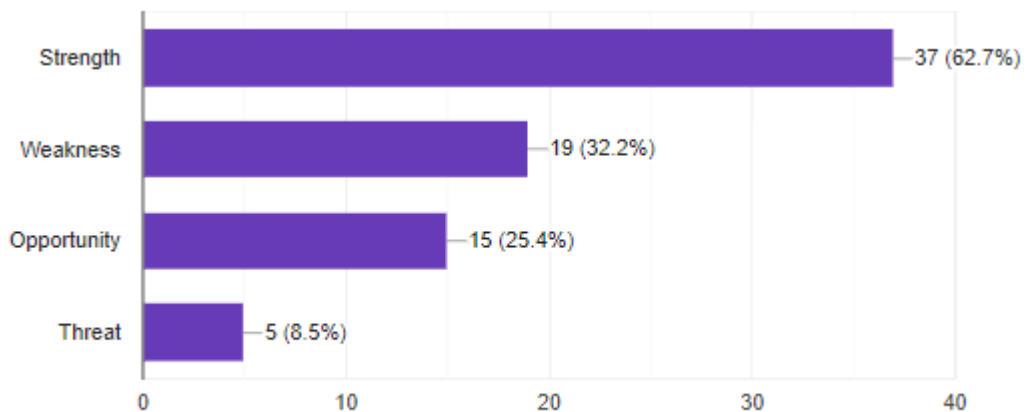
E.1. Facilities



E.2. Teamwork

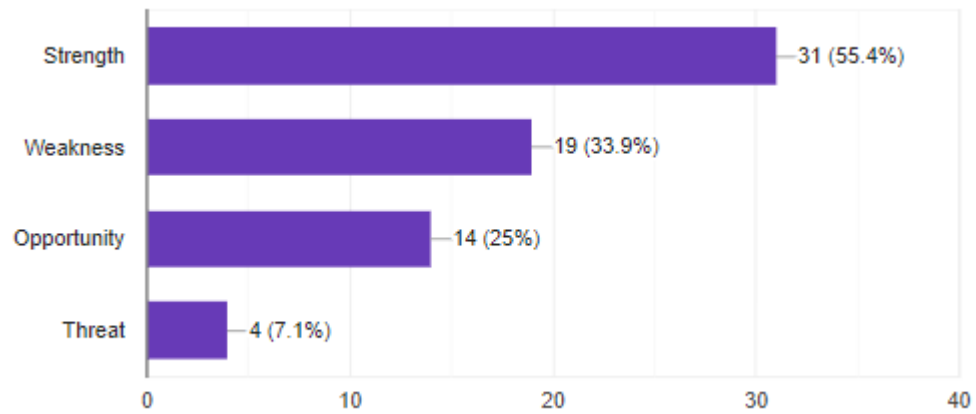


E.3. Publication

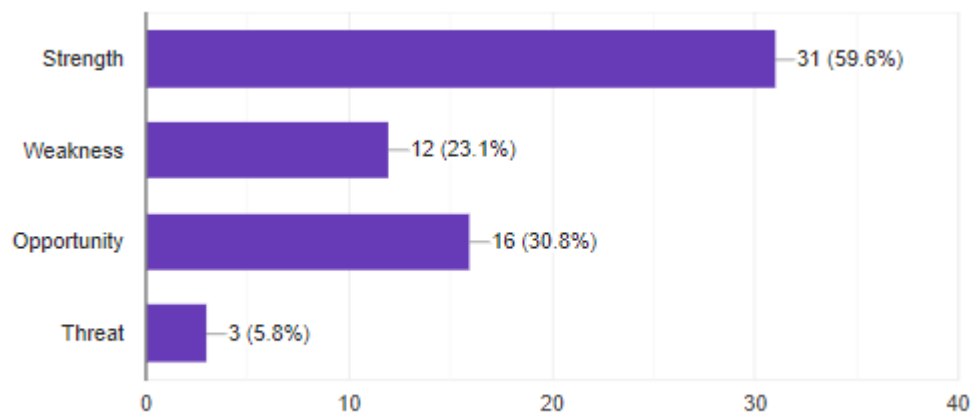




E.4. Grants



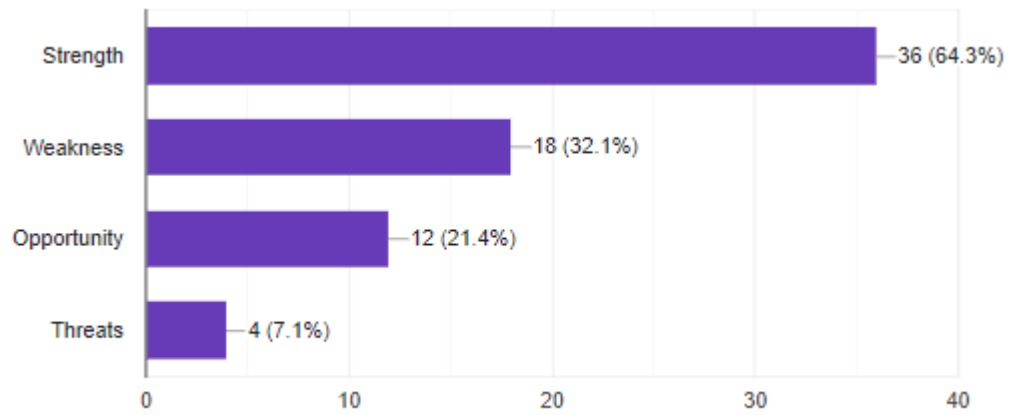
E.5. Awards



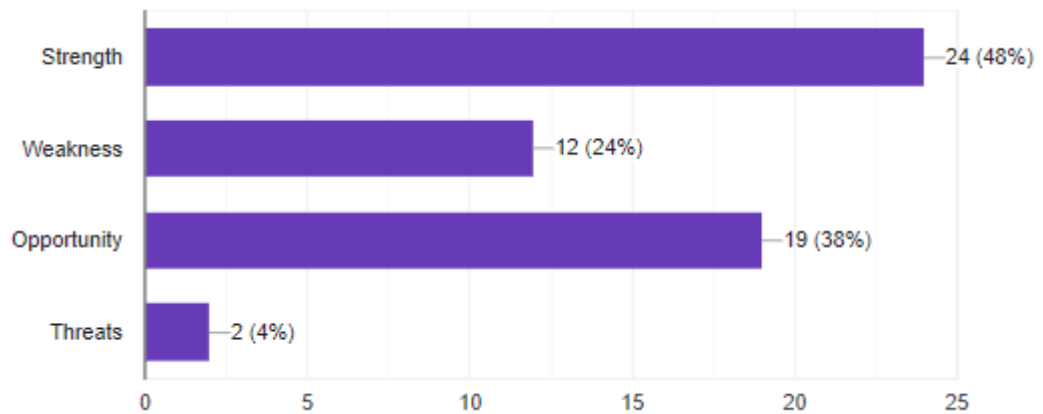


F. Community

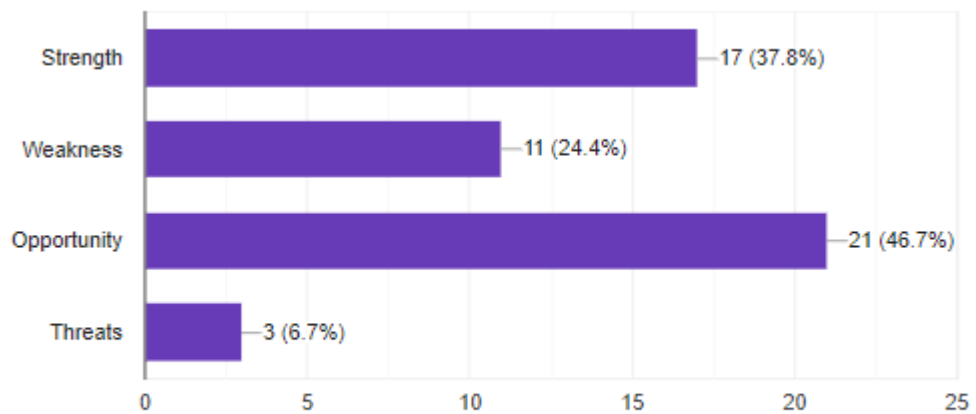
F.1. CME



F.2. Consultancy

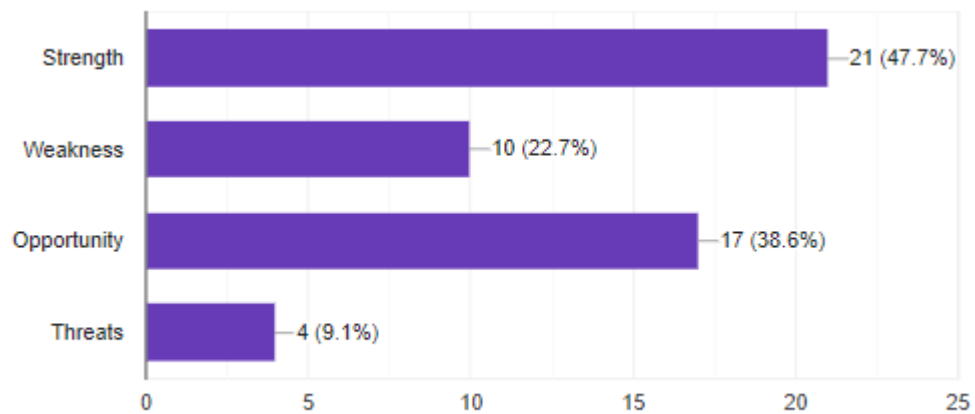


F.3. Charity

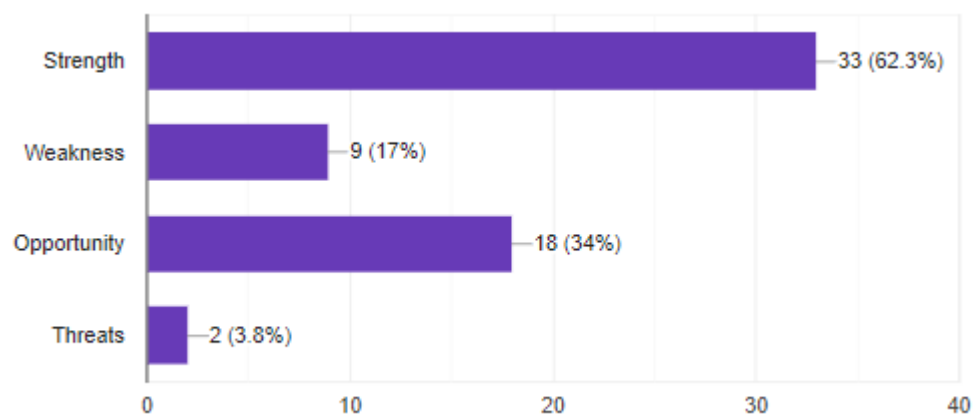




F.4. Cross Curricular Synergism



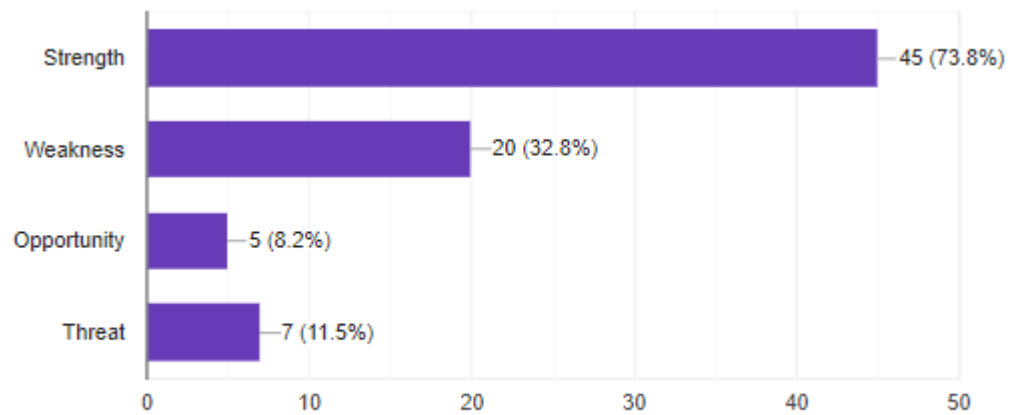
F.5. Campaigns



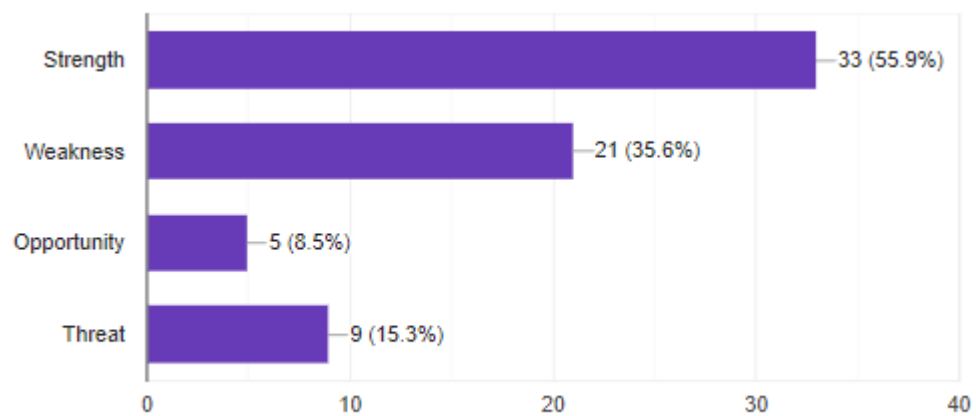


G. Learning Resources

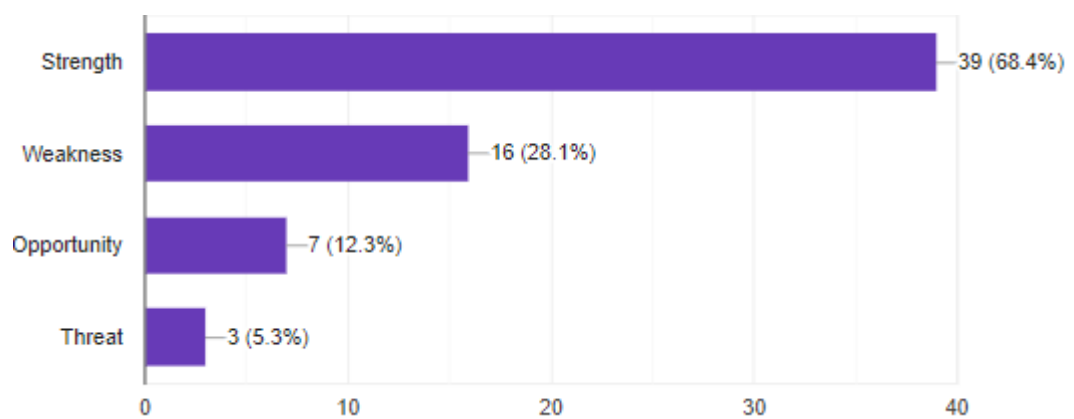
G.1. Availability



G.2. Maintenance

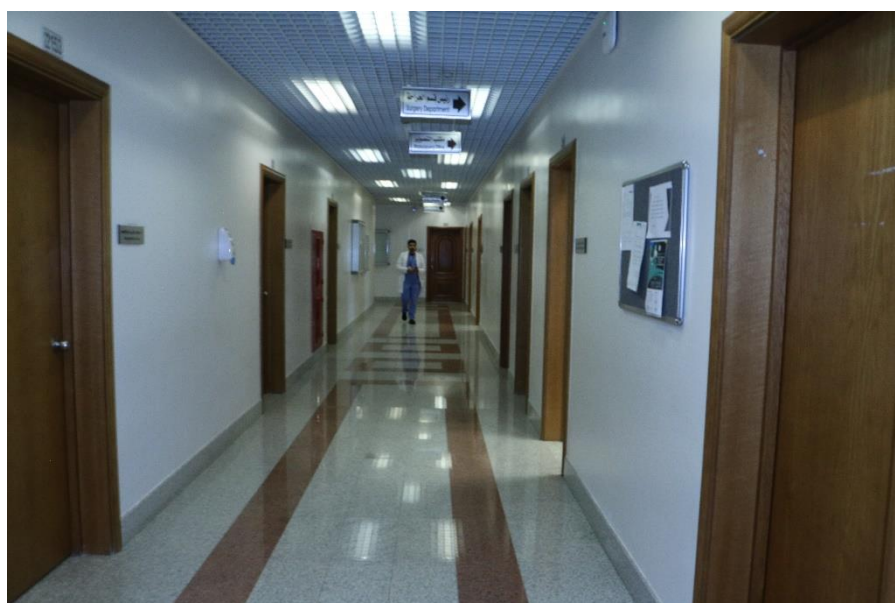
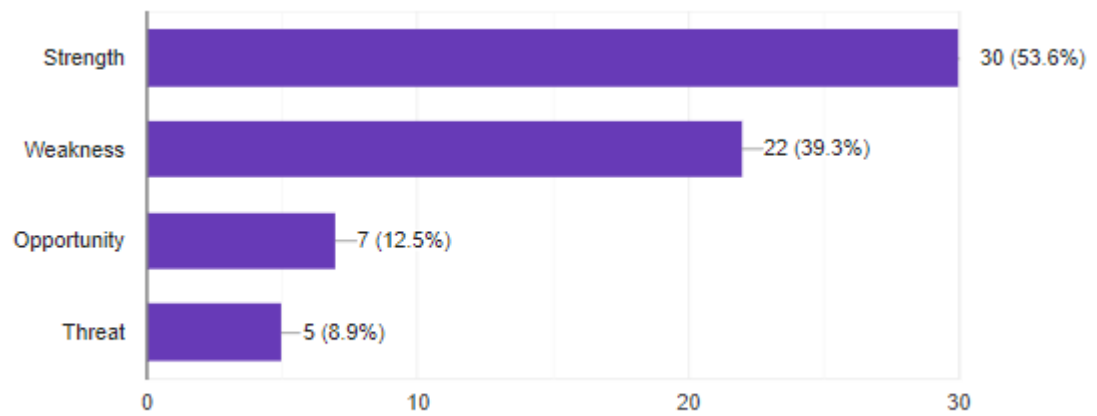


G.3. Suitability





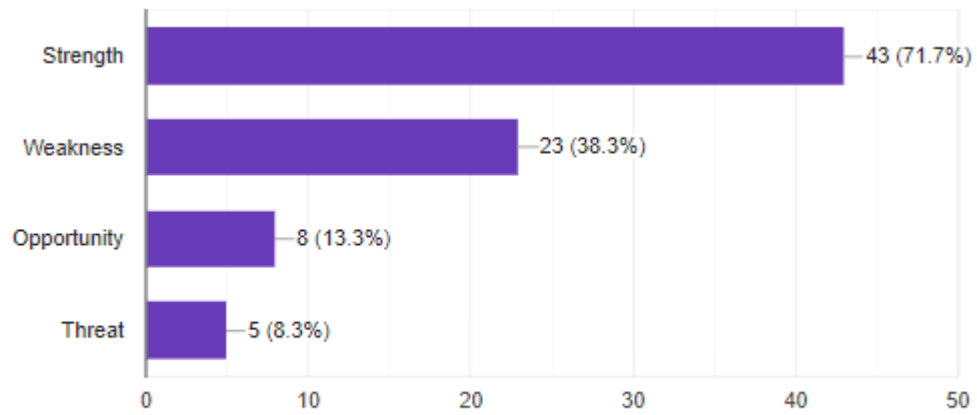
G.4. Sufficiency



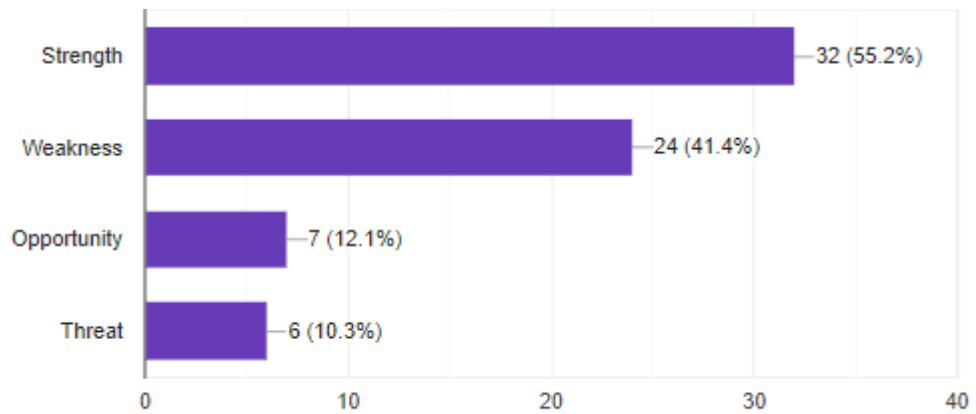


H. Teaching Resources

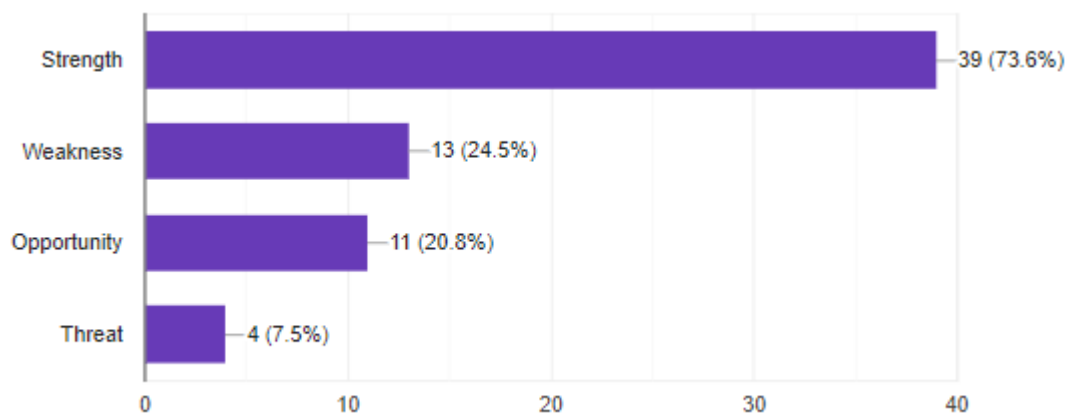
H.1. Availability



H.2. Maintenance

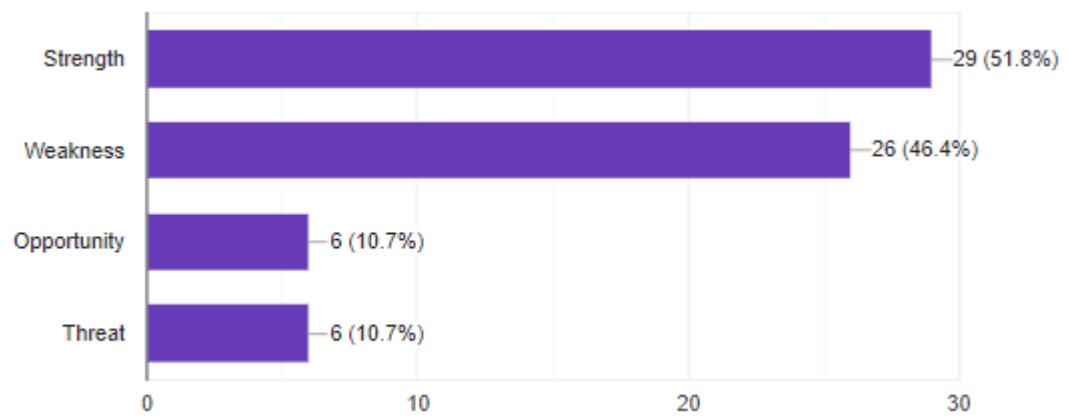


H.3. Suitability





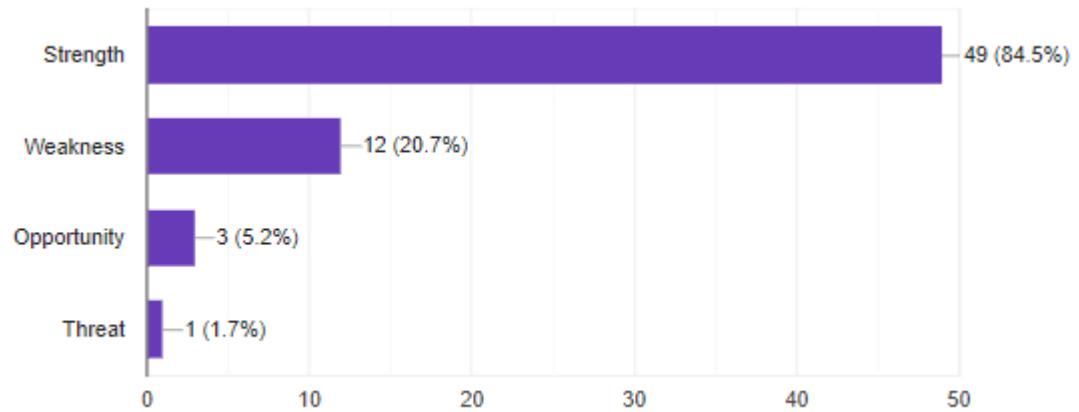
H.4. Sufficiency



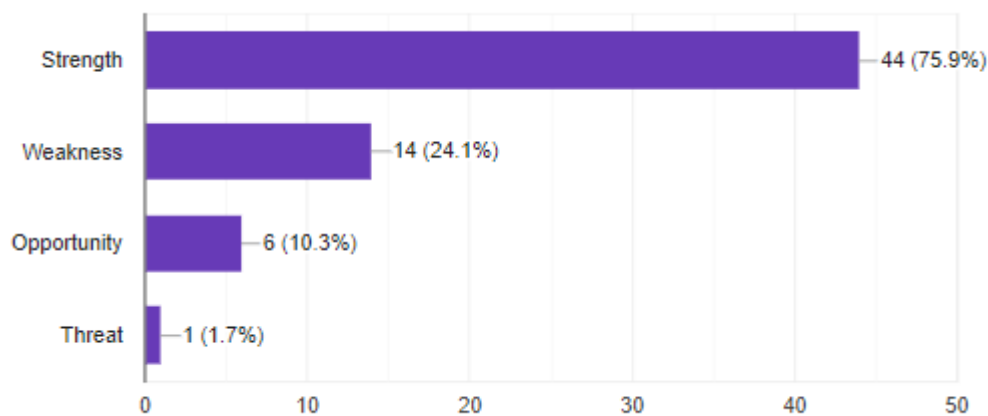


I. Departments

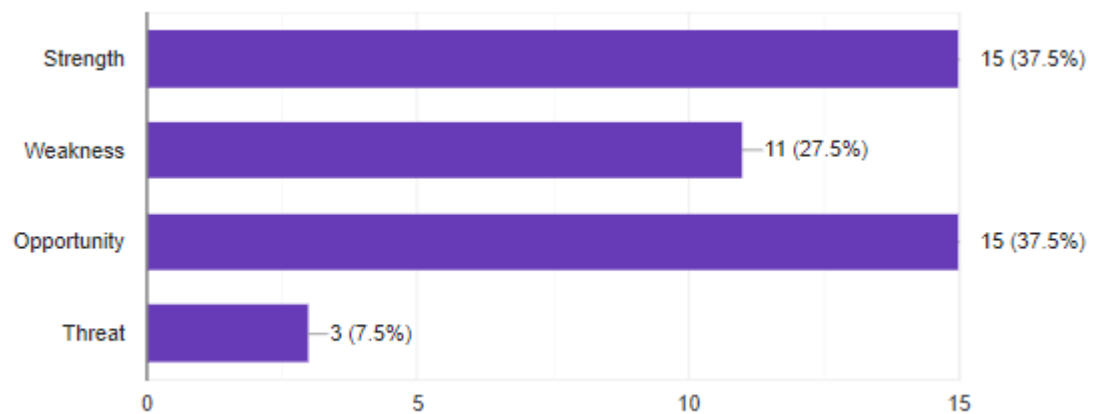
I.1. Meetings and Decision Making



I.2. Interdepartmental Work

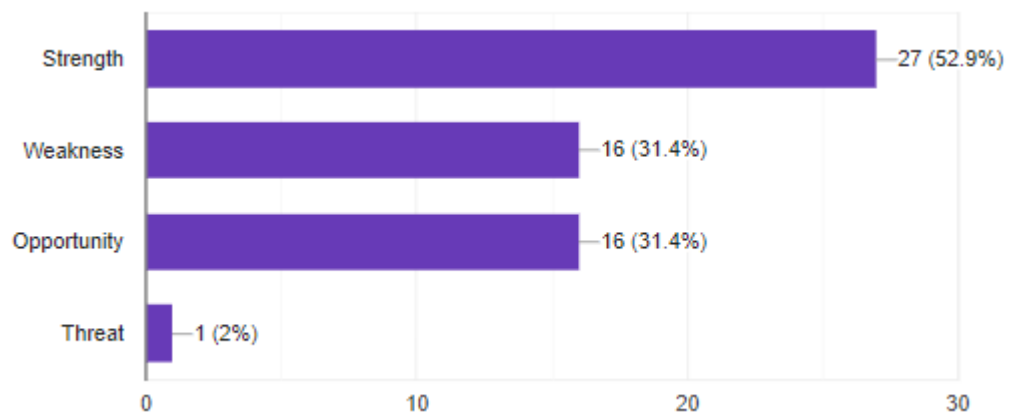


I.3. Market Interaction/Partnership

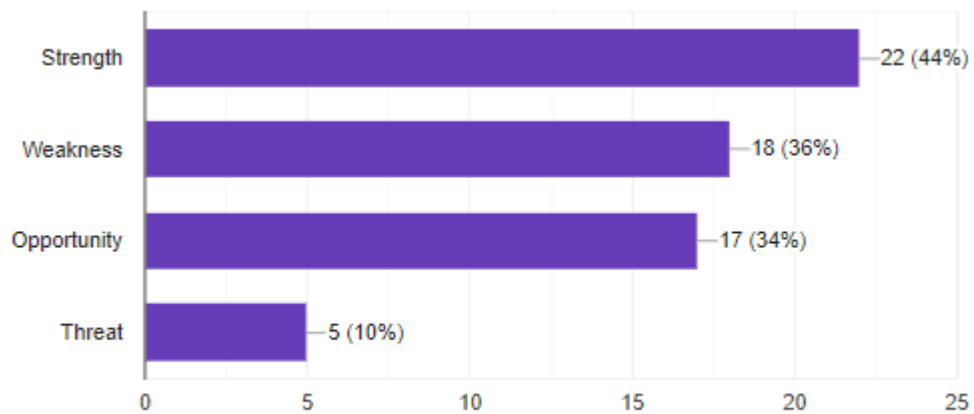




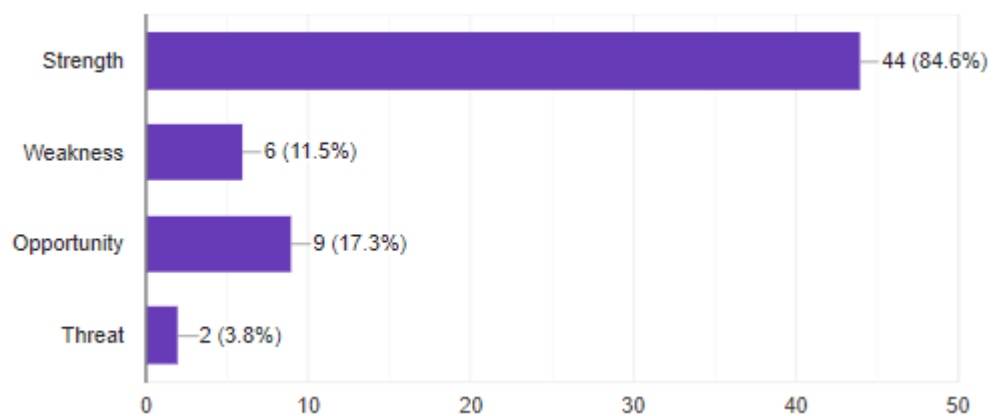
I.4. Creativeness



I.5. MOH Cooperation

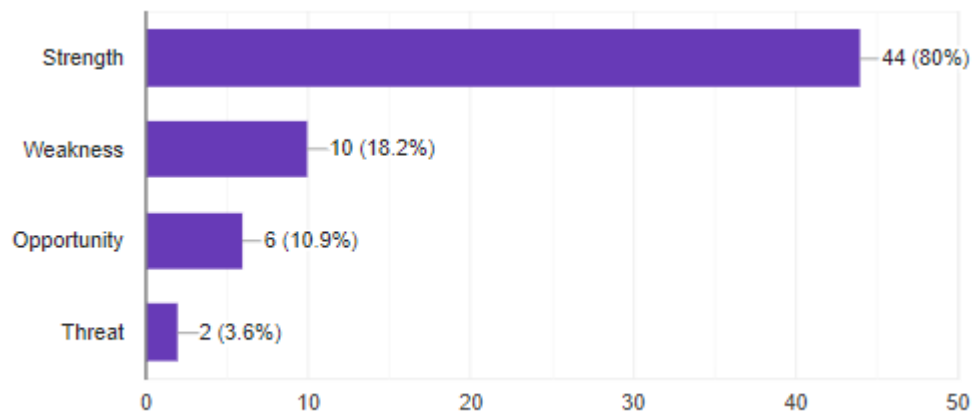


I.6. Administration Response





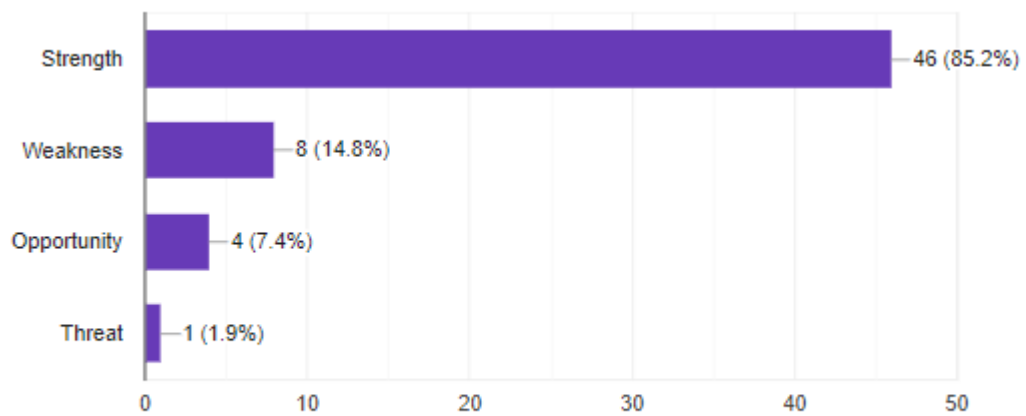
I.7. Support Staff



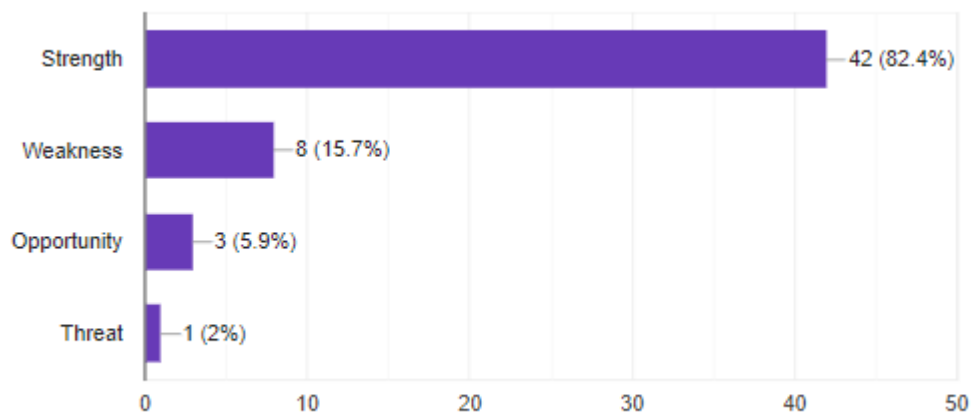


J. Administrative

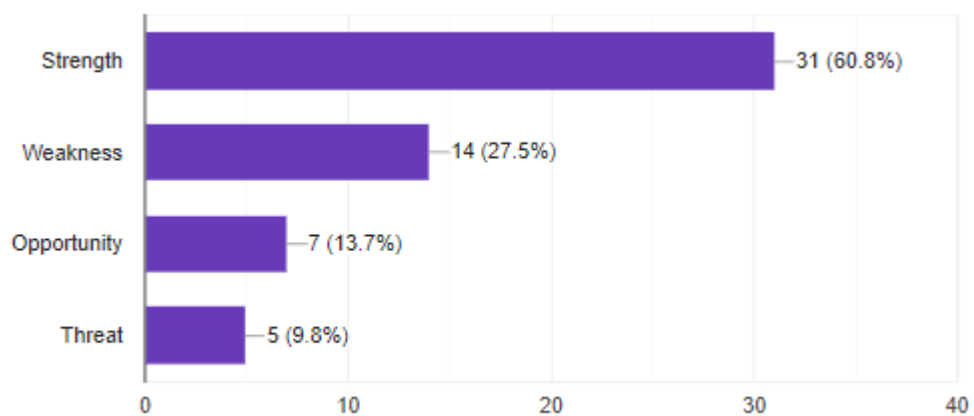
J.1. College Board



J.2. Dean and Vice Deans Meeting

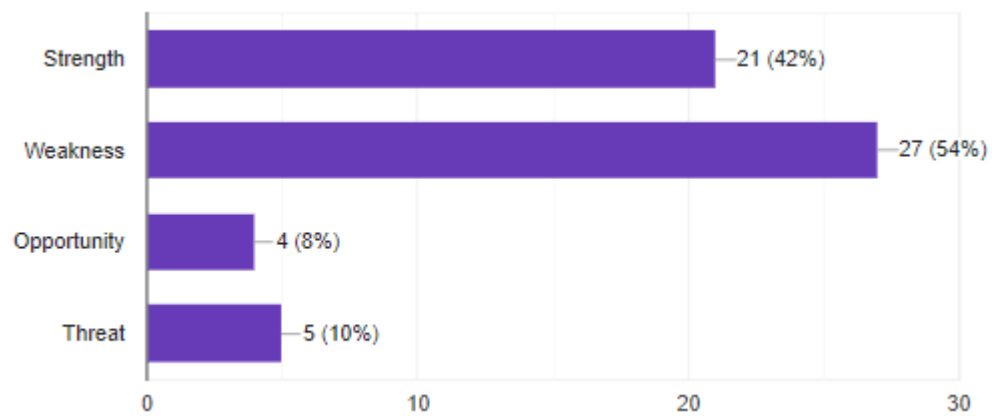


J.3. Financial and Administrative Affair

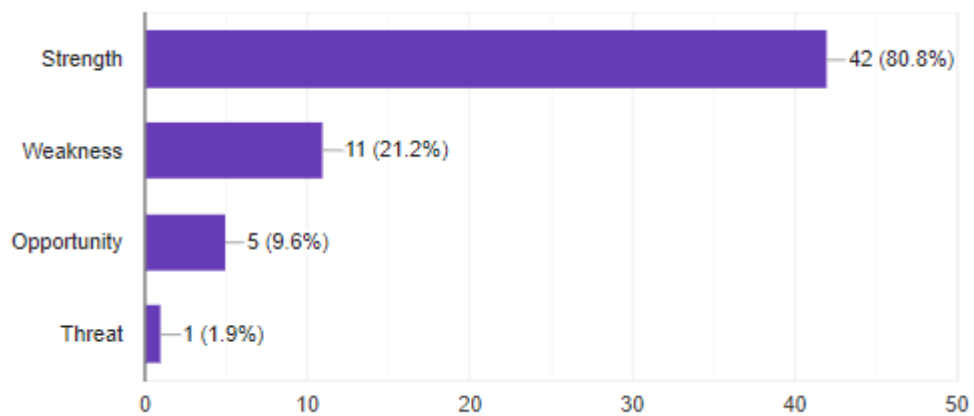




J.4. Overlapping Activities



J.5. Employee Cooperation





12 Strategic themes and enabling goals

The strategic themes and enabling goals below are intended to ensure that our college can respond to the reality of its needs, values, mission and vision and going parallel to University values, mission and vision. The enabling goals reflect and represent the framework for achieving the different strategic theme.

12.1 Strategic themes

Theme 1: Excellence in education for future health professionals

Theme 2: Internationally recognized research in medical sciences

Theme 3: Community engagement – A contribution to the greater good

12.1 Enabling goals

12.1.1 Goal 1

Obtaining high standards in teaching and learning.

We aim to achieve high standards in academia through innovative educational process with emphasis on student centered and integrated curriculum. Providing faculty structure able to support and deliver with excellence.

12.1.2 Goal 2

Improving quality of the work force, management and support structure.

We will focus on improving quality in all aspects of the work of the faculty, academic and administrative management and support staff and logistics. This will be achieved through effective implementation of quality assurance standards and strategic planning.

12.1.3 Goal 3

Accreditation of the undergraduate program.

We will focus and build upon the ongoing process for accreditation of M.B.B.S program under new guidelines of the SAQF and EEC-HES (NCAAA).

12.1.4 Goal 4

Providing conducive environment for conducting high standards researches

We will create a conducive environment to provide maximum facilities to the faculty and students for conducting internationally recognized researches align with our themes and mission of the college, university and new identity of KFU.



12.1.5 Goal 5

Providing Effective community collaboration, communication and partnership

We will maximize the benefits of effective collaboration within the University, with local MOH partners with local community, national and international organizations for the sake of state of the art cultural development and community enhancement.

12.1.6 Goal 6

Effective application of information technology.

We will focus on effective use of informational technology resources for information, educational, feedback, research and administrative aspects.

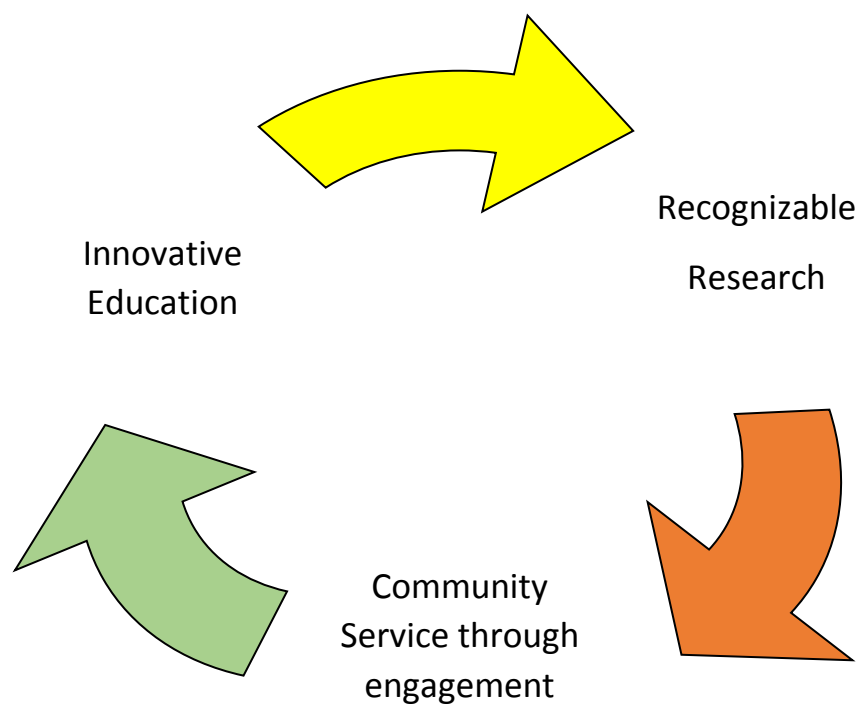


Figure 1 Themes for Strategic Plan



13 Goals & Sub-Goals

Goal 1: Obtaining high standards in teaching and learning.	
1.1 Sub-goal	Update of the curriculum to develop professional physicians.
1.2 Sub-goal	Availability of qualified faculty able to support and deliver excellence
1.3 Sub-goal	Assurance of quality in assessment procedures.
1.4 Sub-goal	Improving student guidance and academic support mechanism.
1.5 Sub-goal	Updating and developing post-graduate programs.
1.6 Sub-goal	Providing clinics, government and private hospitals for clinical trainings
Goal 2: Improving quality of the work force, management and support structure.	
2.1 Sub-goal	Developing effective faculty development training programs.
2.2 Sub-goal	Supporting manpower in accordance of standards of quality management system (QMS)
2.3 Sub-goal	Training of supporting staff (Secretaries/Producers/Lab technicians)
2.4 Sub-goal	Improving process for recruitment of faculty and staff
2.5 Sub-goal	Implementing new faculty appraisal system
2.6 Sub-goal	Developing criteria for reward on excellence.
2.7 Sub-goal	Improving support structures for conducive teaching and learning environment.
Goal 3 Achieving Accreditation of the M.B.B.S program.	
3.1 Sub-goal	Establishing QMS in accordance of KFU
3.2 Sub-goal	Providing awareness regarding QMS to stakeholders
3.3 Sub-goal	Fulfilling the requirements to complete accreditation successfully
Goal 4. Providing conducive environment for conducting high standards researches	
4.1 Sub-goal	Providing adequate resources for basic and clinical researches
4.2 Sub-goal	Meeting standards with international organizations for researches
4.3 Sub-goal	Collaborating within departments, local and international institutes
4.4 Sub-goal	Encouraging, facilitating and rewarding student research activities.
4.5 Sub-goal	Upgradation of animal house for experimental research.
Goal 5. Providing effective community collaboration, communication and partnership	
5.1 Sub-goal	Organization of community awareness programs
5.2 Sub-goal	Developing community engagement skills among faculty & students
5.3 Sub-goal	Involving community in decision making processes
5.4 Sub-goal	Strengthening the partnerships with community, institution and hospital partners.
5.5 Sub-goal	Extending global relations through strategic alliances with institutes
Goal 6. Effective application of information technology.	
6.1 Sub-goal	Effective use of learning management system (LMS)
6.2 Sub-goal	Updating a data-base of faculty and student information
6.3 Sub-goal	Apprising college website in English and Arabic.
6.4 Sub-goal	Encouraging use of information technology tools by faculty & students.
6.5 Sub-goal	Promoting to e learning for students and faculty.



14 Matching with King Faisal University's Goals

College of Medicine Goals	King Faisal University Goals						
	Goal 1 Excellence in Teaching and learning	Goal 2 Conducting scientific researches on community related issues	Goal 3 Lifelong development of human resources	Goal 4 Providing a motivating academic environment that will keep up to date with technology	Goal 5 Creating new opportunities of lifelong learning.	Goal 6 Achieving effective management	Goal 7 Enhancing community engagement that will lead to mutual enrichment
Goal 1 Obtaining high standards in teaching and learning through innovative education	✓		✓	✓	✓		✓
Goal 2 Improving quality of the manpower, management and support structure	✓	✓	✓	✓	✓	✓	
Goal 3 Accreditation of the undergraduate program.	✓		✓	✓	✓	✓	
Goal 4 Provide conducive environment for conducting high standards researches	✓	✓	✓	✓	✓		✓
Goal 5 Providing Effective community collaboration, communication and partnership		✓	✓		✓		✓
Goal 6 Effective application of information technology.	✓	✓	✓	✓	✓	✓	✓



15 Development & Implementation of Modified Program Learning Outcomes with SAQF, SaudiMeds & Vision 2030

Bachelor of Medicine and Surgery Program learning outcomes		SAQF Domains	SAUDI MED PLOs	SAUDI VISION 2030 Main Goals
1	Outcomes for principles of structures and functions, health, psychological, pharmacological, medical (basic, social and clinical sciences) and underlying principles	Knowledge	(K1) Basic sciences and underlying principles	Improve knowledge so can promote physical, psychological, and social wellbeing for a vibrant society with strong roots.
2	Discuss common disease's clinical manifestations, differential diagnosis and consequences of diseases including the principles of early diagnosis of malignancy, common medical and surgical emergencies keeping in mind basic sciences knowledge.		(K2) Principles in medicine, health services and health care systems, health promotion, disease and prevention	
3	Explain different management for common clinical situations including common diagnostic tools, both the pharmacological and non-pharmacological therapies considering the different medical,		(K3) Clinical principles and concepts	



	social, psychological and cultural backgrounds				
4	Outline the ethical principles of research, basic principles of scientific research methods, biomedical statistics and data management.		(K4) Ethics, legal, research principles	Research and scholarship LO 16	
5	Apply clinical reasoning, critical and analytical skills in discussing the patient's complaints, presenting the different possible solutions and therapies while considering the different medical, social, psychological and cultural backgrounds keeping in mind basic sciences knowledge.	Skills	(S1) Clinical skills	Scientific Approach to Practice LO 01	Establish empowering health and social care system
6	Integrate and organize the historical, physical, and investigative findings into a meaningful differential diagnosis formulation, including identifying the most probable diagnosis in a patient.		(S1) Clinical skills	Scientific Approach to Practice LO 02 Patient care LO 07	



7	Recognize the reflection methodology and demonstrate transparent and efficient reflective attitude in both academic and clinical situations		(S2) Practical procedures	Professionalism LO 15	
8	Design effective therapeutic and ongoing management of an individual patient and population at large besides drafting of diagnosis and/or treatment plans with description of the different therapeutic modalities		(S3) Patient investigation and management skills	Patient care LO 04	
				Community oriented practice LO 09	Enhance skills manpower so develop a society in which all enjoy a good quality of life, a healthy lifestyle and an attractive living
9	Apply epidemiological aspects in practice including practicing infection control at all levels and transfer patient safety guidelines to the practical level.		(S4) Health promotion and disease prevention skills		
1	Elicit relevant information and perspectives from patients and their supporters, relatives, colleagues, and other professionals.		(S5) Communication and informatics		Develop an ambitious nation effectively governed through professional role, personal development and enhance



1	Employ skills for both verbal and written communication that accurately convey relevant information and explanations to patients and their relatives considering different types of human behavior under different somatic, psychological and social conditions including conduction of bad news				
1	Communicate with colleagues, physicians, and other health professionals in a collaborative, responsive and responsible manner including writing clear and concise medical records.			Communication and Collaboration LO 12	
1	Employ Information and communication technologies skills to acquire and apply information to manage self-directed learning and collaborative knowledge exchange with ability to facilitate the learning of others as part of professional responsibility				



1	Perform basic medical skills, a range of simple surgical and pharmacological therapies related to the different disciplines, including first aid and general management in both routine cases and emergencies.	Competence	(C1) Decision making, clinical reasoning	Patient care LO 04	
				Patient care LO 05	
1	Perform and document a complete and focused physical and mental examination		(C2) Diagnosis, therapeutic, medical management, patient safety	Patient care LO 03	
1	Develop and tailor the suitable plan of care for different patient problems in a shared view with patients, relatives and peers			Professionalism LO 13	
1	Apply the principles of teamwork dynamics and leadership processes to enable and support effective health professional collaboration.		(C3) Leadership, teamwork, dealing with complexity	Research and scholarship LO 17	Provide the education that builds our children's characters and establish empowering
				Communication and Collaboration LO 11	



1	Design, share and implement some steps in small-scale qualitative, practical or clinical scientific research project.		(C4) professional role, personal development, service quality improvement, legal and ethical responsibilities	Research and scholarship LO 16	Reinforce the ability of our economy to generate diverse job opportunities and institute a new paradigm in attracting global talents and qualifications
1	Appropriately comply with ethical, Professional and legal aspects in dealing with patients medical problems and Colleagues.			Professionalism LO 14	



16 Themes

16.1 Theme 1: Excellence in education for future health professionals

Beside the efforts in the innovative new curriculum, the College needs to concentrate on the support the remaining batches from traditional curriculum with all possible skill acquisition and professionalism. Our College aspires to be recognized as one of the leading center in the innovative medical education and professional development of medical physicians as a part of the whole health professional team. Mindful of its community responsibilities, it will continue to facilitate the student admission policies and to help in preparing up-to-date physicians of good quality to serve the community. To do this, the College will try to keep efficient professional staff, recruit more expert bodies as well as capacity building with permanent job Saudinization.

NCAAA Standards	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (UoG)
Standard 5.0.2: The program has an adequate number of faculty members at all sites where it is offered (e.g., male and female student sections, branches).	Student Faculty ratio	4:1	957/147 6:1	16:1
Standard 5.0.3, 5.0.5 & 5.0.6: The faculty members have the necessary competency (e.g., qualifications, certificates, professional licenses, experience	Availability of Faculty portfolio	90%	129/147 87.8%	70%



required) and effective teaching skills; and appropriate mechanisms are applied for verification				
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Standard 5.0.7 & 5.0.8: Teaching excellence will be regularly evaluated for the delivery of quality education.	Faculty performance evaluation criteria	5	3.46	>3.5
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Standard 4.0.11: The program implements effective procedures to monitor students' progress and to verify their fulfillment of graduation requirements.	Graduation rate /Program Completion rate	80%	186/209 88.9%	80%
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Faculty	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (uoG)
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Standard 5.0.9: Teaching staff participate in professional and academic development	Participation rate in professional development activities	80%	100/147 68%	70%
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programs in accordance with a plan that meets their needs and contributes to the development of their performance.				
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Standard 5.0.5 & 5.0.6: Faculty portfolio containing academic and professional credentials, research, scholarly activities, work experiences, trainings.	Availability of portfolio	80%	100/147 68%	70%
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Standard 5.0.12: The performance of the teaching staff is regularly assessed according to specific and published criteria; feedback is provided to them; and the results are used in improving the performance.	Faculty Performance Evaluation results	Feedback survey and action plan based on results	Not available	Not available
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Learning Environment	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (UoG)
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Standard 6.0.1 & 6.0.2: The program implements effective resource and resource management measures to support teaching and learning processes.	Student and Faculty satisfaction survey on resources	5	Not done	>3.5
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Standard 6.0.13: The program evaluates the effectiveness and efficiency of learning resources, facilities and equipment of all types, and use the evaluation results in the improvement process.	Survey evaluation results for resources, facilities and equipment	5	Not done	>3,5
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Standard 4.0.11: Adopting timely and efficient communication routes to inform all Faculties about processes, initiatives, developments and opportunities in teaching and learning.	Regular submission of minutes	90%	70%	Not available
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Students	<i>KPIs</i>	<i>KPI</i>	<i>KPI</i>	<i>KPI</i>
		<i>Target Benchmarks</i>	<i>Actual Benchmark</i>	<i>External Benchmarks (uoG)</i>
Standard 4.0.7: Students are provided with effective academic, professional, psychological and social guidance, and counseling services through qualified and sufficient staff.	Student satisfaction survey	5	Not done	>3,5
Standard 2.0.4: The program manager acts to provide an organizational climate and supportive academic environment.	Faculty satisfaction survey	5	Not done	>3,5



16.2 Theme 2: Internationally recognized Research in medical sciences

Our College recognizes a need to raise our activities to increase greatly the proportion of our published research, which competes with all local medical colleges, and aspire to be in line with the standards of excellence. The presence of multicultural medium of expertise across the Faculty provides unique opportunities for interdisciplinary research. The positive relation with MOH potentiates the chances for more clinical researches. The presence of funded projects at the level of the University and at the level of the

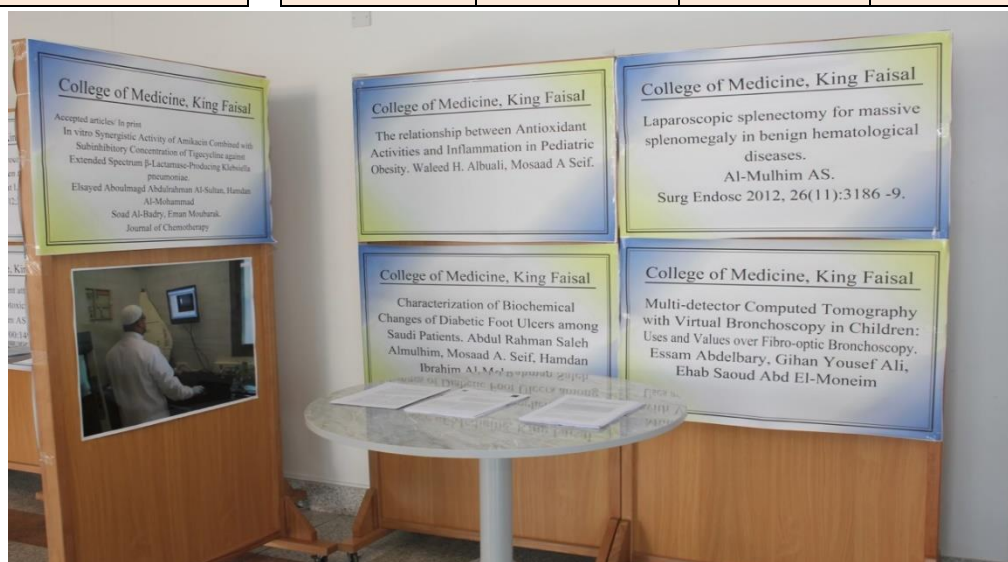


Kingdom, open the way for more strategic thinking and road mapping of College goals in that field. The growing innovative University resources pave the way for a more sound and concrete research. The presence of scientific chairs as the current blood diseases chair and following chances must potentiate the research capacity building of the College.

Competitive researchers	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (uoG)

Standard 5.0.7: Faculty members effectively participate in research activities and scientific production; and their participation in these activities is considered as one of the criteria for their evaluation and promotion.	Faculty research involvement	90%	70%	Not available
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Standard 5.0.7: Faculty members effectively participate in research activities and scientific production; and their participation in these activities is considered as one of the criteria for their evaluation and promotion.	Publication Rate per faculty /year	70%	10%	Not available
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16.3 Theme 3: Community engagement in medical professional practices

Our College realizes that one of its main functions is to serve its community. In addition, the University vision and mission stress on community partnership as a main component of its strategic plan. Community partnership represents opportunities for collaboration mutual benefits. Communication, surveys and meetings to define the community needs and help to engage all stakeholders. One of the major competencies included in all recent medical education themes is community services and advocacy. Community services; besides all its benefits, it justifies the governmental financial investment.

Community engagement	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (uoG)
<i>Standard 5.0.8:</i> Teaching staff participate in community partnership activities; and their participation in these activities is considered as one of the criteria for their evaluation and promotion.	Faculty Community Engagement Accomplishment rate	80 %	40% (58/147)	n/a
<i>Standard 5.0.7:</i> Liaison with the community partnership administration in the University to align with its goals, study its main domains of services, and conduct the community education programs.	Number of collaboration	12	50% (6/12)	n/a
Social responsibility	KPIs	KPI Target Benchmarks	KPI Actual Benchmark	KPI External Benchmarks (uoG)



Standard 1.0.6: The program mission and goals are reviewed periodically with the participation of relevant stakeholders, and are developed accordingly.

Awareness survey rate	100%	90%	n/a
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17 Implementation Plan

The strategic plan committee started its work by reviewing the strategic plan 2015-2020 of the King Faisal University to make sure that the college strategic plan should be brought up in accordance with the true letter and spirit of the vision, mission and values of the strategic plan of the King Faisal University. Afterwards the committee began the studious task of revising the college strategic plan 2015 -2020. Therefore, Head of departments and Coordinators of the departments were apprised in detail and depth about the minutes of the vision, mission, values and all other aspects of the college strategic plan. Coordinators made interactive deliberations with faculty in their departments to impart a complete understanding of all the aspects of the college strategic plan. Meanwhile, the Block Coordinators of the departments were requested to transmit this information to the students for their informed opinion on the plan. This whole exercise played a marvellous role in getting the input of the faculty and students on the matter. SWOT analysis for the college of medicine was conducted by using the google forms and the data was documented and analysed for making a future action plan. The committee also revised the vision; mission and values of the College in the light of input received from different Departments and decided to continue with the same vision, mission and values, which are aligned with KFU's vision, mission and values

It is worthwhile to note that this approach to strategic planning was built on widespread engagement with Faculty, staff, students, hospitals, administration and community. The strategic planning teams worked parallel to each other in identifying SWOT, evidence validation and PEST trend analysis. The college representatives visited to all governmental and private hospitals in Al Hofuf. In each visit, they conducted a stakeholders' survey and formulated a discussion report. A standardized NCAAA program student survey was distributed to all students passing more than 100 credit hours from the program. Survey analysis revealed the areas that need improvement. To incorporate the inspirations and ideas of the community in the plan, a team headed by the Dean and comprising of Vice Dean female affairs and a committee member approached to all lifestyles of society. Team discussed and debated on the concerned



issues with them at length and collected the required data for a better plan. A standardized NCAAA self-evaluation scales (SES) document was distributed to all Departments where they reviewed and evaluated all the college and program practices along with the supplied relevant evidence. Departmental discussion groups finalized the final version of SES and it was discussed and endorsed in the College Board. A discussion group including Dean, Vice Deans financial and administrative director and some strategic planning team members discussed the administrative view about relevant points and suggested the linking of all college decisions, practices and activities to the college mission and goals. Some members of the strategic planning team completed the trend analysis with all possible relevant supporting evidences (PESTS analysis done only with high officials).

After this meticulous exercise ultimately, the strategic planning team, using the college SES and other evidence succeeded in extracting areas which provided basic stratum for the SWOT analysis. Analysis of the current situation and identification of critical issues enabled our college to respond to the reality of its needs through a strategic plan based on the strategic themes reflecting the vision and mission of the college, evened up with the vision and mission of the KFU. It also provided a foundation for establishing certain focused strategic goals, which undoubtedly shall lead to produce a par excellence health professional, internationally recognized researcher and community health service provider graduate.

Action Plan for Strategic Goals:-

Action Plan for Strategic Goals will be implemented through a responsible individual or a team after establishing and defining KPIs. GANTT chart for Action Plan of Strategic Goals is shown in Table – 19.

Monitoring and assessment of implementation plan:-

On a given timeline, the implementation plan will be monitored through an effective, meaningful and efficient mechanism of assessment. In this regard, evaluation and analysis of the already determined KPIs will help in monitoring the progress on action plan, made for relevant themes and goals.



18 GANTT chart (Action Plan for Strategic Goals)

Key:

	On going
	Complete
	Uncomplete

Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.1 Sub-goal	Update of the curriculum to develop professional physicians.	Passing rate of graduates in SLE or postgraduate training entrance examination									
Actions required for achievement of Sub-Goal 1.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Preparation of curriculum committee										
Action 2	Need assessments – discipline or departmental bases										
Action 3	Compilation of data collected as need assessment										
Action 4	Review										
Action 5	Execution amendments										
Action 6	Evaluation										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.2 Sub-goal	Availability of qualified faculty able to support and deliver excellence	Number of qualified faculty									
Actions required for achievement of Sub-Goal 1.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Revise the evaluation form										
Action 2	Assess the requirements on departmental bases										
Action 3	Establish a selection process based on KFUPM policy										
Achieving Rate (%)		30	30	40	100						



Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.3 Sub-goal	Assurance of quality in assessment procedures.	1. Number of internal moderation for marking examination papers 2. Rate of standardization and item analysis 3. Rate of calibration per year									
Actions required for achievement of Sub-Goal 1.3 KPI: 1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Develop a policy for an internal moderation for making examination papers										
Action 2	Execution of internal moderation process for all examinations										
Achieving Rate (%)		50	50	100							
Actions required for achievement of Sub-Goal 1.3 KPI: 2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Assessing the effectiveness of the results by item analysis										
Action 2	Periodic assessment for achieving of the PLOs										
Action 3	Appointment of external examiners for all examinations										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100
Actions required for achievement of Sub-Goal 1.3 KPI: 3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Bi-annual calibration of OMR machines										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.4 Sub-goal	Improving student guidance and academic support mechanism.	Average of students satisfaction for guidance and academic support									
Actions required for achievement of Sub-Goal 1.4		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Development of proposal for psychology rehabilitation unit										
Action 2	Approval from study plan committee										
Action 3	Approval from College board										



Action 4	Approval from higher administration										
Action 5	Execution of plan as a unit										
Action 6	Evaluation of effectiveness										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.5 Sub-goal	Updating and developing post-graduate programs.	1. Number of programs registered as postgraduate programs 2. Periodic review every 5 year									
Actions required for achievement of Sub-Goal 1.5 KPI: 1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Development of proposal for new postgraduate programs										
Action 2	Approval from study plan committee										
Action 3	Approval from College board										
Action 4	Approval from higher administration										
Action 5	Execution of plan as a unit										
Achieving Rate (%)		30	30	40	100						
Actions required for achievement of Sub-Goal 1.5 KPI: 2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Evaluation of effectiveness										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 1: Obtaining high standards in teaching and learning.		Key Performance Indicators (KPI)									
1.6 Sub-goal	Utilizing clinics, government and private hospitals for clinical trainings	Number of hospitals and clinics utilized during an academic year									
Actions required for achievement of Sub-Goal 1.6		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1st	2nd	1st	2nd	1st	2nd	1st	2nd	1st	2nd
Action 1	Explore more training opportunities according to academic requirements.										
Action 2	Training of staff at affiliated hospitals and clinics										
Achieving Rate (%)		50	50	100							



Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.1 Sub-goal	Developing effective faculty development training programs	Participation rate in personal and professional development activities by self-assessment									
Actions required for achievement of Sub-Goal 2.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Identify the areas where faculty require training.										
Action 2	Develop short courses for faculty development										
Action 3	Preparation of personal development plan for each faculty										
Action 4	Develop a friendly user permission process for attending conferences / seminars etc.										
Achieving Rate (%)		30	30	40	100						

Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.2 Sub-goal	Supporting manpower in accordance of standards of quality management system (QMS)	Availability of the e-portfolio									
Actions required for achievement of Sub-Goal 2.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Orientation of new QMS system										
Action 2	Training for development of e-portfolio										
Action 3	Establish an e-portfolio system										
Action 4	Evaluation of the system										
Action 5	Update the system										
Achieving Rate (%)		30	30	40	100						



Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.3 Sub-goal	Training of supporting staff (Secretaries/Producers/Lab technicians)	Participation rate in personal and professional development activities by self-assessment									
Actions required for achievement of Sub-Goal 2.3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Identify the areas where supporting staff require training.										
Action 2	Develop short courses for supporting staff development										
Action 3	Preparation of personal development plan for all supporting staff										
Achieving Rate (%)		30	30	40	100						

Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.4 Sub-goal	Improving process for recruitment of faculty and staff	Number of qualified faculty members (5.0.3)									
Actions required for achievement of Sub-Goal 2.4		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Revise the evaluation form										
Action 2	Assess the requirements on departmental bases										
Action 3	Establish a selection process based on KFU policy										
Achieving Rate (%)		30	30	40	100						

Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.5 Sub-goal	Implementing new faculty appraisal system	Average of overall Faculty evaluation (5.0.7,8 & 12)									
Actions required for achievement of Sub-Goal 2.5		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Orientation of new faculty appraisal system										
Action 2	Training of new faculty appraisal system										
Action 3	Implement new faculty appraisal system										
Action 4	Evaluation of new faculty appraisal system										
Achieving Rate (%)		30	30	40	100						



Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.6 Sub-goal	Developing criteria for reward on excellence.	Availability of reward on excellence system									
Actions required for achievement of Sub-Goal 2.6		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Develop criteria for reward on excellence.										
Action 2	Implement the criteria for reward on excellence.										
Achieving Rate (%)		50	50	100							

Goal 2: Improving quality of the work force, management and support structure.		Key Performance Indicators (KPI)									
2.7 Sub-goal	Improving support structures for a conducive teaching and learning environment.	Average of satisfaction results for resources, facilities and equipment									
Actions required for achievement of Sub-Goal 2.7		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Identify deficiencies in learning resources, other facilities and equipment.										
Action 2	Fulfil deficiencies in learning resources, other facilities and equipment.										
Action 3	Evaluation of available resources										
Achieving Rate (%)		30	30	40	100	50	60	70	80	90	100

Goal 3: Accreditation of the M.B.B.S program.		Key Performance Indicators (KPI)									
3.1 Sub-goal	Establishing QMS in accordance of KFU	Average of best practices applied at college of medicine									
Actions required for achievement of Sub-Goal 3.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Approval of QMS committee.										
Action 2	Plan of QMS practices with liaison with KFU Deanship for Quality Assurance.										
Action 3	Execute the best practices based on QMS										
Action 4	Assess the best practices by Self-Evaluation Scale										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100



Goal 3: Accreditation of the M.B.B.S program.		Key Performance Indicators (KPI)									
3.2 Sub-goal	Providing awareness regarding QMS to stakeholders	Stakeholders Awareness rate									
Actions required for achievement of Sub-Goal 3.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Plan for stakeholders awareness regarding QMS										
Action 2	Execute the plan										
Action 3	Assess by stakeholders awareness survey										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 3: Accreditation of the M.B.B.S program.		Key Performance Indicators (KPI)									
3.3 Sub-goal	Fulfilling the requirements to complete accreditation successfully	Criteria fulfill successfully									
Actions required for achievement of Sub-Goal 3.3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Review the requirements										
Action 2	Gap analysis										
Action 3	Prepare deficient documents										
Action 4	Complete the requirements										
Achieving Rate (%)		50	50	100							

Goal 4: Providing conducive environment for conducting high standards researches		Key Performance Indicators (KPI)									
4.1 Sub-goal	Providing adequate resources for basic and clinical researches	Average of Student and Faculty satisfaction for resources									
Actions required for achievement of Sub-Goal 4.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Identify deficiencies in resources for basic and clinical researches.										
Action 2	Fulfil deficiencies in in resources for basic and clinical researches.										
Action 3	Evaluation of available resources										
Achieving Rate (%)		30	30	40	100	50	60	70	80	90	100



Goal 4: Providing conducive environment for conducting high standards researches		Key Performance Indicators (KPI)									
4.2 Sub-goal	Meeting standards with international organizations for researches	Number of publications in peer reviewed and indexed international journal									
Actions required for achievement of Sub-Goal 4.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Awareness about the importance of research										
Action 2	Training for medical writing										
Action 3	Assess the citation indices										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 4: Providing conducive environment for conducting high standards researches		Key Performance Indicators (KPI)									
4.3 Sub-goal	Collaborating within departments, local, national and international institutes	Number of publications in collaboration with local, national and international institute.									
Actions required for achievement of Sub-Goal 4.3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Plan to collaborate with local, national and international institutions										
Action 2	Perform researches with collaboration with local, national and international institutions										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 4: Providing conducive environment for conducting high standards researches		Key Performance Indicators (KPI)									
4.4 Sub-goal	Encouraging, facilitating and rewarding student research activities.	Number of achieving rewards by the students									
Actions required for achievement of Sub-Goal 4.4		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Develop criteria for reward on excellence.										
Action 2	Implement the criteria for reward on excellence.										
Achieving Rate (%)		50	50	100							



Goal 4: Providing conducive environment for conducting high standards researches		Key Performance Indicators (KPI)									
4.5 Sub-goal	Upgradation of animal house for experimental research	Availability of required animals for applied researches									
Actions required for achievement of Sub-Goal 4.5		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Upgrade already existing animal house to international standards.										
Action 2	Ensure the provision of animals to the researchers										
Achieving Rate (%)		20	40	60	80	100					

Goal 5: Providing effective community collaboration, communication and partnership		Key Performance Indicators (KPI)									
5.1 Sub-goal	Organization of community awareness programs	Number of programs conducted by students and faculty									
Actions required for achievement of Sub-Goal 5.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Plan for community services.										
Action 2	Include in academic activities the community services										
Action 3	Execute awareness programs										
Action 4	Monitor the programs										
Action 5	Evaluate the programs										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 5: Providing effective community collaboration, communication and partnership		Key Performance Indicators (KPI)									
5.2 Sub-goal	Developing community engagement skills among faculty & students	Number of training programs for teaching engagement skills									
Actions required for achievement of Sub-Goal 5.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Conduct workshops on community engagement skills for students and faculty										
Action 2	Plan various students and faculty community work activities with the administration										
Action 3	Implement the community engagement activities e.g., “E-clinic anti-smoking”										
Action 4	Evaluate the effectiveness										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100



Goal 5: Providing effective community collaboration, communication and partnership		Key Performance Indicators (KPI)									
5.3 Sub-goal	Involving community in decision making processes	Number of areas involving community for decision making									
Actions required for achievement of Sub-Goal 5.3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Establish a forum in collaboration with people from all walks of life.										
Action 2	Develop a guideline for the forum										
Action 3	Plan for community partnership programs										
Action 4	Implement the programs										
Action 5	Evaluate the programs										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 5: Providing effective community collaboration, communication and partnership		Key Performance Indicators (KPI)									
5.4 Sub-goal	Strengthening the partnerships with community, institution and hospital partners.	Number of collaborative activities among different institutes									
Actions required for achievement of Sub-Goal 5.4		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Establish a college community forum.										
Action 2	Regular interval meetings to explore new means and ways of the community service community, institution and hospital partners.										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100



Goal 5: Providing effective community collaboration, communication and partnership		Key Performance Indicators (KPI)									
5.5 Sub-goal	Extending global relations through strategic alliances with institutes	Number of partnerships with global institutes									
Actions required for achievement of Sub-Goal 5.5		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Establish relation with global NGOs to serve community in health issues (Blood dyscrasias, Consanguineous marriage, increasing young smokers and obesity etc) of Alhsa region.										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100
Goal 6: Effective application of information technology		Key Performance Indicators (KPI)									
6.1 Sub-goal	Effective use of learning management system (LMS)	Utilization rate of LMS									
Actions required for achievement of Sub-Goal 6.1		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Awareness about LMS										
Action 2	Identify areas by students and faculty, where they can use LMS.										
Action 3	Training programs for LMS										
Action 4	Implementation of LMS										
Action 5	Evaluation of LMS										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100

Goal 6: Effective application of information technology		Key Performance Indicators (KPI)									
6.2 Sub-goal	Updating a data-base of faculty and student information	Completion rate of e-portfolio by faculty and students									
Actions required for achievement of Sub-Goal 6.2		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Awareness about data base										
Action 2	Identify areas by students and faculty, where they can use data base.										
Action 3	Update data base										
Achieving Rate (%)		10	20	30	40	50	60	70	80	90	100



Goal 6: Effective application of information technology		Key Performance Indicators (KPI)									
6.3 Sub-goal	Apprising college website in English and Arabic.	Percentage of completion of college website									
Actions required for achievement of Sub-Goal 6.3		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Ensure completion of college website in English and Arabic										
Achieving Rate (%)		50	100								

Goal 6: Effective application of information technology		Key Performance Indicators (KPI)									
6.4 Sub-goal	Encouraging use of information technology tools by faculty & students	Utilization rate of information tools by faculty & students									
Actions required for achievement of Sub-Goal 6.4		Timeline (Semester wise)									
		20-21		21-22		22-23		23-24		24-25	
		1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd	1 st	2 nd
Action 1	Establish an e-learning unit										
Action 2	Identify areas with the advice of Deanship of E-learning and Distance education, where students and faculty can utilize IT skills and tools.										
Action 3	Arrange IT training programs for students and faculty in collaboration with the Deanship of E-learning and Distance education.										
Achieving Rate (%)		20	40	60	80	100					



19 References

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6. Letters of nominations with tasks and functions of Strategic plan committee
7. Input from the stakeholders



20 Achievement Report for Action Plan (2020-2025)

S. No	Action Plan	Achievements		
1.	.			
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.	.			



21 Risk Management Plan

APPENDIX: Log / Register page

- Log or register page will be designed on an excel sheet.
- Work Breakdown Structure (WBS).

Top on priority	
On priority	
Least on priority	

Risk number	Risk	Area of risk	Cause / Reason	Effect on specific internal process of (Strategic plan)	RISK ASSESSMENT			RISK RESPONSE STRATEGY				RISK MANAGEMENT		
					Probability	Impact	Level of risk	Avoid	Mitigate	Accept	Transfer	WBS (Work Breakdown Structure)	Resources/Cost/Individual or Group responsible	Timeline for action(s)
1	Lack of University hospital facility	Resources OR infrastructure	Lack of Budget	Students learning/research	continuous	High	Red				University		Dean	
2	Increased number of the students entry per year	students	policy	Students learning /Resources/faculty	continuous	High	Red				University (No increase in number)		Dean	
3	Lack of trained faculty on new curriculum	Faculty	Policy/Administration	Students learning /curriculum/research	continuous	moderate	yellow				University		Dean	



4	Difficult access to hospital database Hampering some of the researches	Student/research	Administrative	Research facilities /Student involvement Blood diseases/ scientific chair	continuous	moderate	Yellow		Seek access					Dean	
5	Insufficient teaching spaces	Resources	Administrative	Students learning	continuous	mild	Green				university			Dean	
6	Lack of College Staff in some Clinical specialties/Sub specialties	Faculty	Policy/Administration	Students learning /curriculum/research	continuous	moderate	Yellow				university			Dean	
7	Lack of College Staff in Academic specialties	Faculty	Policy/Administration	Students learning /curriculum/research	continuous	moderate	Yellow				university			Dean	
8	Difficulty in getting training posts for our demonstrators	Faculty	Policy/Administration	Students learning /curriculum/research	continuous	moderate	Yellow				university			Dean	
9	Lack to supportive staff	Personnel	Administrative	Students learning /curriculum/research/administrative work	continuous	moderate	Yellow				university			Dean	
10	Insufficient faculty Work space	Resources	Administrative	Administrative	continuous	moderate	Yellow				university			Dean	
11	Insufficient Research Funds	Resources	Administrative	research	continuous	moderate	Yellow				university			Dean	



PHOTO GALLERY

College of Medicine Strategic Planning and Decision Making Committee





**Faculty Workshop on SWOT Analysis and Review of the College's Vision, Mission
And Core Value Statements**





