

ACADEMIC OPERATIONAL PLAN **2017-2022**

KING SAUD BIN ABDULAZIZ UNIVERSITY FOR
HEALTH SCIENCE (KSAU-HS)
COLLEGE OF NURSING (CON)

Goal 1: Bring College of Nursing national and international recognition by continuously enhancing academic nursing programs that create competent nurses.

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
I. Ensure systematic academic programs review.	Periodic academic programs review.	1. Construct structured schedule meeting for CON curriculum committee and curriculum sub-committee.	Associate dean/assistant dean academic and students affairs Curriculum Committee. Executive management support. Faculty Quality unit	Curriculum Committee Curriculum-Sub Committee	Number of programs curriculum committee meetings per year.	2 per academic year	AY 2017-2018
		2. CON curriculum committee nominates and approves names of independent reviewers every 3 to 5 years.					
		3. Independent reviewer will submit a final report to curriculum committee					
		4. Curriculum committee send reviewers' recommendation to quality committee.					
		5. Quality committee reviews reviewers' comments and make sure it follows the quality guidelines of the university.					
		6. Curriculum committee to ensure the implementation of the					

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		reviewer's recommendations.					
		7. Curriculum sub- committee implements the action plan at each campus according to the program, and course management process.					
		8. Enhance structured schedule meeting for advisory committee.					
		9. Advisory committee will submit a final report to curriculum committee			Number of advisory committee meeting.	1 per academic year	
		10. Curriculum committee develops an action plan based on advisory committee recommendations.					
		11. Monitor the implementations of stakeholders' survey action plans.			3.1 Student's overall evaluation on the quality of their learning experiences at the institution.	Average rating of 3.5 or above on a five-point scale in an annual survey final year students	

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					Employers satisfaction with graduates	Average rating of 3.5 or above on a five-point scale in an annual survey	
	Automated monitoring of student progress	<ol style="list-style-type: none"> 1. Establish proposal for automated monitoring system. 2. Pilot the automated monitoring system for applicability. 3. Activate the automated monitoring system among the three campuses 4. Receive a report about the percentage of students who were counselled based on their progress. 5. Develop an action plan per semester 6. Monitor the implementation of the action plan. 7. Survey the effectiveness of the automated monitoring system 	<p>Curriculum committee</p> <p>Academic and counselling committee</p> <p>Level coordinators</p> <p>Academic advising and counselling unit.</p> <p>Quality unit CON SIS Team</p> <p>Academic advising and counselling unit.</p>	<p>Advising Committee</p> <p>Associate/assistant dean academic and students affairs</p>	<p>Presence of automated system to monitor student progress</p> <p>Percentage of students counselled Based on automatic notification for the first time.</p> <p>Percentage of students counselled Based on automatic notification for the second time.</p>	<p>Achieved by year 2020</p> <p>_____</p> <p>_____</p>	<p>AY 2018-2019</p>

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		8. Update the system based on the survey result.	CON SIS Team				
	Monitoring of effectiveness of teaching/ learning and assessment methods	1. Orient the faculty about the peer review system. 1. A Schedule the peer review of teaching and assessment at the beginning of each academic semester. 1. B Ensure the effectiveness and objectivity of the peer review process of teaching and assessment. 1.C Prepare and submit a report about peer review process of teaching and assessment to curriculum sub-committee	Faculty Support form curriculum sub-committee	Associate/assistant dean academic and students affairs Chairperson of nursing department Nursing Department	Percentage of faculty who were peer reviewed. Percentage of achieved BSN program learning outcomes.	100% 90%	AY 2018-2019
		2. Submit PLO Assessment report with action plan to curriculum sub-Committee.			Stakeholders satisfaction of graduates	Average rating of 3.5 or above on a five-point scale in an	

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						annual survey	
					4.5. Proportion of students entering undergraduate programs who complete those programs in specified time. 3.1 Student's overall evaluation on the quality of their learning experiences at the institution	60% Average rating of 3.5 or above on a five-point scale in an annual survey final year students	
		3. Tracking of students' progress through yearly GPA 3. A Create action plan based on the result.			Average of graduate GPA	3.5	AY 2018-2019

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		<p>4. Receive regular report from Saudi Commission about license exam.</p> <p>5. Develop action plans based on the Saudi Commission reports.</p> <p>6. Develop a schedule for staff development of available teaching and assessment workshops at KSAU-HS</p> <p>6. A Disseminate professional development opportunity for faculty.</p> <p>6. B Receive feedback from faculty on the attendance of the workshops.</p> <p>7. Develop a schedule for students' progress test</p> <p>7.A Analyze the result of progress test among three campuses.</p> <p>7.B Develop an action plan based on the result</p> <p>7.C Follow up the implementation of the action plan.</p>	Chairperson of nursing department		<p>Percentage of Graduates' who passed licensure exam.</p> <p>Percentage of faculty who attended teaching/ assessment workshops</p> <p>Average of progress test results</p>	<p>90%</p> <p>100%</p> <p>60%</p>	

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	Maintain the coordination with the pre-professional phase on the level of curriculum , advising and college counselling	<ol style="list-style-type: none"> 1. Establish task force from CON and pre-professional phase governed by Deanship of Academic Affairs and Quality Assurance to investigate and work on the student low completion rate. 2. Request regular report from pre-professional phase about percentage of students withdraw/drop and the reasons behind it. 3. Conduct yearly faculty focus group from pre-professional phase to investigate arising concerns related to students withdraw/drop. 4. Conduct yearly student’s focus group from pre-professional phase to address their concerns. 5. Develop an action plan based on the feedback 			4.5. Proportion of students entering undergraduate programs who complete those programs in specified time.	60%	AY 2019-2020

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II. Expand academic programs to include more specialized nursing programs to meet society needs.	Expansion of postgraduate programs in response to the needs of the market.	<ol style="list-style-type: none"> 1. Nominate most needed postgraduate programs. 2. Develop set the program specification for the nominated programs. 3. Curriculum committee set admission criteria for the nominated programs. 4. Escalate the process of advertisement and recruitment to the university. 5. Establish set admission criteria for the nominated programs. 6. Assess available resources (such as: faculty, classes, TAs, etc.) needed for the new programs. 7. Develop students' program survey and employer satisfaction survey with post graduate performance. 	Approval from Curriculum Committee.	Curriculum Committee	Number of specialized postgraduate programs offered at CON.	2	AY 2021-2022
			Executive management support	Curriculum-Sub Committee	4.10 Proportion of students entering postgraduate program who completed those program in specified time.	90%	
			Advisory Committee		Employer satisfaction with postgraduate performance.	4 out of 5	
Quality Committee							

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
	Enhance advisory committee engagement.	<ol style="list-style-type: none"> 1. Construct a structure schedule for program advisory committee meeting to identify most needed postgraduate programs based on the market's need. 2. Review postgraduate program annual report and program self-evaluation scale 3. Identify necessary program recommendations based on the recent market and external requirement. 	<p>Approval from advisory Committee.</p> <p>Executive management and college council support</p>	Advisory committee	Number of advisory committee meetings.	One per academic year	AY 2021-2022
III. Enhance excellence and opportunities in evidence based nursing practice in undergraduate and postgraduate nursing programs.	Ensure integration of evidence based nursing practice in nursing programs	<ol style="list-style-type: none"> 1. Review courses every three years to ensure the integrations of evidence-abased practice in nursing courses. 2. Submit a review report and action plan to the quality unit for review then indorse it to the curriculum committee. 3. Ensure the implementation of the action plan. 	<p>Faculty</p> <p>Chief course coordinators</p> <p>Associate/assistant dean academic and student affairs</p>	Nursing Department	Percentage of courses applying evidence based nursing practice in nursing programs.	50%	AY 2019-2020

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	Explore opportunities to gain access to the central simulation lab	<ol style="list-style-type: none"> 1. Initiate the simulation resources at university and colleges level. 2. Establish an orientation session for faculty at Simulation Centres. 3. Conduct simulation training sessions for students in different courses per semester. 4. Construct a structured schedule for objective structured clinical examinations (OSCE) at Simulation Centres. 	<p>Simulation team at Simulation Center and CON to conduct the workshop</p> <p>Associate/assistant Dean, academic Affairs College of Medicine</p> <p>Manpower to facilitate the OSCE</p>	Associate/Assistant dean, College of Nursing clinical affair	Utilization of central simulation lab.	Achieved	AY 2018-2019 CONR CONJ & CONA no central simulation labs
	Continuous monitoring and evaluation of field experience.	<ol style="list-style-type: none"> 1. Establish criteria for Nursing Clinical Teaching Unit (NCTU) liaison to include provision of up-to-date and evidence -based practice. 2. Conduct NCTU/liaison assessment for all of the unites at clinical sites 3. Conduct NCTU/liaison workshops for field staff 	<p>Manpower to conduct the NCTU/liaison workshop</p> <p>available at computer labs at CON-R</p> <p>Quality unit</p>	Associate/assistant dean, clinical affair	Percentage of courses applying evidence based nursing practice in nursing programs.	50%	AY 2019-2020
Student's overall evaluation of field experience training.					3.5/5		
Faculty overall evaluation of field experience training.					3.5/5		

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date	
		4. Upload all needed information and documents on the nursing services website for field staff	Research Unit		Field staff overall evaluation of field experience training.	3.5/5		
		5. Obtain key access for all faculty involved in the clinical training	Admin Assistant					
		6. Conduct Best Care workshop for all faculty involved in the clinical training.						
		6.A Obtain access to Best Care for all faculty, who are involved in clinical training of students.						
		7. Develop a debriefing tool that should be utilized after each clinical practice.						
		7.A Communicate and orient the faculty about the debriefing tool.						
		7.B Implement the debriefing tool.						
		7.C Evaluate the effectiveness and						

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date	
		applicability of the debriefing tool	QAAA Unit					
		8. Unify all clinical evaluation rubric. 9. Implement the unified clinical evaluation rubrics among the three campuses.						Clinical Affairs Research Unit
		10. Evaluate the students, faculty, and filed staff about field experience training: 10.A Analyse the survey results. 10.B Develop an action plan based on the surveys result.						
	Periodic and structured monitoring of learning resources and environment	1. Conduct regular meetings of Library and Learning Resources Committee with stakeholders to identify learning needs.	Support from Deans' office and Students and Academic Affairs	Library and Learning Resources committee	7.2 Number Of accessible computers terminla per student.	0.3:1	AY 2019-2020	
		2. Assess faculty and stakeholders satisfaction with learning resources per year.	College IT	Manager of Students Affaires staff	Students' overall evaluation of learning resources	3.5/5		
					Faculty overall evaluation of	3.5/5		

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
		3. Analyze the stakeholders' survey results and develop an action plan based on which.	Quality unit		field experience training.		
		4. Monitor the implementations of the action plan.	Academic affairs				
		5. Develop structured students orientation about utilization of resources such as Blackboard and help request, and library resources.	Chairperson of Library and Learning Resources Committee	Chairperson of Library and Learning Resources Committee			
		6. Submit a report that specify the utilization of available learning resources.	IT/ Student Affairs/ Librarian				
	Communicate standardize interdisciplinary collaboration for the delivery of nursing programs and scholarly activities	1. Identify collaborative opportunities with other colleges.	Research committee	Dean	Number of interdisciplinary collaboration and agreements.	Two by 2021	AY 2021-2022
		2. Conduct collaborative scholarly activities (teaching, clinical training, and research).	Community committee	Dean	Percentage of standardized units and related committees.	50%	

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
	Offer scholarship opportunities for BSN graduates	1. Establish scholarship unit.	Postgraduate Education KSAU-HS	Dean	Percentage of offered scholarship seats to the number of accepted scholars.	80%	AY 2019-2020
		2. Develop plan of mostly needed specialty for scholarship per year	Deanship of Admission and Registration	Associate dean/assistant dean academic/student affairs			
		3. Monitor scholars progress toward getting approved post graduate programs		Scholarship unit			
		4. Monitor the progress toward getting the degree					

Goal 5: Attract, recruit, and retain highly qualified faculty, and provide opportunities for professional enhancement.

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
I. Intensify efforts through innovative	Communicate with central recruitment	1. Develop advertising plan with central recruitment office.	HR of the university	Faculty Recruitment and Promotion committee	4.1. Ratio of students to teaching staff	20:01	

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date			
approaches that recruit and retain dedicated, talented, and creative faculty and staff.	office to expedite the process of faculty recruitment.	2. Revisit and update the recruitment process to be more efficient.	University scientific committee		4.3. Proportion of teaching staff with verified doctoral qualifications.	50%				
		3. Conduct regular faculty's satisfaction survey about recruitment process.				9.1. Proportion of teaching staff leaving the institution in the past year for reasons other than age retirement.		less than 10%		
		4. Central faculty' satisfaction survey.								
		5. Exit interview conducted by KASU-HS employee relation.								
	Hire faculty with diverse specialties and nationalities.	1. Review annually CON manpower status report (MSR).			4.1. Ratio of students to teaching staff	20:01		AY 2019-2020		
		2. Assess yearly the needs of CON in relation to projected students' number.								
		3. Monitor regularly faculty/students ratio yearly.								
	Conduct annual faculty experience survey.	4. Orient the faculty about faculty experience survey.			Faculty	Associate dean/assistant dean academic/student affairs		Response rate of faculty completed the faculty experience survey.	80%	AY 2019-2020

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
		5. Develop an action plan based on the survey result.	Quality unit	Nursing department			
		6. Follow up the implementations of the action plan					
	Enhance rewarding system	1. Formulate rewarding taskforce.	Associate/assistant Dean for academic and students' affairs	Dean	Percentage of recognized faculty.	100%	AY 2020-2021
		2. Set criteria for awarding outstanding faculty performance.	Faculty	Nursing department			
		3. Post faculty and staff achievements and success stories through the college website annually.					
		4. Announce faculty award at departmental councils and graduation ceremony.					
	Maintain faculty and staff orientation program	1. Update the orientation program based on faculty feedback	Faculty	Nursing Department	Percentage of Faculty staff who were mentored per year	100%	AY 2017-2018

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
		2. Monitor the effectiveness of the orientation program for new faculty.		Faculty enhancement committee	Percentage of new admin staff who were mentored per year	100%	
		3. Evaluate the effectiveness of the orientation program.					
		Maintain faculty mentorship program					
	1. Establish a system of mentorship.	Faculty	Nursing department	Percentage of new staff who were mentored per year	100%	AY 2019-2020	
		2. Evaluate the effectiveness of the mentoring program					
II. Develop and maintain clear and fair criteria for appraisal items	Sustain faculty appraisal system.	1. Evaluate Faculty satisfaction with faculty appraisal criteria.	Nursing department	Dean Associate/assistant dean academic and students affairs	Faculty satisfaction with appraisal procedure.	3.5/5	AY 2020-2021
III. Empower faculty with structured enhancement programs.	Maintain the work of faculty enhancement committee.	1. Establish faculty enhancement committee	Dean	Faculty enhancement committee	Number of meeting minutes	2 per year	AY 2020-2021
		2. Establish faculty professional development dashboard.	Associate/assistant dean academic and students affairs				
		Create professional development database.	Nursing department				

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
	Increase awareness of faculty towards the enhancement activities	1. Orient faculty with professional development opportunities	Faculty		Percentage of faculty who perceived having access to enhancement opportunities	100%	AY 2019-2020
		2. Develop blended and online courses for faculty development.					
	Maintain faculty professional development activities.	1. Develop a plan for staff development based on their needs per year.	Nursing department	Faculty enhancement committee	9.2. Proportion of teaching staff participating each year in professional development activities.	100%	AY 2018-2019
		2. Monitor the effectiveness of professional development activities	Faculty		Percentage of faculty who perceived having access to enhancement opportunities	100%	
	Facilitate faculty preparation for application for promotion	1. Orient faculty about requirements for promotion	Nursing department	Dean	Number of faculty who applied for promotion	_____	AY 2020-2021
		2. Submit an annual report of number of candidates for promotion	Faculty	Associate/assistant dean academic and students affairs			

Goal 7: Enrich the quality of college life and sense of community.

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
I. Maintain an environment that increases students' desire and ability to engage in extracurricular activities.	Ensure optimal utilization of available recreation facilities.	1. Assess students' needs regarding extracurricular activities.	Student Affairs	Dean	Student satisfaction with recreation facilities.	3.5/5	AY 2019-2020
		2. Develop a plan based on students' needs.	Surveys	Associate/assistant dean academic and students affairs Students' Affairs			
		3. Report students' utilizations of recreation services.					
		4. Conduct a survey to assess the students' satisfaction with recreation services and extracurricular activities.					
	Conduct a regular student experience survey.	1. Analyze the data collected from the students' experience survey.	Academic Affairs	Associate/assistant dean academic and students affairs	Student response rate to complete student experience survey.	80%	AY 2019-2020
		2. Develop an action plan based on survey result.	Surveys	Students' Affairs			


Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
II. Maintain a positive college environment.	Facilitate the provision of robust academic, social and career counselling and advising services to students.	1. Conduct orientation to students about academic advising and counselling.	Students' Affairs	Associate/assistant dean, clinical affair	Student evaluation of academic and career counselling.	3.5/5	AY 2020-2021
		2. Conduct students' survey to evaluate the effectiveness of academic advising and counselling process per semester.	Well-Student Center	Associate/assistant dean academic and students affairs	Student evaluation of academic and career counselling.	Average rating on the adequacy of academic and career counselling on a five-point scale in an annual survey of students, target is 3.5 or more	
		2.A Develop an action plan based on data analysis.		Academic and Advising unit			
		3. Establish counselling unit with psychologist in Jeddah and Al Ahsa		Assistant Dean of Clinical Affairs			
		4. Conduct an annual Career Counselling Day for all undergraduate students attended by employers and experts in job markets.					

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
	Maintain an open-door policy.	1. Orient students, faculty, and staff about the open door policy.	Executive Committee	Dean	Faculty satisfaction rate with open door policy.	3.5/5	AY 2019-2020
		Associate/assistant dean academic and students affairs					
		2. Develop a structured schedule meeting between the top management and students, faculty, and staff.		Students' Affairs	Admin assistants satisfaction rate with open door policy.	3.5/5	
					Students satisfaction rate with open door policy.	3.5/5	
Sustain the use of suggestions box for faculty, staff and students.	1. Develop guidelines for using the suggestion box.	IT Unit	Executive committee	Number of suggestions received.	_____	AY 2019-2020	
							Associate/assistant dean academic and students affairs
		Students' Affairs					
	2. Orient students, faculty, and staff to use the suggestion box.						

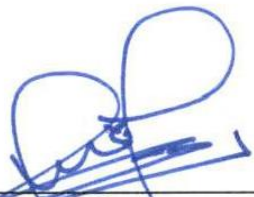
Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
		3. Communicate considered suggestions to students, faculty, and staff through regular meetings and CON website.	CON Public Relation				
	Activate a student appeal and grievance committee.	1. Orient the faculty/ staff and students about the appeal and grievance committee	Nursing Department	Dean	Student response rate to complete student Experience Survey.	80%	AY 2020-2021
		2. Evaluate students' feedback regarding the effectiveness of student appeal and grievance committee.	Academic advisor Students affairs Appeal Committee	Associate/assistant dean academic and students affairs			
	Conduct annual faculty and staff satisfaction survey.	1. Analyze data collected by the faculty and staff satisfaction survey.	Academic Affairs/ Clinical Affairs/ Administration Assistant	Dean	Faculty response rate to complete faculty experience survey.	80%	AY 2019-2020
		2. Develop an action plan based on survey results.		Associate/assistant dean academic and students affairs	Satisfaction rate of faculty		
				Nursing department	(Faculty experience survey results).		

Objectives	Projects/ Initiative	Action	Requirements Resources/ Support	Primary Responsible	KPI	KPI Target	Completion Date
	Provide faculty, staff and students orientation.	1. Conduct orientation program for faculty, staff, and students.		Nursing department	Percentage of faculty who attended the orientation.	100%	AY 2017-2018
		4. Monitor the effectiveness of the orientation program for faculty, staff, and students.		Faculty enhancement committee	Percentage of staff and students who attended the orientation.	100%	
		5. Modify the orientation program based on faculty, staff, and students feedback			Percentage of students who attended the orientation.	100%	
	Develop and implement risk assessment and risk management.	1. Draft risk management plan to include academic, research, community, administration and campus environment.	Faculty	Dean	Finalize the risk assessment and management plan.		AY 2019-2020
		2. Review risk management plan	Taskforce for Risk Management	Associate dean, academic and student affairs			
		3. Get the approval for the risk management plan					
		4. Activate the risk management plan					


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