



DOW MEDICAL COLLEGE
DOW UNIVERSITY OF HEALTH SCIENCES

STRATEGIC PLAN

(2024 - 2027)

Pioneering Excellence | Inspiring Innovation



DOW MEDICAL COLLEGE
DOW UNIVERSITY OF HEALTH SCIENCES



To Heal | To Educate | To Discover

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PRINCIPAL'S MESSAGE

Dow Medical College is one of Pakistan's most renowned institutions for medical education. As the Principal of this prestigious Institute, it is an honor to introduce ourselves to the reader. Dow Medical College is housed in a purpose-built facility with all the basic and clinical departments, the latter housed in the affiliated Dr. Ruth KM Pfau Civil Hospital Karachi, as well as fully equipped lecture halls, laboratories, and museums, in addition to a well-equipped undergraduate Skills Lab with moderate to high fidelity simulation and another High-fidelity Simulation Centre for clinical skills learning and practice. The faculty is experienced and qualified, with highly renowned personalities.

The purpose of the Institute is to produce good quality doctors who can address health-care problems efficiently via exhibiting important competencies like medical knowledge, critical and analytical thinking, research, teamwork, communication skills, technical skills, and patient care. It attempted to achieve the purpose through integrated teaching of basic and clinical sciences using the available and emerging technology. We also believe in fostering lifelong learning through self-directed and independent learning among our medical students.

Our high standards are reflected by our graduates, who are serving the world all over, bringing global recognition and respect to the Institute. Quality medical education, outstanding patient care, and cutting-edge research in areas of interest are the core values of this institute, which form the foundation of a vibrant future and create a heritage of excellence that surpasses all expectations.

EXECUTIVE SUMMARY

The Dow Medical College is an established medical teaching institute with high principles. It has an integrated medical spiral modular curriculum with a problem-based learning approach and experiential learning. The College has essential facilities, knowledgeable and experienced Faculty, infrastructure, and an alliance with the Dr. K. Ruth Pfau Civil Hospital Karachi, which is the province's largest tertiary care hospital providing healthcare facilities to the old city, and with The SMBB Institute of Trauma-only one of its kind in Public Sector in Pakistan. Having stipulated the delivery of quality education and training as our core mission, we have in this document articulated the strategic steps that will guide us for the next three years that would lead to attaining the stated goals.

This updated strategic plan Dow Medical College aims to progressively transform this Institute into a modern medical school and meet its mission in the field of medical teaching, which will also contribute to the University's achievements and mission by utilizing emerging technologies to enhance the learning and teaching experience and better ranking with the Regulatory Body.

Apart from the emphasis on delivering a high-standard medical curriculum, it also intends to utilize technology to overcome the challenges of faculty recruitment.

Research is included as a mandatory part of the curriculum, and the Fourth Professional year batch must do mandatory and mentored research. The faculty, staff, and students are encouraged to play an effective role in community welfare services through many welfare projects of the student societies, health screening and awareness programs, environment-friendly campaigns, and extended help in natural disasters. We focus on the continuous development of the administrative staff through administrative, English language, and skill development courses.

Inspired by the bold vision outlined in the University's Strategic Plan, DMC intends to bring into place an engaging process employing representatives of all stakeholders that would facilitate the accomplishment of the University's vision in a timely fashion. The strategic objectives for Dow Medical College will be 80-90% student satisfaction by the year 2027, increase DMC faculty's (and students') research publication by 25%, acquire incremental research grant by 5-10% of the faculty and achieve top tier ranking (>90% score) from Regulatory Bodies (PMDC and HEC), increase the faculty and student use of LMS accreditation to 100%, and conduct periodic professional course for the nonacademic staff.

To achieve these goals, a Vigilance Committee will be constituted by January 2025 to review the progress and achievements periodically, as given in the break-up under each goal.



ABOUT THE INSTITUTE

History:

Dow Medical College was established in 1945 by converting the old medical school of Hyderabad, which was originally started by Dr. Homstead in 1881.

Subsequently, the College was shifted to function in the old N.J.V. High School Building, Karachi, at the beginning of 1946. The College was named after Sir Hugh Dow, the then Governor of Sindh. Soon after, Civil Hospital Karachi was attached as a teaching hospital for the College and was affiliated to the University of Bombay.

After the creation of Pakistan, the College was affiliated with Sindh University at Karachi from December 1947 till 1951. When Karachi University came into existence, the College was affiliated with Karachi University in December 2003. Dow University of Health Sciences was created, and since then, Dow Medical College has been a constituent institute.

INTRODUCTION & OVERVIEW

Dow Medical College is the 2nd Oldest Medical College in Pakistan, established in 1945. Dr. K. Ruth Pfau Civil Hospital Karachi has a bed strength of 1760 with 150 beds at SMBB Institute of Trauma. The daily OPD turnover of CHK is 7000-7500; the bed occupancy rate is 98%. Family Medicine Centers, which are equivalent to RHU/basic HU, are in the heart of the community at Chanesar Goth and Hijrat Colony.

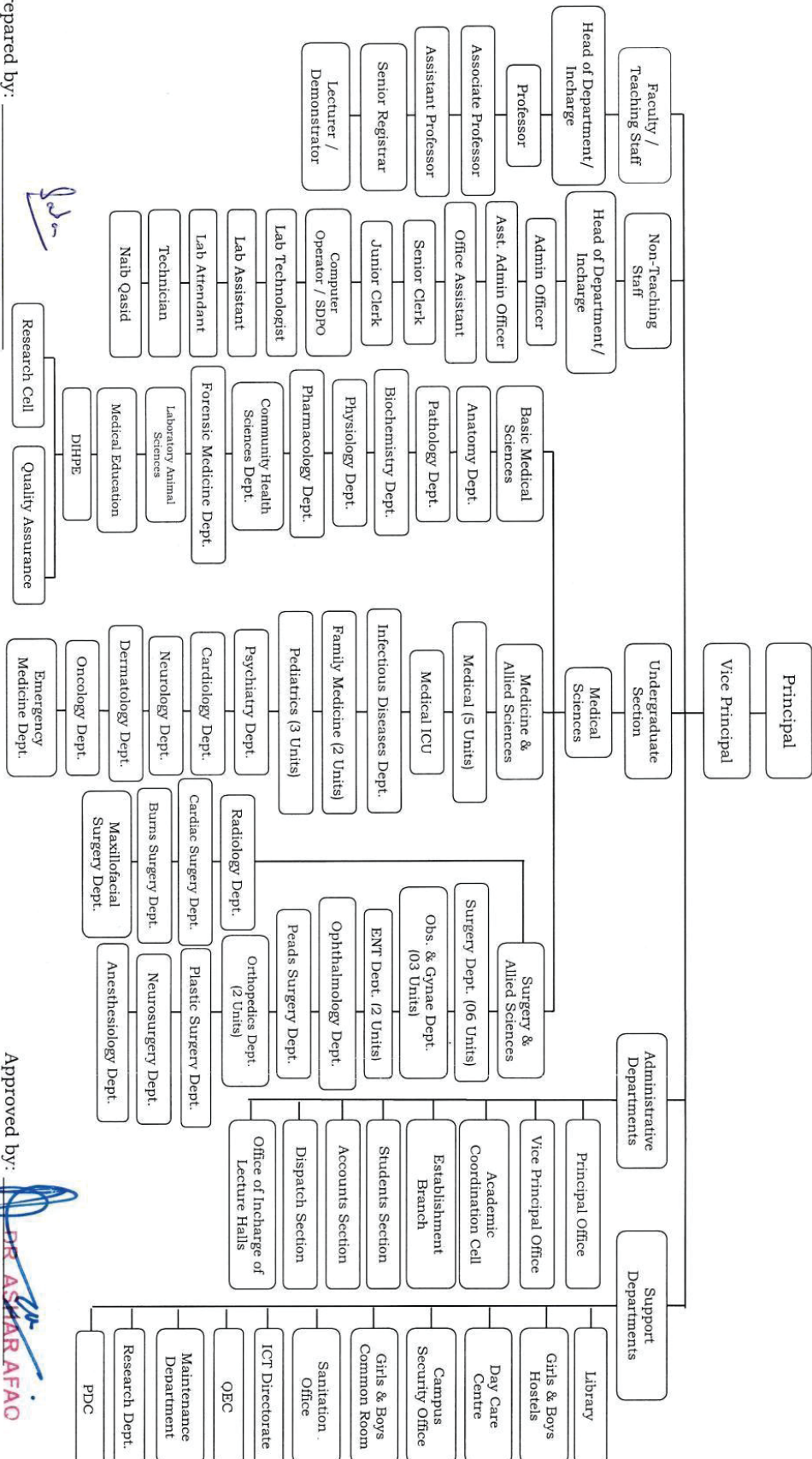
- At present, there are 206 faculty members, including 43 Professors, 36 Associate Profs., 91 Assistant Profs., 16 Senior Registrars, and 20 Lecturers and Senior Lecturers.
- Basic Sciences include well-equipped departments of Anatomy, Physiology, Biochemistry, Pharmacology, Pathology, Forensic and Community Medicine.
- Clinical Sciences include Departments of Internal Medicine, Infectious Disease, Family Medicine, Pediatrics, Neurology, Cardiology, Dermatology, Oncology, Emergency Medicine, Rheumatology, Psychiatry, General Surgery, Gynecology & Obstetrics, Otorhinolaryngology, Ophthalmology, Neurosurgery, Cardiac Surgery, Pediatric Surgery, Plastic Surgery, Burns, Radiology, Anesthesiology, and Orthopedics. Pediatric cardiology and oncology services are also available as subunits of the Pediatrics department. The Department of Medical Education has been added to the DMC for evaluation and improving curriculum implementation and assessments. Moreover, Dow Institute of Health Professional Education has a dedicated presence at the DMC campus, further enhancing the skills of the teachers.
- There are over 492 clinical postgraduates and 350 house officers working in all specialties.
- Other facilities like Reference Library, Reading halls, digital learning center, digital library smart classroom and separate common rooms for boys and girls, and indoor sports facilities like squash court, basketball, volleyball, and table tennis in common rooms. A mini-gymnasium project and student plus faculty wellbeing facility are in the pipeline.
- The undergraduate student-led tumor Boards TEFF is a well-known initiative started by the graduating batch of 2022.
- A children's daycare facility is available on the premises, which is one of its kind in a public sector medical college.
- Video-conferencing room is also operational.
- Ramps and elevators have been planned and installed to help those with different abilities.
- There is a modern high-fidelity simulation laboratory with state-of-the-art adult, pediatric, and obstetric simulators for undergraduate as well as postgraduate training. In addition, there is an undergraduate Skill Lab with medium- to -high--to-fidelity simulators for clinical skills training in the pre-clinical years, while the Pharmacology and Physiology departments are also equipped with power labs for practical training.



ORGANOGRAM
Dow Medical College
Dow University of Health Sciences, Karachi



ORGANOGRAM OF DMC (SUMMARIZED)



Prepared by:

Principal, DMC
Dow Medical College & Civil Hospital
KARACHI.

Approved by:

DR. ASHRAF AFAO
Registrar, DUHS
Dow University of Health Sciences,
Karachi

TOTAL FACULTY, ADMINISTRATIVE & SUPPORTING STAFF OF DOW MEDICAL COLLEGE

Total Faculty & Support Staff of Dow Medical College	
Basic Departments	
Total Professor in Basic Departments	12
Total Associate Professor in Basic Departments	7
Total Assistant Professor in Basic Departments	22
Total Lecturer in Basic Departments	34
Total Administrative and Support Staff in Basic Departments	54
Total Faculty & Staff in Basic Departments	129
Clinical Departments	
Total Professor in Clinical Departments	29
Total Associate Professor in Clinical Departments	22
Total Assistant Professor in Clinical Departments	78
Total Senior Registrar in Clinical Departments	23
Total W.M.O in Clinical Departments	4
Total Psychologist in Clinical Departments	2
Total Occupational Therapists in Clinical Departments	1
Total Medical Technologist in Clinical Departments	1
Total Administrative & Support Staff in Clinical Departments	76
Total Faculty & Staff in Clinical Departments	236
Administrative Departments	
Total Administrative & Support Staff in Administrative Departments	87
Total Faculty & Staff in Basic, Clinical & Administrative Departments	452

Total Number of Enrolled Students in 2023-24 Session

S. NO.	CLASS	TOTAL STUDENTS
1	1ST PROFESSIONAL MBBS 2023	367
2	2ND PROFESSIONAL MBBS 2023	352
3	3RD PROFESSIONAL MBBS 2023	331
4	4TH PROFESSIONAL MBBS 2023	329
5	FINAL PROFESSIONAL MBBS 2023	330
TOTAL		1709



SECTION I: OVERVIEW OF THE STRATEGIC PLANNING PROCESS

The strategic planning process at Dow Medical College (DMC) is designed to enhance medical education, research, and healthcare services. It begins with aligning objectives to its mission, engaging stakeholders, and conducting a situational analysis to assess strengths, weaknesses, opportunities, and challenges.

Key priorities include curriculum modernization, faculty development, research expansion, digital learning integration, and infrastructure improvements. The plan is implemented in phases, ensuring efficient resource allocation and fostering collaborations with national and international institutions.

Progress is tracked through key performance indicators (KPIs) to allow timely adjustments. With a strong focus on sustainability, innovation, and accessibility, the strategic plan ensures DMC's continued excellence in medical education and patient care while adapting to evolving healthcare needs.



SECTION II: VISION, MISSION, AND VALUES

One of the principal objectives of the strategic planning process was the articulation and communication of the fundamental purpose of the University. It is the construct within which challenges and opportunities are examined and analyzed, strategic issues framed, and strategic goals and thrusts articulated. It is also the process through which the plan is implemented and the lens that ultimately evaluates its effectiveness. The primary components of the University's purpose are its vision, mission, and values.

VISION

To be a pre-eminent academic institution committed to
changing and saving lives

MISSION

Providing outstanding patient-centered education, training and
clinical care informed by cutting-edge research and innovation
generating and disseminating new knowledge

VALUES

CUSTOMER SERVICE

- o Put patients & students first

EMPATHY & COMPASSION

- o Understand before you judge
- o Be concerned for sufferings & misfortunes of others

EXCELLENCE

- o Be the best and commit to exceptional quality and service

INNOVATION

- o Encourage curiosity, imagine, create and share

TEAMWORK

- o Engage & collaborate

INTEGRITY & LEADERSHIP

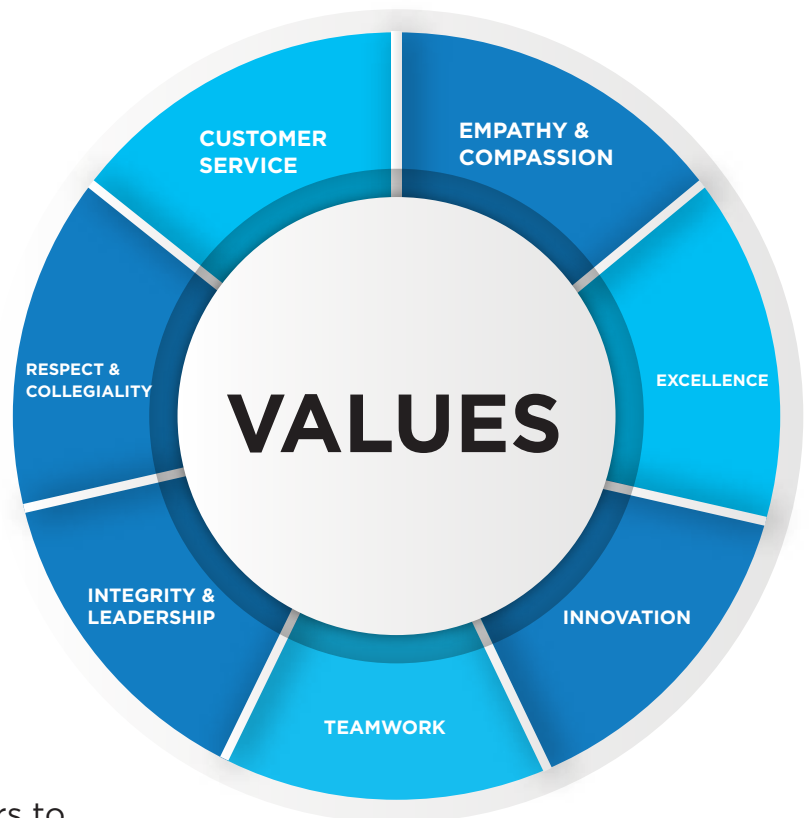
- o Be a role model and influence others to achieve their best
- o Have the courage to do the right thing
- o Hold yourself and others accountable

RESPECT & COLLEGIALLY

- o Be kind
- o Listen to understand
- o Value different opinions

STATEMENT OF PURPOSE

To produce a highly competent medical graduate who can provide healthcare and contribute to the community's welfare, exhibiting the traits of all the DUHS values stated above.





SECTION III: ASPIRATIONAL INSTITUTIONS

Different parameters were used to list our aspirational peers. Following national and international aspirational peers were chosen who share our vision, mission, and core values.

Local: The Aga Khan University, Karachi. Army Medical College, NUMS

Rationale:

Army Medical College stands out as an aspirational Institution for regional medical institutions due to its exemplary fulfillment of the Pakistan Medical and Dental Council (PMDC) criteria. Being a public sector medical institution, AMC consistently meets or exceeds the PMDC's criteria for faculty qualifications, infrastructure, curriculum, and clinical training facilities, ensuring that its educational program meets the highest regulatory standards. In private-sector medical institutions. Aga Khan University serves as an aspirational institution for other regional medical colleges due to its excellence in medical education. AKU's medical college maintains high standards of academic excellence, with a rigorous curriculum designed to produce well-rounded and competent healthcare professionals. The institution places a strong emphasis on evidence-based practice, critical thinking, and practical skills development, setting a benchmark for quality medical education that other colleges aspire to emulate.

International: King Abdul-Aziz University, Jeddah, Kingdom of Saudi Arabia.

Rationale:

King Abdul-Aziz University is ranked 143 in QS World University Rankings by Top Universities and has an overall score of 4.1 stars, according to student reviews on Study portals, the best place to find out how students rate their study and living experience at universities from all over the world.

SECTION IV: STRATEGIC GOALS

Goal I: Deliver World-Class Undergraduate and Postgraduate Education

- Objective 1: Enhance curriculum for 21st-century healthcare
- Objective 2: Leverage Technology for Education Enhancement
- Objective 3: Increase Faculty Training in Digital and Clinical Education Tools
- Objective 4: Enhance Student Satisfaction
- Objective 5: Implement Student-Centered Support Systems

Goal II: Strengthen Research Capacity and Innovation

- Objective 1: Identify Key Research Focus Areas
- Objective 2: Expand Funding for Research and Innovation
- Objective 3: Enhance Faculty and Student Research Skills
- Objective 4: Establish International Research Partnerships

Goal III: Expand and Enhance Community Engagement

- Objective 1: Encourage Faculty and Student Community Involvement
- Objective 2: Develop Health Education Programs for the Community

Goal IV: Recruit, Retain, and Develop a Skilled and Motivated Workforce

- Objective 1: Establish a Faculty Development Center
- Objective 2: Enhance Faculty Retention through Timely Promotion
- Objective 3: Streamline Recruitment Processes

Goal V: Achieve International Accreditation and Benchmarking Excellence

- Objective 1: Secure International Accreditation
- Objective 2: Benchmark Against Top Medical Schools
- Objective 3: Develop Accreditation-Ready Programs

Goal VI: Ensure Financial Sustainability and Expand Revenue Streams

- Objective 1: Expand External Funding for Research and Programs
- Objective 2: Develop Commercially Viable Educational Programs
- Objective 3: Build Alumni and Community Support for Scholarships

Goal VII: Implement Robust Monitoring and Accountability Systems

- Objective 1: Establish a Strategic Plan Oversight Committee
- Objective 2: Develop a Real-Time Monitoring Dashboard
- Objective 3: Implement Corrective Action Protocols
- Objective 4: Conduct Annual Strategic Plan Reviews

OBJECTIVES, OKRs & KPIs

Goal 01: Deliver World-Class Undergraduate and Postgraduate Education							
Goal Statement: Provide quality medical education that is globally competitive and prepares students for the demands of 21st-century healthcare by integrating advanced teaching methodologies, technology-driven learning, and continuous curriculum enhancement.							
Objectives & Key Results (OKRs)							
Objective 1: Enhance curriculum for 21st-century healthcare							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Update DMC's curriculum to include interdisciplinary and evidence-based learning methods, incorporating PMDC and HEC standards to meet global medical education requirements.	KR1.1: Complete curriculum alignment with PMDC and HEC by 2025.	KPI 1.1: Percentage of curriculum aligned with PMDC/HEC standards.	Curriculum Review Committee Reports and CRC Committee Minutes	Complete curriculum by the end of 2025 as per the set benchmark	[CRC]		100% 2025
	KR1.2: Integrate humanities courses by Q4 2025.	KPI 1.2: Number of interdisciplinary and humanities courses introduced.	CRC Committee Minutes		[CRC]		20% by Q4 2025
Objective 2: Leverage technology for education enhancement							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Implement AI-driven educational tools/VR simulations, by 2025 to create engaging, interactive learning experiences.	Integrate AI-driven tools and VR simulations in at least 50% of teaching departments by the end of 2025	KPI 2.1: Percentage of Departments Using AI/VR: Target of 50% of departments by 2025.	Departmental meetings log and minutes Progress reports	25% use of AI-driven or other advanced technologies	Department -al heads	Funds + AI tools are to be provided by the university	20% yearly increase
		KPI 2.2: Utilization Rate of Tools: Number of courses actively using AI/VR tools (tracked through LMS).					
		KPI 2.3: Completion Rate of Integration Plan: Percentage of milestones achieved in the integration roadmap.					

Objective 3: Increase Faculty Training in Digital and Clinical Education Tools							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Train 50% of faculty in AI and clinical simulation technologies by 2025 to ensure educators are prepared for modern, tech-integrated instruction.	KR3.1: Complete training for 50% of faculty by 50% 2025	KPI 3.1: Increase in the percentage of faculty trained in digital and clinical tools.	% of Increase		Principal office DIHPE	Training software, trainers, technical support.	50% Dec-25
	KR3.2: Achieve 50% proficiency in digital and clinical tools by the end of 2025.	KPI 3.2: Faculty confidence scores post-training.	% of Increase				
Objective 4: Enhance Student Satisfaction							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Achieve an 80% student satisfaction rate by 2026 by developing improved feedback mechanisms, upgrading course content, and enhancing support services.	KR 4.1: Develop a feedback system for courses and support services by mid-2025.	KPI 4.1: Student satisfaction rate.	Semester-end satisfaction surveys, and feedback analysis.	80% satisfaction by December 2026.	QEC Principal office	Survey tools, feedback analysis team, and communication platform for updates.	Dec-26
	KR 4.2: Implement improvements based on feedback by the end of 2025 and monitor quarterly.	KPI 4.2: Number of improvements implemented based on feedback.					
Objective 5: Implement Student-Centered Support Systems							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Establish a structured mentorship and peer-teaching program by 2025 to improve academic performance and build a supportive learning environment.	KR 5.1: Develop program guidelines and recruit mentors by Q2 2025.	KPI 5.1: Number of students and faculty participating in the mentorship program.	Participation logs, and student feedback surveys.	50% participation by December 2025.	Principal office Faculty, Students	Program coordinator, training resources, online mentorship platform.	50% by Dec-25
	KR 5.2: Achieve 50% student participation in the program by year-end 2025.	KPI 5.1: Student satisfaction scores related to academic support.					

Strategic Goal 2: Strengthen Research Capacity and Innovation							
Goal Statement: Establish DMC as a leader in medical research by expanding research opportunities, focusing on key areas such as public health, communicable diseases, maternal and child health, and fostering partnerships that support innovation and global collaboration.							
OKR (Objective and Key Results)							
Objective 1: Identify Key Research Focus Areas							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Designate communicable diseases, and maternal and child health as signature research areas, with clear milestones and funding targets by 2025.	KR 1.1: Publish focus areas and establish support plans by mid-2025.	KPI 1.1: Number of established research focus areas.	Research reports, faculty feedback.	Key areas will be designated and supported by December 2026.	Faculty / Principal Office	Research team, administrative support	2025–2026
	KR 1.2: Ensure active research initiatives in each focus area by 2026.	KPI 1.2: Number of support plans developed.					
Objective 2: Expand Funding for Research and Innovation							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Secure 5 million in external research funding by 2026 to support identified research areas, with ongoing efforts to diversify funding sources.	KR 2.1: Obtain at least 1 million in government grants by 2025.	KPI 2.1: Total research funding secured.	Financial reports, partnership agreements.	5 million by December 2026.	Faculty / Principal Office / ORIC	Grant writers, funding databases, proposal review team.	Dec-26
	KR 2.2: Establish 3 new research partnerships by 2026.	KPI 2.2: Number of new partnerships.					
Objective 3: Enhance Faculty and Student Research Skills							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Develop a training program by 2025 that builds research capacity among faculty and students, covering proposal writing, data analysis, and collaboration techniques.	KR 3.1: Launch training modules by Q1 2025.	KPI 3.1: Number of faculty and students trained.	Training records, project output.	50% participation by December 2026.	HODs / Principal Office	Trainers, research tools, training modules.	Dec-26
	KR 3.2: Reach 50% faculty and student participation by 2026.	KPI 3.2: Number of new research projects post-training.					

Objective 4: Establish International Research Partnerships							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Form partnerships with at least one international research institution by 2025 to foster knowledge sharing, collaborative research, and access to advanced resources.	KR4.1: Identify and approach five target institutions by Q1 2025.	KPI 4.1: Number of international partnerships established.	Partnership agreements, and research project records.	Three partnerships by December 2026.	Faculty / Principal Office	Partnership development team, legal support, travel budget for meetings.	Dec-26
	KR4.2: Finalize at least three formal partnership agreements by year-end 2025.	KPI 4.2: Number of collaborative research projects launched.					

Strategic Goal 3: Expand and Enhance Community Engagement							
Goal Statement: Increase DMC's positive impact on community health by launching specific, measurable initiatives that address healthcare disparities and improve accessibility to health services, particularly in underserved areas.							
OKR (Objective and Key Results)							
Objective 1: Encourage Faculty and Student Community Involvement							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Implement a volunteer program for faculty and students to participate in local health outreach, with at least 50% involvement by 2025.	KR1.1: Develop program and incentives by Q1 2025.	KPI 1.1: Participation rate in community programs.	Volunteer logs, community feedback.	50% participation by December 2025.	Principal Office, Faculty, Students.	Event resources, volunteer management software.	Dec-25
	KR1.2: Reach 50% participation by December 2025.	KPI 1.2: Number of community events supported by volunteers.					
Objective 2: Develop Health Education Programs for the Community							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Offer biannual health education workshops on chronic diseases by 2025, reaching 5,000 community members each year.	KR2.1: Develop and launch the first set of workshops by Q2 2025.	KPI 2.1: Number of workshops conducted.	Attendance records and post-workshop surveys.	5,000 community members are reached annually.	Faculty and Students.	Health education materials, workshop facilitators, and community outreach support.	2025 onward
	KR 2.2: Engage 10,000 community members annually starting in 2025.	KPI 2.2: Total number of attendees per year.					

Strategic Goal 4: Recruit, Retain, and Develop a Skilled and Motivated Workforce							
Goal Statement: Cultivate a high-quality, engaged workforce by implementing comprehensive recruitment, retention, and professional development strategies that make DMC a premier employer in medical education.							
OKR (Objective and Key Results)							
Objective 1: Establish a Faculty Development Center							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Create a center by 2025 offering career mentoring, leadership training, and structured research sabbaticals to support continuous faculty development.	KR 1.1: Complete facility set up by Q2 2025.	KPI 1.1: Operational status of the Faculty Development Center.	Facility reports and program attendance logs.	100% operational by 2025, 5 programs annually	Principal office along with ORIC, PMRC, Research office, DME	Facility space, AV equipment, program designers.	2025–2026
	KR 1.2: Launch five development programs annually by 2026.	KPI 1.2: Number of programs conducted.					
Objective 2: Enhance Faculty Retention through Timely Promotion							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Develop a competitive incentive and recognition program by 2025, targeting a 20% improvement in faculty retention over three years.	KR 2.1: Design and implement a faculty incentive plan by Q2 2025.	KPI 2.1: Faculty turnover rate.	Annual faculty retention reports and satisfaction surveys specific to the incentive program.	20% improvement in retention by December 2026.	HR	Budget allocation for incentives, HR personnel for program management.	Dec-26
	KR 2.2: Achieve a 20% improvement in faculty retention by 2026 through retention-focused incentives.	KPI 2.2: Satisfaction scores related to the new incentive program.					
Objective 3: Streamline Recruitment Processes							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Introduce a transparent and efficient recruitment process by 2025 that reduces hiring time by 5% and emphasizes hiring in critical areas of need.	KR3.1: Implement a streamlined recruitment process by Q3 2025.	KPI 3.1: Average time to hire.	Recruitment process reports and quarterly hiring analysis.	5% reduction in hiring time by December 2026.	HR	Recruitment software and additional HR staff for streamlined processes.	Dec-26
	KR3.2: Achieve a 30% reduction in recruitment time by year-end 2026.	KPI 3.2: Number of new hires per quarter.					

Strategic Goal 5: Achieve International Accreditation and Benchmarking Excellence							
Goal Statement: Position DMC among the top medical schools globally by pursuing international accreditations and benchmarking against high-ranking institutions to continuously elevate standards in medical education and research.							
OKR (Objective and Key Results)							
Objective 1: Secure International Accreditation							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Achieve PMDC and one additional international accreditation by 2025 to enhance DMC's global standing.	KR 1.1: Fulfill all PMDC requirements by Q4 2024.	KPI 1.1: Accreditation status with PMDC and international bodies.	Accreditation inspection reports and annual compliance checks.	Full compliance by December 2025.	DME,QEC, Principal office	Accreditation consultants, dedicated quality control team.	Dec-25
	KR 1.2: Obtain international accreditation by December 2025.	KPI 1.2: Percentage of criteria met for each accreditation.					
Objective 2: Benchmark Against Top Medical Schools							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Establish a benchmarking framework by 2025 to evaluate DMC's performance against QS World University Rankings.	KR 2.1: Conduct a benchmarking analysis by Q27 2025.	Improvements in key performance metrics.	Benchmarking reports and progress evaluations.	As of university	DME,QEC, Principal office	Benchmarking tools, quality assurance team.	Dec-26
	KR 2.2: Improve on three key performance indicators (curriculum quality, research output, faculty qualifications) by 2026.						
Objective 3: Develop Accreditation-Ready Programs							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Implement improvements in the key academic program by 2026 to ensure compliance with international accreditation standards.	KR 3.1: Complete curriculum and operational updates in targeted programs by Q3 2026.	KPI 3.1: Percentage of programs meeting accreditation criteria.	Program audit reports and accreditation compliance checks.	Full compliance by December 2026.	DME,QEC, Principal office	Accreditation consultants, program review committee, training for faculty.	Dec-26
	KR 3.2: Achieve full accreditation compliance for all programs by the end of 2026.	KPI 3.2: Number of improvements implemented in targeted programs.					

Strategic Goal 6: Ensure Financial Sustainability and Expand Revenue Streams							
Goal Statement: Strengthen DMC’s financial base by diversifying revenue streams, establishing endowments, and creating funding opportunities to support scholarships, research, and faculty development.							
OKR (Objective and Key Results)							
Objective 1: Expand External Funding for Research and Programs							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Increase government and private-sector grants by 25% by 2026 to support research and educational initiatives.	KR 1.1: Secure three new grant partnerships by 2025.	KPI 1.1: Total funding raised through grants.	Annual funding reports and partnership agreements.	25% funding increase by December 2026.	Faculty Departments Heads	Grants team, relationship management tools, proposal writers.	Dec-26
	KR 1.2: Achieve a 50% funding increase by year-end 2026.	KPI 1.2: Number of new partnerships established.					
Objective 2: Develop Commercially Viable Educational Programs							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Introducing fee-based certification and online courses by 2025 to generate an additional revenue stream	KR 2.1: Launch at least two fee-based certification programs by Q4 2025.	KPI 2.1: Number of fee-based courses launched.	Enrollment data and revenue reports from programs.	500 students enrolled by December 2025.	PDC	Curriculum designers, marketing team, online learning platform.	Dec-25
		KPI 2.2: Total enrollment in commercial programs.					
Objective 3: Build Alumni and Community Support for Scholarships							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Launch an alumni/philanthropist-driven scholarship program by 2025, providing financial aid to 20 students annually by 2027.	KR 3.1: Establish alumni scholarship fund by Q4 2025.	KPI 3.1: Total number of scholarships awarded.	Annual scholarship distribution records and alumni donation tracking.	Scholarships will be given to all needy students annually by 2027	Alumni Department, Principal Office	Alumni relations team, scholarship fund management, fundraising events.	2025–2027
	KR 3.2: Provide scholarships to 100 students per year by 2027.	KPI 3.2: Amount of funds raised through alumni contributions.					

Strategic Goal 7: Implement Robust Monitoring and Accountability Systems							
Goal Statement: Ensure effective implementation of the strategic plan by establishing rigorous tracking, reporting, and accountability mechanisms that guide timely adjustments and maintain alignment with goals.							
OKR (Objective and Key Results)							
Objective 1: Establish a Strategic Plan Oversight Committee							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Form a dedicated committee by 2025 responsible for quarterly reporting and real-time KPI tracking, with direct reporting to the principal.	KR 1.1: Conduct quarterly reviews of all strategic plan objectives starting Q2 2025.	KPI 1.1: Number of quarterly reviews completed.	Committee meeting minutes and progress reports.	Quarterly reviews and biannual reports beginning in 2025.	Strategic Planning Committee Chair,	Committee meeting space, reporting software, administrative support.	Jul-25
	KR 1.2:Publish biannual progress reports beginning 2026.	KPI 1.2: Frequency and quality of progress reports published.					
Objective 2: Develop a Real-Time Monitoring Dashboard							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Create a digital dashboard by 2025 for tracking progress on key metrics, accessible to all stakeholders for transparent monitoring.	KR 2.1: Launch an interactive KPI dashboard by Q4 2025.	KPI 2.1: Dashboard usage rate by departments.	User access logs and KPI tracking reports.	Full department usage by December 2025.	Digital Learning Centre IT	Software developers, training staff, and data integration tools.	Dec-25
	KR 2.2: Train 100% of department heads on using the dashboard by year-end 2025.	KPI 2.2: Number of KPIs tracked in real-time.					
Objective 3: Implement Corrective Action Protocols							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Introduce a corrective action protocol by 2025 to address delays or challenges in meeting milestones, ensuring timely adjustments to stay on track.	KR 3.1: Develop corrective protocols by Q1 2025.	KPI 3.1: Number of corrective actions implemented timely.	Protocol usage reports and training completion logs.	100% trained project leads by Q3 2025.	SPCC+OC	Training resources and project management tools.	Sep-25
	KR 3.2: Train 100% of project leads in corrective protocols by Q3 2025.	KPI 3.2: Percentage of project leads trained on protocols.					

Objective 4: Conduct Annual Strategic Plan Reviews							
Objective	Key Results	KPI	Measurement Method	Target	Person Responsible	Resource Requirement	Timeline
Conduct comprehensive reviews each year, beginning in 2025, to assess achievements, challenges, and necessary adjustments for the upcoming year.	KR 4.1: Complete the first strategic plan review by the end of Q4 2025.	KPI 4.1: Number of objectives reviewed and updated annually.	Review reports and implementation logs.	100% of objectives reviewed annually starting 2025.	Strategic Planning Committee (DMC) Principal Office	Strategic planning team, data analysis tools, and report preparation resources.	2025 onward
	KR 4.2: Identify and implement improvements based on review findings by Q1 for the following year.	KPI 4.2: Number of corrective actions or adjustments implemented.					



SECTION V: RESOURCE PLANNING FOR ACHIEVING STRATEGIC GOALS

To maximize the effective and efficient use of current resources and identify new sources as well as to continue to identify new sources, the institute will try to:

- (1) Establish priorities for expenditures that are informed and guided by the University's Master Strategic Plan.
- (2) Improve the working environment by providing all possible facilities to the faculty like computers with internet and printers, and training in AI etc.
- (3) Allocate enough budget to start and continue academic/extracurricular activities both for the faculty members and students.
- (4) Create alternative sources of funding through new and innovative undergraduate programs, e.g., by arranging CME/CPD programs with PDC.

SECTION VI: IMPLEMENTATION AND MONITORING OF STRATEGIC PLAN

A Vigilance Committee will be established to conduct periodic reviews and monitor progress toward targets and achievements. The TOR of the committee would be but not limited to the following.

- (1) Monitoring the implementation efforts.
- (2) Report results timely.
- (3) Take correct actions and measures as and when necessary to ensure success.
- (4) Employ meaningful indicators of progress (KPI; Key Performance Indicators) according to the DMC Strategic Plan, in line with DUHS.
- (5) Accomplish tasks/goals /milestones as set by the University by influencing and guiding them according to the reports created with the help of KPI.
- (6) Report to VC, University Senate, and Syndicate regularly through the Principal DMC.

SECTION VII: LIST OF APPENDICES

No.	DESCRIPTION
A	LIST OF RESEARCH SUPERVISORS
B	SWOT ANALYSIS
C	TOWS MATRIX

APPENDIX A: LIST OF RESEARCH SUPERVISORS

RESEARCH PROJECTS

- i- 24 research projects assigned to the 4th year students in the year 23-24.- details with the Research department
- ii- Faculty research project details are with ORIC

LIST OF RESEARCH SUPERVISORS

FINAL YEAR FOR THE RESEARCH PRESENTATION 2022, DMC (DUHS)

S.No	Name Of Supervisors	Department	C.G Group	Title
1	Dr. Naseem Ahmed	Pathology	A-1	Paternal postpartum depression and its associated risk factors in Karachi, Pakistan
2	Dr. Nabiya Sandeelo	Medical Unit V	A-2	Assessment of Knowledge and self-Management Practices of Diabetes and its Correlation with the Severity of Recurrent Diabetic Foot Ulcers in a Tertiary Care Hospital in Pakistan
3	Dr. Zahid Ali Memon	Surgical Unit-II DMC/CHK	A-3	Knowledge and awareness of retinitis pigmentosa (RP) in medical students at Dow Medical College
4	Dr. Tanveer Alam	Medical Unit all	B-1	Cardiopulmonary resuscitation Training rates and knowledge Levels among medical students
5	Dr. Lubna Riaz	Forensic Medicine	B-2	Prevalence of Sleep Paralysis Among Health Allied Students of Dow University of Health Sciences
6	Dr. Pawan	Medical unit I	B-3	Awareness and attitude of patients (Diabetic) regarding diabetic foot diseases in Karachi, Pakistan
7	Dr. Saeed	Surgical Unit IV, DMC/CHK	C-1	Determinants of drug abuse amongst medical students

8	Dr. Ghazala Farrukh	Physiology	C-2	Prevalence and risk factors of dry eye disease among medical students in Karachi, Pakistan
9	Dr. Hina Khan	Surgery V DMC/CHK	C-3	Emotional intelligence among medical students: a cross-sectional study from Dow Medical College Karachi, Pakistan.
10	Dr. Amanullah Lail	Pediatrics Unit II	D-1	Factors leading to COVID-19 vaccine hesitancy in Karachi, Pakistan
11	Dr. Syed Dilbar Ali Shah	Cardiology	D-2	Prevalence and Risk Factors of Atrial Fibrillation
12	Dr. Muhammad Ahsan	Biochemistry	D-3	Medical students' understanding and views on lumbar puncture
13	Mr. Syed Arif Ali	School of Public Health	E-1	Perception of female doctors Regarding factors leading to Career discontinuation in Pakistan: a cross-sectional Study
14	Dr. Shazia Nazar	Physiology	E-2	Menstrual migraine among young females in Karachi
15	Dr. Farah Shabiul Hasnain	Obs & Gyn Unit II	E-3	The effect of dysmenorrhea on the academic performance of undergraduate Female students at Dow Medical College.
16	Dr. Nighat Nisar	Community Health Sciences	F-1	The efficacy and safety of typhoid conjugate vaccine in children: a met analysis
17	Dr. Syed M.Ashraf Jahangeer	Med-Unit III DMC/CHK	F-2	Prevalence of imposter syndrome Among undergraduate medicals Students in Sindh, Pakistan, and Its associated factors: Cross-sectional study
18	Dr. Erum Kazim	Surgical Unit-IV DMC/CHK	F-3	Association between gallbladder stone disease and comorbidities such as diabetes and metabolic syndrome: A CROSS-SECTIONAL STUDY

19	Dr. Hargun Das Lakhani	Ophthalmology Unit-I	G-1	Survey on knowledge and attitude of medical students at Dow Medical College, Karachi, regarding refractive Lasik Procedure
20	Dr. Zakiuddin Ahmed	Forensic Medicine	G-2	Change in Perception regarding Euthanasia between Pre-clinical and Clinical years Medical Students: A Cross-Sectional Study
21	Dr. M.Noman	Orthopedic Unit II	G-3	Prevalence Triggers and self-management practices of Migraine and headaches medical students at Dow Medical College
22	Dr . Ali Haider	Surgical Unit-II DMC/CHK	H-1	Digital rectal examination (DRE) - perceptions, Attitudes, barriers, and enablers towards its Performance by undergraduate medical Students in their clinical years
23	Dr. Erum Afaq	Physiology	H-2	Prevalence and association of ADHD & alexithymia Among medical students
24	Dr. Sadia Iqbal	Anatomy	H-3	Knowledge, Attitude, and Practices of Healthcare Professionals towards Postoperative Pain Management in a Tertiary Care Hospital



APPENDIX B:

SWOT ANALYSIS

STRENGTHS (S)	WEAKNESSES (W)
<ol style="list-style-type: none"> 1. Large alumni network 2. Experienced Faculty with a greater sense of association being alumni of DMC Attached clinical hospital with large turnover. 3. Affordable merit-based education 4. Highly focused students 5. Purpose-built campus & infrastructure 6. Technology update – SBE, LMS & Library 7. Brand value – heritage value as one of the oldest and high-ranking medical institutions of the Country. 8. University’s umbrella Support for IT, Medical Education, PDC, and other departments. 9. The student research part of the curriculum faculty research is mandatorily required for promotion. 	<ol style="list-style-type: none"> 1. No separate Medical Education or IT Departments, which is a statutory requirement. 2. Limited financial aid facilities 3. Many students / large size batch – presents disciplinary issues + capacity issues. 4. Maintenance of infrastructure and inability to expand due to heritage building. 5. Limited autonomy 6. Limited sports facility 7. The attached hospital has dual administration financial resources limitations. 8. Governmental ban on recruitment + promotion Faculty and staff burnout, demotivation, and lack of incentives 9. Work ethics and culture 10. Resistance to change (among Faculty + Staff & students)
OPPORTUNITIES (O)	THREATS (T)
<ol style="list-style-type: none"> 1. Scope of development for a new project. 2. Research for available National & International collaboration 3. Professional development initiatives 4. Integration of technology for flexible work arrangement and teaching methodology 5. Establishment of Endowment Chairs in addition to administrative positions in teaching departments. 	<ol style="list-style-type: none"> 1. De-accreditation threat due to faculty shortage. 2. Faculty attrition (leaving and replacing) Sudden regulatory changes by Govt. & the concerned regulatory Body. 3. Limited funds / Budget cuts 4. There is a growing number of financial assistance requests from students due to the current economic downfall.



APPENDIX C: TOWS MATRIX

	OPPORTUNITIES (O)	THREATS (T)
	<ol style="list-style-type: none"> 1. Scope of development for a new project. 2. Research for available National & International collaboration 3. Professional development initiatives 4. Integration of technology for flexible work arrangement and teaching methodology 5. Establishment of Endowment Chairs in addition to administrative positions in teaching departments. 	<ol style="list-style-type: none"> 1. De-accreditation threat due to faculty shortage. 2. Faculty attrition (leaving and replacing) Sudden regulatory changes by Govt. & the concerned regulatory Body. 3. Limited funds / Budget cuts 4. There is a growing number of financial assistance requests from students due to the current economic downfall.
STRENGTHS (S)	SO	ST
<ol style="list-style-type: none"> 1. Large Alumni network 2. Experienced Faculty with a greater sense of association being alumni of DMC Attached clinical hospital with large turnover. 3. Affordable merit-based education 4. Highly focused students 5. Purpose-built campus & infrastructure 6. Technology update – SBE, LMS & Library 7. Brand value – heritage value as one of the oldest and high-ranking medical institutions of the Country. 8. University’s umbrella Support for IT, Medical Education, PDC, and other departments. 9. The student research part of the curriculum Faculty research is mandatorily required for promotion. 	<ul style="list-style-type: none"> • Establishment of Endowed Chairs in addition to administrative positions in teaching departments • Encourage student publication with faculty mentors to improve the University’s ranking • Develop community service screening programs for the patients at CHK and Family care clinics • Faculty authoring books 	<ul style="list-style-type: none"> • Development of a financial assistance fund for students in collaboration with the prominent alumni network of DMC. • Dealing with faculty shortage by taking on board prominent alumni (clinicians and basic science experts) as visiting faculty on a probono basis to avoid deaccreditation. • Active participation in platforms offered by the Regularity Body and collaboration with other stakeholders (Universities at the provincial & national levels) for a combined voice.

WEAKNESSES (W)	WO	WT
<ol style="list-style-type: none"> 1. No separate Medical Education or IT Departments, which is a statutory requirement. 2. Limited financial aid facilities 3. Many students / large size batch – presents disciplinary issues + capacity issues. 4. Maintenance of infrastructure + inability to expand due to heritage building. 5. Limited autonomy 6. Limited sports facility 7. The attached hospital has dual administration financial resources limitations. 8. Governmental ban on recruitment + promotion Faculty and staff burnout – and demotivation & lack of incentives 9. Work ethics and culture 10. Resistance to change (among Faculty + Staff & students) 	<ul style="list-style-type: none"> • Develop student-led mentorship and teaching assistance programs • Bestowing teaching assistant status to the duly qualified medical officers and consultants under CHK. • Establish DOGANA-based need and merit-based financial assistance for DMC students • Develop indoor sports and health facility • Encourage student-led NGOs and alumni to improve the workplace infrastructure in the attached teaching hospital. 	<ul style="list-style-type: none"> • Staff and Faculty attrition • Faculty and staff burnout and demotivation due to lack of incentives and promotions.

