PROFESSIONAL DEVELOPMENT CENTER (PDC)

DOW UNIVERSITY OF HEALTH SCIENCES

STRATEGIC PLAN
(2024 – 2027)

Pioneering Excellence | Inspiring Innovation

To Heal | To Educate | To Discover

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DIRECTOR'S MESSAGE

Our mission is to empower individuals at every stage of their professional journey, equipping them with the knowledge, skills, and resources needed to excel in their respective fields.

Whether you are a student seeking guidance on career pathways, an alumni member looking to stay connected and updated, a staff or faculty member seeking professional growth opportunities, or a doctor aiming to enhance your clinical expertise, our department is here to support you every step of the way.

Through a wide range of workshops, seminars, training programs, and networking events, we strive to foster a culture of continuous learning and development. Our goal is to empower you to reach your full potential and make meaningful contributions to your profession and society at large.

I invite you to explore the various resources and opportunities available through our department and to actively engage in your professional development journey. Together, let us embark on a path of lifelong learning and growth, enriching our lives and the lives of others through our dedication to excellence.

Thank you for being a part of our vibrant professional community. We look forward to supporting you in achieving your goals and aspirations.

Dr. Syed Farjad Sultan

EXECUTIVE SUMMARY

The Professional Development Centre (PDC) at Dow University of Health Sciences (DUHS) was initially created to fulfill the Pakistan Medical and Dental Council (PMDC) curriculum requirements for the Undergraduate Skill Lab (UGSL). Since then, it has expanded to include diverse educational functions, including Continuing Medical Education (CME), Post Graduate Education, and a simulation lab. With its two campuses (DMC and Ojha), the PDC offers a range of services, and the number of employees has grown to 39, contributing to both academic and administrative support.

In November 2023, a strategic planning session was conducted with the goal of enhancing PDC's direction and self-sustainability, ultimately improving the quality of education and training. The planning process focuses on strengthening academic, administrative, faculty development, and resource optimization. The strategic objectives outlined in this plan aim to modernize academic courses, standardize administrative procedures, build national and international collaborations, develop flagship courses for self-sustainability, engage with NGOs and institutions, expand facilities, and promote a culture of fiscal responsibility and team development.

Key goals include revising and updating the UGSL curriculum, forming policies for better administrative efficiency, maintaining international collaborations (such as the American Heart Association), and building commercial training programs to sustain the PDC's growth. With a robust monitoring system in place, progress will be tracked and adjusted as necessary to achieve desired outcomes.

ABOUT PDC

Established in 2004, Dow University of Health Sciences (DUHS) aimed to promote Continuing Medical Education (CME) within its faculty and students. The Professional Development Center (PDC), initially the "Office of CME," commenced its operations in January 2004. This office organized various CME events, including lectures, seminars, symposia, conferences, and celebrated International Health Days regularly. In a year and a half, the dedicated faculty and alumni abroad successfully organized over 100 national and international events.

Post the 2005 earthquake, hands-on workshops were introduced in addition to theoretical CME lectures. This led to the transformation of the Office of CME into the more comprehensive "Professional Development Centre" (PDC) of DUHS, inaugurated by the Chancellor and Governor of Sindh.

Two divisions, Surgical and Allied, and Medical and Allied, were established within the PDC, with designated faculty directors conducting Training Needs Assessments and offering programs for various health professionals.

Equipped with modern facilities like a simulated ICU, operation theatre, laparoscopic/endoscopic suites, training halls, and a conference room, the PDC provides hands-on training with the latest audio-visual and multimedia systems, electronic simulators, and manikins.

INTRODUCTION & OVERVIEW

The Professional Development Centre (PDC) at Dow University of Health Sciences (DUHS) was formed to cater for the Undergraduate Skill Lab (UGSL) requirement of Pakistan Medical and Dental Council (PMDC) requirement for curriculum, initially at Dow Medical College (DMC) and then at Dow International Medical College (DIMC).

Since then, it has expanded, catering to other academic administrative requirements of DUHS. At present PDC has a cumulative staff of 39 employees over the two campuses (DMC and Ojha Campus). These include the Undergraduate Skill Lab (USGL) at DMC and DIMC, Asif Rehman Simulation Lab (SimLab), Continuing Medical Education (CME), Post Graduate Education, including American Heart Association (AHA) related activity and Administration (Admin). There is cross cover amongst all academic components so as to maximize utilization of resources, with the exception of accounts and administration (non-teaching staff). Having said that, each entity mentioned above has its dedicated core team identified. The PDC at DIMC has been notified to be under administrative of PDC – DMC in 2023 (date...) before that it was under administrative domain if Dow Institute of Health Professional Education (DIHPE).
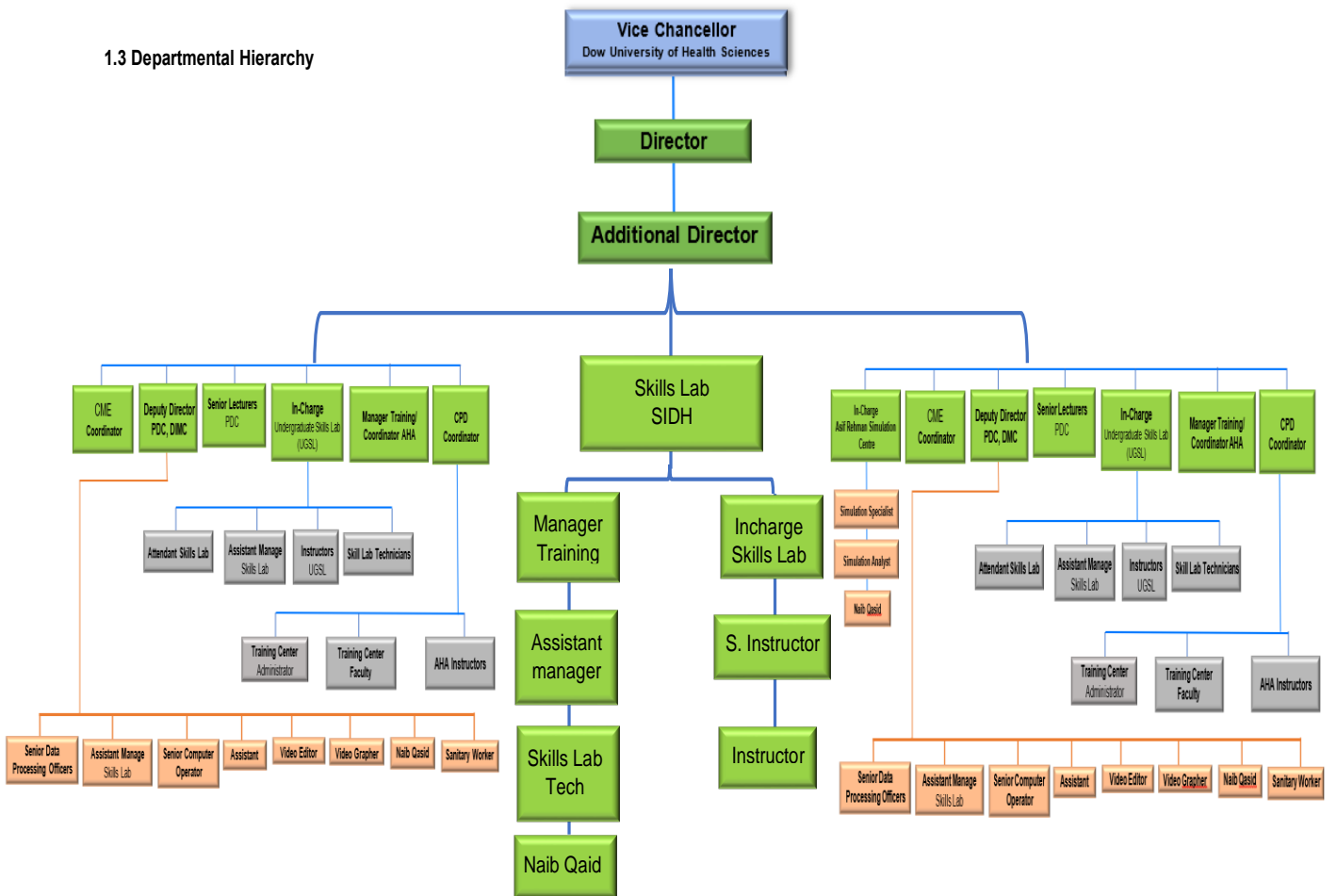
The dedicated space allocated by DUHS for PDC related activity varies in both campuses. At DMC, rooms on second floor of PDC Building is allocated to UGSL and CME office (in-process), fourth floor PDC building is fully allocated for PDC related activity and fourth floor Library building is for SimLab. At DIMC one hall and three small rooms are allocated for PDC related activity including storage of equipment and record keeping.

The first strategic planning session was held on 22 November 2023 with the objective "To start process of planning for future direction for PDC, to formulate a direction for progression / planning / improvement in PDC related activity with a goal of quality education and training with an aim towards self-sustainability".

ORGANOGRAM

1.3 Departmental Hierarchy

Vice Chancellor
Dow University of Health Sciences

Director

Additional Director

Skills Lab SIDH

CME Coordinator · Deputy Director PDC, DIMC · Senior Lecturers PDC · In-Charge Undergraduate Skills Lab (UGSL) · Manager Training/ Coordinator AHA · CPD Coordinator

Attendant Skills Lab · Assistant Manage Skills Lab · Instructors UGSL · Skill Lab Technicians

Training Center Administrator · Training Center Faculty · AHA Instructors

Senior Data Processing Officers · Assistant Manage Skills Lab · Senior Computer Operator · Assistant · Video Editor · Video Grapher · Naib Qasid · Sanitary Worker

Manager Training

Assistant manager

Skills Lab Tech

Naib Qaid

Incharge Skills Lab

S. Instructor

Instructor

In-Charge Asif Rehman Simulation Centre · CME Coordinator · Deputy Director PDC, DIMC · Senior Lecturers PDC · In-Charge Undergraduate Skills Lab (UGSL) · Manager Training/ Coordinator AHA · CPD Coordinator

Simulation Specialist

Simulation Analyst

Naib Qasid

Attendant Skills Lab · Assistant Manage Skills Lab · Instructors UGSL · Skill Lab Technicians

Training Center Administrator · Training Center Faculty · AHA Instructors

Senior Data Processing Officers · Assistant Manage Skills Lab · Senior Computer Operator · Assistant · Video Editor · Video Grapher · Naib Qasid · Sanitary Worker

SECTION I: OVERVIEW OF THE STRATEGIC PLANNING PROCESS

The Strategic Planning Process for the Professional Development Centre (PDC) at DUHS has been designed with the aim of enhancing the educational quality, optimizing resources, and driving the institution towards self-sustainability. The planning began with a session in November 2023 that identified key focus areas such as curriculum modernization, faculty development, policy standardization, and building strategic national and international collaborations.

The strategic plan is organized around several goals, including:

- Modernizing UGSL courses to incorporate new teaching methods and assessments.
- Standardizing administrative work through the development of policies, rules, and regulations.
- Expanding collaboration with national and international bodies.
- Creating flagship courses that hold commercial value.
- Engaging in community outreach and establishing more skill labs at all DUHS campuses.

The success of this plan will be measured using clear Key Performance Indicators (KPIs), data collection methods, and frequent reviews. The process is dynamic and allows for adjustments as necessary to meet DUHS's academic mission.
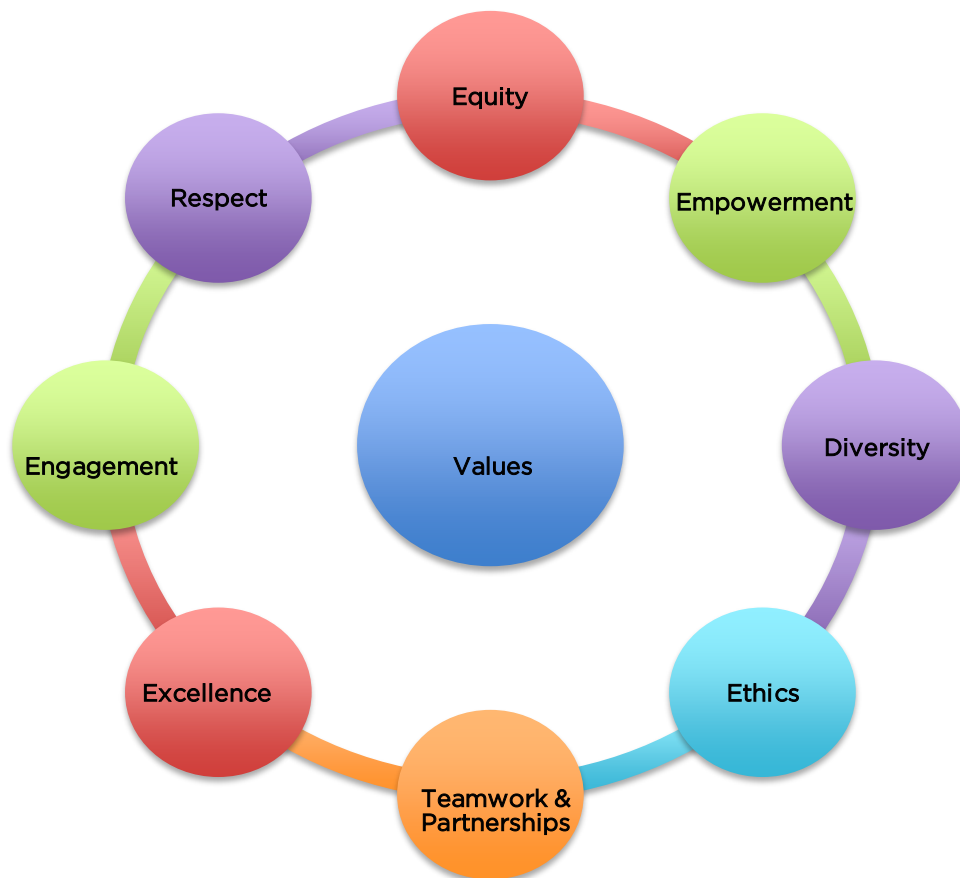
SECTION II: VISION, MISSION & VALUES

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 students first

● **Empathy & Compassion**

  o Understand before you judge

  o Be concerned for the sufferings and 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 and 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 & Collegiality**

  o Be kind

  o Listen to understand

  o Value different opinions

STATEMENT OF PURPOSE

- To cultivate an environment and mindset conducive to Continuing Professional Development (CPD) among Healthcare Professionals.

- By offering need-based programs in Continuing Education (CE) and practical Hands-on Workshops, the objective is to furnish a technically proficient and current workforce in the Health Sciences field.

- The aim is to establish international benchmark standards for quality assurance across all training programs conducted by PDC.

- Additionally, there is a commitment to enhancing the health-related knowledge and skills of the general public through public health awareness and preventive programs.

SECTION III: STRATEGIC GOALS

Goal 1: Upgradation / update of present academic UGSL courses, technique to teaching and to move towards modernizing training and assessment of trainees.

The present UGSL curriculum has not been revised / reviewed since conception. With the continuous evolution in technology and evidence-based changes in teaching methodologies, upgradation of knowledge and modernizing delivery of knowledge is of prime importance. Modernizing knowledge delivery via a media platform makes knowledge available to students 24/7 with booked time for performance of skill on mannequins and simulated settings. Forming assessment process to quantify and measure knowledge gain so as to perform safe procedures on simulated patients with transfer of knowledge from bench-to-bedside will have to be simultaneously developed. This process will be in alignment of DUHS vision and mission for academic excellence.

Goal 2: Standardize administrative work by forming policies, rules & regulations (r&r) and Standard Operative Procedures (SoP).

Presently there are limited policies present at PDC and even those need revision. Standardization of organizational workflow and processes will save time and energy and simplify things for all concerned. At present new policies include academic certificate policy, academic notification policy, SoP for CME Accreditation, r&r for CME process (as per PMDC guidelines). Further policies pertaining for academic material at UGSL and SimLab review and revision (as required), policy / SoPs regarding financial flow and other administrative policies need to be formed.

Goal 3: To retain and acquire international and national collaboration with training bodies and NGOs for education and dissemination of knowledge and skills.

At present DUHS has a contract with AHA for monitoring of all AHA related activities in Pakistan. The contract is renewed every three years, the requirements of AHA include transparency in activities and precise record keeping. We have to continue to retain this relationship with AHA, as it gives DUHS an upper hand at the international level. Further involvement with International Committee of Red Cross (ICRC) and other national and internationally accredited training courses and workshops have to be targeted and be accessible to DUHS.

Goal 4: To start process of forming Flagship courses, for teaching and training involving present PDC staff and DUHS faculty, of commercial importance so as to move towards self-sustainability. To compensate

involved faculty for flagship courses having commercial value.

DUHS being a pre-eminent academic institute, having a fully equipped and manned SimLab, has the opportunity to construct Flagship courses. A flagship course is a high-profile, prestigious, or prominent academic program offered by an educational institution. These courses are often considered the best or most significant in a particular department or discipline. Flagship courses are designed to showcase the strengths and expertise of the institution, attracting attention and recognition from students, faculty and academia in general. In universities, flagship courses are often characterized by their innovative curriculum, distinguished faculty, advanced research opportunities and state-of-the-art facilities. These courses may also serve as a focal point for marketing and promotional efforts to attract high-achieving students and enhance the institution's reputation. Flagship implies that it is that best that the university has to offer and is important for the university's academic reputation and research standing.

Goal 5: Increase engagement with NGO's and other bodies / institutions for academic / educational grants, so as to train healthcare staff and increase community engagement for outreach programs.

The PDC at DUHS is well recognized for holding academic workshops and training sessions for other organizations as an outreach activity that is monitored and awarded CME points. Other educational / training grant awarding bodies should be approached to avail the opportunities of engaging health care workers and to start community engagement for resuscitation / lifesaving training courses.

Goal 6: Competent staff, state of the art equipment and activities to be at all main DUHS campuses (DMC, DIMC and SIDH) with skill lab.

DUHS has three major skill labs established in three campuses namely, Dow Medical College (DMC), Dow International Medical College (DIMC) and Sindh Infectious Diseases Hospital and Research Centre (SIDH) at NIPA with shared human resource and at times equipment. There high fidelity SimLab is only present at DMC, that staff from other campuses avail. With increasing demand from faculty and trainers, the skill labs in all three campuses should be expanded with trained human resource and state of the art equipment as per demand over time, three to five years as per needs assessment from faculty and availability of funds in budget.

Goal 7: Initiate PDC faculty development and upgradation process, including educational development, promotion (as per DUHS policy) and further training of human resource so as to retain, educate and train (further human resource), for objective six.

SWOT analysis identified reservation from staff and limitation in career pathway. A clear career pathway should be defined for all positions of staff at PDC in all campuses. Career advancements in terms of education and training to be incorporated and staff should be encouraged to avail facilities so as to progress in their careers and to continue to train present junior and additional human resource for plan described in goal six.

Goal 8: Develop and sustain an environment of administrative and fiscal responsibility, accountability and transparency, including team building activities with all associated departments at DUHS.

All staff at the PDC should have a job description with SMART objectives and an appraisal process wheel defined associated with increment and promotion, once the career pathway is defined. There should be at least two team building activities per year that should include associated clinical and administrative departments so as to enhance communication and collaboration, increase motivation and team cohesion, enhance creativity and problem-solving skills and for stress reduction. These activities should be tailored to the needs and dynamics of the team.

OBJECTIVES, OKRs & KPIs

Goal 1: Upgradation / update of present academic UGSL courses, technique to teaching and to move towards modernizing training and assessment of trainees.

Objective 1.1: Review and revise existing UGSL courses to meet current standards.

- **OKRs**:
    - Review 100% of the existing UGSL courses within the first 6 months.
    - Integrate 3 new teaching techniques per course by the end of Year 1.
- **KPIs**:
    - Number of courses updated.
    - The number of new teaching techniques integrated.
- **Measurement Method**:
    - Course content review records, feedback from instructors and students.
    - Survey to assess the effectiveness of new teaching methods.
- **Timeline**:
    - Completion by end of Year 1.

Objective 1.2: Transition to a digitalized, modernized system for course delivery and assessment.

- **OKRs**:
    - 75% of courses moved to an online or hybrid format by Year 2.
    - Implement a new assessment model (e.g., AI-based or digital assessments) by Year 2.
- **KPIs**:
    - Percentage of courses available online.
    - Number of digital assessments conducted.
- **Measurement Method**:
    - Online course tracking system, student and faculty surveys.

- Timeline:
  - Completion by Year 2.

Goal 2: Standardize administrative work by forming policies, rules & regulations (r&r) and Standard Operative Procedures (SoP).

Objective 2.1: Formulate and standardize policies and rules across all administrative functions.

- OKRs:
  - Complete policy and rule documentation for all key administrative functions within 9 months.
  - Approve and implement policies for at least 3 major areas of administration by the end of Year 1.
- KPIs:
  - Number of policies and SOPs documented and approved.
  - Percentage of administrative processes standardized.
- Measurement Method:
  - Policy approval records, internal audits.
- Timeline:
  - Initial completion by Year 1, ongoing review.

Objective 2.2: Implement a tracking system for compliance and adherence to policies.

- OKRs:
  - Implement a system for monitoring compliance within 6 months.
  - Ensure 90% adherence to standardized policies across departments by Year 2.
- KPIs:
  - Compliance rate, number of audits conducted.
- Measurement Method:
  - Compliance reports, audit results.
- Timeline:
  - System implementation by Year 1, compliance review ongoing.

Goal 3: To retain and acquire international and national collaboration with training bodies and NGOs for education and dissemination of knowledge and skills.

Objective 3.1: Establish collaboration agreements with at least 5 international and national training bodies.

- **OKRs**:
  - Secure 3 national and 2 international collaborations by Year 1.
  - Increase collaboration scope by 50% by Year 2.
- **KPIs**:
  - Number of collaboration agreements.
  - Number of joint programs initiated.
- **Measurement Method**:
  - Signed collaboration agreements, joint event records.
- **Timeline**:
  - Year 1 (initial partnerships), Year 2 (expansion).

Goal 4: To start process of forming Flagship courses, for teaching and training involving present PDC staff and DUHS faculty, of commercial importance so as to move towards self-sustainability. To compensate involved faculty for flagship courses having commercial value.

Objective 4.1: Develop at least 2 flagship courses for commercial purposes.

- **OKRs**:
  - Create the course outline and content by Year 1.
  - Enroll 50 students in the flagship courses by Year 2.
- **KPIs**:
  - Number of courses created.
  - Number of enrollments in flagship courses.
- **Measurement Method**:
  - Enrollment records, course feedback.
- **Timeline**:
  - Course development by Year 1, launch by Year 2.

Objective 4.2: Develop a faculty compensation model for these commercial courses.

- OKRs:
  - Complete the compensation framework by Year 1.
  - Implement it for at least 2 courses by Year 2.
- KPIs:
  - Number of courses with faculty compensation structures in place.
  - Faculty satisfaction with the compensation model.
- Measurement Method:
  - Faculty feedback, compensation records.
- Timeline:
  - Framework by Year 1, implementation by Year 2.

Goal 5: Increase engagement with NGO's and other bodies / institutions for academic / educational grants, so as to train healthcare staff and increase community engagement for outreach programs.

Objective 5.1: Secure at least 3 academic/educational grants.

- OKRs:
  - Apply for 10 grants by Year 1.
  - Secure at least 3 grants by Year 2.
- KPIs:
  - Number of grant applications submitted.
  - Number of grants secured.
- Measurement Method:
  - Grant application records, financial reports.
- Timeline:
  - Year 1 (applications), Year 2 (grants received).

Objective 5.2: Increase NGO engagement by forming 5 new partnerships for community outreach.

- OKRs:
    - Secure 3 new NGO partnerships by Year 1.
    - Increase community outreach programs by 25% by Year 2.
- KPIs:
    - Number of partnerships.
    - Number of outreach events held.
- Measurement Method:
    - Partnership agreements, event participation records.
- Timeline:
    - Partnerships by Year 1, increased outreach by Year 2.

Goal 6: Competent staff, state of the art equipment and activities to be at all main DUHS campuses (DMC, DIMC and SIDH) with skill lab.

Objective 6.1: Ensure all major campuses have state-of-the-art equipment and skill labs.

- OKRs:
    - Upgrade or purchase equipment for at least 80% of the main campuses by Year 1.
    - Set up a dedicated skill lab in all campuses by Year 2.
- KPIs:
    - Percentage of campuses with upgraded equipment.
    - Number of skill labs established.
- Measurement Method:
    - Inventory records, campus inspection reports.
- Timeline:
    - Equipment upgrades by Year 1, skill lab setup by Year 2.

Goal 7: Initiate PDC faculty development and upgradation process, including educational development, promotion (as per DUHS policy) and further training of human resource so as to retain, educate and train (further human resource), for objective six.

Objective 7.1: Create and implement a continuous professional

development program for PDC faculty.

- OKRs:
    - Design the program and conduct pilot training by Year 1.
    - Train 100% of PDC faculty by Year 2.
- KPIs:
    - Number of faculty trained.
    - Feedback on faculty training program.
- Measurement Method:
    - Attendance records, survey results.
- Timeline:
    - Program design and pilot by Year 1, full implementation by Year 2.

Goal 8: Develop and sustain an environment of administrative and fiscal responsibility, accountability and transparency, including team building activities with all associated departments at DUHS.

Objective 8.1: Establish a transparent financial management system for all PDC operations.

- OKRs:
    - Develop and implement financial transparency protocols by Year 1.
    - Conduct quarterly financial audits for accountability by Year 2.
- KPIs:
    - Number of audits conducted.
    - Financial transparency ratings.
- Measurement Method:
    - Audit reports, financial records.
- Timeline:
    - Transparency protocols by Year 1, ongoing audits by Year 2.

Objective 8.2: Conduct team-building activities to improve collaboration across departments.

- OKRs:
  - Organize 3 team-building events by Year 1.
  - Achieving 90% participation from associated departments by Year 2.
- KPIs:
  - Event participation rate.
  - Team collaboration satisfaction surveys.
- Measurement Method:
  - Event attendance records, post-event surveys.
- Timeline:
  - Team-building events by Year 1, continuous improvement by Year 2.

SECTION IV: RESOURCE PLANNING FOR ACHIEVING STRATEGIC GOALS

Resource planning for the PDC's strategic goals involves ensuring that all necessary resources—human, financial, and technological—are available to meet the outlined objectives.

1. **Human Resources:**
   - Staff development is a priority, with plans to offer faculty promotions, training, and career advancement opportunities.
   - A needs analysis will guide staff expansion, particularly for the skill labs at all campuses.
2. **Financial Resources:**
   - The PDC aims to seek additional funding through grants and collaborations with NGOs, private institutions, and international organizations to support educational and community outreach programs.
   - The development of flagship courses will also create new income streams, contributing to financial sustainability.
3. **Technological Infrastructure:**
   - Investments in modernizing the PDC's technological systems are planned to improve both teaching and administrative functions.
   - Regular reviews of technology will ensure PDC remains competitive in offering state-of-the-art training and assessment tools.
4. **Facilities and Equipment:**
   - The skill labs across DUHS campuses will be expanded to accommodate the growing demand. New equipment and state-of-the-art simulation tools will be procured based on faculty needs and available budget.
5. **Monitoring and Accountability:**
   - The PDC's strategic objectives will be tracked through clear KPIs, regular reviews, and responsible parties for each goal.
   - Team-building activities and performance evaluations will ensure staff engagement and accountability, ultimately ensuring the success of the strategic plan.

In sum, resource planning focuses on securing necessary funding, expanding facilities, ensuring staff development, and utilizing technological advancements to achieve the PDC's goals efficiently.

SECTION V: IMPLEMENTATION & MONITORING OF THE STRATEGIC PLAN

To successfully implement the strategic objectives of PDC, a robust monitoring system is essential. This system should be designed to track progress, identify challenges and ensure that each strategic objective is being met efficiently and effectively.

Goal 1: Upgradation / update of present academic UGSL courses, technique to teaching and to move towards modernizing training and assessment of trainees:

a) **Key Performance Indicators (KPIs)**
This being a time sensitive activity – should be completed with-in three months
b) **Data Collection Methods:**
Surveys and assessments to evaluate student skills before and after training, tracking participation in training and assessment programs
c) **Review Frequency:**
Review of training programs should be a yearly process, specifically during student's summer vacation.
d) **Responsibility:**
PDC and concerned faculty chair to oversee training programs and collaborate with principal office for performance reviews.

Goal 2: Standardize administrative work by forming policies, rules & regulations (r&r) and Standard Operative Procedures (SoP).

a) **Key Performance Indicators (KPIs):**
One administrative policy document, R&R and SoP should be prepared every month and submitted
b) **Data Collection Methods:**
Regular systems audits, user feedback surveys and identification of incidents that may be mitigated by policies, R&R and SoPs.
c) **Review Frequency:**
Once every two years review of policy documents and administrative workflow.
d) **Responsibility:**
PDC staff, HR, Principal office to ensure regular review of processes and to ensure compliance.

Goal 3: To retain and acquire international and national collaboration with training bodies and NGOs for education and dissemination of knowledge and skills.

a) **Key Performance Indicators (KPIs):**
To approach 2 – 3 national and international training bodies and NGOs every

year, collaboration with one new organization yearly.
b) Data Collection Methods:
Documentation of communication and response of association, number of people trained.
c) Review Frequency:
Bi-annual review of process
d) Responsibility:
Marketing, Global directorate, Director PDC and principal office to ensure smooth transition of process.

Goal 4: To start process of forming Flagship courses, for teaching and training involving present PDC staff and DUHS faculty, of commercial importance so as to move towards self-sustainability. To compensate involved faculty for flagship courses having commercial value.

a) Key Performance Indicators (KPIs):
To develop 1 – 2 Flagship courses every year, of the simulators already available at DUHS.
b) Data Collection Methods:
Documentation of communication and response of association, number of people trained.
c) Review Frequency:
Bi-annual review of process
d) Responsibility:
Director PDC, principal office and associated specialty chairperson / lead person to ensure smooth transition of process.

Goal 5: Increase engagement with NGO's and other bodies / institutions for academic / educational grants, so as to train healthcare staff and increase community engagement for outreach programs.

a) Key Performance Indicators (KPIs):
To approach 2 – 3 national and international training bodies and NGOs every year, collaboration with one new organization yearly.
b) Data Collection Methods:
Documentation of communication and response of association, number of people trained.
c) Review Frequency:
Bi-annual review of process
d) Responsibility:
Marketing, global engagement directorate, alumni office, PDC and principal office to ensure smooth transition of process.

Goal 6: Competent staff, state of the art equipment and activities to be at all main DUHS campuses (DMC, DIMC and SIDH) with skill lab.

a) Key Performance Indicators (KPIs):

Process over 3 – 5 years, hiring and training of HR. Purchasing of appropriate equipment

b) Data Collection Methods:
Needs analysis and requirement from all institutes using PDC / skill labs.

c) Review Frequency:
Bi-annual review of process

d) Responsibility:
PDC, principal office, HR, Finance and Procurement to ensure smooth transition of process.

Goal 7: Initiate PDC faculty development and upgradation process, including educational development, promotion (as per DUHS policy) and further training of human resource so as to retain, educate and train (further human resource), for goal six.

a) Key Performance Indicators (KPIs):
To document career pathway for all positions at PDC within the year.

b) Data Collection Methods:
Documentation and appraisal documents including SMART objectives.

c) Review Frequency:
Yearly review of process

d) Responsibility:
Human Resource department to ensure smooth transition of process.

Goal 8: Develop and sustain an environment of administrative and fiscal responsibility, accountability and transparency, including team building activities with all associated departments at DUHS.

a) Key Performance Indicators (KPIs):
To document career pathway with job description for all positions at PDC.
Implement pay for performance culture.
Tailor team retreat activity as per needs identified.

b) Data Collection Methods:
Appraisal documents including SMART objectives.
Outcome of team retreat

c) Review Frequency:
Bi-annual review of process

d) Responsibility:
Human Resource department to ensure smooth transition of process.

For all the goals, the following general principles should be applied

- Regular progress reports should be prepared and reviewed by the strategic planning committee
- Engage with key stakeholders, including staff, faculty and community members for feedback and suggestions.

- Flexibility to adjust strategies based on monitoring outcomes and unforeseen challenges.
- Successes and challenges should be documented to refine strategies and share best practices within the organization.
- Ensure that the monitoring system and the objectives are aligned with the overall mission and vision of DUHS, DMC and PDC.

A well-designed monitoring system with regular reports will provide the higher hierarchy with the necessary insights to make informed decisions, adapt to changing circumstances, and ensure the successful implementation of the PDC strategic plan.

Contextual factors Influencing the Planning Process:

Successful implementation of the strategic plan for PDC is influenced by several contextual factors. Addressing these factors is critical to ensure that the planning process leads to desired outcomes. Here are the key factors to consider:

1. **Regulatory Compliance:** By the end of the first quarter, ensure all services and operations are aligned with national healthcare standards. Conduct comprehensive reviews twice a year to identify and rectify any compliance gaps.

2. **Cultural Sensitivity:** Foster relationship with faculty, NGOs and industry leaders, focusing to have bi-annual meetings with stake holder representatives to gather insights and feedback on how to make PDC services more culturally appropriate.

3. **Economic Climate:** To support growth, actively pursue additional funding sources with a goal of identifying new funding streams by the year's end to proceed towards self-sustainability.

4. **Technological Advancements:** Plan and initiate the upgrade of PDC technological infrastructure for academic improvement, while also evaluating each year to stay ahead of the curve.

5. **Workforce Dynamics:** A needs analysis of all campuses is required to increase the staff count, with training to make skill labs at other campuses self-reliant, while also putting strategies in place for career advancements and progression so as to retain staff.

6. **Stakeholder Engagement:** Establish a regular schedule of meetings with key stakeholders and aim to develop and launch at least two collaborative flagship projects or initiatives per year that will benefit DUHS and its service users.

7. **Community Demographics and Need:** Conduct comprehensive community needs assessments to understand the changing needs of the population and adjust training services accordingly.

By elaborating on each step with specific actions and targets, PDC can create a clear roadmap for implementing its strategic plan, ensuring that the team members understand their roles and responsibilities and that progress can be measured and communicated effectively.

SECTION VI: LIST OF APPENDICES

No.	DESCRIPTION
A	SWOT Analysis
B	TOWS Matrix

APPENDIX A: SWOT ANALYSIS

STRENGTHS	WEAKNESSES
1. High Fidelity Simulation Lab – only one is present in a public sector university. 2. AHA Accreditation & monitoring of AHA activity all over Pakistan 3. Low Costing for academic activities.. 4. Skilled Technical Staff- Multi-disciplinary, young and energetic. 5. CME Accreditation – PMDC (Pakistan Medical & Dental Council). 6. Infrastructure & Equipment – space and equipment available for multiple specialty courses and workshops. 7. Structured Training for SimLab. 8. Organizational culture and leadership support.	1. Revision/ update of academic course 2. Lack of standardized policy (should have a timeline) 3. Lack of marketing 4. Lack of interest of end users 5. The community awareness program is lacking 6. Lack of employee accountability (some are doing more than others) 7. Lack of Certified training/ Capacity building (equal opportunity) 8. Lack of appreciation from the institution 9. Student attendance is dropping 10. No career progression.
OPPORTUNITIES	THREATS
1. Standardization of the curriculum of UGSL. 2. Resource for the Nation – marketing. 3. Standardization training. 4. Flagship courses development (Marketing, teaching, Training, Flagship Courses). 5. Funds / Grants for academic, educational, and community outreach training. 6. Medical Education Research. Collaboration with Public /Private Sectors.	1. Unstable political condition 2. Financial constraints 3. Competitors for simulation 4. Dependent on non-PDC faculty for CME 5. License cancellation of AHA. 6. Unplanned / organized cross coverage of UGSL skill training by clinical faculty.

APPENDIX B: TOWS MATRIX

	OPPORTUNITIES	THREATS
	1. Standardization of the curriculum of UGSL. 2. Resource for the Nation – marketing. 3. Standardization training. 4. Flagship courses development (Marketing, teaching, Training, Flagship Courses). 5. Funds / Grants for academic, educational, and community outreach training. 6. Medical Education Research. Collaboration with Public /Private Sectors.	1. Unstable political condition 2. Financial constraints 3. Competitors for simulation 4. Dependent on non-PDC faculty for CME 5. License cancellation of AHA. 6. Unplanned / organized cross coverage of UGSL skill training by clinical faculty.
STRENGTHS	SO	ST
1. High Fidelity Simulation Lab – only one is present in a public sector university. 2. AHA Accreditation & monitoring of AHA activity all over Pakistan 3. Low Costing for academic activities.. 4. Skilled Technical Staff- Multi-disciplinary, young and energetic. 5. CME Accreditation – PMDC (Pakistan Medical & Dental Council). 6. Infrastructure & Equipment – space and equipment available for multiple specialty courses and workshops. 7. Structured Training for SimLab. 8. Organizational culture and leadership support.	1. Leverage High Fidelity Simulation Lab for Flagship Courses: Use the unique presence of the high-fidelity simulation lab to develop flagship courses for marketing, teaching, and training. 2. Utilize Skilled Technical Staff for Standardization of Curriculum: Use the multi-disciplinary, energetic, and skilled technical staff to help standardize the curriculum of UGSL. 3. CME Accreditation for Medical Education Research: Use the PMDC accreditation to expand medical education research opportunities, aligning with the development of new research courses. 4. Expand AHA Accreditation through Collaborations: Leverage AHA Accreditation to collaborate with both public and private sectors, further developing	1. Mitigate Political Instability with Strong Organizational Support: Use strong leadership and organizational culture to remain resilient against political instability. 2. Defend Against Competitors with Low-Cost, High-Quality Offerings: Highlight the low-cost academic activities and high-quality training as a competitive advantage in the face of competitors. 3. Prevent Financial Constraints by Seeking Grants and Funds: Use available resources and infrastructure to apply for grants, helping to mitigate financial constraints. 4. Leverage PMDC and AHA Accreditation to Maintain Reputation Amidst Threats: The strong AHA and PMDC accreditations can help maintain credibility and mitigate

	community outreach programs. 5. Develop Community Awareness Programs Using Infrastructure: Utilize the available infrastructure and equipment to increase community awareness and offer educational programs to the public.	the risk of losing licenses or other threats.
WEAKNESSES	**WO**	**WT**
1. Revision/ update of academic course 2. Lack of standardized policy (should have a timeline) 3. Lack of marketing 4. Lack of interest of end users 5. The community awareness program is lacking 6. Lack of employee accountability (some are doing more than others) 7. Lack of Certified training/ Capacity building (equal opportunity) 8. Lack of appreciation from the institution 9. Student attendance is dropping. 10. No career progression.	1. Update and Standardize Curriculum for UGSL: Address the weakness of course revisions by aligning with the opportunity of curriculum standardization. 2. Build Community Awareness Programs and Market UGSL: Develop and launch a marketing campaign to build awareness of the UGSL and its services, addressing the lack of community awareness. 3. Improve Employee Accountability Through Certified Training Programs: Develop certified training programs to ensure equal opportunities for capacity building and improve employee accountability. 4. Create Career Progression Paths to Improve Attendance: Develop clear career progression options to motivate students and improve attendance while addressing the weakness of low student attendance. 5. Secure Grants for Training and Community Outreach: Use available funds and grants to build and update training and community outreach programs, improving institutional visibility.	1. Develop a Standardized Policy with a Clear Timeline: Address the lack of standardized policies by creating clear timelines for course revisions and training updates. 2. Market UGSL to Overcome Lack of Interest from End Users: Create a marketing plan to raise awareness and counteract the lack of interest from end users. 3. Prevent Loss of AHA License by Enhancing Internal Policies: Develop and enforce stricter internal policies for AHA activity to ensure the license remains intact. 4. Improve Faculty Engagement to Prevent Unplanned Training: Create a more organized approach for UGSL skill training and ensure that clinical faculty play a more active role in training activities to address unplanned coverage. 5. Enhance Employee Accountability through Structured Policies: Create a structured approach to employee accountability to reduce inconsistency in workload distribution.