

QUALITY PROCESSES PDCA CYCLE-BASED ACTION PLAN FORM

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UNIT	FACULTY OF HEALTH SCIENCES	The Period to Which it Belongs	2024
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A. LEADERSHIP, GOVERNANCE AND QUALITY									
#	Sub-criteria	Strengths	Areas for Improvement	Plan [1]	Apply [2]	Check [3]	Take precautions [4]	Responsible Unit	Units to Collaborate With
A.1. Leadership and Quality	A.1.1. Governance Model and Administrative Structure	*Ensuring the active participation of internal and external stakeholders in governance processes. *Quality Policy *Strategic Plan for the 2024-2028 Period in line with Quality Policies - The plan has been created. *Many activities within the faculty to be carried out through committees and with clearly defined workflow processes and job descriptions *Having a staff onboarding guide *Academic and administrative staff should participate in in-service training related to management processes. *Organizing motivational activities and rewarding staff within the unit. *Stakeholder satisfaction levels are periodically assessed and discussed at academic board meetings.		Our 2024-2028 Strategic Plan, Quality Assurance Policy Document, and Management System activities will be carried out in accordance with our Faculty's Organizational Chart. *Maintaining stakeholder participation in management and decision-making processes. *In order to ensure continued participation in in-service training related to administrative processes, *If a new commission is established, workflows and job descriptions will be created, and after approval by the faculty council, the commission will continue to provide information and begin its activities by highlighting their importance in academic council meetings. (Throughout the year) *Departments will discuss the organizational chart, strategic goals and performance indicators, Quality Assurance Policy Document, including management activities, quality processes, education and training, research and development, and community contribution *Continuing the evaluation of stakeholder satisfaction levels *Conducting activities to promote a culture of quality. *Processes should continue to be maintained in a hierarchical structure. *Processes should be conducted on a PDCA basis. *In the case of a newly established commission, defining the workflow and job description. *Updating the staff orientation guide *In line with our faculty's vision, activities are carried out to enhance the institutional culture and sense of belonging among staff and students. *Providing information and conducting evaluations regarding the implementation of administrative processes in accordance with guidelines and process cards.	*Meetings will be held with an advisory board composed of internal and external stakeholders to include stakeholder views in decision-making processes. (January - December 2024) *Students will be involved in decision-making processes through committees, advisory boards, and faculty boards (throughout the year). *Governance, education and training, research and development, community service, internationalization, etc. are addressed through committees within the faculty. (Throughout the year) *All management processes shall be conducted in accordance with the "Process Management Handbook Management Sub-Process Detail Cards" Policy will be provided. (Throughout the year) *The staff orientation guide will be updated in accordance with the Bartın University In-Service Training Directive. (April 2024) *For newly appointed personnel, orientation training will be provided within one month (throughout the year) in accordance with the Bartın University In-Service Training Directive and Orientation Training Procedures Detailed Process and Orientation Training Procedures Process Card, in order to help them better understand the institution and enhance their sense of belonging. *The participation of academic and administrative staff in in-service training will be monitored and discussed at academic board meetings. (Throughout the year) *Satisfaction survey results *PDCA Action Plan Monitoring and Evaluation Report *The Process Management Handbook's Management Tasks Sub-processes *Detailed Processes will be monitored with Performance Indicators. *Motivational activities and reward programs will continue to be organized through the social activities committee (throughout the year). *Motivational activities and rewards will be given to staff. (Throughout the year) *The satisfaction levels of academic and administrative staff will be evaluated to determine whether they meet the goals set out in the Strategic Plan, and the results will be discussed at the academic council meeting. (December 2024) *Unit activity reports and unit internal evaluation reports will be prepared annually. (December 2024) *Commission activity reports will be presented at the end-of-year academic board meeting. (December 2024) *Satisfaction surveys will be conducted among stakeholders. (Throughout the year) *UBYS will be actively used in governance processes. (Throughout the year)	*Meeting minutes *Commission activity reports *Published data related to activities, such as news, posters, brochures, etc. *Official documents and agreements *Website image or link *RİMER (Turkish Presidential Communication Center) *Strategic Plan Monitoring and Evaluation Report *Unit Activity Report *Internal Unit Assessment Report (BİDR) *Satisfaction survey results *PDCA Action Plan Monitoring and Evaluation Report *The Process Management Handbook's Management Tasks Sub-processes *Detailed Processes will be monitored with Performance Indicators. *Information Technology and Web Commission New plans will be developed to address the identified shortcomings regarding the website's up-to-date information. *Regulatory and preventive actions (RCPA) will be taken for any disruptions experienced in the monitoring and tracking processes.	*Deanery *Department Heads *Quality Commission *Department Heads	*Academic and administrative staff *Internal Control Monitoring and Steering Committee *Social Activities Commission *Information Technology and Web Commission *Students *Advisory board	
	A.1.2. Leadership	*Strong communication between academic and administrative staff and with senior management. *Many activities within our faculty are carried out through committees. *The distribution of authority within the unit and the definition of the job descriptions of the individuals/unit/boards/commissions to whom authority has been delegated are all necessary. *Evaluating managers' performance and leadership qualities through surveys.	*The accreditation processes of the unit programs are ongoing.	Our Strategic Plan for the Period 2024-2028, Quality Assurance Policy Document, Management System in accordance with the Policy Document and our Faculty's Organizational Chart. *Encouraging the participation of our faculty's human resources in administrative, scientific, cultural, and social activities. *Preparations for the accreditation application process of the Nursing and Social Work Program are ongoing. *Annual activity monitoring in line with the commissions areas of activity. *Continuing the evaluation of unit managers' performance and leadership qualities.	*Meetings will be held with an advisory board composed of internal and external stakeholders to include stakeholder views in decision-making processes. (January - December 2024) *Regular meetings will be held with department heads to monitor unit management processes. (Throughout the year) *Certificates of appreciation will be given by academic boards to recognize the performance of academic and administrative staff. (Throughout the year) *Training sessions and meetings will be organized to promote a culture of quality. (Throughout the year) *Participation in YÖKAK Quality Trainings will be ensured. (Throughout the year) *Academic general assembly meetings will continue to be held at the beginning and end of each term to facilitate discussions and exchange of views. (Throughout the year) *Regular meetings will continue to be held with administrative staff to gather their opinions (throughout the year). *A satisfaction survey will be conducted to evaluate the leadership and effective communication of the dean and department heads. (Once a year) *Participation of academic and administrative staff in in-service training will be monitored. (Throughout the year) *An application for accreditation of the Nursing Program will be submitted. (February 2024) *Processes related to the preparation of the Social Work Program accreditation application will continue. (Throughout the year)	*Internal Unit Assessment Report (BİDR) *RİMER *Annual activity report of the Social Activities Committee *Results of the manager satisfaction survey *Event reports *Participation certificates *Strategic Plan Monitoring and Evaluation Report *This will be checked against the minutes of the Advisory Board and Academic Board meetings, and the minutes of the administrative staff meetings.	*Participation in administrative, scientific, cultural, and social activities, as well as in-service training, will be monitored and encouraged according to the level of participation. *A Corrective Action Plan (CAP) will be issued for any shortcomings identified following the commission's annual activity reports, advisory board, academic board, and management meeting. *If the data in the strategic plan monitoring and evaluation report reveals insufficient participation in in-service training and quality training, an agenda item will be created at the academic board meeting to discuss the reasons and incentives. *If the satisfaction survey results fall below the target value, the reasons will be investigated and a follow-up assessment will be conducted. *If any problems arise during the accreditation processes, discussions will be held with the department heads to develop plans for resolving these issues.	*Deanery *Department Heads *Quality Commission *Program Accreditation Commissions	*Academic and administrative staff *Internal Control Monitoring and Steering Committee *Students *Advisory board
	A.1.3. Unit Conversion Capacity	*Faculty Strategic Plan and Department Strategic Plan for the Period 2024-2028 - The target indicators have been defined, and indicators for the transformation of the unit should be included in these plans. *The only First Aid Training and Instructor Training Center in the region has been opened being *The Simulation Laboratory has been opened. *The realization of projects at regional and national levels *The number of events organized with the aim of contributing to society and social responsibility projects is high.	*Social contribution to regional development, increasing research and development activities.	*To line with the Quality Assurance and Management System Policy Document, regional, national and international objectives are achieved, taking into account stakeholder expectations and a participatory approach, continuation *As part of our strategic plan's goals of generating social benefit, First Aid Training and First Aid Instructor Training Management Handbook Programs *Within the scope of the objectives included in our Social Contribution Policy Document and strategic plan, *In order of social contribution activities and cooperation with our stakeholders (throughout the year), to improve the quality of international sustainable development goals, to develop research, application and projects aimed at science, social problems and regional development with a solution-oriented approach, and to open a pre-school class. *Process Management Handbook Program Update Details Process for the Acquisition and Specialization Area: *The Curriculum Plan will be updated in accordance with the Education and Training Policy document and the defined mechanisms in the International Standards Card. (September 2024) Within the scope of our university's goal to improve its education and training programs, *Scientific activities (projects, publications, presentations, congress participation, etc.) related to the specialization area will be carried out. *In line with our community service goals, a prenatal class will be opened. (November 2024) *A student profile study will be conducted. (December 2024-January 2025)	*Advisory board, academic general assembly, administrative human resources, and beginning-of-term and end-of-term meetings will be held. (Throughout the year) *In line with our community service goals, First Aid Training and First Aid Instructor Training will be provided (throughout the year) *Student admission proposals will be made. (September 2024) *To ensure that our Faculty is preferred by priority and qualified students, promotional activities will be planned by the Departments to increase the quality of education within the scope of international sustainable development goals, to develop research, application and projects aimed at science, social problems and regional development with a solution-oriented approach, and to open a pre-school class. *Process Management Handbook Program Update Details Process for the Acquisition and Specialization Area: *The Curriculum Plan will be updated in accordance with the Education and Training Policy document and the defined mechanisms in the International Standards Card. (September 2024) Within the scope of our university's goal to improve its education and training programs, *Scientific activities (projects, publications, presentations, congress participation, etc.) related to the specialization area will be carried out. *In line with our community service goals, a prenatal class will be opened. (November 2024) *A student profile study will be conducted. (December 2024-January 2025)	*Meeting minutes *Official letter *Published data related to activities, such as news, posters, brochures, etc. *PDCA-Based Action Plan Control *It will be checked with the form. *Updated curriculum *Number of programs that accepted students *Student profile report *This will be checked with the strategic plan monitoring and evaluation report/ implementation report.	*Failure to hold meetings A new meeting date will be set accordingly. *Work will be done to report and rectify any deficiencies identified in the 6-month inspection report. *If student admission to the midwifery program is not approved, a new application will be submitted. *Corrective Action Plans will be taken to address any identified shortcomings in the implementation of these practices.	*Deanery *Department Heads	*Academic and administrative staff *Quality Coordination *Student Affairs Department *Advisory board *Students *First Aid Training and Instructor Training Center
	A.1.4. Internal Quality Assurance Mechanisms	*Our faculty operates its processes within the framework of the PDCA cycle: being *Implementation and evaluation of applications, support for unit employees in the accreditation processes. (giving) *Having detailed quality policies: *Students having membership in commissions *We need to have a governance model *Process management is being implemented		*Ensuring that quality processes are effective and sustainable for all activities of our Faculty in line with our University's Quality Assurance Policy Document. *Continuing the activities of our Faculty based on the PDCA cycle. *In order to analyze the progress of our faculty's plans, we will continue to prepare 6-month and annual reports. *In line with the Quality Assurance and Management System Policy Document, maintaining a participatory approach and increasing the participation of stakeholders in decision-making processes as outlined in our strategic plan, activity maintaining student membership in commissions. *Monitoring activities where the PDCA cycle is applied and resulting improvements are made, in order to increase the number of exemplary practices. *Continued use of UBYS, ALYS, and MECPA systems. *Discussion of expectations with stakeholders and advisory boards within the components of the quality assurance system. *All processes are carried out in accordance with the process management manual. *Preparation of the 2024 Consolidated Risk Report and Risk Action Plan	*A PDCA-based Action Plan will be prepared. (March 2024) *Advisory board meetings will be held. (January, July 2024) *For personnel starting their duties in our faculty, orientation training will be conducted within one month in accordance with the Orientation Training Process Card. (Throughout the year) *All academic and administrative staff will carry out activities according to the defined duties, authorities, and responsibilities of our faculty committees. *Meetings will continue to be held by the Dean's office to gather expectations at the beginning of the semester and to assess how many of the end-of-semester requests have been fulfilled. These meetings are open to all students (4 times a year). *Student representation will be ensured in boards and committees. (Throughout the year) *Monitoring and evaluation reports, progress reports, activity reports, and internal unit evaluation reports will be prepared. (July 2024, January 2025) *UBYS, ALYS, and MECPA systems will continue to be used (throughout the year). *All processes will be conducted in accordance with the process management manual. (Throughout the year) *The 2024 Consolidated Risk Report and Risk Action Plan will be prepared (January 2024). *Processing of RYMER applications will be carried out (throughout the year).	*6-month monitoring and evaluation reports *Internal unit evaluation reports *Action plan reports *Activity reports *Official documents *Advisory board meeting minutes *Faculty board and department board meeting minutes *Student representation will be ensured in boards and committees. (Throughout the year) *Monitoring and evaluation reports, progress reports, activity reports, and internal unit evaluation reports will be prepared. (July 2024, January 2025) *Web news *Training poster *RİMER applications *RİMER analyses *This will be checked against the Consolidated Risk Report and Risk Action Plan.	*The six-month monitoring and evaluation report will be sent to the departments, and the necessary work will be done to achieve the targets at the end of the year. *In academic council meetings measures to be taken in the coming year will be determined. *Conventional Investigation (CİT) will be conducted for the identified irregularities.	*Deanery *Department Heads *Analytic Commission *Internal Control Monitoring and Steering Committee *Quality Commission	*Academic and administrative staff *Students *Advisory board *Information Technology Department
A.1.5. Public Information and Accountability	*Faculty Board, Faculty Management Boards and Department Boards decisions and Unit Activity Reports, Strategic Plan - The reports, the Internal Control Action Plan Reports, will be published publicly on our Faculty's website in accordance with the personal data protection law. *Our faculty's website has Turkish and English versions of the "Information Technology and..." kept active through "Web Commission" activities.		*Faculty Board and Faculty Management Board decisions regarding Personal Data Protection To continue being published publicly in accordance with the law. *Ensuring the continuous publication of faculty unit activity reports, strategic plan monitoring and evaluation reports, and internal control action plan reports on our faculty's website. *Our faculty's website is available in Turkish and English under the title "Information Technology and Web Development" Keeping the Commission active through its activities	*Faculty Board and Faculty Management Board decisions are published publicly in accordance with the Personal Data Protection Law and our University's Personal Data Processing and Protection Policy. (Throughout the year) *Faculty unit activity reports will continue to be published on the unit's website at the end of the year, along with a 6-month monitoring and annual evaluation of the strategic plan and internal control action plan (throughout the year). *Our faculty's website will be kept active in Turkish and English through the activities of the "Information Technology and Web Commission" (throughout the year). *The Unit Information Technology and Web Commission will be updated to represent each section of the unit. (April 2024) *Faculty event announcements, completed activities, and newsletters are shared with the public via the website (throughout the year). *The Personal Data Protection Commission will regularly review the announcements published on our website regarding any violations of accountability for personal data under the Personal Data Protection Law and share them in a report (throughout the year).	*Annual activity report by the Information Technology and Web Commission *Unit Internal Evaluation Report *Six-month and annual internal control monitoring and evaluation reports *Web announcements published on the Faculty page in accordance with the Personal Data Processing and Protection Policy *The number and content of announcements and news reports regarding personal data breaches will be checked through meeting reports.	*New plans will be made in the next period to address the deficiencies identified in the six-month and annual monitoring and evaluation reports by the Information Technology and Web Commission and the Personal Data Protection Commission. *KVKK Commission	*Deanery *Department Heads *Information Technology and Web Commission *KVKK Commission	*Academic and administrative staff	

A.2. Mission, Vision and Policies	A.2.1. Mission, Vision and Policies	*The practices implemented in our faculty in line with our mission, vision and policies have become widespread throughout the unit. *Our faculty members carry out various activities in line with the needs of our region and the city we live in, and students take part in social responsibility activities and volunteer work. *The regular participation and acceptance of TÜBİTAK 2009 student projects every year.	*The accreditation processes of the unit programs are ongoing.	*Ensuring the continuity of objectives and indicators in line with the mission, vision, and core values of the Faculty of Health Sciences in the preparation of the 2024-2028 Strategic Plan. *Our mission and vision will continue to be updated and published on our website to be shared with the public. *Our faculty staff will continue to be reminded of our mission and vision at regular intervals via email. *Ensuring that all activities of our faculty are carried out in accordance with our mission, vision, and policies. *Continuing our educational, community service, research and development, and administrative activities within the framework of our university policy documents. *Providing orientation training to our new students and informing them about our mission and vision through the student orientation guide available on our website. *Newly appointed academic and administrative staff to our faculty will be informed about our mission and vision through the orientation guide available on our website. *Providing information about TÜBİTAK projects at academic advisory meetings. *In line with our faculty policies, developing our students' research capacities and preparing them for the requirements of the 21st century by encouraging student project writing, involvement in projects, and ensuring their continuity. *Actively conducting the Social Responsibility and Volunteer Work courses in the curriculum and encouraging students to choose these courses. *Providing information to faculty members about externally funded projects such as TÜBİTAK, TÜSER, and ERASMUS+ projects.	*Our mission and vision will be updated in line with the feedback from internal and external stakeholders, and the updated mission and vision will be published on our Turkish and English websites (throughout the year). *In order to ensure that our faculty's mission and vision are embraced and that a work ethic based on these principles is established throughout the working life, our faculty's mission and vision will be regularly sent to all our employees via email (throughout the year). *New academic and administrative staff joining our faculty will be informed about our mission and vision during orientation training and through the orientation guide continuously available on our website (throughout the year). *New students starting at our faculty will be informed about our mission and vision during the orientation program and through the student orientation guide, which is continuously available on our website (throughout the year). *All activities to be carried out in our faculty will be in line with the faculty's mission and vision. (Throughout the year) *In the Social Responsibility and Volunteer Work courses, activities will be carried out in line with the needs of the region and the city we live in. (Spring Semester) *Information about TÜBİTAK projects and application requirements will be provided to students at academic counseling meetings (throughout the year). *In order to develop our students' research capacities and prepare them for the requirements of the 21st century, the courses Project Management, Academic Writing Skills, Research Methods, and Professional Research Project, which are already part of the curriculum, will continue to be actively conducted (throughout the year). *Announcements will be made throughout the year regarding externally funded projects for faculty members, such as TÜBİTAK, TÜSER, and ERASMUS+ projects.	*Reviews of the Information Technology and Web Commission meeting *2024-2028 Unit Strategic Plan *Regarding mission and vision sent emails *Our Unit Strategic Plan *Student and staff orientation guides *Unit Strategic Plan monitoring and evaluation reports *Meeting minutes *Course information package, course syllabi *Official letter of course assignment *Number of accepted and submitted projects *Unit needs analysis reports *Will be checked with BİER.	*Information Technology and Web Commission web page tracked by This will ensure its continued relevance. *Orientation trainings will be conducted on time. *Students and academic staff applying for projects *Information Technology and Web Commission By comparing the number of projects with the number of projects planned, the Commission *Corrected investigation (CIR) will be conducted for the identified irregularities.	*Deanery *Department Heads *Technology and Web Commission	*Academic and administrative staff *Internal Control Monitoring and Steering Committee *Students
	A.2.2. Mission Aims and Objectives	*Faculty Strategic Plan and Department Strategic Plan for the Period 2024-2028 The target indicators have been determined. *Within the scope of the faculty's strategic plan, practices covering all units and areas are systematically monitored in line with strategic aims and objectives and in accordance with the faculty's internal quality assurance system. being *Measures to be taken in consultation with stakeholders		*Our faculty's strategic plan, prepared in line with the UN Development Goals and the Sustainable Development Goals of the 12th Development Plan, aims to achieve the targets and indicators outlined in the plan by 2024 through various activities. *Continuing the implementation of our faculty's quality processes. *Ensuring the continuity of cooperation with internal and external stakeholders. *Preparation of six-month and annual monitoring and evaluation reports in line with the unit's strategic plan objectives and indicators, and discussion of these reports at academic board and advisory board meetings. *Including feedback from internal and external stakeholders in program updates. *Ensuring student, research assistant, and lecturer representation in the Faculty Management Board, Faculty Council, Commissions, and Department Boards to continue gathering their opinions. *Holding informational meetings with external stakeholders to facilitate potential collaborations. *Collaborating with institutions such as the Ministry of National Education, Special Education Centers, and Private Hospitals in practical courses. *We will inform you of any changes in the legislation regarding activities related to our strategic aims and objectives. *Identifying risks to the achievement of strategic aims and objectives. *Planning for sustainable development and specialization, as outlined in our 2024-2028 strategic goals and indicators.	*In line with the strategic plan objectives and indicators of our faculty, the active and continuous work process of all our departments and commissions will be ensured (throughout the year). *In line with the aims and objectives included in the faculty's strategic plan, internal quality assurance mechanisms will continue to be operated for practices covering all units and areas (throughout the year). *Activities will be carried out in line with our sustainable development and specialization goals included in our 2024-2028 Strategic Goals and Indicators. (Throughout the year) *The unit's strategic plan objectives and indicators will be monitored and evaluated every six months and annually, and the results will be reported and published on the website. (July 2024, January 2025) *The Unit Quality Commission will be tasked with identifying deficiencies and unachieved goals within the internal quality assurance system that contribute to achieving strategic aims and objectives, and ensuring that corrective and preventive actions are implemented by the relevant units. (Throughout the year) *Feedback from internal and external stakeholders will continue to be sought for program updates (throughout the year). *Student, research assistant, and lecturer representation is ensured in the Faculty Management Board, Faculty Council, Commissions, and Department Boards, and the views of internal and external stakeholders are taken into account (throughout the year). *Increasing projects and activities with external stakeholders will be included as agenda items in the Academic General Assembly meetings. (Beginning and End of Fall and Spring Semesters) *The terms of the protocols signed with external stakeholders will be implemented. (Throughout the year) *Formal correspondence and collaboration with external stakeholders will continue in applied courses. (Beginning of Fall and Spring Semesters) *The Unit Risk Assessment Commission will identify risks and prepare six-monthly and annual monitoring and evaluation reports, as well as an annual action plan. (July - December 2024)	*Unit Internal Evaluation Report *Faculty strategic plan monitoring and evaluation reports Faculty Board Decisions *Unit Information Technology and Web Commission reports *Academic General Assembly Meeting Minutes *Official documents *Protocols *Unit Council Risk Action Plan *This will be checked against the Unit Consolidated Risk Report.	*Based on the 6-month monitoring and evaluation report, the functionality of the internal quality assurance system mechanism will be reviewed to address the identified shortcomings. Corrective Action Plans will be developed for the identified shortcomings. *Corrected investigation (CIR) will be conducted for the identified irregularities.	*Deanery *Department Heads *Unit Quality Commission	*Academic and administrative staff *Internal and external stakeholders *Unit Risk Identification and Analysis Commission *Internal Control Monitoring and Steering Committee
	A.2.3. Performance Management	*Faculty Strategic Plan and Department Strategic Plan for the Period 2024-2028 The target indicators have been determined. *The progress towards achieving the target indicators outlined in the strategic plan will be evaluated annually with the participation of internal and external stakeholders, and improvement efforts will be carried out. *The progress towards achieving strategic goals and indicators will be monitored by the departments, divisions, and Strategic Plan Preparation and Quality Commissions, respectively, with stakeholder participation, and then submitted to the Dean's Office. *Holding academic and general assembly meetings regularly every year. * Organizing training and events as part of performance improvement efforts for internal and external stakeholders. *All stages of the PDCA cycle are being implemented in faculty activities. *At the beginning of each semester, feedback and requests regarding the activities of one of our students are collected, and at the end of the semester, dean's meetings are held to evaluate the achievement status and satisfaction of the students.		*Maintaining performance processes in line with the Quality Assurance Policy Document. *The evaluation and monitoring of the strategic plan's target indicators will be carried out regularly, reported, discussed in the relevant committees, and then continued to be published publicly on the website. *Program self-assessments will continue to be conducted at regular intervals each year to evaluate compliance with quality policies, accreditation criteria, strategic aims and objectives, and to continue making improvements where necessary. *Continuing the monitoring and evaluation process regarding the strategic plan's target indicators through meetings and commission meetings with the participation of internal and external stakeholders. *Continuing to hold Academic and General Assembly meetings at the beginning and end of each semester, as well as student dean's office meetings. *Continuing the implementation of the PDCA cycle stages sequentially in faculty activities *Performance improvement training, scientific and social activities of internal and external stakeholders continuation of the regulation *Continuing the preparation of the unit activity report. *Continuing accreditation efforts through the participation of internal and external stakeholders by adopting the institutions' quality policies. *Performing and monitoring tasks and processes according to the process management handbook. *Developing unit-level plans to achieve key performance indicators in terms of both quantity and quality. *Identifying risks to achieving performance indicators *Regular recording of data related to achieving performance indicators into the MECRA system.	*To increase participation in scientific and social events, event announcements will be shared on the Faculty's website and social media accounts (throughout the year). *The evaluation and monitoring of the Strategic Plan's target indicators will continue to be carried out twice a year, every six months, with the participation of internal and external stakeholders, and reported by the relevant commissions and published publicly. (July 2024, January 2025) *Students who are external stakeholders will receive meeting invitations from UBYS to participate in committee meetings (throughout the year). *Academic and General Assembly meetings will continue to be held regularly. (Throughout the year) *The PDCA cycle stages will continue to be implemented sequentially in faculty activities. (Throughout the year) *The Social Activities Commission will organize performance-enhancing events for newly appointed and promoted academic and administrative staff (throughout the year). *A unit activity report will be prepared at the end of the year to evaluate unit performance. (December 2024) *Program self-assessments will be conducted to ensure continuity based on the results, and improvements will be made as needed. (Throughout the year) *As part of the Program Accreditation Studies, regular application and analysis of course start and end surveys, continued participation of internal and external stakeholders in academic and general assemblies, and systematic contribution of Mentor Nurse training and the Peer Mentoring program will be ensured (throughout the year) *Dean's office will continue to hold student student meetings at the beginning and end of each semester (throughout the year). *Newly hired academic and administrative staff will continue to receive orientation training accompanied by a staff orientation guide. (Throughout the year) *Process management will be conducted in accordance with the company's handbook throughout the year. *Meetings will be held twice a year to determine the quantitative and qualitative progress towards strategic goals, and work will continue as needed. (July 2024, January 2025)	*Meeting minutes *Commission activity reports *Published data related to activities, such as news, posters, brochures, etc. *Official documents and agreements *Website image or link *Social media account images or links *Strategic Plan Implementation and Evaluation Report *Unit Activity Report *Action Plan Implementation Report *MECRA report *Consolidated Risk Report and Risk Action Plan *With the Performance Program Report it will be checked.	*Failure to hold meetings new meeting date in case will be determined. *Annual activities of the commissions Following the discussion of the reports at the academic general assembly, work will continue in line with the shortcomings and suggestions. *Information technology and web commission The website will be kept up-to-date, and if any deficiencies are identified during the Quality Commission's review, new plans will be developed to address these shortcomings. *Corrected investigation (CIR) will be conducted for the identified irregularities.	*Deanery *Quality Commission *Strategic Plan Preparation Commission *Information Technology and Web Commission *Department Heads	*Academic and administrative human resources *Quality Commission *Strategic Planning Committee *Information Technology and Web Commission
A.3.4 Process Management	A.3.4 Process Management	*Transparent sharing of workflow processes and job descriptions on the website. *The process map has been created. *Conducting monitoring, evaluation, and adjustment processes in accordance with quality standards. *Monitoring and evaluation of the Faculty Strategic Plan and Department Strategic Target Indicators twice a year, every six months. *Faculty workflow processes and job descriptions must be defined. *The faculty's e-learning system is actively in use. *Students can follow announcements and access course materials through the system for both online and in-person classes.	*Return of graduating students limited notifications	*Quality Assurance, Education and Training Policy, Management System Policy document *Achievement of performance indicators listed in the target cards of the Faculty Strategic Plan on a six-month and annual basis to ensure the sustainability of scientific activities. Monitoring and evaluation will be conducted and reported, and published on the website. (July 2024, January 2025) *Data will be collected through the Career Planning Application and Research Center. *Survey participation will continue through the registration of new graduates in the alumni information system. (Throughout the year) *Our graduating students will continue to use the *Process Management Handbook Internal Quality Assurance System for the continuity of activities *Ensuring the active use of the e-learning system by departments throughout the year. *Promotional announcements will be continued on the website to encourage the participation of Faculty Board and Faculty Management Board members in activities in a transparent manner (throughout the year). *The use of the e-learning system will be maintained by the instructors. (Throughout the year) *The registration process for graduates in the alumni information system will be monitored through the Career Planning and Implementation Center and the Alumni Relations Commission (throughout the year).	*All stakeholders involved in faculty committees will continue to implement and report on activities in accordance with their defined duties and responsibilities (throughout the year) *Process Cards provided by the Career Planning and Implementation Center. (Throughout the year) *UBYS and MECRA will continue to be used for transactions. (Throughout the year) *Announcements will be made by the Career Planning and Implementation Center to students who will be graduating at Academic Counseling meetings. *Announcements will be continued on the website to encourage the participation of Faculty Board and Faculty Management Board members in activities in a transparent manner (throughout the year). *The use of the e-learning system will be maintained by the instructors. (Throughout the year) *The registration process for graduates in the alumni information system will be monitored through the Career Planning and Implementation Center and the Alumni Relations Commission (throughout the year).	*Meeting minutes *Commission activity reports *Published data related to activities, such as news, posters, brochures, etc. *Official documents and agreements *Website image or link *Strategic Plan Implementation and Evaluation Report *Action plan implementation report *Student registered in the alumni information system number *Data in the alumni information system occupancy rate *MECRA report *Lesson recording analysis results it will be checked.	*Event organizing committees will be asked to create a work division plan to ensure events can take place on schedule. *Any shortcomings identified in the six-monthly and annual monitoring reports regarding the achievement of the goals and indicators included in the Faculty Strategic Plan will be communicated to the department heads and relevant committees for new planning and corrective action.	*Deanery *Quality Commission *Department Heads	*Academic and administrative staff source *Career Planning and Implementation Center *Alumni Relations Committee

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Unit	FACULTY OF HEALTH SCIENCES	The Period to Which It Relates	2024
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B. EDUCATION AND TRAINING									
#	Sub-criteria	Strengths	Areas for Improvement	Plan [1]	Apply [2]	Check [3]	Take precautions [4]	Responsible Unit	Units to Collaborate With
B.1. Program Design, Evaluation and Updating	B.1.1. Program Design and Approval	"Developing awareness within the institution regarding accreditation efforts, under the leadership of the faculty's senior management." "Systematic monitoring of program design and approval processes and their improvement through evaluation in collaboration with relevant stakeholders."		"Conducting meetings and studies for the accreditation of the Nursing Program within the scope of the BARU Quality Assurance System Directive, the 2024-2028 Strategic Plan and BİDR. Within the scope of the Education and Training Quality Policy and the Turkish Higher Education Qualifications Framework: "Ensuring that the program outcomes of our faculty departments are up-to-date." "Ensuring that the program descriptions of our faculty departments are up-to-date." "Ensuring that the course information packages of our faculty departments are up-to-date and 100% complete."	"Preparatory meetings and studies for the accreditation of the Nursing Program will be conducted. (Throughout the year) "Our faculty departments will ensure that their program outcomes are up-to-date. (Once a year) "The program descriptions of our faculty departments will be kept up-to-date. (Once a year) "The course information packages for our faculty departments will be kept up-to-date. (At the beginning of each semester) "A self-assessment report will be written as part of the accreditation process. (September 2024)	"Course information package link "Course information package report "Meeting minutes regarding accreditation processes "This will be checked with a self-assessment report."	"Ensuring the completion of information packages for newly added courses. "Encouraging faculty members to work towards accreditation." "In the event of any issues with updates to program outcomes, course information packages, and program descriptions, discussions will be held regarding the problem, and corrective and preventive actions will be taken in line with the suggestions."	"Department Heads	"Deanery "Academic Human Resources "Unit Training/Orientation Commission "Department Boards "Students "Program Accreditation Commission "Other faculty members from the relevant programs of the Faculty of Health Sciences "Advisory board
	B.1.2. Program Course Distribution Balance	"Our faculty's curriculum design, evaluation, monitoring, and 100% completion of information packages."		"Updating and announcing compulsory, departmental and non-departmental elective courses on our Faculty's official website within the scope of the Education and Training Quality Policy and the Turkish Higher Education Qualifications Framework. "Updates to the Strategic Plan, Education and Training Quality Policy, and elective courses within the scope of the Turkish Higher Education Qualifications Framework. "2024-2028 Strategic Plan, Education and Training Quality Policy, BİDR and Turkey Within the framework of the Higher Education Qualifications Framework, the curriculum structure should consider a balance between compulsory and elective courses, and courses outside the field of study, in order to provide cultural depth and opportunities to recognize different disciplines. "Within the scope of the 2024-2028 Strategic Plan and BİDR, the number of courses and weekly class hours will be adjusted to allow students time for non-academic activities as well arrangement	"Updates to the course information package by the instructor who will be teaching the course during course assignments "Course information package link "Course information package report "2024 Strategic Plan Implementation Report "Nursing Department Training Booklet supervisory authority through the University Information Management System, will be done. (Throughout the year)	"Course information package link "Course information package report "2024 Strategic Plan Implementation Report "Nursing Department Training Booklet supervisory authority through the University Information Management System, will be done."	"Ensuring that the information packages for newly added courses are completed. "Increasing the number of student-participatory activities. "If the desired goals are not achieved in planned student-participatory activities, corrective and preventive actions will be taken."	"Department Heads	"Academic human resources "Department/Division Boards "Unit Curriculum / Education Commission "Program Accreditation Commission "Other faculty members from the relevant programs of the Faculty of Health Sciences "Advisory Board "Students
	B.1.3. Alignment of Course Outcomes with Program Outcomes	"Within our faculty Our departments "Course" at the beginning of the semester "With Its Program and Checklists" At the end of the term, "Course Files" through routine preparation alignment between course learning outcomes and program outcomes provided		"In accordance with the Strategic Plan, Education and Training Quality Policy, Turkish Higher Education Qualifications Framework, and BARU Associate and Undergraduate Education and Examination Regulations, the instructors responsible for the courses must ensure that all sections of the course information package (including the learning objectives of the courses in the program outcomes) are completed and checked by the relevant program heads."	"Course syllabi will be matched with course outcomes and program objectives. (At the beginning of each semester) "Course File Forms will be prepared and implemented throughout the process. (At the end of each semester) "Course files will be reviewed by department heads and any deficiencies will be corrected. (At the end of each semester) "In case of any updates to the curriculum, these updates will be reflected in the course information package and checked by the department heads (throughout the year)."	"Course Syllabi "Course Files "This will be checked against the training catalog."	"Department heads will check whether course learning outcomes and program outcomes have been matched. It will be done. "Conditional investigation (CI) will be conducted for the identified irregularities."	"Deanery "Department Heads	"Academic Human Resources "Unit Training/Orientation Commission "Student Representatives "Department/Division Boards "Program Accreditation Commission
	B.1.4. Student Workload-Based Course Design	"The processes of designing, evaluating, and updating the existing curriculum in our faculty to be found		"BARU Quality Assurance Directive, Education and Training Quality Policy, BARU Associate Degree and Undergraduate Education and Examination Regulations Within the framework of the Distance Education Procedures and Principles, ensuring the active continuity of the processes of designing, evaluating, and updating the existing course programs in our faculty."	"In calculating course credits, student workload based on the acquisition of knowledge, skills, and competencies determined according to the Turkish Higher Education Qualifications Framework and foreseen on a program basis will be taken as the basis. (Throughout the year) "Student course evaluation surveys will be conducted. (At the end of each semester) "The results of the course evaluation surveys will be discussed at the academic board meeting, and necessary improvement efforts will be planned (throughout the year)."	"Course Syllabi "Course Files "Training catalog "This will be checked against the results of the course evaluation survey."	"Student workload calculations take into account the time required for lectures, course preparation, and exams. It will be kept. "Conditional investigation (CI) will be conducted for the identified irregularities."	"Deanery "Department Heads	"Academic Human Resources "Unit Training/Orientation Commission "Student Representatives "Department/Division Boards "Program Accreditation Commission
	B.1.5. Monitoring and Updating Programs	"Updating and reviewing the current curriculum in our faculty."	"The accreditation processes of the unit programs are ongoing	"The Strategic Plan, Education and Training Quality Policy, Turkish Higher Education Qualifications Framework, and BARU Associate and Undergraduate Education and Examination Regulations stipulate that course files should include the workload created for students within the scope of multiple assessments for each course, the impact of each assessment activity (exam, assignment, practical work) on the learning outcome and the program outcome. "Within the scope of the Process Management Handbook (Use of the Course Plan and Course Change Procedures Detail Process Card) (Program Evaluation and Program Update Detail Process Cards), the continuation of the new curriculum for Nursing Department 1st year students in line with the new education and training plan. to do Process Management Handbook (Lesson Plan and Course Modification Procedures Detailed Process) (Card Usage) (Program Evaluation and Program Update Details Process) Within the scope of the cards, the Social Services Department's SİB223-Social Services and the inclusion of the "Application Areas" course in the department's curriculum. "Establishing and running peer mentoring groups in the Nursing Department to facilitate communication between students from different levels, particularly to help newly enrolled students adapt to the university and the nursing profession. "As part of the accreditation efforts, the Mentor Nurse program prepared for volunteer nurses in applied professional courses during the Spring semester of the 2023-2024 Academic Year. Creating a Training Program	"Course files will include the workload created for students within the scope of multiple assessment methods for each course, the impact of each assessment activity (such as exams, assignments, and practical work) on the learning outcome and the course program outcomes (throughout the year). "First-year students in the Nursing Department will continue to take updated courses in line with the new curriculum. (Throughout the year) "The Social Work Department's SİB223 - Social Work and Application Areas course will be implemented in the program. (Throughout the year) "Peer mentoring working groups will be established and run within the Nursing Department. (Throughout the year) "As part of the accreditation efforts, a Mentor Nurse Training Program will be created for volunteer nurses in practical professional courses during the Spring semester of the 2023-2024 academic year. (February 2024)	"Course information package link "Nursing Department Training Booklet "Peer Mentoring Working Group Meeting Minutes Program Participation Certificates "Guidance and Psychological Counseling Commission activities report "Meeting minutes related to accreditation processes "This will be checked with a self-assessment report."	"Ensuring that all information packages for newly added courses are completed. "Faculty members will be encouraged to participate in accreditation efforts. "If any problems arise during the accreditation processes, discussions will be held with the department heads to develop plans for resolving these issues. "Conditional investigation (CI) will be conducted for the identified irregularities."	"Department Heads	"Academic Human Resources "Unit Training/Orientation Commission "Student Representatives "Department/Division Boards "Program Accreditation Commission "Peer Mentoring Workshop Group
	B.1.6. Management of Education and Training Processes	"The courses in our Faculty's Nursing Department are taught in separate sections. "Regular orientation training is provided to our new students. "There should be arrangements for elective courses and courses outside of the department."	"A proposal for a minor program has been submitted, and the goal is to activate the program and ensure its sustainability."	"Student Orientation Guide and Undergraduate Education and Training for newly enrolled students Regulations and compliance training will be provided. "Information about the Guidance and Psychological Counseling Commission will be provided at academic counseling meetings within the scope of the Academic Counseling Application Guidelines. "Continuation of academic advising processes within the scope of the Academic Advising Implementation Guidelines. "The processes are carried out in accordance with the job descriptions of our Faculty's Guidance and Psychological Counseling Commission. "Education and Training Quality Policy, BARU Associate Degree and Undergraduate Education and Training and Within the scope of the Examination Regulations, the Social Work Department minor program, to be carried out in collaboration with the Nursing Department. "Increasing the number of students benefiting from Double Major programs within the scope of the Education Quality Policy and Strategic Plan objectives and indicators. "Within the scope of the BARU Quality Assurance Directive, Education and Training Quality Policy, and BARU Associate Degree and Undergraduate Education, Training and Examination Regulations, the Faculty aims to maintain diversity in teaching and training methods. "Implementation of course evaluation satisfaction surveys (Student and Faculty Member) within the scope of the Education and Training Quality Policy."	"Orientation training will be provided for first-grade students. (October 2024) "During academic counseling meetings, students' expectations and evaluations of the semester will be gathered, and information about the Guidance and Psychological Counseling Commission will be provided. (Throughout the year) "To identify students with low academic performance under the guidance of a faculty member, their overall grade point averages will be evaluated on the faculty member page in the LMS system. Individual interviews will be conducted, and they will be referred to the Guidance and Psychological Counseling Commission within our Faculty. (Throughout the year) "The Social Work minor program will be conducted in collaboration with the Nursing Department. (Throughout the year) "Information regarding Double Major programs will continue to be provided during orientation sessions. (October 2024) "For double major programs, collaboration will take place between our departments and the units of our university and faculty. (Throughout the year) "Information about minor and double major programs will be provided at academic advisory meetings (throughout the year). "Our department heads will monitor the number and success of students pursuing minor and double major programs through academic advisors (throughout the year). "In our faculty, current teaching methods and techniques, as well as student/learner-centered teaching practices, will be implemented using methods such as theoretical lectures, assignments, student presentations, question-and-answer sessions, case studies, and demonstrations (throughout the year). "Course satisfaction surveys (student and faculty) will be administered. (End of semester)	"Student Orientation Guide "Orientation Training Program "Meeting minutes "Guidance and Psychological Counseling Commission activities report "Minutes of academic advisory meetings "Official correspondence "Course Satisfaction Survey Results "OOF records "This will be checked using the Course Syllabus and the Start of Education and Training Checklist."	"Collaboration between the advisor of students with low academic performance and the Guidance and Psychological Counseling Commission will be increased. "If the Social Work and Nursing Department is unable to activate the Minor program, the program design will be reviewed and necessary improvements will be made. "Training sessions in cases where student participation is low in academic advisory meetings It will be repeated. "If satisfaction survey results fall below 70%, the matter will be discussed in departmental and academic boards, and regulatory and preventive actions will be implemented. "Regulatory and preventive measures will be implemented to address disruptions in the education and training processes."	"Deanery "Department Heads "Academic Consultants "Guidance and Psychological Counseling Commission	"Academic Human Resources "Unit Training/Orientation Commission "Student Representatives "Department/Division Boards "Program Accreditation Commission "Psychological Counseling Commission "Section Continuous Improvement Commission

	B.2.1. Teaching Methods and Techniques	*At the end of the academic term in our faculty, "Course Reporting on the alignment between course learning outcomes and program outcomes using "Ries". *Training of instructors for our faculty members participation		*Participation of our Faculty's teaching staff in the trainers' training program regarding teaching methods and techniques, within the scope of the BARU Quality Assurance Directive. "In line with our goal of increasing student project applications included in our 2024-2028 Strategic Plan, our Faculty students will be encouraged to undertake TÜBİTAK 2209-A projects. *Education and Training Quality Policy, Turkish Higher Education Qualifications Framework, Within the scope of the Education Commission Decisions, teaching staff are encouraged to participate in training courses on teaching methods and techniques.	*Our faculty members will participate in a trainers' training program on teaching methods and techniques. (Throughout the year) *Our faculty students will be encouraged to undertake TÜBİTAK 2209-A projects in collaboration with their advisors. (Throughout the year) *Innovative methods and techniques will be added to teaching methods and techniques within the framework of teacher training. (Throughout the year)	*Training of trainers participation certificates *TÜBİTAK 2209 A project results *Course files *Strategic Plan Implementation and Evaluation Report will be checked.	*Revised TÜBİTAK 2209 A projects that were not accepted, following a re-examination by their advisors, will be done. *If faculty participation in the training program is insufficient, feedback will be provided to faculty members to encourage them to participate. *Corrective Investigation (CI) will be conducted for the identified irregularities.	*Deanery *Department Heads *Academic Consultants	*Academic Human Resources *Unit Training/Orientation Commission *Department/Division Boards
B.2. Programs Execution (Student-Centered Learning, Teaching and Evaluation)	Measurement and Evaluation	*The application of multiple measurement and evaluation methods in the evaluation of our faculty's educational activities.		*Strategic Plan, BARU Associate Degree and Undergraduate Education and Examination Regulations, Ensuring the continuity of using multiple measurement methods in the measurement and evaluation processes within the scope of the prepared Curriculum Vıase and the Education Commission Guidelines. *The use of peer, mentor, and self-assessment along with instructor evaluation in relevant courses in line with program accreditation objectives.	*The continuous use of multiple measurement methods in assessment and evaluation will be ensured. (Throughout the year) "In some courses, peer, mentor, and self-assessment will be used in conjunction with instructor evaluation. (Throughout the year) "E-course recordings will be reviewed. (At the end of each semester) "In the Professional Research Project courses, instructor-based, peer-reviewed, and self-assessment methods will be used for assessment and evaluation. (During the Fall and Spring Semesters) "In the professional practice course, the evaluation criteria for care plans, reports, and presentations will include the assessment of the mentor nurse. (Throughout the year) "Different assessment methods will be used for the 2023-2024 Spring and 2024-2025 Fall semester exams, including multiple choice, true/false, open-ended, fill-in-the-blanks, matching, etc. (for both Fall and Spring semesters). *The measurement and evaluation committee will prepare an activity report. (December 2024) *The 2023 Performance Program implementation report will be prepared. (December 2024) *Newly appointed faculty members will participate in training programs on measurement and evaluation (throughout the year). *A training program for mentor nurses will be held. (February 2024) *The course information package system will be updated in accordance with the Process Management Handbook Course Information Package Entry Procedures Detailed Process Card (learning outcomes, program outcomes, learning outcome, program outcome matrix) (At the beginning of each semester) *Midterm, final, and make-up exams, as well as assessment methods such as evaluation of practical work and assignments, will be used to align and evaluate learning outcomes and program outcomes. (During Fall and Spring Semesters) *Transcripts will continue to be generated on a semester basis in the UBİYS system. (Fall and Spring Semesters) *Course evaluation surveys will continue to be administered. (During both Fall and Spring semesters) *Course files must be completed at the end of each term. (Fall and Spring Semesters)	*Lesson file *Percentage of Completion of the Course Information Package *Number of Course Files Prepared (including Student Achievement, Measurement and Evaluation Examples, Student Performance Statuses, Course Evaluation Survey Results, etc.) *Number of Students Whose Graduation Has Been Confirmed *YOK Monitoring and Evaluation Report *Analysis of Exam Questions *Course syllabus *Student Transcripts *Results of Satisfaction Surveys *Process Management Handbook - Program Evaluation and Program Update Detailed Process Cards *Strategic Plan Monitoring and Evaluation Report (Stakeholder) Number of Programs Evaluated and Updated According to Feedback (Nursing Department) *Updated Curriculum *Program Self-Assessment Reports *Will be checked with BİOR	*Multiple assessment in newly added courses The use of these methods will be ensured. *Exam questions will be prepared in accordance with the alignment of learning outcomes with program outcomes. *Multiple assessment methods will be applied when preparing the exams, and the methods to be used in calculating the scores of the questions will be determined accordingly. *Encouraging the use of various measurement and evaluation methods, and providing training in measurement and evaluation for newly appointed faculty members. Participation will be ensured. *Corrective Investigation (CI) will be conducted for the identified irregularities.	*Department/Division Boards *Academic person source	*Deanery
	B.2.3. Student Admission, Recognition of Prior Learning and Crediting	*Implementation of processes relating to student admission, recognition and crediting of prior learning. "The use of multiple teaching methods *Applying teaching techniques that are appropriate to the students' needs and motivations.	Within the scope of Bartın University Associate Degree and Bachelor's Degree Education, Teaching and Examination Regulations; *Continuing the implementation of processes relating to student admission, recognition and crediting of prior learning. *Ensuring that all students have equal access to the laboratory facilities in our faculty. *In our faculty, raising awareness about improving teaching processes through the use of effective teaching methods and techniques, and ensuring the sustainability of related studies.	*The Exemption Committee, the Education Committee, and the Faculty Board will make assessments regarding students' prior learning. (At the beginning of each semester) *Commission decisions will be discussed at the Faculty Board Meeting (at the beginning of each semester).	*Commission activity reports *This will be checked against the meeting minutes.	*The deficiencies identified in the commission reports will be discussed and decided upon at the board meetings. *Corrective Investigation (CI) will be conducted for the identified irregularities.	*Exemption Commission *Education Commission *Faculty Administration Board	*Students	
	B.3.1. Learning Environment and Resources	*The classrooms located in our faculty, The laboratory should have adequate quality and quantity of accessible resources such as textbooks, online books/documents/videos, etc.	Within the scope of the Academic Advising Practice Guidelines; * Activities to promote the learning environment and resources of our university. *Ensuring that all students have equal access to the laboratory facilities in our faculty. *Ensuring that textbooks, online books/documents/videos, etc., are available in appropriate quality and quantity.	*During academic advisory meetings, information will be provided about our university library, periodicals, online books, printed resources, and other learning environments and resources. (Throughout the year) *During the orientation training, our Library and Documentation Department will provide information about our university library, periodicals, online books, printed resources, etc., learning environments and resources. (October 2024) *To ensure equal access to laboratory practices for all students, rotations will continue to be implemented (throughout the year). *Official letters will be sent to the relevant departments regarding book requests (March 2024). *Lesson presentations, resources, and videos will continue to be updated to the e-learning system. (Throughout the year) *The availability of adequate computer and internet access in the classrooms will be checked at the beginning of each term. (At the beginning of each term) *In case of insufficient classroom capacity, classrooms will be allocated in cooperation with other units. (At the beginning of each semester) *Classrooms will be cleaned daily (throughout the year). *In line with the objectives of the vocational course, students will be provided with opportunities to complete their practical training in clinical, field, Ministry of National Education, etc., areas through rotations (throughout the year).	*Orientation training participation records *Minutes of academic advisory meetings *Book request lists *Course files *Rotation plans *List of students using library services *Classroom cleanliness will be checked using a cleanliness control schedule.	*Students who do not attend academic advising meetings will be monitored by their advisors. *If the classrooms, laboratories, textbooks, online books/documents/ videos, etc., in our faculty are not of adequate quality and quantity and are not accessible, the relevant units will be advised to make corrections. *When deficiencies in classroom infrastructure are identified, collaboration will be established with other faculties of the University, and additional classrooms will be requested. *In case of insufficient classroom capacity, classrooms will be allocated in cooperation with other units. *Corrective Investigation (CI) will be conducted for the identified irregularities.	*Academic staff *Deanery *Department Heads	*Provincial Health Directorate *National Education Directorate *Family and Social Policies Directorate *UZEM Coordination Office *Library and Documentation Department *Administrative staff	
	B.3.2. Academic Support Services	*Our faculty members hold meetings every two weeks with the students they advise. *Our faculty members closely monitor the academic development of the students they advise. *Our faculty provides internship opportunities to students advised by our teaching staff. *Our faculty members are encouraging students they advise to submit project applications.	*Ensuring that academic advisory meetings continue regularly. *Monitoring students' academic progress *Our Faculty's Guidance and Psychological Counseling Department in academic advisory meetings Providing information about the Advisory Commission. *Providing information about the Psychological Counseling and Guidance Application and Research Center at academic advisory meetings. *Informing and encouraging students about internship opportunities and project applications. *Conducting Academic Advising Evaluation Surveys *Providing information about student clubs at counseling meetings *Club introduction at the start of the academic year *The Sports Commission will organize competitions with our university and faculty as part of the sports festivals. *Activity planning by the Healthy Steps Club, LOSEV Club and Yönlü Club *Providing consultancy to student clubs	*Academic advisory meetings will be held at least twice a month (throughout the year). *Academic advisory meetings will provide information on academic development, internship opportunities, and project applications. (Throughout the year) *Information about our Faculty's Guidance and Psychological Counseling Commission will be provided at academic advisory meetings (throughout the year). *Information about the Psychological Counseling and Guidance Application and Research Center will be provided at academic advisory meetings. (Throughout the year) *Academic Advising Evaluation Surveys will be conducted. (Throughout the year) *Information about student clubs and club introductions will be provided at academic advisory meetings. (October 2024) *The Sports Commission will organize competitions in collaboration with our university and faculty as part of sports festivals every academic term (throughout the year). *The Healthy Steps Club will be planning events as part of World Health Day and Nurses' Week celebrations. (April-May 2024) *The LOSEV Club will be planning an event as part of World Leukemia Children's Week. (November 2024) *The Turkish Red Crescent Club will be planning events as part of Red Crescent Week and Blood Donation Day. (May-November 2024)	*Meeting minutes *Commission activity reports *Club activity reports *News, posters, brochures, etc. related to the activities have been published. *Official documents and agreements *Website image or link *Strategic Plan Implementation and Evaluation Report *Action plan implementation report will be used for verification.	*Activities will be planned in collaboration with the Psychological Counseling and Guidance Application and Research Center to enable students in need to benefit from psychological counseling services.	*Deanery *Guidance and Psychological Counseling Commission *Sports Commission *Turkish Red Crescent Club *Green Crescent Club *LOSEV Club *Healthy Steps Club *Department Heads	*Academic and administrative human resources *Students *Psychological Counseling and Guidance Application and Research Center	
B.3. Learning Resources and Academic Support Services	B.3.3. Facilities and Infrastructure	*Social and sports facilities located within our faculty facilities, classrooms, various centers, Anatomy, First Aid and Nursing Skills Laboratories suitable quality and quantity, accessible being	Within the scope of the Academic Advising Practice Guidelines; *The social and sports facilities, classrooms, and various centers located within our faculty, Ensuring that Anatomy, First Aid, and Nursing Skills Laboratories are accessible and of appropriate quality and quantity. *Incentives for students to utilize the facilities and infrastructure services included in the Strategic Plan, in line with the objective of increasing the number of students using these services.	*Class schedules will be prepared and posted at the entrance of each classroom. (At the beginning of each term) *Information regarding the use of social and sports facilities will be provided during academic counseling and orientation training. (Throughout the year) *A tournament will be organized by the Sports Commission for the use of sports facilities. (May 2024) *The Anatomy, First Aid, and Nursing Skills Laboratories will be maintained with appropriate quality and quantity, and their accessibility will be ensured through student rotations (throughout the year).	*Student rotations *Official letter *Class schedules *This will be checked against the meeting minutes.	*In cases where the numerically determined targets for student use of facilities, centers, and laboratories are not met, the reasons will be investigated and plans will be made accordingly. *Corrective Investigation (CI) will be conducted for the identified irregularities.	*Deanery *Department Heads *Sports Commission	*General Secretariat *Administration and Financial Affairs Department *Presidency *Provincial Health Directorate *Students	
	B.3.4. Disadvantaged Groups	*In our faculty, the necessary arrangements are being made to ensure that disadvantaged groups have access to educational opportunities, and these arrangements... it is being monitored by the Dean's office. *Various activities are organized to raise our students' awareness of disadvantaged groups. *Our university has exemplary practices.	* Departments should plan events on important days and weeks throughout the year related to disadvantaged groups. *Conducting awareness-raising activities for disadvantaged groups in Volunteer Work and Social Responsibility Projects courses.	*Activities will be organized in cooperation with the Bartın Provincial Directorate of National Education. (Throughout the year) *Events will be organized as part of Social Responsibility Projects. (During the Fall-Spring Semester) *Activities will be organized as part of volunteer work. (During the Fall and Spring semesters)	*Application forms *Event request form *Event news *Poster or brochure *BİOR *Strategic Plan Monitoring and Evaluation Reports *Unit Activity Reports *Social Responsibility Project Final Reports *This will be checked with the PDCA Action Plan Monitoring and Implementation Report.	*If no activities are carried out to raise awareness about disadvantaged groups, the reasons will be identified and the necessary improvements will be made.	*Deanery *Department Heads	*Disabled Student Unit Coordination *Students *Provincial Directorate of National Education	

				*In academic advisory meetings, faculty members should encourage students to make use of the university's infrastructure and facilities. *First-year students from all departments will receive information about the university's infrastructure and facilities during the Student Orientation training. *The opening of a prenatal school will be ensured. *The number of social responsibility projects undertaken by students will be increased. *Social responsibility activities will be increased through TÜBİTAK projects. *The number of clubs will be increased. *The quotas for Social Responsibility and Volunteer Studies courses will be increased. *The number of teaching staff who will conduct these courses will be increased. The First Aid Training and Instructor Training Center will provide data on the number of participants and their success rates.	*First-year students from all departments will receive information about the university's infrastructure and facilities during the Student Orientation training. (At the beginning of each semester) *In academic advisory meetings, faculty members will continue to encourage students to utilize the University's infrastructure and facilities. (Throughout the year) *Our faculty's scientific, cultural, social, and sporting activities will be planned annually. (Throughout the year) *Community contribution activities will be planned within the scope of the course. (Throughout the year) *Student Projects under the theme of Social Contribution (2019-A) will be planned annually (throughout the year). *Student Club Community Contribution Activities will be planned annually. (Throughout the year) *Projects supported by external funds will be planned annually. (Throughout the year) *First Aid Training and Instructor Training Center Courses will be organized. (Throughout the year) *Process Cards will be used. (Throughout the year)	*Event request form *Event news webpage link or image *Poster or brochure *Official documents *Meeting minutes *BİÖR *Strategic Plan Monitoring and Evaluation Reports *Unit Activity Reports *Social Responsibility Project Final Reports *Stakeholder Feedback *FDCA Action Plan Monitoring and Implementation Report It will be checked.	*Due to limited infrastructure in our faculty, necessary improvements will be made in cooperation with clubs to increase participation in social, cultural and sporting activities.	*Deanery *Sports Commission *Turkish Red Crescent Club *Green Crescent Club *N.O.S.B.V. Club *Healthy Steps club *Department Heads *Academic staff *Health, Culture and Sports Department Presidency *Academic and administrative human resources *Students	
	B.4.1. Appointment, Promotion and Assignment Criteria	*Teaching staff quotas Identifying and requesting solutions in the areas where they are needed. *Faculty course assignments teaching staff's expertise fields and course load balances fair distribution by taking into consideration to be done	*Strategic Plan, Education and Training Quality Policy, Education and Training Quality Policy, Turkish Higher Education Qualifications Framework and the Duties of Teaching Staff Within the scope of their definitions, due to the large number of practical courses and the need to effectively conduct research activities, there is a demand for an increase in the number of teaching staff. *Within the scope of the Quality Assurance Policy, the Department operates under a participatory management approach. Requests/demands from the relevant departments will continue to be received at board meetings. *Ensuring the continuity of fair course distribution in faculty assignments, taking into account the expertise areas and teaching load balances of faculty members. *Course assignments will continue to be made by taking into account the opinions and suggestions of the teaching staff at the Department Board meetings.	*The processes for determining the standard staffing levels for teaching staff and making requests for needed areas will be decided upon in Department Board Meetings held with the participation of all teaching staff. (Throughout the year) *In our faculty, course planning will be done in the fall and spring semesters by taking into account the opinions of the teaching staff in the departments. (At the beginning of each semester) *At the end of the term, the results of the course satisfaction surveys received from the Quality Coordination Office will be evaluated by the academic boards. (Throughout the year)	*Meeting minutes *Course satisfaction survey results *This will be verified with official documents.	*Necessary requests will be made to address the shortage of academic human resources. *Necessary measures will be taken based on the survey results. <i>*Correctional Investigation (ÇTİ) will be conducted for the identified irregularities.</i>	*Deanery, *Department Heads *Personnel Department *Quality Coordination		
B.4. Teaching The roster	B.4.2. Teaching Competencies and Development	*Receiving in-service training requests from academic staff in our faculty and reporting them to the Rectorate. *Newly appointed academic staff and all teaching participation of staff in training programs aimed at improving their teaching competencies monitoring *Regular participation in training programs such as instructor training to learn and use interactive active teaching methods and distance education processes.	*Strategic Plan, Education and Training Quality Policy, Education Commission Decisions and As part of the Education and Training Quality Policy, ensuring that teaching staff continue to benefit from the instructor training program.	*In-service training requests will be submitted to the Rectorate after being requested from departments and administrative staff. (Throughout the year) *Newly appointed teaching staff will participate in trainer training programs (Assessment and Evaluation, Teaching Methods and Techniques) (throughout the year). *In order to enhance the teaching competencies of faculty members in line with the requirements of the age, they will participate in a trainer training program in accordance with the Teaching Competency Development Process Card. (Throughout the year)	*Participation certificates *Official documents *Strategic goals and indicators will be monitored through tracking and implementation reports.	*If insufficient participation of faculty members in training programs is identified, strategies to encourage their participation will be developed. <i>*Correctional Investigation (ÇTİ) will be conducted for the identified irregularities.</i>	*Deanery * Department Heads *Academic staff *Quality Commission *Academic and administrative staff *Quality Coordination		
	B.4.3. Incentives and Rewards for Educational Activities	*Research and development activities in our faculty are in line with our Faculty's 2024-2028 Strategic Plan. Prepared with a plan and in 6-month periods. Monitoring and measuring through Performance Program Implementation Reports. *The faculty has a high level of participation in activities aimed at improving the scientific competence of its teaching staff. *Incentive mechanisms to improve the academic performance of teaching staff	Strategic Plan, Education and Training Quality Policy and Bartın University Faculty Within the scope of the Directive on Evaluating and Rewarding the Educational Performance of Staff: *Encouraging the continued participation of our faculty members in educational and scientific activities. *Encouraging our faculty members to apply for academic incentives. *Support for faculty members to increase the quantity and quality of their academic work. continue to be given	*Discussions will be held in academic and departmental board meetings throughout the year regarding how faculty members can improve their academic work. *The award status of our faculty members will be monitored according to the Bartın University Academic Performance Awards Guidelines. (Throughout the year) *Applications from faculty members who apply under the Bartın University Faculty Performance Evaluation and Reward Guidelines will be followed up (throughout the year). *The Faculty Strategic Plan monitoring and evaluation report will be used to track whether or not we have achieved our goals. (July - December 2024)	*Meeting minutes *Strategic Plan monitoring and implementation report *Will be checked with BİÖR.	*Reporting of deficiencies identified in the 6-month monitoring and evaluation report and instruction, notify the employees <i>*Correctional Investigation (ÇTİ) will be conducted for the identified irregularities.</i>	*Department Heads *Deanery *Academic staff		
*Strategic Plan Monitoring and Evaluation Reports									
Explanations [1] What is planned to be implemented during the year to improve the identified strengths and to transform areas open to improvement into strengths? If any, what are the desired goals and performance indicators? [2] What is the schedule and how will the planned actions be implemented? [3] How will it be checked whether the desired goals and/or performance indicators have been achieved? [4] What will be done to continue the strengths that are improved with the areas open to development that evolve into strengths, and what standards will be introduced?									

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C. RESEARCH AND DEVELOPMENT									
#	Sub-criteria	Strengths	Areas for Improvement	Plan [1]	Apply [2]	Check [3]	Take precautions [4]	Responsible Unit	Cooperation will be established. Units
C.1. Management of Research Processes and Research Resources	C.1.1. Research Processes Management	*Faculty Strategic Plan and Department for the Period 2024-2028 The strategic target indicators should be defined, and indicators related to research processes should be included in these plans. *To improve the quality of scientific publications in our faculty, activities will be carried out to raise awareness among our faculty members, and infrastructure work will be done to provide resources for scientific studies.	*To ensure the effective use of our faculty's resources, we aim to increase the number of project applications and encourage faculty members and students to obtain project support from national and international external funds.	Strategic Plan Objectives and Indicators for the Period 2024-2028 and Research Within the scope of the Development Policy Document. *Ensuring an increase in the quality of scientific publications by our faculty members. *Increasing the number of projects outside the institution *Encouraging an increase in the number of projects being carried out in the field of specialization and supported by external funds. According to the Process Management Handbook; *Monitoring the progress of the research and development process targets and indicators specified in the Strategic Plan every six months. *Identifying risks to achieving strategic goals and indicators.	*The Strategic Monitoring and Evaluation report will be reviewed by the internal control monitoring and steering committee. (July - December 2024) *Faculty members will be encouraged to participate in training and events on research methods, statistics, academic writing skills, and resources such as Wiley and Clarivate (throughout the year). *Academic staff will be guided and motivated regarding the management of the Unit's research processes. (Throughout the year) * Unit research results will be shared with the Advisory Board. (December 2024) *Faculty members will be provided with opportunities to participate in training on external projects and to write project proposals. (Throughout the year) *Faculty members will be encouraged to participate in training courses, seminars, and symposiums related to their area of specialization (throughout the year).	*Meeting minutes *Strategic Monitoring and Evaluation Report *Participation certificates *Project documents that have been accepted and submitted. *Unit Internal Evaluation Report will be checked.	*At the Academic Board Meetings held at the end of the term, measures to be taken regarding the unmet goals for the next 6 months will be determined. *The unit's internal evaluation report will be used to identify strengths and areas for improvement, and the action plan for the following year will be prepared accordingly.	*Deanery *Department Heads *Academic staff *Quality Commission	*Library and Documentation Department Presidency *Advisory board *Project Technology Office General Coordination *Quality Coordination
	C.2.1. Research Competencies and Development	*Faculty Strategic Plan and Department for the Period 2024-2028 The strategic target indicators should be defined, and indicators related to research processes should be included in these plans. *Our faculty is carrying out domestic/international, public/private sector funded projects. *The quality and quantity of achievements and publications produced by our faculty members are increasing.	*Strengthening our academic staff through ongoing faculty recruitment processes.	*2024-2028 Strategic Plan Goals and Indicators and Research Development Policy Document; continuation of supported projects financed domestically/internationally, by the public/private sector. *Performing and monitoring tasks and processes according to the process management handbook. * Planning at the unit level to achieve strategic goals and indicators in terms of quantity and quality. *Identifying risks to achieving strategic goals and indicators.	*The Strategic Monitoring and Evaluation report will be reviewed by the internal control monitoring and steering committee. (July - December 2024) *Faculty members will be encouraged to participate in training, symposiums, and panels related to domestic/international, public/private sector funded projects. (Throughout the year) *Support will be provided in corporate collaboration processes. (Throughout the year)	*Strategic Monitoring and Evaluation Report *Certificate of participation *The accepted project will be checked against the submitted project documents.	*At the Academic Board Meetings held at the end of the term, measures to be taken regarding the unmet goals for the next 6 months will be determined. *Risks in project application processes identification and risks related to them its management will be planned.	*Deanery *Department Heads *Academic staff *Quality Commission	*Deanery *Project Technology Office General Coordination
C.2. Research Competence, Job troops and Supports	C.2.2. National and International Joint Programmes and Partnerships Research Units	*Having commissions in our faculty focused on national and international collaboration programs, *Personnel during orientation training for newly appointed faculty members. They should be informed about national and international exchange programs through the Adaptation Guide.		Erasmus Exchange Program Guidelines, BARU Internationalization Policy Document and Process Management Handbook within the scope of the Internationalization Sub-Process; *Increasing bilateral agreements for international exchange programs *Continuing the activities of commissions in our faculty regarding national and international cooperation programs. *Encouraging faculty members to participate in international exchange programs and increase their collaborations with international researchers. *Clarifying how to improve relations with existing international partners and what to look for in seeking new partnerships.	*Correspondence will be conducted to increase bilateral agreements for international exchange programs (throughout the year). *Awareness-raising among incoming and outgoing faculty members in international exchange programs *Official training sessions will be held. (Throughout the year) *Assessment Report on the Needs of Academic Human Resources Related to International Exchange Programs Participation in training programs will be encouraged (throughout the year). * In international project applications, potential partners will be identified through evaluations based on international university rankings, CVs of expert researchers, etc. (Throughout the year) * General Coordination Office for External Relations and General Directorate of Project and Technology Office Training on international bilateral collaborations will be requested from the coordination office. (Throughout the year)	*Correspondence *Strategic Monitoring and *Certificate of Participation *Unit Internal Evaluation Report *Will be checked against the MECRA report.	*The unit's internal evaluation report will be used to identify strengths and areas for improvement, and the action plan for the following year will be prepared accordingly. *If there is no increase in the number of collaborations, the shortcomings in the process will be identified and suggestions for improvement will be received for the following year. *If collaborations with international researchers increase and the number of faculty members benefiting from exchange programs is low, measures will be taken to improve the situation. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Academic human resources *Erasmus Commission *Deanery	*General Directorate of Foreign Relations Coordination *Project and Technology Office General Coordination *Erasmus Coordination
	C.3.1. Monitoring and Evaluating Research Performance	*The high number of events organized and attended by faculty members in our faculty to improve their research competencies. *Thanks to the support our faculty members provide to our students, we have a high number of TUBITAK 2209-A projects.		Research and Development Quality Policy, Academic Incentive Regulation, Academic Performance and Project Awards Guidelines, Process Management Manual The book is a research performance monitoring and evaluation sub-process. Within the scope of the Project Management Sub-Process. *Planning activities to ensure the continued quantitative and qualitative increase in the number of articles submitted to and accepted by journals in the Web of Science or Scopus categories. *Ensuring the continuity of TUBITAK 2209-A project applications. *Academic staff participate in training programs focused on interdisciplinary and R&D projects and submit project applications. *Academic staff to undertake projects related to our university's area of specialization. *Increasing the number of patent and utility model applications	*Academic staff will attend information seminars on the publication process in field-indexed journals and international journals. (Throughout the year) *Articles will be submitted to journals in the Web of Science or Scopus categories. (Throughout the year) *Project applications and/or project partnerships will be submitted for Erasmus+ Programs. (Throughout the year) *Project applications will be submitted to TUBITAK programs. (Throughout the year) *Students will be encouraged to participate in TUBITAK 2209-A projects (throughout the year). *Projects will be carried out in line with our university's areas of specialization. (Throughout the year) *Participation in training courses related to patents and utility models will be encouraged. (Throughout the year)	*Publication information *Erasmus Participation Certificate *Project Application Information *Strategic Monitoring and Evaluation Report *Unit Internal Evaluation Report *This will be checked against the MECRA report.	*Deficiencies identified in the monitoring and evaluation report will be reported and communicated to the teaching staff. *If the number of accepted articles falls below the target, submissions to different journals will be encouraged. *Participation in training programs will be facilitated if there are few project, patent, or utility model applications. *Faculty members will identify any problems encountered during the process and present suggestions for improvement in the following year. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Academic human resources *Department Heads *Deanery	*Library and Documentation Department Presidency *Project and Technology Office General Coordination *Erasmus Coordination
C.3.2. Evaluation of Faculty/Researcher Performance		*Achieving research and project goals within the scope of strategic target indicators for faculty members.		* Our 2024-2028 Strategic Plan, Research and Development Quality Policy, Academic Incentive Regulations, Academic Performance and Project Awards The directive, in accordance with the Process Management Handbook Research and Development Main Process, aims to increase the number of internally and externally (national, internationally) funded projects in our Faculty. *Increasing the number of projects in which faculty members participate as principal investigators and researchers.	*The high increase in TUBITAK 2209-A student applications and acceptance numbers in our faculty will continue (throughout the year). *Our faculty's academic staff will be encouraged to participate in training programs related to research objectives within the scope of strategic target indicators. (Throughout the year) *In accordance with the Faculty Promotion and Appointment Guidelines, faculty members will be encouraged to apply for project funding from external sources (throughout the year). *Our faculty members will participate in training sessions provided by the PTO (Project Management Organization) to learn about external institutions that can provide support for their projects. (Throughout the year)	*6-Month Monitoring and Evaluation Report *TUBITAK 2209-A application and results announcement page *Training/Participation Certificates *Project application and acceptance documents *This will be checked against the MECRA report.	*Our faculty students will be encouraged by academic advisors within the scope of TUBITAK-2209A. *Faculty members will identify any problems encountered during the process and present suggestions for improvement in the following year. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Academic human resources *Deanery * Department Heads * Students	*TUBITAK *Project and Technology Office General Coordination *Library and Documentation Department Presidency

Explanations

[1] What is planned to be implemented during the year to improve the identified strengths and to transform areas open to improvement into strengths? If any, what are the desired goals and performance indicators?

[2] What is the schedule and how will the planned actions be implemented?

[3] How will it be checked whether the desired goals and/or performance indicators have been achieved?

[4] What will be done to continue the strengths that are improved with the areas open to development that evolve into strengths, and what standards will be introduced?

QUALITY PROCESSES PDCA CYCLE-BASED ACTION PLAN FORM

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Revision No.	1

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D. SOCIAL CONTRIBUTION									
#	Sub-criteria	Strengths	Areas for Improvement	Plan [1]	Apply [2]	Check [3]	Take precautions [4]	Responsible Unit	Cooperation will be established. Units
D.1. Management of Social Contribution Processes and Social Contribution Sources	D.1.1. Management of Social Contribution Processes	*Our unit's community service activities are progressing at the desired level.	*Transforming events into social responsibility projects	* According to the curriculum regarding social contribution; students should be encouraged to choose courses that promote social contribution. * Encouraging faculty and students to submit social responsibility project applications, in line with the goal of increasing social responsibility projects included in our 2024-2028 Strategic Plan. * Encouraging participation in guideline introductions and project process trainings in collaboration with the Social Responsibility Project Coordination Office.	*Information regarding courses with social impact will be provided at academic advisory meetings. (At the beginning of each semester) *Collaboration with the Social Responsibility Project Coordination Office will take place. (Throughout the year) *Participation in training programs related to Social Responsibility Projects will be encouraged. (Throughout the year) *Social responsibility project processes will be carried out within the scope of the Social Responsibility Project Coordination Implementation Guidelines. (Throughout the year)	*Course registration reports *Certificate of participation *Meeting minutes *Strategic Plan Monitoring and Evaluation Report *This will be checked with the Unit Internal Evaluation Report.	*Efforts will be made to increase the number of courses and activities in this area by raising the issue in academic meetings. *Through academic advisors raising student awareness, the interest in these socially contributing courses will be increased. *The unit's internal evaluation report will be used to identify strengths and areas for improvement, and the action plan for the following year will be prepared accordingly. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Students *Teaching Staff *Department Heads *Deanery	*Social Responsibility Project Coordination *Students
	D.1.2. References	* Our faculty must have sufficient infrastructure and qualified human resources to enable the realization of its community contribution activities. * Obtaining support from our faculty's human resources (teaching staff, administrative staff, students)	*Increasing the number of joint projects that our faculty will carry out with external stakeholders regarding its social contribution activities.	*According to BARU's Social Contribution Policy; regular communication with external stakeholders and strengthening relationships. *Understanding stakeholder expectations and evaluating how to collaborate more effectively on projects. *Informing academic and administrative staff and students about the infrastructure resources they can use for social responsibility projects and activities. *Continuing to provide human resource support from our academic and administrative staff for social responsibility activities.	*Information meetings will be organized throughout the year to inform students and academic staff about the project application schedule and process. * Opportunities will be provided for joint meetings with external stakeholders (throughout the year). * Participation in project-related training will be encouraged. (Throughout the year) *Information will be provided regarding infrastructure resources that can be used for social responsibility activities. (Throughout the year) *Our laboratories used for social responsibility activities and our First Aid Training and Instructor Training Center will continue to be used (throughout the year). *Data regarding infrastructure and human resources used in social responsibility activities will be monitored through strategic goal and indicator monitoring reports. (Twice a year)	* Strategic Plan Monitoring and Evaluation Report *Official correspondence *Certificate of participation *Meeting minutes *This will be checked with the Unit Internal Evaluation Report.	*Evaluation presentations will be given on the implementation processes of the projects that have been accepted within the scope of the project. *The unit's internal evaluation report will be used to identify strengths and areas for improvement, and the action plan for the following year will be prepared accordingly. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Students *Teaching Staff *Department Heads *Deanery	*Deanery *Social Responsibility Project Coordination *External Stakeholder Institutions *Students
D.2. Social Contribution Performance Evaluation	D.2.1. Monitoring of Social Contribution Performance and Evaluation	* Our faculty members carry out various activities in line with the needs of our region and the city we live in, and students take part in social responsibility activities and volunteer work. *Our faculty's contribution to society activities and project objectives determined in the strategic plan	*Encouraging faculty members to participate in international projects Social responsibility increasing the number of students involved in activities and volunteer work	*According to the Process Management Handbook; assignments to departments should be made taking into account our faculty's strategic plan and the university's event calendar. * According to the Strategic Plan; faculty members should continue to work on projects that contribute to society. *BARU Student Clubs and Social Responsibility According to the Project Coordination Implementation Guidelines; students should participate in social responsibility activities and volunteer work through clubs and courses.	According to our university's event calendar; *World Obesity Day event will be held. (March 2024) *March 15th World Social Work Day Event: "Social Work in Disasters and Field Experiences" will be held. (March 2024) *An event will be held for Seniors' Week, March 18-24. (March 2024) *Cancer Awareness Week events will be held from April 1-7. (April 2024) *An event will be held as part of World Health Day, April 4-10. (April 2024) *Events will be held as part of the World Midwives Day on May 5th and the National Midwives Week from April 21-28 (May 2024). *An event will be held on May 5th, World Hand Hygiene Day. (May 2024) *Nursing Week events will be held from May 12-18. (May 2024) *An event will be held as part of Breastfeeding Week, October 1-7. (October 2024) *An event will be held as part of Breast Cancer Awareness Day on October 15th. (October 2024) *An event will be held as part of Organ Donation and Transplantation Week, November 3-9. (November 2024) *An event will be held as part of World Prematurity Day on November 17th. (November 2024) *Students will take part in events organized by our faculty. (Throughout the year) *Our social contribution performance will be monitored and evaluated according to the "Management of Social Contribution Activities Sub-Process" and "Monitoring and Evaluation of Social Contribution Activities Detailed Process" of the Process Management Handbook. (Throughout the year)	*Strategic Plan Annual Monitoring and Evaluation Report *Certificate of participation *Meeting minutes *This will be checked with the Unit Internal Evaluation Report.	*Effective communication will be maintained with the institutions and organizations of our city. *The unit's internal evaluation report will be used to identify strengths and areas for improvement, and the action plan for the following year will be prepared accordingly. *Correctional Investigation (CPI) will be conducted for the identified irregularities.	*Students *Teaching Staff *Department Heads *Deanery	*Deanery *Department Head *Students *Clubs *SKS Department

Explanations
[3] What is planned to be implemented during the year to improve the identified strengths and to transform areas open to improvement into strengths? If any, what are the desired goals and performance indicators?
[2] What is the schedule and how will the planned actions be implemented?
[3] How will it be checked whether the desired goals and/or performance indicators have been achieved?
[4] What will be done to continue the strengths that are improved with the areas open to development that evolve into strengths, and what standards will be introduced?