BARÜ

BARTIN UNIVERSITY
FACULTY OF HEALTH SCIENCES

INTERNAL UNIT ASSESSMENT REPORT

2025

Unit Quality and Accreditation Committee

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A. LEADERSHIP, GOVERNANCE AND QUALITY

A.1 Leadership and Quality

A.1.1 Governance Model and Administrative Structure

The governance model and administrative structure of the Faculty of Health Sciences are defined in alignment with the faculty's mission, vision, and strategic goals. In accordance with the principle of transparency, the organization chart of our faculty and the duties, powers, and responsibilities of all units included in this chart have been shared with the public on the faculty website (A.1.1.1,A.1.1.2). With the same understanding, the organization charts of the departments within the faculty and the structuring of their sub-units are also accessible on the department web pages (A.1.1.3,A.1.1.4,A.1.1.5). The faculty's quality policy is aligned with the university's quality assurance and management system policies and is supported by activities carried out within the framework of the 2024–2028 Strategic Plan (A.1.1.6,A.1.1.7,A.1.1.8, A.1.1.9). The job descriptions of all academic and administrative staff working at the faculty have been defined in writing and are notified to personnel during the onboarding process (A.1.1.2,**A.1.1.10).**All the faculty's business and transactions are carried out in accordance with the provisions of the relevant legislation,Management and workflow processes are carried out in accordance with the process cards included in the Bartın University Process Handbook (A.1.1.11, A.1.1.12). In addition, within the first four weeks after taking up their duties, orientation trainings are provided to academic and administrative staff, along with information regarding duties, authority, and responsibilities (A1.1.13,A.1.1.14,A.1.1.15,A.1.1.16,A.1.1.17). The faculty's governance model, organizational structure, and task allocations are accessible to internal and external stakeholders. Organizational charts, memberships of boards and commissions, and faculty and department web pages publish them (A.1.1.1,A.1.1.2,A.1.1.3, A.1.1.4,A.1.1.5,A.1.1.18,A.1.1.19). In line with the participatory governance approach, student representation is ensured through Faculty Board, Faculty Advisory Board, and Department Board meetings, and students' opinions are reflected in decision-making processes (A.1.1.18,A.1.1.19, **A.1.1.20)**. Faculty Board and Faculty Administrative Board decisions are published publicly in accordance with the provisions of the KVKK (A.1.1.21,A.1.1.22). The functioning of the faculty' s management and organizational structure is monitored regularly through Unit Internal Evaluation Reports, Strategic Plan monitoring reports, advisory board evaluation reports, and annual improvement plans (A.1.1.23,A.1.1.24,A.1.1.25,A.1.1.26 A.1.1.27).Monitoring results are evaluated in Academic General Assembly meetings and directly reflected in decision-making processes (**A.1.1.28).**These processes are handled within the PÜKO cycle to ensure that monitoring and improvement activities are carried out (A.1.1.29). In our faculty, beyond law-

based practices, a unique management approach is implemented based on the integrated execution of Unit Internal Evaluation Reports, Strategic Plan monitoring reports, and annual improvement plans (**A.1.1.30**,**A.1.1.31 A.1.1.32).**In addition, the orientation trainings conducted in accordance with the Personnel Orientation Guide prepared for the faculty and updated regularly are assessed through satisfaction surveys and continuously improved in line with the findings obtained (**A.1.1.15**,**A.1.1.16**,**A.1.1.17**). This holistic approach shows that quality assurance in our faculty is operated in a sustainable and systematic manner.

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A.1.2. Leadership

The Faculty of Health Sciences operates with a dynamic leadership approach that takes ownership of the quality assurance system and can manage change and uncertainty. Since the establishment of the faculty, uncertainties have been reduced by creating workflows and job descriptions regarding academic and administrative processes in line with the quality assurance policy (**A.1.2.1**,**A.1.2.2**). In order to ensure that any complexity that may arise in the processes does not lead to a loss of motivation, social events are organized through the social activities commission, and the motivation of academic and administrative staff is supported (**A.1.2.3**). In addition, staff members' efforts and achievements are made visible through appreciation certificates via UBYS and by being shared on the faculty website and in their social media accounts (**A.1.2.4,A.1.2.5**,**A.1.2.6**). A multi-channel and effective communication network has been established in the faculty between management and academic and administrative staff. Through the UBYS system, the "Contact Us" platform, email groups, and instant messaging applications, fast and continuous communication is ensured (**A.1.2.7**,**A.1.2.8,A.1.2.9**). In sharing authority and assigning duties, balance is taken into account; the assignment of duties by faculty committees is discussed in the Academic General Assembly and shaped in line with feedback from academic human resources (**A.1.2.10**,**A.1.2.11).** This approach contributes to managing relationships in a participatory and transparent manner. The leadership qualities and competencies of unit managers are assessed annually by academic and administrative personnel through the "Manager Performance Evaluation Survey" (**A.1.2.12**). The survey covers multi-dimensional areas such as human relations, leadership, guidance, problem solving, empowerment, organizational skills, and participatory management. By including vice

department chairpersons, heads of departments, and student representatives in the evaluation process, a multi-stakeholder monitoring approach has been adopted.The dissemination and internalization level of the quality culture is monitored through manager performance evaluation surveys, Academic General Assembly meeting minutes, Faculty Quality Commission decisions, and PÜKO-based action plan monitoring reports (**A.1.2.12,A.1.2.13,A.1.2.14,A.1.2.15).**Monitoring results are supported not only by reporting, but also by evaluating them in meetings with the participation of all stakeholders, thereby ensuring that the quality culture is adopted at the institutional level (**A.1.2.13).**Improvement plans are prepared for the areas identified as open for development in line with the monitoring results regarding leadership performance, and the implementation status of these plans is monitored annually (**A.1.2.14**). The findings obtained are secured through board decisions, and the processes are updated with a continuous improvement approach (**A.1.2.15).**In this way, leadership practices and the quality culture are developed in a dynamic structure.Discussing the results of the "Manager Performance Evaluation Survey" implemented within the faculty with all stakeholders together during the Academic General Assembly meetings is a distinctive leadership approach that goes beyond standard monitoring practices (**A.1.2.13).**Through this practice, monitoring results are assessed in a participatory setting, enabling the sustained internalization of a quality culture in a structure that spreads from top management down to the grassroots. In this regard, our faculty offers a unique example of a quality-focused and participatory leadership approach.

Evidence

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A.1.2.2: Job Descriptions

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Faculty's Transformation Capacity

In line with BARÜ's Quality Assurance Policy Document, the Management System Policy Document, the Education-Training Policy Document, the Internationalization Policy Document, and the Social Contribution Policy Document, our faculty has adopted a change management model that takes into account changes in the higher education ecosystem, national goals, and stakeholder expectations. This model enables the unit to be managed in a coherent, future-ready, and sustainable manner. Within our unit, the 2024–2028 Strategic Plan was prepared by taking stakeholder input and has been concretized to include mission and vision updates and targets aligned with the future (**A.1.3.2**,**A.1.3.3**). Within the framework of the purposes and objectives determined in line with the strategic plan, unit activities are carried out using modern management techniques, and the philosophy of continuous improvement is applied in all processes (**A.1.3.2**,**s:22).**Our unit conducts benchmarking studies based on the practices and good examples of similar higher education institutions.The findings obtained are reflected in the education and training, research, and management processes as innovative practices and are implemented within a systematic innovation management process (**A.1.3.4**). In our faculty, the Dean's Office, Department Headships, the Faculty and Department Commissions actively carry out their duties for the effective management of transformation processes. Through these committees, transformation practices are planned, implemented, and monitored (**A.1.3.4**,**A.1.3.5).** In addition, our Faculty Quality Commission and Advisory Board provide guidance for change processes by holding consultations regarding education and training processes (**A.1.3.6**). The results of transformation practices are regularly followed up through commission activity reports and improvement plans. Based on the monitoring results, decisions on improvement and measures are taken in the areas where needed, and processes are updated in line with strategic objectives (**A.1.3.7**). In this way, change management is carried out within a planned, monitorable, and continuously improving structure.Our faculty has original practices aimed at institutionalizing student-centered education, contributions to society, and entrepreneurial and innovative activities through research for regional development. Among these:

Active operation of the region's sole First Aid Training and Instructional Training Center **(A.1.3.8, A.1.3.9),**

Process Management Handbook Program Update Details Process: Inclusion of the digital and innovative courses located in the card (Nursing Care Technologies, Digital Nursing, Artificial Intelligence in Health, Digital Midwifery, etc.) in the educational plan (A.1.3.10,A.1.3.11),
Planned implementation of community contribution and social responsibility projects within the scope of the Activity Calendar (**A.1.3.12),**

takes place. These practices stand out as original and measurable approaches that strengthen the unit's transformation capacity.

Evidence

A.1.3.1: Policy Documents
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A.1.3.3: Mission, Vision, and Core Values of the Faculty of Health Sciences
A.1.3.4: Faculty Commissions
A.1.3.5: Activity Reports of Faculty Commissions for the Year 2025
A.1.3.6: Activity Report of the Advisory Board for the Year 2025
A.1.3.7:2025 Improvement Plan Report
A.1.3.8: First Aid Training and Instructor Training Center
A.1.3.9: First Aid Training News Text
A.1.3.10: Training Brochure-2025
A.1.3.11:2025 Strategic Plan Achievement Report of the Faculty of Health Sciences
A.1.3.12:2025 Activity Calendar

A.1.4. Internal Quality Assurance Mechanisms

In our faculty, internal quality assurance practices are carried out on the basis of our university's quality policies and the Process Management Handbook (**A.1.4.1, A.1.4.2).**Within this scope, the Unit Quality Commission works actively within the framework of its job description and carries out activities for the planning, monitoring, and improvement of quality processes (**A.1.4.3, A.1.4.4, A.1.4.5).**Quality activities in our faculty are carried out within the framework of the PDCA cycle. Strategic Plan Monitoring, Evaluation, and Realization Reports and Improvement Plans are prepared; they are monitored at six-month intervals and the implementation process is managed with assigned responsibilities (**A.1.4.6, A.1.4.7, A.1.4.8).**At the beginning and end of the period, meetings are held to regularly monitor the level of achievement of the objectives (A.1.4.9,A.1.4.10). For monitoring quality processes and data management in our faculty,

UBYS, ALYS, and Mecra systems are used effectively. Through these systems, processes are monitored, feedback is obtained from stakeholders, and records are securely stored (**A.1.4.11**, A.1.4.12,A.1.4.13,A.1.4.14). In addition, RI˙ MER applications are monitored regularly and processes are managed (A.1.4.12). The Risk Identification and Analysis Committee identifies and records risks that may affect faculty activities. The committee makes efforts to prevent the recurrence of risks and shares the results on the website (**A.1.4.15, A.1.4.16).**Stakeholder opinions are collected through Academic General Board meetings, Advisory Board meetings, and student representation, and reflected in quality processes (**A.1.4.4, A.1.4.5, A.1.4.8,**A.1.4.12, A.1.4.13,A.1.4.14,**A.1.4.15, A.1.4.16,**A.1.4.9,A.1.4.10). Our faculty provides integrated orientation training for newly hired staff through the Personnel Orientation Guide and process cards. In this training, job descriptions, quality processes, and workflows are communicated in detail, strengthening alignment with institutional operations (**A.1.4.17).In addition, the Quality Committee carries out special assessment and development activities related to course forms, survey questions, and workflows within the scope of accreditation processes (A.1.4.18, A.1.4.19, A.1.4.20).**These original practices show that, in our faculty, quality assurance is operated in a sustainable manner beyond institutional standards.

Evidence

A.1.4.1: Quality Assurance Policy Document

A.1.4.2: Bartın University Process Management Handbook

A.1.4.3: Terms of Reference for the Quality Commission

A.1.4.4: Agenda Items for the Academic General Assembly Meeting

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A.1.4.19: Minutes of the Quality Committee Meeting Regarding the Forms Planned to Be Used in the Implementation Courses of the Departments

A.1.4.20: Minutes of the Quality Committee Meeting Regarding the Qualitative Interview Questions Prepared by the External Stakeholder Unit

A.1.5. Public Information and Accountability

Our Faculty presents the decisions of the Faculty Board, the Faculty Administrative Board, and the Department Board, as well as unit activity reports and strategic plan monitoring and improvement reports throughout the year to the public in a transparent manner, in line with Law No. 6698 on the Protection of Personal Data (KVKK) and our university's data policies (**A.1.5.1**.,**A.1.5.2**,**A.1.5.3**,**A.1.5.4**,**A.1.5.5**,**A.1.5.6**). Our faculty website is being updated with a user-friendly design in both Turkish and English. The Information Technology and Web Commission is responsible for ensuring the currency and accessibility of the page content; information such as meeting announcements, seminars, contact details for academic/administrative staff, and scholarship and examination calendars is shared regularly (**A.1.5.5**,**A.1.5.6**,**A.1.5.7, A.1.5.8,A.1.5.9**,**A.1.5.10,A.1.5.11, A.1.5.12).**In addition, scientific, social, and societal activities are shared regularly through social media platforms (Instagram, Twitter) and web announcements; with more than 500 news items and announcements, stakeholder information is ensured/is being carried out (**A.1.5.9**,**A.1.5.10,A.1.5.11, A.1.5.12).**In our unit, activity reports, strategic plan realization reports, and improvement plans are prepared in six-month and annual periods and presented to stakeholders at Academic General Assembly and Advisory Board meetings (**A.1.5.4, A.1.5.5**,**A.1.5.6**). In this way, internal and external accountability is implemented systematically. Our faculty regularly monitors web and social media access data (Faculty website 28.995 visits, Nursing Department 15.573 visits, etc.) and measures stakeholder engagement through increases in follower numbers. In light of these measurements, the effectiveness of information dissemination methods is evaluated and necessary information/awareness activities are carried out (**A.1.5.13).**By the Information Technology and Web Commission, the effectiveness of the website and social media accounts is monitored regularly; based on access and interaction data, update and improvement decisions are made.In addition, mechanisms supporting the sustainability of quality processes are being reviewed and updated (**A.1.5.13).**Our Faculty shares, in real

time and in a planned manner, both its academic/administrative activities and community contribution projects via its website and social media. Within this scope, the number of followers of department-based social media accounts has been increased; staff adaptation trainings, awards, and events have been announced in a transparent manner, thereby establishing a unique information-sharing and accountability practice that goes beyond standard reporting (**A.1.5.13).**

Evidence

A.1.5.1: Faculty Board Decisions for 2025

A.1.5.2: Board of Administration Decisions for 2025

A.1.5.3: Department Board Decisions for 2025

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A.2. Mission and Strategic Objectives

A.2.1. Mission, Vision, and Policies

As part of the Faculty's 2024–2028 Strategic Plan, our mission and vision have been updated by taking into account the views of internal and external stakeholders, and have been defined as a mission aimed at training qualified human resources that are "student-centered, entrepreneurial-innovative, and contribute to society," and a vision as "a leading faculty that provides national and international recognition and contributes to regional development." The mission and vision were communicated to academic/administrative staff via e-mail and conveyed to newly hired staff and students through orientation guides (**A.2.1.1**,**A.2.1.2**,**A.2.1.3**,**A.2.1.4**,**A.2.1.5**,**A.2.1.6**,**A.2.1.7**, **A.2.1.8, A.2.1.9, A.2.1.10).**In line with our quality assurance and policy documents, our Faculty plans and implements all its activities. Students' active participation in projects, the implementation

of social responsibility and volunteering projects, and the delivery of project management and professional research courses are carried out within this framework (A.2.1.11,A.2.1.12).Faculty members are also informed and supported regarding international funding and mobility programs (A.2.1.13). While updating our mission and vision, the opinions of internal stakeholders (academic/ administrative staff, students) and external stakeholders (alumni, sector representatives) were taken into account; participation was ensured through surveys, meetings, and opinions from the advisory board (A.2.1.1,A.2.1.2,A.2.1.3,A.2.1.4,A.2.1.5,A.2.1.6,A.2.1.7,**A.2.1.8, A.2.1.9, A.2.1.10).**Our Faculty monitors the implementation level of its mission and vision through indicators such as student projects, social responsibility and volunteering activities, course planning, and the use of the simulation laboratory, and evaluates it through regular reporting (A.2.1.11,A.2.1.12).To strengthen the adoption of the mission and vision, our Faculty has provided information to both staff and students through orientation/adjustment guides; by supporting students' active participation in project and social responsibility activities, it has developed a unique approach that directly links education and training processes with strategic objectives (**A.2.1.9, A.2.1.10,**A.2.1.11,A.2.1.12).

Evidence

A.2.1.1: Quality Assurance Policy Document Link

A.2.1.2: Education-Teaching Policy Document Link

A.2.1.3: Research and Development Policy Document Link

A.2.1.4: Management System Policy Document Link

A.2.1.5: Internationalization Policy Document Link and

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A.2.1.8: Screenshot of the Email Address Where the Mission, Vision, and Core Values Are Shared with Faculty Staff

A.2.1.9:2025 Staff Onboarding Guide

A.2.1.10:2025-2026 Academic Year Student Orientation Guide

A.2.1.11:2024 First Semester TÜBİTAK 2209-A Application Results News Link

A.2.1.12: Curriculum Plan Link

A.2.1.13: International Staff Mobility Training Webpage Link

A.2.2. Strategic Goals and Objectives

Our Faculty's 2024–2028 Strategic Plan has been prepared to include five objectives and twenty-one targets in the short-, medium-, and long-term, and is made available to all stakeholders through

the faculty website (A.2.2.1,A.2.2.2,A.2.2.3,**A.2.2.4,**A.2.2.5). Our strategic plan is structured according to the priorities of sustainable development and specialization; the objectives and targets are associated with the SDGs, and this linkage is monitored in six-month and annual reporting (A.2.2.3,A.2.2.6). The annual and six-month levels of achievement of target indicators are regularly monitored; the Unit Strategic Plan 2025 Year Achievement Report and Improvement Plan reports are assessed at the Advisory Board and Academic General Assembly meetings and are published on the website (A.2.2.7,**A.2.2.8).**Targets that cannot be reached are identified during six-month periods and discussed with stakeholders at Advisory Board and Academic General Assembly meetings. For example, in the first six-month report of 2025, "PG2.3.1.The number of scientific events held at the university was increased from 14 to 23 and the target was achieved (A.2.2.3,A.2.2.9). The risks are identified by the Unit Risk Identification and Analysis Committee, included in the action plan, and published on the website (A.2.2.10). Our Faculty has developed a risk-focused strategic management practice. The Unit Risk Identification and Analysis Committee determines risks specific to the needs of the unit and includes them in annual action plans, thereby ensuring the achievement of objectives (A.2.2.10). In addition, an approach of continuous improvement has been adopted through reporting at six-month intervals and stakeholder participation.

Evidence

A.2.2.1: Faculty of Health Sciences 2024–2028 Strategic Plan

A.2.2.2: Faculty of Health Sciences Strategic Plan Implementation Reports

A.2.2.3:2025 Faculty of Health Sciences Strategic Plan Implementation Report

A.2.2.4: Faculty Committees 2025 Activity Reports

A.2.2.5: Committee Activity Reports

A.2.2.6:2024 POCA-Driven Action Plan

A.2.2.7:2025 Academic Unit Advisory Board Report

A.2.2.8: Sample of Academic Board Decision

A.2.2.9:2025 First Six Months **Sa** Health Sciences Faculty Strategic Plan Implementation Report

A.2.2.10:2025 Risk Register and Additional Risk Management Activity Follow-Up Form

A.2.3. Performance Management

At our Faculty, performance management is carried out with a holistic approach within the scope of the 2024–2028 Strategic Plan's objectives and indicators and the Quality Assurance Policy document. The processes are structured as follows: defining the duties, goals, and performance indicators of academic and administrative staff; monitoring them through six-month and annual

reporting; improving them through training and activities; and obtaining feedback from stakeholders (A.2.3.1,A.2.3.2,A.2.3.3,A.2.3.4,A.2.3.5,A.2.3.6,A.2.3.7,A.2.3.8). Performance indicators are monitored on six-month and annual periods and reported through Unit Strategic Plan Realization Reports and Improvement Plans. Changes in performance results over the years are tracked and trend analyses are conducted (A.2.3.3,A.2.3.5).The monitoring results of instructors' activities and unit performance are evaluated by the Dean's Office, Department, and Head of the Main Department; for areas showing low performance, individual meetings are held and improvement recommendations are provided, and necessary measures are taken within the framework of the PUKÖ cycle (A.2.3.9,A.2.3.10,**A.2.3.11, A.2.3.12).**Our faculty's distinctive practice is the "360 Degree Instructor Performance Evaluation Survey" for instructors. In this system, while instructors carry out their own self-evaluations, they are also evaluated by the Dean's Office, the Department Offices, and all instructors; the results are discussed in committees and reflected in improvement plans (A.2.3.9,A.2.3.10,**A.2.3.11, A.2.3.12).**In addition, contribution is made to the unit's strategic goals through applications for the academic incentive allowance and research performance reporting (A.2.3.15,A.2.3.13,A.2.3.14).

Evidence

A.2.3.1:BARÜ Quality Assurance Policy Document

A.2.3.2: Faculty of Health Sciences 2024-2028 Strategic Plan

A.2.3.3: Unit Strategic Plan Evaluation Reports

A.2.3.4: Strength Analysis Training Announcement Webpage

A.2.3.5: Faculty of Health Sciences Bayram Greetings Event

A.2.3.6: Vision Meeting of the Faculty of Health Sciences

A.2.3.7:2025 Improvement Plan

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A.2.3.9: Instructor Performance Evaluation Survey Reports

A.2.3.10: Faculty Member Performance Evaluation Survey Report-2025

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A.2.3.12: Sample Academic Board Decision

A.2.3.13: Faculty Commissions

A.2.3.14: Academic Incentive Application Allowance Application Results 2025- Faculty of Health Sciences

A.3. Management Systems

A.3.1. Information Management System

In our faculty, education and training, academic and administrative processes are carried out through integrated information systems such as the ÜBYS, EBYS, and Personnel Automation, and are recorded regularly. Course plans, student registrations, grade entry, graduation procedures, correspondence, and personnel processes are monitored via the system and recorded with verifiable data (A.3.1.1,**A.3.1.2,**A.3.1.3). All data is protected within the scope of the KVKK and relevant legislation; access controls based on authorization, password security, secure servers, and regular backup procedures are implemented. Physical documents are kept in locked cabinets, and access to documents requiring confidentiality is restricted (**A.3.1.4,**A.3.1.5,A.3.1.6). Through ÜBYS and other systems, data such as course-based success rates, student and staff statistics, and transaction completion times are reported on a regular basis; by sharing them with data-driven presentations at the Academic General Assembly meetings, they contribute to strategic decision-making processes (**A.3.1.2,**A.3.1.4,**A.3.1.7).**SystemInformation and compliance studies for its use are being carried out; data security and user satisfaction are monitored, and when issues are identified, they are reported to the Information Technology and relevant technical units to initiate the solution process (A.3.1.1,**A.3.1.3).**Our faculty has developed original applications. For example, in the Department of Nursing, student requests for using the Free Time Laboratory are managed online and in a traceable manner through the Laboratory Appointment System; program outputs are monitored with student-based grading charts; and exam question analyses are conducted with the Analysis Universal Program (A.3.1.8,**A.3.1.9, A.3.1.10).**

Evidence

A.3.1.1:BARÜ UBYS
A.3.1.2: Sample Course File
A.3.1.3: Faculty of Health Sciences 2025 Activity Report
A.3.1.4: Upper Written Notice on the Establishment of the Exam Archive Room and Staff Assignment
A.3.1.5: Faculty Administrative Board Decisions
A.3.1.6: Faculty Board Decisions
A.3.1.7: Academic General Assembly Decision
A.3.1.8: Free Time Laboratory Application System
A.3.1.9: Student-Based Achievement Indicators Table—Top Text for Filling Out
A.3.1.10: Analysis Universal Program

A.3.2. Human Resources Management

Task assignments, course loads, and committee and board assignments are planned considering academic title, field of expertise, and workload balance; they are recorded through decisions of the Faculty and the University Board of Management. Personnel leave is carried out via the Personnel Automation system, and duty notifications are sent through the UBYS to ensure verifiability (A.3.2.1,A.3.2.2,**A.3.2.3, A.3.2.4, A.3.2.5, A.3.2.6, A.3.2.7, A.3.2.8).**Training needs are determined by the Personnel Department Presidency by taking into account unit activity areas, job descriptions, changes in legislation, and performance feedback. In line with the identified needs, in-service trainings have been organized, information and training activities have been carried out specifically for the unit, and they have been recorded with participation certificates and training lists (A.3.2.9,**A.3.2.10, A.3.2.11,**A.3.2.12). The orientation training satisfaction survey results for newly appointed personnel are evaluated at Academic General Assembly meetings, and based on the findings, process improvement recommendations are developed (A.3.2.13,A.3.2.14, A.3.2.15,A.3.2.16). In line with personnel feedback, the processes were reviewed, the training contents were updated, and the duty assignment schedules and notification procedures were revised. In addition, the effectiveness of the processes was increased by developing compliance trainings and briefing documents (A.3.2.12,A.3.2.13,A.3.2.14,A.3.2.15). Academic achievement, scientific, educational, and administrative contributions are announced on the website; personnel are recognized through holiday greeting activities, certificates of appreciation, and plaques. At the end of 2025, by sending certificates of appreciation to all academic and administrative staff via Ü BYS, motivation and institutional belonging were strengthened (A.3.2.17,A.3.2.18,**A.3.2.19).**

Evidence

A.3.2.1:BARU Process Handbook

A.3.2.2:BARU Process Maps

A.3.2.3: Faculty Board Decision—Course Assignments

A.3.2.4: University Administrative Board Decision—Course Assignments

A.3.2.5: Faculty Board Decision—Commission Assignments

A.3.2.6: Commission Distribution Follow-up Schedule

A.3.2.7: Sample Personnel Leave Request Letter

A.3.2.8: Sample Commission Notification Letter

A.3.2.9: Training Needs Analysis Results

A.3.2.10: Upper Correspondence Regarding Determining In-Service Training Needs - Personnel Department Directorate

A.3.2.11: Upper Letter Regarding the Determination of In-Service Training Needs - Personnel Department - Faculty of Health Sciences

A.3.2.12: Unit Strategic Plan Evaluation Reports

A.3.2.13: Faculty of Health Sciences Personnel Compliance Guide 2025

A.3.2.14: Personnel Compliance Training News Webpage

A.3.2.15: Results of the 2025 Personnel Compliance Training Satisfaction Survey

A.3.2.16: Sample Academic General Board Decision

A.3.2.17: Bayram Celebration Event News Webpage

A.3.2.18: Academic Staff Success News Webpage

A.3.2.19: Sample Certificate of Thanks

A.3.3. Financial Management

Budgets allocated to our unit are distributed in accordance with Law No. 5018, the relevant secondary legislation, and internal university regulations, in line with the Strategic Plan targets and annual activity plans. Spending priorities are determined by taking performance indicators and strategic objectives into account (**A.3.3.1,**A.3.3.2). Institutional revenues (government contribution, revenues received from students, R&D revenues, revolving fund, donations, etc.) are regularly monitored and reported. In recent years, initiatives have been undertaken to increase project-based R&D revenues and donation revenues in order to secure additional resources. Procurement, tender, and direct supply transactions are carried out with due regard to the statutory monetary limits and the principles of equal treatment and competition; controls by the spending authorization officer and the realizations officer are ensured, and all financial transactions are recorded on the basis of documentation. Purchases that were not mandatory were postponed, opportunities for shared use were assessed, and cost-saving measures were implemented (**A.3.3.1,**A.3.3.2).All financial transactions are subject to the scrutiny of the Turkish Court of Accounts (Sayıştay), with the results of audits and reporting being evaluated; the reasons for deviations are analyzed and improvement activities regarding budget planning for the following period, needs analyses, and the effectiveness of resource use are planned (A.3.3.2). All movable and immovable assets are recorded in accordance with the relevant legislation, monitored through digital systems, and updated periodically. Of the 50.213.121,00 TL appropriation allocated for 2025, 49.947.860,67 TL has been spent; the realization rate was approximately 99,47%. The limited deviations stem from the postponement of certain needs and cost-saving measures; the reasons were analyzed and reported (**A.3.3.1,**A.3.3.2).

Evidence

A.3.3.1:2025 Budget Appropriations Allocation Status List

A.3.3.2: Faculty of Health Sciences 2025 Strategic Plan Implementation Report

A.3.4. Process Management

Our faculty's organizational chart (A.3.4.1) and the processes and sub-processes related to all activities (including distance education) are defined (A.3.4.2). The processes are carried out in line with the Quality Assurance Policy Document (A.3.4.3), the Social Contribution Policy Document (A.3.4.4), the Education and Training Policy Document (A.3.4.5), the Management System Policy Document (A.3.4.6), and the BARÜ Process Management Handbook Process Cards (A.3.4.2). Course registration, exam scheduling, and grade entry processes are monitored through ÜBYS data, student feedback, and notifications from course coordinators; the issues identified are resolved by ensuring coordination with the Department Board and the Student Affairs Unit, and the corrective actions taken are recorded in decisions (A.3.4.7, A.3.4.8,**A.3.4.9).**Academic and administrative correspondence is carried out via EBYS, while course registration and grade entry are performed electronically through ÜBYS integration. Thanks to the Free Time Laboratory Application System used in the Nursing Department, students can create laboratory appointments online; processing times have been shortened, manual errors and the use of paper have been reduced (**A.3.4.10,**A.3.4.11**).Evidence**

A.3.4.1: Organization Chart

A.3.4.2:BARÜ Process Handbook and Process Cards

A.3.4.3:BARÜ Quality Assurance Policy Document

A.3.4.4:BARÜ Social Contribution Policy Document

A.3.4.5:BARÜ Education and Teaching Policy Document

A.3.4.6:BARÜ Management System Policy Document

A.3.4.7:UBYS

A.3.4.8: Course Planning Schedule of the Faculty of Health Sciences

A.3.4.9: Decision of the Department Board

A.3.4.10: Course Registration and Grades Entry Screen

A.3.4.11: Free Time Laboratory Application System Connection Link

A.4. Stakeholder Involvement

A.4.1. Internal and External Stakeholder Involvement

At our faculty, the views of external stakeholders (employers, sector representatives, NGOs, etc.) are obtained through the Faculty Advisory Board and reflected in strategic planning and decision-making processes. At board meetings, stakeholder recommendations are reported in a systematic manner and used to improve education, management, and operational processes (**A.4.1.1**,**A.4.1.2**,**A.4.1.3**,**A.4.1.4**). Students regularly participate in Department Board and Academic General Assembly meetings; their opinions regarding curriculum planning, exam schedules, and education and training processes are conveyed to decision-making mechanisms (**A.4.1.5**,**A.4.1.6**). Communication with graduates is carried out in cooperation with the Graduate Communication Commission and the Career Planning, Practice and Research Center. Graduate representatives contribute to the education processes by joining the Faculty Advisory Board, and regular meetings are held to collect graduates' views and suggestions (**A.4.1.7**).Data obtained from student meetings at the beginning and end of the term, course and practice surveys, focus group interviews, and manager performance surveys are used to improve lesson planning, exam scheduling, and academic/operational processes (**A.4.1.8**,**A.4.1.9**,**A.4.1.10**, **A.4.1.11**). Content clashes and timing issues were identified in the course enrollment and exam scheduling processes; they were corrected through decisions of the Department Board, and process traceability was increased through digital applications such as the Free Time Laboratory Application System (**A.4.1.9**,**A.4.1.10**). While preparing the strategic plan and the annual activity plan, the views of all stakeholders, including local administrations, sector representatives, graduates, and students, were systematically collected and integrated into the planning process (**A.4.1.1**,**A.4.1.2**,**A.4.1.3**,**A.4.1.4**,**A.4.1.5**,**A.4.1.6**,**A.4.1.7**,**A.4.1.8**,**A.4.1.9**,**A.4.1.10**, **A.4.1.11**,**A.4.1.12**,**A.4.1.13**,**A.4.1.14**,**A.4.1.15**).

Evidence

A.4.1.1:2024-2028 Unit Strategic Plan

A.4.1.2: Quality Assurance Policy Document

A.4.1.3: Unit Advisory Board

A.4.1.4: Unit Advisory Board Report

A.4.1.5: Faculty Committee

A.4.1.6: Invitation Letter for the Department Board

A.4.1.7: Certificate of Participation in the Graduates' Student Event

A.4.1.8: News of the Students' Meeting at the Beginning of the Term

A.4.1.9: End-of-Term Students' Meeting

A.4.1.10: Course Survey Results

A.4.1.11: Academic General Assembly Document

A.4.1.12: Action Plan

A.4.1.13: Academic General Assembly Decision

A.4.1.14: RİMER Application Page

A.4.1.15: RİMER Report

A.4.2. Student Feedback

Students fill out course satisfaction surveys at the end of each year. In order to increase the participation rate, QR codes are provided to students before and after each class and practice session; reminders are made by course coordinators, and announcements are shared through the faculty website (**A.4.2.1**). In addition, the importance of the surveys is emphasized in student meetings at the beginning and end of the term, encouraging active participation. Student participation is ensured at a high level; by increasing the visibility and accessibility of the surveys, the data collection activity has been strengthened (**A.4.2.2**,**A.4.2.3**). Students can effectively use various feedback channels. The main channel is RİMER, which provides 24/7 access. All applications are assessed by the relevant units and feedback is provided as soon as possible. Students are aware of these channels and actively use them. The feedback channels are operated effectively, ensuring that students' opinions are reflected in decision-making processes (**A.4.2.4**). Course satisfaction surveys are analyzed in detail by the Quality Committee.Strong areas and areas open for improvement are identified through the surveys; concrete recommendations are developed with the Corrective and Preventive Actions Form and are shared with the relevant units and faculty members (**A.4.2.5**). The surveys are used not only for monitoring, but also for continuous improvement; measures that will enhance the quality of educational processes are implemented (**A.4.2.6**,**A.4.2.7**). Based on feedback, arrangements are made in course content and application areas; laboratory application plans are optimized and consultation meetings are increased (**A.4.2.8)**. The changes made are recorded through decisions of the Department Board and communicated to students via the faculty website and announcements. Thus, students are informed about the improvements made and transparency of the processes is ensured (**A.4.2.9**).

Evidence

A.4.2.1:QR Code Example

A.4.2.2: Announcement of the Start-of-Term Meeting

A.4.2.3: End-of-Term Meeting News

A.4.2.4:RİMER Reports

A.4.2.5: Sample Corrective and Preventive Action Form

A.4.2.6: Survey Reports

A.4.2.7: Course Satisfaction Survey Results

A.4.2.8: Improvement Examples

A.4.2.9: Department Board Decision Regarding Discussion of Academic Advising Results

A.4.3. Management of Alumni Relations

Graduates are systematically followed through the Alumni Information System. In this system, graduates' contact information, employment status, professional development, and career processes are regularly recorded and kept up to date. Graduates' participation in the system is encouraged, and the obtained data are analyzed in the quality assurance system and used for the improvement of programs (**A.4.3.1**,**A.4.3.2).**Regular surveys are administered to graduates, and the adequacy in business life of the knowledge and skills they gained during the education process is assessed. The obtained data are included in the quality assurance system and are used in planning activities aimed at improving education and training processes and strengthening relations with graduates (**A.4.3.3**). Collaboration is carried out with the institutions where graduates are employed and sector representatives, and their feedback is obtained. Within this scope, assessments regarding graduate competence are compiled and taken into account in quality assurance processes (**A.4.3.4**,**A.4.3.5**) .Based on graduate and employer feedback, necessary improvements are made in educational programs and course curricula. These efforts are documented within the quality assurance system and contribute to the continuous improvement of education processes (**A.4.3.1**,**A.4.3.6**). Career Days, graduate interviews, and online "Graduate Meeting" events are organized. In these events, graduates share their professional experiences, contribute to students' career planning, and strengthen interaction among graduates, students, and academics (**A.4.3.4**,**A.4.3.5, A.4.3.7**). Graduates' professional and academic achievements are recorded, announcements are made on the faculty and university web pages, and they are preserved within the scope of institutional memory. This practice strengthens graduates' sense of belonging and contributes to maintaining the connection between the university and its graduates (**A.4.3.2**,**A.4.3.8**).

Evidence

A.4.3.1: Official Correspondence of the Graduate Information System Commission

A.4.3.2: Alumni Information System

A.4.3.3: Dean's Official Letter Inviting Graduates to the Meeting

A.4.3.4: Career Days Event

A.4.3.5: News Text for the Meeting with Graduate Students

A.4.3.6: Alumni Participant Information Regarding the Institutional Internal Evaluation Team Visit

A.4.3.7: News Link About Orientation Trainings for First-Year Students

A.4.3.8: Academic Advising Evaluation Report

A.5. Internationalization

A.5.1. Management of Internationalization Processes

At our faculty, the Exchange Programs Commission, which follows internationalization activities, actively carries out its duties, and the Department Erasmus Coordinators also manage these processes. The contact details of the coordinators are published in an up-to-date manner on our faculty's website (A.5.1.1 **decision no:8**,A.5.1.2,A.5.1.3). In the faculty's 2024–2028 strategic plan, internationalization targets and indicators have been defined, and the departments have created their own targets in a manner aligned with these and published them on their web pages. Data regarding the objectives are shared transparently with stakeholders through activity reports (A.1.5.4,A.1.5.5). Students' placement and exemption processes are carried out by the academic advisor and the Department Exemption and Placement Commission, and procedures are conducted within the scope of the Bartın University Exemption and Placement Procedures Directive. The processes are discussed in the Department and Faculty Boards to prevent any loss of rights, and all documents are kept for follow-up purposes (A.1.5.6,A.5.1.7,A.5.1.8,A.5.1.9).In the orientation programs applied to students who enroll newly, the faculty members assigned in the Erasmus Coordination Office provide information; regular briefings are held in academic advising meetings; and the Exchange Programs Committee organizes activities aimed at sharing experiences of academic staff who benefit from exchange programs (**A.5.1.10**,A.5.1.11,A.5.1.12). The numbers of international student and staff mobility are monitored regularly in line with strategic targets and indicators. According to the report for the first six months of 2025, it has been determined that the targeted numbers could not be reached, and to increase these figures, experience-sharing events, the establishment of new agreements, and promotional activities have been organized (A.5.1.13,**s:75,76,**A.5.1.14,A.5.1.15). Satisfaction measurement is not carried out regularly yet; developing improvement plans in this regard constitutes a development area for our Faculty (A.5.1.16 **s:106,107).**

Evidence

A.5.1.1: Faculty Administrative Board Decision

A.5.1.2: Letter of Assignment for the Erasmus Department Coordinator and Deputy Coordinator

A.5.1.3: Web Page of the Health Sciences Faculty Coordinators

A.5.1.4: Health Sciences Faculty 2024–2028 Strategic Plan

A.5.1.5: Activity Report for 2025

A.5.1.6: Directive on Exemption and Placement Procedures of Bartın University

A.5.1.7: Minutes of the Decision of the Exemption and Placement Commission

A.5.1.8: Faculty Administrative Board Decision

A.5.1.9: Student Erasmus Acceptance Letter

A.5.1.10: Event Permission Letter

A.5.1.11: Cover Letter for the Submission of Minutes of the Academic Advising Meeting

A.5.1.12:2025 Activity Report of the Exchange Committee

A.5.1.13: Report on the First Six-Month Realization of the 2025 Strategic Plan

A.5.1.14: Academic General Assembly Decision

A.5.1.15: Link to the News Web Page for the K171 International Staff Mobility Training

A.5.1.16:2025 Annual Realization Report of the Strategic Plan

A.5.2. Internationalization Resources

In our faculty, sources used for internationalization activities other than Erasmus grants are planned and carried out in annual budgets in line with the strategic objectives of the university and the faculty. In the 2024–2028 strategic plan, cost estimates have been made for internationalization goals and performance indicators, and annual budget planning is carried out accordingly (**A.5.2.1**). The allocation of grants is made fairly and transparently within the framework of criteria determined by the relevant units and coordinators. Expenditures and resources used in our faculty are monitored in a coordinated manner with the Department of Strategy Development and the General Coordination Office for External Relations, and all processes are recorded (**A.5.2.2**). At the end of the year, all expenditures related to internationalization and the realization rates of the allocated resources are monitored and reported through activity reports. This data is used as a guide in the next year's budget planning and in improving strategic targets. Activity reports are shared transparently on our faculty's website (**A.5.2.2**).

Evidence

A.5.2.1: Our Faculty's 2024–2028 Strategic Plan

A.5.2.2: Unit Activity Reports

A.5.3. Internationalization Performance

In our faculty, internationalization performance is monitored through Strategic Plan Monitoring and Evaluation Reports and Unit Activity Reports prepared in six-month and annual periods. Within this scope, the numbers of incoming/outgoing students and faculty members, the number of international students, and the number of internationally supported projects and publications are systematically tracked; the reports are shared on our website and are evaluated in the academic general assembly and advisory board meetings (**A.5.3.1**,**A.5.3.2**,**A.5.3.3**,**A.5.3.4**,**A.5.3.5**,**A.5.3.6 s: 3,4,A.5.3.7**,**A.5.3.8**). In recent years, an increase has been achieved in the mobility of both outgoing students and outgoing faculty members. It is supported through regular informing via the Sustainability and Change Programs Commission and the departments, through experience-sharing activities, and by increasing bilateral agreements. To reach the targets in the number of incoming students/faculty members, international project applications and promotional activities are carried out in line with the recommendations of the Advisory Board (**A.5.3.2**,**A.5.3.9 decision no:2-5,9,A.5.3.10**,**A.5.3.11**,**A.5.3.12**). Our faculty transforms its protocols into active collaborations. Protocols are implemented through international exchange programs, joint projects (e.g., COST projects), joint publications, and seminars. These activities are monitored and reported every year by the Exchange Programs Commission and relevant units (**A.5.3.9 decision no:2-5,9, A.5.3.10**,**A.5.3.11**,**A.5.3.12**). In cases where internationalization performance targets (e.g., number of outgoing students) cannot be met, deviations are analyzed through six-month and annual monitoring reports, and the reasons are discussed in academic general assembly and advisory board meetings. In cases where targets are not achieved, corrective measures are taken; for example, promotion and encouragement for international project applications, increasing bilateral agreements, and carrying out promotional activities (**A.5.3.9 decision no:2-5,9,A.5.3.12,A.5.3.13 s: 107,A.5.3.14 decision no:1-4).**

Evidence

A.3.5.1: First Six-Month Implementation Report of the 2025 Strategic Plan

A.3.5.2: Annual Implementation Report of the 2025 Strategic Plan

A.3.5.3:2025 Annual Activity Report

A.3.5.4: Strategic Plan Evaluation Reports

A.3.5.5: Activity Reports

A.3.5.6: Academic General Assembly Meeting Decision

A.3.5.7: Student Profile for 2025

A.3.5.8: Our Student Profile Website

A.3.5.9:2025 Advisory Board Report

A.3.5.10: Our Faculty Member Assigned in COST Project Processes News Website Link

A.3.5.11: English Faculty Website

A.3.5.12:2025 Activity Report of the Change Programs Commission

A.3.5.13:2024 Strategic Plan Annual Realization Report

A.3.5.14: Academic General Assembly Decision

B. EDUCATION AND TRAINING

B.1. Program Design, Evaluation, and Updating

B.1.1. Design and Approval of Programs

The educational objectives and learning outcomes of the Nursing, Midwifery, and Social Work programs in our Faculty are publicly shared on the website in association with the TYYÇ through the Program Competencies–TYYÇ Alignment Matrix (**B.1.1.1)**. Curriculum updates are carried out in line with stakeholder input. For example, in 2024, the establishment of Dual Major (ÇAP)/ Minor programs in the Departments of Nursing and Midwifery was designed with stakeholder feedback and reflected in implementation (B.1.1.2). For all courses, Course Information Packs were prepared in full, including ECTS workloads, weekly topic plans, learning outcomes, teaching methods, and assessment and evaluation components. The packs are accessible via the website and their currency is ensured through matrices linked to program outcomes (**B.1.1.3, B.1.1.4, B.1.1.5, B.1.1.6, B.1.1.7).**Program design and approval processes were carried out within the framework of our Faculty Board Decisions and the Quality Processes of Bartın University, and curriculum updates were completed in 2024 (**B.1.1.8)**.Assessment is conducted on the level of attainment of Program Outcomes based on course and exam data. For areas where the targeted level cannot be reached, assessment tools and questions are updated, and a continuous improvement cycle is operated (**B.1.1.9, B.1.1.10,**B.1.1.2) . Common compulsory courses (Turkish Language, Atatürk's Principles and History of the Turkish Revolution, Foreign Language) are offered within the scope of distance education; under the coordination of Bartın University Distance Education Center (BUZEM), materials, interaction, and assessment methods are arranged in a way suitable for distance education. In addition, 1st-year orientation trainings are planned in distance/blended formats and made available in the Student Orientation Guides (**B.1.1.11, B.1.1.12).**

Evidence

B.1.1.1:TYYÇ Compliance Matrix Web Screenshot

B.1.1.2: Unit Activity Report 2025 Web Link

B.1.1.3: Course Information Package Screenshot Showing Fullness

B.1.1.4: Learning Outcomes and Program Outcomes Relationship Matrices Screenshot

B.1.1.5: Course Information Package Screenshot

B.1.1.6: Example Course Information Package Weekly Topics and Assessment Methods

B.1.1.7: Training Catalog Web Screenshot

B.1.1.8: Faculty Board Decision Curriculum Update

B.1.1.9: Example Application of Calculating Program Outcomes Based on Students

B.1.1.10: Exam Analysis and Improvement Example

B.1.1.11: Student Orientation Guide 2025-2026 Academic Year

B.1.1.12: Orientation Training Poster

B.1.2. The Balance of Course Distribution in the Program

In our faculty's programs, the balance between within-field and outside-field courses according to the required/elective course ratio is regularly monitored. These evaluations are discussed by the Curriculum and Education Commission and the Department Boards, and are taken into account in curriculum planning (**B.1.2.1).**Students in our faculty are supported in taking courses in different disciplines, and they are encouraged to gain cultural and academic depth through courses outside the department. The number of outside-department courses students are required to take has been specified in the teaching plan, and instructors also support implementation by offering these courses (**B.1.2.2, B.1.2.3).**When preparing weekly course schedules, consideration is given to allowing students time for their social and cultural development, and out-of-class time spaces are structured (**B.1.2.4).**In our faculty's programs, course distribution is organized to include both professional knowledge courses and general culture and personal development courses. This approach supports students' multidimensional development (**B.1.2.1, B.1.2.5).**Feedback received from students and instructors is evaluated, and course load and elective/aNecessary improvements are being made by taking into account suggestions regarding the non-course lesson pool. In addition, student satisfaction and workload analyses are carried out on a regular basis every year (**B.1.2.6**).

Evidence

B.1.2.1: Compulsory Course Ratio

B.1.2.2: Educational Program Screenshot

B.1.2.3: Nursing Department Board Decision

B.1.2.4: Weekly Course Schedule Examples

B.1.2.5: Training Content Screenshot

B.1.2.6: Student Workload Analysis Reports

B.1.3. Alignment of Course Learning Outcomes With Program Outcomes

A Matrix of Program Competencies has been created in our faculty in order to demonstrate the relationship between the courses' learning outcomes and the program outcomes. The learning outcomes at the course level have been matched with the relevant program outcomes and announced publicly through the Course Information Package (Bologna Information System) (**B.1.3.1)**. When preparing course learning outcomes, the Bloom Taxonomy has been taken as the basis, and the outcomes are expressed clearly and in a measurable way with respect to the cognitive, affective, and psychomotor domains. Instead of general statements, performance-oriented verbs such as "analyzes," "designs," and "evaluates" are used (**B.1.3.2).**The assessment components' performances for the course—exams, assignments, presentations, and practicals—have been linked to the learning outcomes. A mapping of outcomes is performed on the basis of questions, making it visible which outcomes the students achieve (**B.1.3.3, B.1.3.4).**General outcomes, teaching methods of courses (group work, project/assignments, article presentations, etc.) and through measurement and evaluation tools, it is provided to students, and in the Course Information Packages, which activities are used for assessment is systematically defined (**B.1.3.5, B.1.3.6).**For courses taken outside the program (elective and service courses), the relationship between learning outcomes and program outcomes has been defined, and in the Course Information Packages these contributions are clearly demonstrated (**B.1.3.1, B.1.3.6)**. At the end of the term, the level of attainment of program outcomes by students is calculated, and improvements are planned based on the findings. The course learning outcome—measurement tool matching is strengthened, data are collected in a standard format, and a monitoring-improvement cycle is operated by analyzing at the program level (**B.1.3.7).**

Evidence

B.1.3.1: Course Information Package Example

B.1.3.2: Examples of Course Learning Definitions/Outcomes

B.1.3.3: Example of Mapping Table

B.1.3.5: Example of an Exam Paper

B.1.3.6: Example of Practical Assessment and Syllabus

B.1.3.7: Course Information Package Example

B.1.3.8: Analysis Results for Achieving Program Outcomes

B.1.4. Curriculum Design Based on Student Workload

In calculating course credits, student workload based on gaining the knowledge, skills, and competencies determined according to the Turkish Qualifications Framework (TQF) and envisaged at the program level is taken as the basis. In the calculation of student workload, the weekly class hours of the course, the time allocated for preparations such as assignments, projects, and presentations if there is study outside class, and the required study time for examinations are taken into account, and the total workload for each course is determined. The obtained total workload is divided by the total number of semester European Credit Transfer and Accumulation System (ECTS) credits to determine the credits and ECTS for each theoretical and practical course included in the programs (**B.1.4.1**). The workload of the applied activities that students can carry out in work settings within and/or outside the country is determined in accordance with the Bartın University Associate Degree, Undergraduate Education and Examination Regulations, and is included in the program's total workload (**B.1.4.2**).

Students' homework, in-class presentations, year-round practical activities, and all courses taken are also indicated with ECTS workload in the diploma supplement and are included in the course syllabi (**B.1.4.3).**Student workload credits for the Ebelik, Nursing, and Social Work departments in the education catalog found on the Bartın University information package website are defined (**B.1.4.4**, **B.1.4.5**,**B.1.4.6**). Activities related to the entirety of the courses offered within our faculty have been prepared in detail in this context and incorporated into the course information packages. For determining the credits of Internship, professional practice, or laboratory courses on a course-by-course basis, not only the time the student spends at school is included; the time spent outside school such as report writing and preparation is also included (**B.1.4.1**). The workload-based monitoring of courses included in the programs is carried out with student course evaluation surveys (**B.1.4.7**). In addition, a course-specific student workload survey is also administered, reported, and shared on the website (**B.1.4.8**).Improvements are being made in line with the analysis results of the course satisfaction survey and the student workload survey (**B.1.4.9).**The course transfer of ECTS and recognition processes for the courses taken by students who go through student exchange programs (Erasmus, Farabi) are carried out based on the "Student Workload" (by looking at its duration and content) (**B.1.4.10).**

Evidence

B.1.4.1: Curriculum Contents Information Package

B.1.4.2: Bartın University Associate, Undergraduate Education and Examination Regulations

B.1.4.3: Sample Course Syllabus

B.1.4.4: Nursing Department Course Information Package

B.1.4.5: Midwifery Department Course Information Package

B.1.4.6: Social Work Department Course Information Package

B.1.4.7: Course Satisfaction Survey Results

B.1.4.8: Student Workload Survey Results

B.1.4.9: Improvement Tables

B.1.4.10: Document on Recognition of Courses in the Student Exchange Program

B.1.5. Monitoring and Updating of Programs

At our faculty, the updating and improvement of the existing course schedules is carried out in line with a continuous development approach. The accreditation processes for unit programs are also actively ongoing. Within the scope of the Strategic Plan, Education-Training Quality Policy, the Turkish Higher Education Qualifications Framework, and the BARÜ Associate and Undergraduate Education-Training and Examination Regulations, regular completion of course files for the purposes of monitoring and updating the programs is maintained (**B.1.5.1).**

Program evaluation activities are carried out using the Course Plan and Course Change Processing Detailed Process Card, as well as the Program Evaluation and Program Update Detailed Process Cards of the Process Management Handbook (**B.1.5.2**). The curriculum update intervals for our undergraduate degree programs are maintained once every 4 years, in a comprehensive manner with stakeholder participation. In 2023, the Nursing Department updated and implemented the new curriculum in order to ensure that the department's students take the updated courses in line with this plan (**B.1.5.3**). There is no change in the curricula of the Department of Social Work and the Department of Midwifery. In addition, the Nursing Department is evaluated annually by the Nursing Department's final-year students and instructional staff through the "Nursing Undergraduate Program Evaluation Survey" (**B.1.5.4**). Since no low scores or suggestions were identified in the survey results, no improvement plan was scheduled within 2025 (B.1.5.5).

Statistical indicators such as the course performance status in the program, number of students, and reasons for students whose enrollment was terminated are presented annually in our Faculty's Activity Report (**B.1.5.6**). Students' course performance status is statistically examined and evaluated in the course files. In the course files, strengths and areas for improvement are identified according to performance status (**B.1.5.1).**The Nursing Department monitors performance on a course and student basis on a termly basis through a table prepared by the unit using student-based performance indicators

(B.1.5.7). For students with low success status, a guidance faculty member meeting is primarily scheduled, and improvements aimed at addressing the issue are planned (**B.1.5.8).**

Whether the program achieves its educational purposes and objectives is evaluated through the "Education Program Objectives Survey" and qualitative interviews. The survey is administered annually to internal stakeholders (academic and administrative staff) and external stakeholders (students, graduates, employers, patients, patients' relatives, etc.). Qualitative interviews are conducted with students and academic staff. Reports are shared on the website (**B.1.5.9**). Based on the results, no improvement recommendation is available during 2025 (**B.1.5.5).**

In our Faculty, during 2025, the Nursing Department underwent a self-evaluation process by the Nursing Education Programs Evaluation and Accreditation Association (HEPDAK) .

As a result of your application regarding the general evaluation of the Nursing Undergraduate Program in the 2025–2026 period, made to the Nursing Education Programs Evaluation and Accreditation Association (HEPDAK), the Nursing Undergraduate Program of our Faculty has been accredited as "Fully Accredited" for a period of five years until 30.09.2031 (B.1.5.10,B.1.5.11,B1.5.12).

It is one of the strengths of our Faculty that, in its departments, programs are monitored and updated in line with stakeholder feedback. It is one of the Faculty's open-to-development aspects to ensure the sustainability of internalized, systematic, sustainable, and exemplary practices of our Faculty's programs according to the quality assurance system.

Evidence

B.1.5.1: Sample Course File

B.1.5.2:BARÜ Process Handbook

B.1.5.3: Current Curriculum Plan of the Nursing Department

B.1.5.4: Assessment Survey Reports for the Nursing Undergraduate Program

B.1.5.5: Improvement Tables Regarding Program Updates

B.1.5.6:BARÜ Faculty of Health Sciences 2025 Activity Report

B.1.5.7: Upper Cover Note for Filling Out Student-Based Achievement Indicators Table

B.1.5.8: Continuous Improvement Activities for Students and Their Results

B.1.5.10: Nursing Department Self-Assessment Report

B.1.5.11:HEPDAK Field Visit Website News

B.1.5.12:HEPDAK Full Accreditation Decision Letter

B.1.6. Management of Education and Training Processes

Our faculty carries out education and training processes in line with the BARÜ Quality Assurance Directive (B.1.6.1), the Education-Training Policy Document (B.1.6.2), the BARÜ Associate Degree and Undergraduate Education-Training and Examination Regulations (B.1.6.3). In addition, in the management of these processes, the academic calendar (B.1.6.4), the Process Management Handbook (B.1.6.5), the Education-Training Main Process process cards (B.1.6.6), the PUKÖ-based Action Plan (B.1.6.7), the Unit Risk Management Action Plan (B.1.6.8), the Academic Advising Implementation Directive (B.1.6.9), and our Faculty's Unit Strategic Plan (B.1.6.10) serve as guiding documents.

In order to ensure the sustainable continuity of the management of processes, the Health Sciences Faculty Education Committee, the Nursing Department Curriculum and Education Committee, the Nursing Department Exemption and Placement Committee, the Midwifery Department Exemption and Placement Committee, and the Social Work Department Exemption and Placement Committee—composed of academic personnel specialized in their field—carry out these processes in accordance with their job descriptions, authorities, and responsibilities regarding these processes (B.1.6.11).

In the Nursing Department, courses are divided into sections to improve the quality of education and to use practical areas more efficiently (**B.1.6.12).**In our Faculty, courses are delivered in sections in accordance with "Principles Regarding the Implementation of Elective/ Sectional Courses in Bartın University Faculty of Health Sciences" (B.1.6.13). In our Faculty, facilities for applied courses are available, including the Nursing Skills Laboratory, the Anatomy Laboratory, and the First Aid Laboratory. Laboratory rotations have been established to enable more active learning in line with the purpose of the applied courses (**B.1.6.14).**

In our Faculty, a faculty classroom table has been prepared within a system accessible to all departments in order to avoid any issues such as exam conflicts and insufficient classroom availability when preparing class schedules and examination schedules between departments. The teaching and exam capacities of the classrooms are stated in this system. The classrooms used by the departments can be seen by everyone, so there are no conflicts, etc. (B.1.6.15). When the class schedules and examination schedules are submitted to the Dean's Office, the vice dean responsible for education and training reviews the programs (B.1.6.16).

Evidence

B.1.6.1:BARÜ Quality Assurance Directive

B.1.6.2:BARÜ Education-Training Policy Document

B.1.6.3:BARÜ Associate and Undergraduate Education-Training and Examination Regulations

B.1.6.4:BARÜ Academic Calendar

B.1.6.5: Process Management Handbook

B.1.6.6: Educational-Training Main Process Process Cards

B.1.6.7: Action Plan Based on PDCA

B.1.6.8: Unit Risk Management Action Plan

B.1.6.9: Academic Advising Implementation Directive

B.1.6.10: Faculty of Health Sciences Strategic Plan 2024-2028

B.1.6.11: Faculty Committees

B.1.6.12: Sample Rotation Plan

B.1.6.13: Principles Regarding the Execution of Departmental Courses at Bartın University Faculty of Health Sciences

B.1.6.14: Example Laboratory Rotation

B.1.6.15: Faculty Classroom Schedule

B.1.6.16: Assignment of Duties Among Vice Deans

B.2. Implementation of Programs (Student-Centred Learning, Teaching, and Assessment)

B.2.1. Teaching Methods and Techniques

The methods defined in the Course Information Packages are consistent with the methods applied in the classroom. In in-class implementations,**instruction** is used together with role-play, demonstrations, brainstorming, question-and-answer sessions, discussions in small and large groups, case analysis, observation, and laboratory and field applications (**B.2.1.1**,**B.2.1.2, B.2.1.3**). Students demonstrate active participation through projects, homework, presentation sessions, paper presentations, group work, peer assessment, and laboratory/practical studies, and are encouraged toward deep learning (**B.2.1.4**,**B.2.1.5**,**B.2.1.6**). In 2025, 33 faculty members attended the Educators' Training Program and developed their competencies for student-centered, interactive, and technology-supported teaching methods (**B.2.1.7).**In line with the results of the Course Evaluation Surveys, teaching methods are reviewed and, when necessary, method changes are made. In addition, measurement and evaluation tools are updated through exam analyses (**B.2.1.8**,**B.2.1.9**).In applied lessons, students' professional competencies are assessed through process-oriented activities such as laboratory, internship, and field practice, and assessment methods that are not based solely on exam scores are used (**B.2.1.1**,**B.2.1.9**,**B.2.1.10**).

Evidence

B.2.1.1: Sample Course Syllabi Related to Distance and Formal Education

B.2.1.2: Bologna Course Information Package

B.2.1.3: Sample Course Syllabus

B.2.1.4: Sample Course Syllabus—Different Teaching Method 1

B.2.1.5: Sample Course Syllabus—Different Teaching Method 2

B.2.1.6: Sample Course Syllabus—Different Teaching Method 3

B.2.1.7: Strategic Plan Implementation Report for the Year 2024

B.2.1.8: Results of the Course Evaluation Survey

B.2.1.9: Sample Course File

B.2.1.10: Faculty Board Meeting Minutes

B.2.2. Measurement and Evaluation

At our faculty, process-focused (formative) assessment methods are used. These include portfolios, projects, weekly assignments, presentations, case presentations, peer assessment, and practical performance evaluations; the learning outcomes of the courses and the program outcomes are assessed in an integrated manner, and student-centered measurement is carried out (**B.2.2.1**,**B.2.2.2**,**B.2.2.3**). Predetermined rubrics are used to evaluate students' performance, and these assessment criteria are communicated to students transparently through course syllabi and announcements (**B.2.2.1**,**B.2.2.3**). In different sections or among different instructors, common exams, common answer keys, and standard grading charts are used. Examination security and assessment processes are carried out in line with institutional examination guidelines and Faculty Board decisions (**B.2.2.4**,**B.2.2.5**,**B.2.2.6)**.For students with disabilities, special arrangements such as additional time, large-print papers, and separate classrooms are provided, taking into account the principle of accessibility and equal opportunity (**B.2.2.7**). After the examination results are announced, students are not only informed of their grades, but also provided feedback about questions where errors were made, learning areas that are incomplete, and areas that need improvement. Student development is supported through explanations provided via question-solving classes and the learning management system (**B.2.2.4**). Examination results are analyzed using difficulty and item discrimination indices, and when deemed necessary, questions are revised and measurement tools are improved. Reports are regularly checked by the Measurement and Evaluation Commission (**B.2.2.5**).

Evidence

B.2.2.1: Sample Examination Papers

B.2.2.2: Vocational Research Project Course: Abstract and Peer Assessment Examples

B.2.2.3: Sample Course File

B.2.2.4: Evidence Regarding Feedback Provided After the Exam

B.2.2.5: Request of the Measurement and Evaluation Committee Concerning the Course Files

B.2.2.6: Rules to Be Followed in the Exam

B.2.2.7: Official Correspondence Regarding the Measurement and Evaluation of Students with Disabilities

B.2.3. Student Admission, Recognition of Prior Learning, and Credit Transfer

All application requirements, evaluation criteria, and schedules are announced transparently and in an accessible manner on the Faculty and University website; results are published based on a ranking by scores, ensuring the accountability and traceability of the process (**B.2.3.1**,**B.2.3.2**). Exemptions and credit transfer are examined by the Exemption and Placement Committee based on objective criteria for students' previous courses, and decisions are submitted to the Dean's Office. Procedures are completed within the periods specified in the academic calendar, and results are officially processed in the transcript (**B.2.3.3**,**B.2.3.4**). Courses taken by students within domestic or international exchange programs are evaluated according to the principle of full recognition in a way that will not extend the student's term (**B.2.3.3**,**B.2.3.5**). Within the framework of the "Directive on Recognition of Prior Learning," students' achievements outside formal education, their certificates, or work experience are assessed to grant exemptions from the relevant courses and are recorded (**B.2.3.4**,**B.2.3.6**).In graduate programs, application, evaluation, and examination processes are carried out within clearly defined rules; interviews are also recorded and implemented transparently (**B.2.3.5**,**B.2.3.7**). Issues encountered in placement (intibak) and exemption processes are monitored, reported, and improvements are made within the framework of the relevant regulation/directive. Within this scope, exemption and placement practices are continuously updated and standardized (**B.2.3.3**,**B.2.3.4**,**B.2.3.6**).

Evidence

B.2.3.1: Double Major, Minor, and Intra-Institutional Horizontal Transfer Directive

B.2.3.2: Evidence of Transparency, Accountability, and Traceability in Student Admission Processes

B.2.3.3: Minutes of the Committee Decision

B.2.3.4: Minutes of the Faculty Board Decision

B.2.3.5: Procedures and Principles Related to Graduate Education and Training at Bartın University

B.2.3.6: Directive on the Recognition of Prior Learning at Bartın University

B.2.3.7: Graduate Placement Results

B.2.4. Certification of Competencies and Diploma

All programs' graduation requirements are published in a transparent, clear, and accessible manner in the student information system and on the Faculty's website (**B.2.4.1**,**B.2.4.2**, **B.2.4.3).**Every student who graduates is issued a Diploma Supplement along with their diploma, free of charge, supporting international validity (**B.2.4.4**). Graduation processes are carried out through the online course withdrawal system, and students complete each step of the process online. In this way, bureaucratic delays are minimized and processes are accelerated (**B.2.4.5**,**B.2.4.6**,**B.2.4.7**,**B.2.4.8**). Certificates issued by TÖMER and BÜNSEM are recorded in the relevant systems and their verifiability is ensured (**B.2.4.9**). Courses taken in Erasmus or other exchange programs are shown in the transcript and Diploma Supplement with their original codes and names after the Equivalency Commission evaluates content and credit compatibility (**B.2.4.10**,**B.2.4.11**).

Evidence

B.2.4.1: Screenshots of the "Graduation Requirements" page on the Faculty and Department WEB pages **B.2.4.2:**Screenshots of the Competency Requirements page in the Program Information Package **B.2.4.3:**Bartın University Associate and Undergraduate Education-Training and Examination Regulations

B.2.4.4: Sample Diploma Supplement prepared in English

B.2.4.5: Information about Online Course Drop

B.2.4.6: Information for Graduates about the Course Drop Process and Diploma Delivery

B.2.4.7: Screenshot of the Advisor Course Drop Page

B.2.4.8: Sample Graduation Committee Decision(s)

B.2.4.9: Sample Certificate Provided by TÖMER

B.2.4.10: Exemption Committee Report of the Student Going to Erasmus and a Sample Transcript

B.2.4.11: Diploma Sample

B.3. Learning Resources and Academic Support Services

B.3.1. Learning Environment and Resources

At our faculty, 9 out of 15 classrooms are actively used; the computer and internet infrastructure of the classrooms is checked at the beginning of each term, and in case of inadequacy, classrooms are assigned through cooperation with other units (**B.3.1.1**,**B.3.1.2**,

B.3.1.3) . Laboratory and simulation environments are equipped to meet students' needs for applied training (B.3.1.1,B.3.1.4,B.3.1.5,B.3.1.6,B.3.1.7). Our library provides access to printed and electronic publications, databases, and an open-access system, and with the "Vetis" cloud platform and the Cep Kütüphanem application, students and faculty members can access resources from anywhere. Library usage statistics are monitored regularly (B.3.1.8,B.3.1.9, B.3.1.10,B.3.1.11,B.3.1.12,B.3.1.13,B.3.1.14,B.3.1.15,B.3.1.16). Various areas are provided to students for studying outside of class and for social interaction.The Ağdacı Residence, which is integrated with the natural environment, offers social amenities such as a FIFA-approved football pitch, fitness facilities, and an indoor sports hall. In addition, social life is supported through spring festivals, music, theatre, and sports events (B.3.1.17,B.3.1.18,B.3.1.19). Feedback received from students regarding learning environments and resources is collected through surveys and meetings, and after being evaluated in the academic board and advisory boards, necessary improvements are made in physical and learning resources (B.3.1.20).

Evidence

B.3.1.1: Anatomy Laboratory

B.3.1.2: Official Correspondence for Classroom Infrastructure

B.3.1.3: Official Correspondence Requesting a Classroom

B.3.1.4: Nursing Skills Laboratory

B.3.1.5: First Aid Laboratory

B.3.1.6: Simulation Laboratory

B.3.1.7: Maternity Class

B.3.1.8: Library Images

B.3.1.9: Library Open Access WEB Page

B.3.1.10: Library Database WEB Page

B.3.1.11: Library "Vetis" Library Services Platform

B.3.1.12: Library Publication Request System

B.3.1.13: My Pocket Library Application

B.3.1.14: Sample Academic Advising Meeting Minutes

B.3.1.15: Student Orientation Guides WEB Page

B.3.1.16: Screenshot of the Email Sent by the Head Office of the Library and Documentation

B.3.1.17: GreenMetric 2025 World University Rankings WEB Page

B.3.1.18: Student Orientation Guides

B.3.1.19:BARÜ Spring Festival WEB Page

B.3.1.20: Course Evaluation Surveys Cover Page Examples

B.3.2. Academic Support Services

One advisor is assigned to each student, and advisors hold face-to-face or online meetings with students once every two weeks. Advisor hours are incorporated into the weekly course schedule and are posted on the office doors. All advising activities are carried out in accordance with our University's Academic Advising Framework Action Plan and the Associate Degree and Undergraduate Academic Advising Directive (B.3.2.1,B.3.2.2,B.3.2.3, B.3.2.4).Each year, Career Day events are organized in our faculty, and students are directed to prepare CVs, participate in interview simulations, and attend sector meetings. In 2025, 1,025 of our students benefited from this service (B.3.2.5,B.3.2.6,B.3.2.7). Students are informed about the center's services through orientation training and guidance introductions, and, if needed, they receive individual advising. In 2025, 5 students from our faculty benefited from psychological counseling services. Service access is carried out in an easy and confidentiality-based manner (B.3.2.8,B.3.2.9,B.3.2.10,B.3.2.11,B.3.2.12). Students' academic achievements, application performance, and participation in projects and activities are monitored through their course achievement charts and transcripts. Thus, students' academic and career development is followed systematically (B.3.2.13,B.3.2.14) . The effectiveness of academic advising services is measured every year with the Academic Advising Evaluation Survey, and the results are published on the faculty website. Student complaints are resolved through improvement procedures such as advisor changes or warnings (B.3.2.15,B.3.2.16).

Evidence

B.3.2.1: Academic Advising Framework Action Plan

B.3.2.2: Bartın University Associate and Undergraduate Academic Advising Directive

B.3.2.3: Instructor Office Door Labels

B.3.2.4: Minutes of Academic Advising Meetings

B.3.2.5:2025 Faculty Strategic Plan Implementation Report

B.3.2.6: Career Events-1

B.3.2.7: Career Events-2

B.3.2.8: Student Orientation Guide

B.3.2.9: School of Health Sciences Adaptation Training News (Midwifery Department)

B.3.2.10: School of Health Sciences Adaptation Training News (Nursing Department)

B.3.2.11: School of Health Sciences Adaptation Training News (Department of Social Work)

B.3.2.12: Nursing Department Strategic Objectives and Indicators 2025 First 6-Month Realization Report

B.3.2.13: Screenshot of the WEB Page Where Faculty Advisorships Are Displayed

B.3.2.14: Course Achievement Schedule

B.3.2.15: Results of the Academic Advising Evaluation Survey

B.3.2.16: Academic General Assembly Meeting

B.3.3 Facilities and Infrastructure

Our faculty has sufficient quality and quantity to support teaching and training activities in terms of the cafeteria, technology-equipped study areas, health, transportation, information services, library, distance education infrastructure, and indoor and outdoor sports facilities. The aforementioned infrastructure opportunities are accessible and have been made available for students to use. The A ğdacı Campus, where our university is also located, has been established on an area of 87,520.00 m ². In addition to the Faculty of Forestry and the Faculty of Health Sciences in Bartın, the Ağdacı Campus hosts application and research centers operating in the fields of distance education, continuing education, language training, and first aid. The campus also includes workshops, administrative units, student dormitories, and social and sports facilities (**B.3.3.1**,**B.3.3.2**).

Our university has a total of 5 indoor sports halls and 8 outdoor sports fields across the Ağdac ı and Kutlubey campuses (**B.3.3.2**). These areas are planned in a manner suitable for team and individual sports activities. The campuses are easily accessible via university services, municipal public transportation vehicles, and private vehicles; the campuses' proximity to the city center increases accessibility. Within the faculty building, there are table tennis and chess areas available for students' use (**B.3.3.3, B.3.3.4).**

Our faculty has a total of 15 classrooms, 9 of which are actively used. The Anatomy Laboratory, the Nursing Skills Laboratory, the Simulation Laboratory, the Maternity Class, and the First Aid Training and Educational Training Center, which provide services within an area of approximately 313 m ², are available for the use of students and faculty members (**B.3.3.5**,**B.3.3.6**,**B.3.3.7**,**B.3.3.8**, **B.3.3.9**). The simulation laboratory equipped with computer-assisted patient care simulators offers practice-based learning opportunities aimed at improving students' care skills (**B.3.3.7**).

Student rotations are planned in order to ensure the effective, efficient, and balanced use of the laboratories; at the beginning of the education and training period, weekly course schedules and classroom and laboratory usage timetables are prepared and posted at the entrances of the relevant

classes and laboratories (**B.3.3.10, B.3.3.11).**The adequacy of the laboratory environments is monitored at the end of the term through surveys conducted by the Measurement and Evaluation Commission Education and Training Subunit via assessment surveys (**B.3.3.12, B.3.3.13, B.3.3.14)**, and the results are available on the website (**B.3.3.15**). The "Disability-Friendly University Flags and Program Badge" organized by the Council of Higher Education (YÖK) was awarded to our Faculty's Social Work Department in 2025 with the disability-friendly university program badge award (**B.3.3.16**).

Evidence

B.3.3.1: Student Accommodation Guide

B.3.3.2: Outdoor Sports Facilities

B.3.3.3: Image of the Table Tennis Hall

B.3.3.4: Image of the Chess Area

B.3.3.5: Anatomy Laboratory

B.3.3.6: Nursing Skills Laboratory

B.3.3.7: Sample Application of the Simulation Laboratory

B.3.3.8: Maternity Class

B.3.3.9: First Aid Training and Instructor Training Center

B.3.3.10: Class Use Schedule

B.3.3.11: Laboratory Use Schedule

B.3.3.12: Laboratory Application Evaluation Form Report,

B.3.3.13: Application Area Evaluation Form Report,**B.3.3.14:**

Laboratory Application Area Evaluation

B.3.3.15: Education and Training Subunit Page of the Measurement and Evaluation Committee i reports web

B.3.3.16: Social Work Department Award for an Accessible Universities Program

B.3.4. Disadvantaged Groups

The Office of Students with Disabilities is able to identify disadvantaged students through the coordination of the unit and the records of our faculty, and determine their needs. An integration training program and a student integration guide have been provided for international students. In addition, chronic illnesses or economic disadvantage situations are recorded and the necessary support measures are planned (**B.3.4.1**,**B.3.4.2**,**B.3.4.3**,**B.3.4.4,B.3.4.5, B.3.4.6).**At the entrances to the faculty, there are ramps and protective barriers, and there is an elevator that provides access to classrooms. Accessibility has been ensured in physical, academic, and social areas. Our Faculty's

Department of Social Work received the “Engelsiz Üniversiteler” (Universities for All) Program Award in 2025; at the university level, there are also awards for Accessibility in Education (Green Flag) and Accessibility in Socio-Cultural Activities (Blue Flag) (B.3.4.1,**B.3.4.7,**B.3.4.8,**B.3.4.9).** Through the Office of Students with Disabilities, students with special needs are supported by making adaptations to their courses and examinations using FRM 0763–0767 forms.This process is carried out systematically between consultants and course instructors (B.3.4.10,B.3.4.11,B.3.4.12, B.3.4.13,B.3.4.14). In accordance with Bartın University’s Part-Time Student Employment Procedures and Principles, meal bursaries and part-time work support are provided fairly to students who experience financial hardship. A diet meal application is also provided for students with celiac disease (B.3.4.15,**B.3.4.16, B.3.4.17).**Evaluation processes are followed through strategic plan monitoring and activity reports and are shared on the website and with stakeholders. In line with feedback received from students, improvements are made in the physical, academic, and social environment (B.3.4.15,B.3.4.16,B.3.4.17). Academic and administrative staff are informed about approaches to disadvantaged groups and awareness within the scope of the Office of the Coordinator of Students with Disabilities and the relevant directives. In addition, awareness of the processes is ensured through student orientation programs and guides (B.3.4.1,B.3.4.2, B.3.4.3).

Evidence

B.3.4.1: Directive of the Office of the Coordinator for Students with Disabilities

B.3.4.2: Adaptation Training Program for International Students

B.3.4.3: Student Adaptation Handbook

B.3.4.4: Procedures and Principles for Employing Part-Time Students at Bartın University

B.3.4.5: Part-Time Work Student Fee 2025 2026 Academic Year

B.3.4.6: February 2025 Meal List for People with Celiac Disease at Bartın University Kutlubey and Ağdacı Campuses

B.3.4.7: Accessibility in Education and Accessibility Award in Socio-Cultural Activities (Document)**B.3.4.8:**Accessibility in Education and Accessibility Award in Socio-Cultural Activities (News)

B.3.4.9: Social Services Department Badge for the Barrier-Free Universities Program

B.3.4.10:FRM 0763 Annex-1 Service Application Form

B.3.4.11:FRM 0764 Teaching Adaptation Form

B.3.4.12:FRM 0765 Appendix-3 Audio Recording Commitment

B.3.4.13:FRM 0766 Appendix-4 Photo Recording Commitment

B.3.4.14:FRM 0767 Appendix-5 Course Partner Commitment (Student Form)

B.3.4.15: Administrative Activity Report

B.3.4.16: Management Activity Report Sharing with External Stakeholders

B.3.4.17: Strategic Plan Implementation Report of the Faculty of Health Sciences for 2025

B.3.5. Social, Cultural, and Sports Activities

Within our faculty, seven student clubs actively operate under the supervision of teaching staff. For the activities of student communities, the use of venues, organizational support, and guidance services are provided in coordination with the Health Culture and Sports Department; outdoor/indoor sports areas, conference halls, and spaces within the faculty are allocated for events. If necessary, equipment and logistical support are also provided (B.3.5.1,B.3.5.2, B.3.5.9). The number, type, and participant profile of organized events are regularly monitored through the Strategic Plan Implementation Reports. In 2025, our faculty carried out 8 events of a social, cultural, and sporting nature, 10 events for disadvantaged groups, and 14 events by student clubs (B.3.5.8). When planning events, the selection of accessible venues, organizing events across different time periods, and arrangements that facilitate the participation of students with disabilities are taken into account. These processes are carried out in cooperation with the Coordination Office of the Students with Disabilities Unit (B.3.5.3,**B.3.5.10).**The activities of student communities are carried out within the framework of the event processes conducted by the Directorate of Health, Culture and Sports and the relevant guidelines. Guidance is provided through academic advisors assigned to each student club; the Sports Committee and the Social Activities Committee play an active role in the planning and implementation processes (B.3.5.1, B.3.5.4,B.3.5.9). In line with students' requests, new activities are planned and support is provided for activities that are being carried out for the first time. For example, the booth activity organized within the scope of the 1–7 March Green Crescent Week in cooperation with the Green Crescent Student Club was brought to life with students' demands and participation (B.3.5.7). The students and teams representing our university are supported in terms of organization and logistics through the Directorate of Health, Culture and Sports and the relevant units. Sports facilities are actively made available for use; the processes for participating in competitions and events are coordinated by the relevant units (B.3.5.1,B.3.5.2,B.3.5.4).

Evidence

B.3.5.1: Directorate of Health, Culture and Sports Activity Report

B.3.5.2: Bartın University Open Sports Facilities

B.3.5.3:the conference hall located in the Ağdacı Campus

B.3.5.4: Medical and Social Center

B.3.5.5: Event Archive in the Faculty of Health Sciences

B.3.5.6: BARÜFEST'25

B.3.5.7:1–7 March Greenay Week Greenay Student Club Event

B.3.5.8: Strategic Plan Implementation Report for the Faculty of Health Sciences for 2025

B.3.5.9: Committees of the Faculty of Health Sciences

B.3.5.10: Promotion of Club Activities in Consulting Services

B.3.5.11: Student Satisfaction Results Web Page

B.4. Academic Staff

B.4.1 Appointment, Promotion, and Assignment Criteria

The appointment and promotion processes for faculty members in our faculty are carried out in line with national legislation and institutional arrangements related to the "Criteria Directive for Promotion and Appointment to Bartın University Teaching Staff." Announcements are made to the public through the Official Gazette and the university's website, and applications, evaluation, and appointment processes are carried out within defined workflows, taking into account the principles of merit and equal opportunity (**B.4.1.1**,**B.4.1.2**,**B.4.1.3**, **B.4.1.4**,**B.4.1.5**,**B.4.1.6**)**.**Course assignments are made by considering the expertise areas of teaching staff and balancing course loads. Distributions of teaching load are discussed in Department Board Meetings with the participation of all instructors, and the decisions made are implemented transparently by recording them in minutes. The process is carried out in accordance with "The Principles to Be Followed in Determining Teaching Load and in Making Additional Course Payments"**(B.4.1.7,B.4.1.8)**.Selection of non-permanent teaching staff is made by taking into account the field expertise and professional experience appropriate to the nature of the relevant course. Assignments are first evaluated by the department boards and the related administrative approval processes are completed. The performance of these instructors regarding their courses is monitored through student satisfaction surveys and feedback applied at the end of the term (**B.4.1.9**,**B.4.1.10**,**B.4.1.11).**Academic appointment and promotion criteria are regularly reviewed in line with the university's quality assurance policy and strategic plan targets. Updates to the criteria are made by considering institutional needs, academic performance indicators, and national higher education policies; these updates are put into effect through the relevant directives (**B.4.1.1**,**B.4.1.12**,**s:27,B.4.1.13**).

Evidence

B.4.1.1: Directive on Criteria for Promotion and Appointment of Faculty Members at Bartın University

B.4.1.2: Regulation on Amendments to the Regulation on Determining and Using Standard Staff Positions for Academic Personnel in State Higher Education Institutions, published in the Official Gazette dated 02 November 2019 and numbered 30936

B.4.1.3: Requirement for a Sample Official Gazette Announcement

B.4.1.4: Sample Preliminary Assessment Committee Report

B.4.1.5: Sample Preliminary Assessment Results Announcement

B.4.1.6: Webpage Where the Personnel Department's Academic Staff Recruitment Announcement Is Disseminated to Stakeholders

B.4.1.7: Principles to Be Followed in Determining Teaching Load and Payments of Additional Lecture Fees

B.4.1.8: Decision of the Department Board Where the Course Is Shared

B.4.1.9: Provisions of the Regulation on the Procedure and Principles Regarding Entrance Examinations to Be Applied in Appointments by Lateral Transfer or Direct Appointment to Academic Staff Positions Other Than Faculty Members

B.4.1.10: Decision of the Department Board Regarding a Teaching Staff Member Without a Permanent Position

B.4.1.11: Upper Correspondence Letter from the Office of the Secretary-General Regarding a Teaching Staff Member Without a Permanent Position

B.4.1.12: Bartın University Process Management Handbook

B.4.1.13: Bartın University Faculty of Health Sciences 2024-2028 Strategic Plan

B.4.2. Teaching Competencies and Their Development

At our faculty, participation in the trainers' training programs is encouraged and closely monitored for all academic staff, especially for instructors who are newly appointed. These programs, which aim to improve measurement and assessment, teaching methods and techniques, and pedagogical competencies, are carried out in line with the Strategic Plan and the Education-Training Quality Policy. Participation is monitored by the Dean's Office, and reminders and guidance are provided when necessary (**B.4.2.1, p:1**,**B.4.2.2**,**B.4.2.3**,**B.4.2.4**,**p: 46).**Training programs for trainers are organized so that instructors can effectively use student-centered and interactive teaching methods. Within this scope, by providing training on topics such as writing learning outcomes, strategies to increase student motivation, adult learning psychology, and critical thinking in teaching, the development of teaching competencies is supported (**B.4.2.1, p:1**,**B.4.2.2**,**B.4.2.4**).The teaching staff's performance related to courses is regularly monitored and evaluated through course satisfaction surveys.

The survey results are discussed in department boards and at the Faculty Academic General Board; improvement recommendations and measures to be taken are decided in line with item-based evaluations. This process is carried out within the framework of continuous improvement under Corrective and Preventive Actions (**B.4.2.5**,**B.4.2.6**,**B.4.2.7**,**B.4.2.8**).

Evidence

B.4.2.1: Faculty Strategic Plan Implementation Report for 2025

B.4.2.2: Trainers' Training Program

B.4.2.3: Trainers' Training Participation and Reminder Dean's Office Official Correspondence

B.4.2.4: Bartın University Process Management Handbook

B.4.2.5:2024-2025 Academic Year Fall Semester Course Satisfaction Survey Results, Social Work Department

B.4.2.6:2025-2026 Academic Year Fall Semester Course Satisfaction Survey Results, Nursing Department

B.4.2.7: Solution Suggestions, Improvements, and Measures to Be Taken for the Evaluation of Course Satisfaction Surveys

B.4.2.8: Minutes of the Academic General Assembly Decision

B.4.3. Incentives and Rewards for Educational Activities

The Guidelines for the Assessment and Awarding of Educational-Teaching Performance of Faculty Members at Bartın University were introduced to the faculty members working in our faculty through official correspondence and academic board meeting sessions; information was provided regarding the application processes and participation was encouraged. In this process, the opinions and suggestions of the faculty members were taken into account(**B.4.3.1**,**B.4.3.2**,**B.4.3.3**,**B.4.3.4**,**B.4.3.5**,**B.4.3.6**). Within the scope of our University's Academic Performance and Project Awards Directive, at the "Academic Performance Award Ceremony," many of our faculty members received awards in the gold, silver, and bronze categories. In the gold category, 2 of our Dr. Faculty Members were eligible to receive awards; in the silver category, 1 Assoc. Prof. Dr. and 1 Research Assistant Dr. were eligible to receive awards. In the bronze category, they received 1 Prof. Dr. and 1 Assoc. Prof. Dr. awards (**B.4.3.7**).

At our faculty, success in education and training activities is evaluated through criteria defined within the Bartın University Directive on the Assessment and Awarding of Teaching Staff's Education and Training Performance. Teaching staff's education and training

performance is regularly monitored through performance evaluation surveys; the results obtained form input for award and incentive mechanisms carried out at the university level (**B.4.3.2**,**B.4.3.8**,**B.4.3.9**,**p.1).**

The teaching staff's teaching and training performance is monitored and evaluated through faculty performance evaluation surveys and student feedback. In line with these evaluations, the teaching staff are directed to in-service training and instructor training programs, with the aim of improving and encouraging training performance (**B.4.3.2**,**B.4.3.8**,**B.4.3.9**,**p.1).**

At our Faculty, incentive and reward processes are carried out transparently and based on measurable criteria in accordance with guidelines defined across the university. The performance of teaching staff is monitored through survey results and activity reports; the results are reported in accordance with the provisions of the KVKK and shared with stakeholders. The processes are not dependent solely on management initiative, but are implemented within the framework of defined criteria and monitoring mechanisms (**B.4.3.1**,**B.4.3.2**,**B.4.3.8**,**B.4.3.9**,**p.1).**

Evidence

B.4.3.1: Bartın University Academic Performance and Project Awards Directive

B.4.3.2: Bartın University Directive on the Evaluation and Awarding of the Educational-Teaching Performance of Its Instructors

B.4.3.3: Directive on Supporting Faculty Members' Participation in Domestic and International Scientific Activities at Bartın University

B.4.3.4: Directive on Supporting Students' Participation in Domestic and International Scientific Activities at Bartın University

B.4.3.5: Dean's Office Opinion Submission Cover Letter Regarding the Directive on the Evaluation and Awarding of Educational-Teaching Performance of Bartın University Faculty Members **B.4.3.6:**Minutes of the Academic General Board Meeting (On Improving the Academic Studies of Faculty Members)

B.4.3.7: News of the Academic Performance Awards Ceremony University Web Page

B.4.3.8: Faculty of Health Sciences 2025 Instructor Performance Evaluation Report

B.4.3.9: Our Faculty's 2025 Strategic Plan Achievement Report

C. RESEARCH AND DEVELOPMENT

C.1. Management of Research Processes and Research Resources

C.1.1. Management of Research Processes

In line with the Faculty of Health Sciences' 2024–2028 Strategic Plan goals and indicators (**C.1.1.1)**and the Research and Development Policy Document (**C.1.1.2)**, it carries out research activities by focusing on academic priorities that produce social benefit and value and contribute to local, regional, and national development objectives. In accordance with our faculty's mission and vision (**C.1.1.3)**, our research policy aims at continuous improvement and development of R&D processes. In this direction, research activities are managed effectively through a quality-focused governance model (**C.1.1.4)**. Our faculty does not have a sub-committee specifically defined for research processes within the Unit Quality and Accreditation Commission. However, research processes are carried out in cooperation by the relevant academic units and commission members; when necessary, they are evaluated at the academic board and commission meetings and decisions are made.Publication, patent, and project processes carried out within our faculty are monitored regularly by the Internal Control Monitoring and Steering Committee (**C.1.1.5). The results obtained are shared with relevant stakeholders in the meetings of the Academic General Assembly and Advisory Board; feedback aimed at improving the processes is received and taken into consideration (C.1.1.6, C.1.1.7).**

Our Faculty conducts studies directed at the priority research areas it has identified in accordance with the University's Strategic Plan and the Research and Development Policy Document. Information and guidance regarding these areas were announced to academic staff through UBYS via official correspondence; teaching staff were encouraged to develop projects in these areas and to increase their scientific output. This practice aims to ensure coherence between institutional priorities and academic activities (**C.1.1.8).**

The Faculty of Health Sciences implements various award and support mechanisms in order to effectively manage research and development processes, increase the motivation of academic staff, and encourage scientific productivity. In this context, the achievements of academic staff who have won a research scholarship, whose projects have been approved, or who have received awards at scientific events are announced on the Faculty's official website and are awarded with "Academic Performance Awards" (**C1.1.9).**In addition, in line with the Directive on Supporting Participation in Domestic and International Events (C.1.1.10), the participation of instructors in scientific events is encouraged, and this support constitutes an

important part of the management of research processes. All researchers in our Faculty can benefit from the Scientific Research Projects (BAP) support program of Bartın University (C.1.1.11). However, the University Promotion Criteria are also actively applied in academic promotion processes (C.1.1.12). In 2025, 7.Under the Academic Performance and Project Award Ceremony within the R&D Project Market, the Nursing and Social Work Departments' faculty members with the highest number of publications in the Q1, Q2, and Q3 categories were awarded the "Academic Performance Award" (**C.1.1.9**,**C.1.1.13).**

At the Faculty of Health Sciences, the management, monitoring, and continuous improvement of research processes are carried out through the Strategic Plan Monitoring and Evaluation Reports prepared for the first six-month and annual periods (C.1.1.14). In addition, research processes are regularly monitored and evaluated across the unit, based on the PUKÖ (Plan-Do-Check-Act) cycle, through the 2025 Faculty of Health Sciences Improvement Plan (C.1.1.15) and Activity Reports (C.1.1.16), and preventive and improving measures are taken when necessary.

In the evaluation of research processes, the steps in the "Research and Development Performance Monitoring and Evaluation Business Workflow Diagram," published on the web page of the Bartın University Quality Coordination Office, and the "Business Workflow Diagram for Improving Faculty Members' Research Competencies" are followed (**C.1.1.17**). In addition, the "Process Card for Monitoring and Evaluating the Research and Development Performance of Units" (**C.1.1.18)**and the "Process Card for Improving Faculty Members' Research Competencies" stated in the Bartın University Process Management Handbook are also used effectively.

At the Academic General Assembly Meetings held at the end of each year, the areas in which the set targets were not achieved are reviewed; necessary measures are decided for these areas, and new planning is carried out for the following six-month or annual period (C.1.1.14). Within the scope of the meetings, support is provided for research methods, statistics training, academic writing, and project writing in order to enhance the research competencies of faculty members. To increase research and development capacity, various scientific activities and trainings are organized on topics such as artificial intelligence, power analysis, career management, and ethics in health services by faculty members (C.1.1.19). In addition, the diversity and adequacy of university resources, the changes in these resources over the years, the expectations of academic staff, and aspects open to improvement are evaluated through the Academic Staff Satisfaction Survey regularly conducted by Bartın

University (**C.1.1.20).**The survey results are published on the Quality Coordination Office's website, and continuous improvement efforts are carried out in line with requests received from academic staff to developthe resources (**C.1.1.21).**

Among the primary goals of the research conducted in our faculty is to contribute to regional development and social benefit. In this regard, a BAP project implemented for pregnant women in the region aimed to support local people's access to health services and to increase social awareness. The project in question serves as a good example of how research outputs can directly contribute to society (**C.1.1.22).**

Among our faculty's strong aspects in research processes are conducting awareness-raising activities aimed at improving the quality of scientific publications, actively using the process management handbook, adopting the governance model, and systematically monitoring research processes through the Strategic Plan, Action Plan, and Activity Reports. Among the areas open to improvement, the need to increase the number of project applications aimed at attracting more external funding sources and to make more effective use of existing resources stands out.

Evidence

C.1.1.1:2024-2028 Unit Strategic Plan

C.1.1.2: Research and Development Policy Document

C.1.1.3: Mission and Vision

C.1.1.4: Governance Model

C.1.1.5: Internal Control Monitoring and Steering Committee

C.1.1.6: Academic General Assembly Meeting

C.1.1.7: Academic General Assembly Meeting

C.1.1.8: Official Correspondence

C.1.1.9: Academic Performance Awards

C.1.1.10: Directive on Supporting Participation in National and International Scientific Activities of Bartın University

C.1.1.11:BARÜ Directive on Scientific Research Project(s)

C.1.1.12:BARÜ Directive on Criteria for Promotion and Appointment to Academic Faculty

C.1.1.13: Patent News

C.1.1.14: Strategic Plan Monitoring and Evaluation Reports

C.1.1.15: Improvement Action Plan

C.1.1.16: Unit Activity Report 2025

C.1.1.17: Process Management Handbook

C.1.1.18: Process Card

C.1.1.19: Strategic Plan 2025-Year Realization Report

C.1.1.20: Academic Staff Satisfaction Survey

C.1.1.21: Official correspondence

C.1.1.22: Event Poster

C.1.2. Internal and External Resources

Within our faculty, access to in-university (BAP) resources is provided in order to sustain research and development activities, and there is an ongoing BAP project **(C.1.2.1).**However, there is no specific monitoring committee that systematically tracks this process and evaluates budget use and outputs. Therefore, research support processes are carried out at the individual level, and systematic monitoring and improvement practices remain limited.

Application and acceptance processes for externally funded projects (TÜBİTAK, EU, Development Agencies, etc.) are monitored, reported, and encouraged by the University's Strategic Plan and Internal Control Monitoring and Steering Committee. While this provides a positive quality assurance mechanism to increase the use of external resources, a more proactive and systematic initiative is needed at the faculty level.

It appears that supports such as travel allowances for researchers, conference participation, expert invitations, and fieldwork support are not being provided. This has been considered a limitation that negatively affects the dissemination of research activities, as well as academic mobility and internationalization processes.

Moreover, the condition of laboratory, software, and equipment infrastructure is not being assessed on a regular basis; no specific budget planning is made for needs such as maintenance-repair and calibration. In addition, no concrete initiative has been taken to develop infrastructure through donations, sector collaborations, or external funding in order to increase the diversity of resources.

Even though university internal funds are used to some extent, the existence of an institution-wide monitoring mechanism for external resources constitutes an important basis. However, the fact that monitoring and improvement processes regarding the adequacy and diversity of resources have not been institutionalized at the faculty level, the lack of support mechanisms, and the insufficiency of initiatives related to infrastructure prevent progress to the 4. and 5. levels.

Evidence

C.1.2.1:BAP Project

C.1.3. Doctoral Programs and Postdoctoral Opportunities

At present, there is no doctoral program within our faculty, and three different thesis-based master's programs are conducted under the Department of Nursing Science and one thesis-based master's program under the Department of Social Work Science (**C.1.3.1)**. Since our faculty has a young academic staff, the minimum number of faculty members required to open a doctoral program has not yet been reached. Therefore, there is currently no evaluation process regarding the alignment of doctoral thesis topics with priority research areas. However, in the medium term, it is planned to open doctoral programs together with strengthening the faculty staff, and strategic planning is being carried out in this direction (**C.1.3.2**).

In this context, a “Post-Doc” position has not been defined, and there is no institutional-level incentive mechanism or directive for employing researchers who have completed their doctorates in projects. However, it is considered that such policies should be developed within future organizational arrangements in order to enable development in this field.

Our faculty does not have a clear policy regarding hiring its own PhD graduates (inbreeding) or hiring graduates from different institutions. At present, there is no institutional requirement or guidance for applying criteria such as postdoctoral experience at external institutions aimed at increasing academic diversity.

Because there is currently no PhD program, monitoring activities related to educational quality, assessments of competence in writing publications or projects, implementation of publication requirements, evaluations of thesis experiences abroad, and graduate career tracking are not yet carried out. These areas will be put into effect through monitoring and improvement mechanisms to be structured with the opening of PhD programs.

In conclusion, although practices regarding PhD and postdoctoral research processes have not yet been initiated specifically within our faculty, the shortcomings in this area are considered areas open to development, and the goal is to structure these processes alongside strengthening the academic faculty staffing.

Evidence

C.1.3.1: Education Catalog

C.1.3.2:2024-2028 Unit Strategic Plan

C.2. Research Competence, Collaborations, and Supports

C.2.1. Research Competencies and Their Development

At our faculty, active participation is provided in the Project Market events organized university-wide in order to strengthen interdisciplinary interaction among researchers and a culture of developing joint projects. Announcements regarding project applications are regularly made through the university's website and social media channels, ensuring that all academic staff are informed about the events. In this context, our faculty participated in the BARÜ 8th International R&D Project Market event with 1 project. Such events enable researchers to get to know one another and develop ideas for joint projects (**C.2.1.1**,**C.2.1.2**). At our faculty, the research performance of academic staff is addressed in annual evaluation meetings held within the dean's office and department chair offices. In these meetings, strong and developable aspects regarding research activities are identified, and individual feedback is provided to academic staff whose research performance is relatively low or determined to require development.These instructors are directed to in-unit and external trainings organized in fields such as project writing, data analysis, and academic writing; the referral processes are documented through formal correspondence and meeting minutes (**C.2.1.3**,**C.2.1.4**). The competency development of all researchers working in our faculty is monitored and assessed systematically. The developments of instructors regarding their training, project, and research activities are reported with evidence through Strategic Plan Evaluation Reports. In these reports, changes in the number of publications and projects of instructors engaged in training are tracked; additionally, evaluations are made at the individual level through Duty Extension, Appointment, and Promotion documents. In line with the results obtained, feedback meetings are held with instructors, and remedial training plans are prepared for areas where such training is needed (**C.2.1.4**,**C.2.1.5**,**C.2.1.6**,**C.2.1.7**).The participation of academic staff working in our faculty in scientific activities at home and abroad is supported in a planned and systematic manner within the scope of the Bartın University Directive on Supporting Participation in Domestic and International Scientific Activities. In addition, academic staff are encouraged to benefit from the TÜBİTAK 2224-A and 2224-B programs, and this year, 2 academic staff members from our faculty received support for participation in international scientific

activities. Participation documents and support processes are regularly monitored in the Strategic Plan Monitoring and Implementation Reports (C.2.1.8,C.2.1.9,C.2.1.10,C.2.1.11).

Evidence

C.2.1.1: Announcements Regarding Project Applications

C.2.1.2: Participation in the Project Fair

C.2.1.3: Official Correspondence

C.2.1.4: Performance Evaluation Surveys

C.2.1.5: Strategic Plan Evaluation Reports

C.2.1.6: Extension of Duty Document

C.2.1.7: Appointment Promotion Document

C.2.1.9: Directive on Supporting Participation in Domestic and International Scientific Events

C.2.1.10:2224-A Program for Supporting Participation in International Scientific Events

C.2.1.11:2224-B Program for Supporting Participation in Domestic Scientific Events

C.2.1.12:2224-A Participation in the Support Program for Attending International Scientific Events

C.2.2. National and International Joint Programs and Joint Research Units

At present, within our faculty, there are no interdisciplinary or inter-institutional graduate (master's/doctoral) programs being carried out with other universities or institutions. In addition, no official initiative or correspondence process has been initiated to open such programs to date. However, in line with the relevant legislation and our university's higher-level policy documents, it is planned to initiate efforts to open joint graduate programs in the coming periods, provided that the necessary academic and administrative infrastructure requirements are met (C.2.2.1 **s:105-106,**C.2.2.2).

Our faculty encourages and supports the participation of its faculty members and staff in international research networks. In this context, we have teaching staff who actively serve in international research networks carried out within the framework of COST Actions. One of our faculty members has served in Spain within the scope of a COST project; in addition, one of our faculty members has taken on membership in the COST Action Management Committee and the role of “Cultural Safety Officer.” These activities increase our faculty’s international research visibility (C.2.2.1 **s:105-106,**C.2.2.3,C.2.2.4,C.2.2.5).

Our faculty has joint research activities carried out by academicians from different disciplines coming together. These studies are not conducted under a formally structured "joint research group" or laboratory framework; however, joint publications and projects are produced through interdisciplinary academic interactions. The aforementioned outputs are monitored and evaluated through academic performance assessment processes, strategic plan monitoring reports, and individual academic activity records (**C.2.2.6**,**C.2.2.7**).

Within our faculty, there is no research project, joint study, or personnel exchange practice for research that is actually carried out under cooperation protocols signed at the national or international level. Therefore, there are no assignments, field studies, or project documents indicating that the protocols are supported by active research activity. However, in the future, it is planned that these protocols will be transformed into active implementations if the necessary infrastructure and conditions are provided (**C.2.2.2**,**C.2.2.7**).

In our faculty, there is no official joint research unit or R&D center cooperation established with private sector, public institutions, ministries, municipalities, or Technokent companies. In addition, there is no R&D partnership that is structured at the institutional level and offers continuity. However, in line with our faculty's academic capacity, it is planned that opportunities for cooperation among the public–university–industry will be assessed in the coming period. **(C.2.2.7).**

The performance of existing collaborations and research activities in our faculty is regularly evaluated based on the number of publications produced by faculty members, project outputs, and other academic performance indicators. These evaluations are carried out in six-month and annual periods through the Strategic Plan Evaluation Reports; based on the results obtained, areas for improvement are identified (**C.2.2.1 s:105-106,C.2.2.7**).

Evidence

C.2.2.1:2025, Annual Strategic Plan Evaluation Report
C.2.2.2: Meeting Agenda Minutes
C.2.2.3: COST Actions
C.2.2.4: Certificate of Participation in the COST Project
C.2.2.5: Cultural Safety Officer (Cultural Safety Officer)
C.2.2.6: List of Research Conducted Through Interdisciplinary Collaboration
C.2.2.7: Strategic Plan Evaluation Reports

C.3. Research Performance

C.3.1. Monitoring and Evaluation of Research Performance

At our Faculty, research performance is monitored by taking into account **quality**-oriented criteria in addition to quantitative indicators such as the number of publications; for example, journal quartile ranges (Q1–Q2) and indexing status (WoS, Scopus, TR Index). This process is carried out systematically within the scope of the Research and Development Quality Policy, the Regulation on the Academic Incentive Allowance, and the Directive on Academic Performance and Project Awards. Performance data are analyzed in 6-month and annual periods and evaluated in department boards (**C.3.1.1**,**C.3.1.2**,**C.3.1.3**,**C.3.1.4**,**C.3.1.5**,**C.3.1.6**).

Achievements regarding research objectives are regularly monitored within the scope of the strategic plan. When comparing 2024 and 2025 in our faculty, it was observed that there was a 10% decrease (from 50 to 45) in the total number of publications by academic staff of the Faculty of Health Sciences according to Web of Science (WoS) Q categories. However, the number of publications in the Q1 category increased by 87.5%, rising from 8 to 15, which indicates that the faculty is focusing on producing high-quality publications. A decrease was experienced in Q2 publications by 28%, in Q3 by 30%, and in Q4 by 25%, and these declines were partially offset by the increase in Q1 publications. Overall, although there was a decline in the number of publications, a significant improvement in publication quality was achieved. Deviations from the targets are analyzed, and the results are included in the strategic plan evaluation reports
(C.3.1.5, C.3.1.7).

During the process of monitoring and evaluating research performance in our faculty, no direct inter-university benchmarking is applied. However, an internal monitoring and evaluation mechanism based on intra-institutional comparison is effectively used at the institutional level. In this context, through the Research and Academic Performance System (**C.3.1.8**) carried out within Bartın University, our faculty's research performance can be monitored comparatively with our faculty's other departments and with other faculties within our university. Through the aforementioned system, publication numbers, publication quality, indexing status, and other academic output indicators can be observed both quantitatively and qualitatively. In addition, these data are followed in a regular and up-to-date manner through the institutional academic archive available within the system. In the related system, based on articles published in 2025 in the WOS categories, it ranks 4th (**C.3.1.9**), within the scope of

articles indexed in Scopus, it ranks 3rd (C.3.1.10), and in the ranking of articles published within TR Dizin, it ranks 2nd (C.3.1.11).

Our Faculty attaches strategic importance to the studies carried out within the specialization area determined by our university. Accordingly, the priorities and key words regarding the specialization area have been shared with all academic human resources through the unit's website (C.3.1.12). The targets for the specialization area and the activities carried out in this area are handled and monitored under a separate heading within the Unit Strategic Plan, apart from other research areas (C.3.1.5 **s:93-100).**Within this scope, research, publication, and project activities related to the specialization area are evaluated regularly, and annual performance data are analyzed comparatively with previous years. As a result of these evaluations, it has been determined that the annual data related to the specialization area show a distribution similar to that of the previous year (C.3.1.7 **s:90-96).**Although various studies are carried out for the area, it is seen that the previously determined strategic targets have not yet been fully achieved.This situation is addressed in line with the monitoring and evaluation results; the improvement requirements aimed at strengthening the activities in the specialization area are reflected in the relevant planning processes.

As a result of the monitoring and evaluation activities carried out in our faculty, areas falling below the targets are regularly analyzed, and the factors leading to lower performance are addressed from a holistic perspective. Within this scope, root cause analyses are conducted in line with the data obtained from strategic plan evaluation reports and performance indicators; infrastructure, human resources, workload, process management, and similar factors are evaluated in detail. Based on the findings obtained, corrective and preventive activities are planned for the relevant areas, and these activities are translated into concrete action steps within the Improvement Plan Report (2025) (C.3.1.13). The activities included in the improvement plan are defined together with responsible units and timelines and put into practice. During the implementation process, the effectiveness of the activities carried out is monitored through the specified performance indicators; the results obtained are reviewed again in the next evaluation period.Thus, the outcomes of the measures taken for areas where the targets cannot be achieved are systematically tracked, and the improvement plans are updated when deemed necessary.

Evidence

C.3.1.1: Research and Development Quality Policy

C.3.1.2: Regulation on the Academic Incentive Allowance

C.3.1.3: Directive on Academic Performance and Project Awards

C.3.1.4: Process Management Handbook

C.3.1.5:2025, Annual Strategic Plan Evaluation Report

C.3.1.6:6-Monthly and Annual Strategic Plan

C.3.1.7:2024, Annual Strategic Plan Evaluation Report

C.3.1.8: Research and Academic Performance System

C.3.1.9: Comparison Based on WOS

C.3.1.10: Comparison Based on Scopus

C.3.1.11: Comparison by Directory

C.3.1.12: Unit Website Page

C.3.1.13: Improvement Plan Report (2025)

Evaluation of Faculty Member Performance

The management, monitoring, and continuous improvement of our faculty's research processes are carried out through the Strategic Plan Evaluation Reports prepared for the first six-month and annual periods (**C.3.2.1**). In addition, research processes are regularly monitored and evaluated with the 2025 Annual Improvement Plan Report based on the PUKÖ (Plan-Do-Check-Act) cycle established across the unit (**C.3.2.2**), and when necessary, preventive and developmental measures are taken.

At our faculty, criteria for evaluating research performance are carried out within transparent, measurable, and previously defined institutional arrangements. The evaluation criteria for research performance have been clearly defined, in advance, in a transparent and measurable manner within the scope of the Academic Incentive Allowance Regulation, the Directive on Promotion to and Appointment as Faculty Member, and the Directive on Academic Performance Awards. Publication types, journal quartiles (Q1–Q4), citation types, and project outputs are explicitly defined and made available to all academic staff (**C.3.2.3**,**C.3.2.4**, **C.3.2.5**,**C.3.2.6**,**C.3.2.7**).

Performance data of academic staff are collected through Performance Evaluation Surveys; analyses are carried out by considering group averages, distributions, and overall trends without highlighting individual identities (**C.3.2.8**,**C.3.2.9**). The obtained results are shared in an anonymized form on the faculty website and evaluated at the institutional level in

academic board meetings. As a result of these evaluations, strengths and areas open to improvement are identified; in line with the findings, corrective practices aimed at enhancing performance are planned by operating feedback mechanisms (C.3.2.2).

At our faculty, academically successful staff who demonstrate high performance are identified and made visible at the institutional level through achievements such as project acceptance, registration of a beneficial model, and awards received at national and international events (C.3.2.10,C.3.2.11,C.3.2.12,C.3.2.13, C.3.2.14) . These achievements are announced on the faculty website and social media accounts; in addition, at academic general assembly meetings, certificates of congratulations are presented to the academic staff who produce the most publications within the scope of WoS, Scopus, and the TR Index (C.3.2.15).

Within this scope, the identification, visibility, and encouragement of highly performing researchers are addressed with a systematic approach. Research grants are provided to those who win them, and projects are supported through acceptance. In addition, at academic general assembly meetings, recognition mechanisms at the department and faculty levels are implemented by presenting certificates of congratulations to the academic human resources that publish the most within the scope of Web of Science, Scopus, and the TR Index (C.3.2.15).

As a result of analyses carried out through Performance Evaluation Surveys (C.3.2.8) and Duty Extension Documents (C.3.2.16), academic staff whose performance falls below the expected level are identified; one-on-one meetings are conducted by the department heads. In these meetings, factors affecting performance such as infrastructure deficiencies, course and administrative workload are assessed; necessary guidance and supporting practices are planned. The process is handled holistically at the deanery level (C.3.2.3).

Evidence

C.3.2.1: Strategic Plan Evaluation Reports (6-month and annual)
C.3.2.2:2025 Improvement Plan Report
C.3.2.3: Regulation on Academic Incentive Allowance
C.3.2.4: Directive on Criteria for Promotion and Appointment to Bartın University Faculty Membership
C.3.2.5: Directive on Academic Performance Awards
C.3.2.6: Sample Duty Extension Document
C.3.2.7: Sample Appointment and Promotion Document

C.3.2.8: Performance Evaluation Surveys

C.3.2.9: Sharing on Web Pages

C.3.2.10: Project Acceptance

C.3.2.11: Registration of the Utility Model

C.3.2.12: Academic Staff Receiving Awards at International Events (1)

C.3.2.13: Academic Staff Receiving Awards at International Events (2)

C.3.2.14: Sharing Academic Achievements at the Institutional Level

C.3.2.15: Presenting a Congratulations Certificate to Successful Academic Staff

C.3.2.16: Letters of Extension of Duty

D. PUBLIC CONTRIBUTION

D.1. Management of Social Contribution Processes and Social Contribution Resources

D.1.1. Management of Social Contribution Processes

Our faculty carries out its social contribution activities in line with the aim of our university, "Producing Social Benefit Through Studies Aimed at the Sustainable Development Goals" (A 3). The social contribution and social responsibility processes in our faculty are managed in coordination with the central Social Responsibility Project Coordination Office (D.1.1.1) within our university. While our social responsibility activities in the faculty are planned at the unit level by "Department Chairmanships" and the "Faculty Quality Commission," the project approval, registration, and university-wide reporting processes are carried out through the central Social Responsibility Project Coordination Office. Thanks to this structure, activities are standardized with the organization's and the faculty's overall strategic objectives (A3, H 3.2) (D.1.1.2,D.1.1.3).

At our faculty, social contribution activities are carried out within an institutional plan that is integrated with the university's strategic objectives, beyond individual efforts. The institutionalization of these processes, within the scope of the goal "Increasing the Number of Social and Regional-Focused Activities" (H3.2) in our Strategic Plan, is linked to the beginning-of-academic-year schedule (**D.1.1.4). In 2025, 11 events were implemented in a planned manner to meet the unit's performance indicators (PG3.2.1) (D.1.1.5**).

In addition, social responsibility projects are carried out in coordination with the Social Responsibility Projects Coordination Office within our university. In this way, public conferences, health screenings, and projects are standardized in accordance with the university's general social contribution policy. Moreover, social responsibility activities are structured

systematically through courses in our curriculum such as “HEM222 Social Responsibility,” “G ÖN300 Volunteering Studies,” and “HEM230 Entrepreneurship and Innovation.” Pursuant to the 2025 Improvement Plan, students are institutionally encouraged to take roles in these activities through clubs and courses (D.1.1.5,D.1.1.6).

Our faculty operates in cooperation with public institutions and non-governmental organizations (NGOs) in order to increase the impact of social contribution activities and to support local development. First of all, when planning the activities, our university’s central Social Responsibility Projects Coordination Office and the “Advisory Boards” in which external stakeholder representatives within our faculty are included play an active role. In 2025, in the planning and implementation phases of 11 community-focused events, coordination was ensured with local administrations and relevant public bodies (D.1.1.7).

Social responsibility projects and other student research projects (e.g., field studies within the scope of TÜBİ TAK 2209-A) have not remained as activities limited to within the unit; depending on the area of implementation, they were managed jointly with logistical and data support from relevant external stakeholders (directorates affiliated with the provincial governorate, local health directorates, etc.) (D.1.1.5,D.1.1.6).

Our faculty, within the scope of the specialization area, considers the goal of producing joint projects with public institutions as a strategic priority (H3.1). However, in the 2025 reporting it was determined that the number of collaborations in this area remained below the targeted level, and an improvement plan will be prepared for increasing the protocols to be carried out with external stakeholders in 2026 (D.1.1.5,D.1.1.6). Our faculty monitors social contribution activities not only quantitatively (numerically) but also qualitatively and on an activity basis; based on the results obtained, it makes concrete improvements in processes.

The effectiveness of the activities is monitored through Strategic Plan indicators (PG3.2.1 and PG 3.2.3), feedback from external stakeholders, and the number of participation in activities. According to the 2025 data, 11 social events were successfully completed; however, it has been determined that the impact of the activities in terms of dissemination and visibility needs to be increased (D.1.1.5).

Evidence

D.1.1.1:BARÜ Social Responsibility Project Coordination Office

D.1.1.2:BARÜ 2024-2028 Strategic Plan

D.1.1.3:BARÜ Faculty of Health Sciences 2024-2028 Strategic Plan

D.1.1.4: Faculty of Health Sciences TÜBİTAK 2209 Project Information Request Form

D.1.1.5:2025 BARÜ SBF Annual Strategic Plan Implementation Report

D.1.1.6:2025 BARÜ SBF Improvement Report

D.1.1.7: News of the Faculty Advisory Board Meeting

D.1.2. Sources

Our faculty carries out a multidimensional human resources planning process that includes not only academic expertise, but also administrative staff and student support in order to achieve its targets for social contribution. Social contribution activities are planned by the Dean's Office, Department Heads, and relevant committees. Administrative staff take an active role in these activities in terms of logistical organization, formal correspondence, and communication with coordinators. Pursuant to the 2025 Improvement Plan, students are targeted to be "active subjects" in social contribution activities (**D.1.2.1**,**D.1.2.2**). In this context:

- Part-Time Students and Clubs: In activities carried out through student clubs, students are encouraged to take on administrative and operational duties.
- Volunteering and Course Integration: The number of students taking part in social responsibility projects is monitored as a strategic target (PG3.2.3) .

However, within our University, the Social Responsibility Projects Coordination Office supports the limited availability of human resources at the unit level through central opportunities by providing expertise and guidance support for project proposals coming from our faculty. In the end-of-2025 evaluations, measures such as announcing the events on the web page as “News” to increase student participation and rewarding successful projects have been planned under the “Take Precautions” activities (**D.1.2.2**,**Article 20).**

Evidence

D.1.2.1:2025 BARÜ SBF Annual Strategic Plan Implementation Report

D.1.2.2:2025 BARÜ SBF Improvement Report

D.2. Social Contribution Performance

D.2.1. Monitoring and Improving Social Contribution Performance

Our faculty systematically records all its social contribution activities (public trainings, health screenings, social responsibility projects, etc.) and, at the end of each year, reports them in a comparative manner against the targeted performance indicators through the Strategic Plan Implementation Report (D.2.1.1). At the beginning of 2025, the target for the "Number of socially and regionally focused events" (H3.2) was set at 12; by the end of the year, it was demonstrated with concrete data that 11 of these activities were carried out, achieving a success rate of 92% (D.2.1.1,**PG3.2.1).**The levels of realization of activities are monitored through department boards, dean's office activity reports, and quality commission evaluations. For example, the outputs of socially oriented projects carried out within the scope of TÜBİTAK 2209-A projects and web news regarding social responsibility activities are archived in a digital environment in a way that will constitute data for unit performance. As a result of the comparison, areas where the target was not fully achieved (e.g., the number of joint projects with public institutions - H3.1) Identified and included in the 2025 Improvement Plan, and corrective measures (such as increasing protocols) were planned within the "Take Action" stage (D.2.1.1,D.2.1.2). Our faculty has integrated its social contribution strategy with global goals. The ongoing projects and activities can be directly associated not only with local targets, but also with the United Nations Sustainable Development Goals (SDGs) (**D.2.1.3).**Implementation and Matching Examples:

SDG 3 (Good Health and Well-Being): Due to our faculty's primary mission, the "Health Screenings", "Menopause Symptoms and Quality of Life", and "Public Health Trainings" carried out directly serve this purpose (**D.2.1.3).**

SDG 4 (Quality Education): Under the courses of "HEM222 Social Responsibility" and "GÖN 300 Volunteer Work", projects conducted with the participation of 48 students support quality education and lifelong learning opportunities (D.2.1.1).

SDG 5 (Gender Equality): Academic studies on women's health and community awareness activities are evaluated under this heading (**D.2.1.3).**

SKA 13 (Climate Action): The "Awareness of Climate Change and Its Effects on Health" project carried out within the scope of TÜBİTAK 2209-A can be aligned with environmental awareness and climate crisis response objectives (**D.2.1.3).**

In accordance with the principle of “Studies for the Sustainable Development Goals” within the central strategic objectives (A3) of our university, for every project proposal form prepared in our Faculty it is stated which SDG the activity is related to, and these data are compiled in year-end achievement reports (D.2.1.1,D.2.1.2). Our Faculty monitors the success of the social contribution activities carried out not only through participation numbers, but also through the benefits provided and stakeholder satisfaction. The impact of the activities is measured through end-of-event surveys, feedback forms from external stakeholders, and the performance indicators (PG) in the “Strategic Plan Implementation Report.” Following 11 social events held in 2025, feedback from participants was collected and these data were reported (D.2.1.1). In addition to these projects, the satisfaction of participants is assessed through the “First Aid Training Program and Instructor Evaluation Survey” regarding the courses provided by the First Aid Training and Instructor Center operating within our Faculty (D.2.1.4).As a result of satisfaction and impact analyses, the “Preventive Action” phase is implemented for areas that show low performance. For example, in the 2025 Improvement Plan, the process of improving the action “publication and announcement of events as news” has been identified as an improvement action with the aim of having the activities resonate more broadly in society and increasing participation (D.2.1.1,D.2.1.2,D.2.1.5).

Evidence

D.2.1.1:2025 BARÜ SBF Annual Strategic Plan Implementation Report

D.2.1.2:2025 BARÜ SBF Improvement Report

D.2.1.3: Faculty of Health Sciences TÜBİTAK 2209 Project Information Request Form

D.2.1.4: Sample First Aid Training Program and Instructor Evaluation Survey

D.2.1.5:BARÜ SBF Events Archive Website

RESULT EVALUATION

A. LEADERSHIP, GOVERNANCE, AND QUALITY

Strengths

- Regular monitoring of internal quality assurance mechanisms and carrying out improvement efforts
- Processes being defined and corporate operations being maintained in a systematic manner
- Clear staff job descriptions and implementation of compliance training
- Active work of committees and operation of reporting/monitoring processes
- Ensuring stakeholder participation and sharing reports transparently

- Monitoring and reporting compliance with the KVKK
- Managing the website in two languages in a current and user-friendly manner
- Communicating the mission and vision systematically to staff and students
- Regular advisory meetings are held by academic adviser faculty members.
- Student satisfaction surveys are implemented regularly and in a sustainable manner.
- Improvement results are regularly communicated to students.
- Increasing participation in particular in student meetings.

Areas for Development

- Participation rates in graduate surveys are at a low level. This limits the effective use of graduate feedback in education and training processes.
- Awareness-raising and incentive activities are needed to increase participation in graduate surveys. Strengthening participation will improve the quality of feedback.

Establishing alternative feedback channels to support communication with graduates

Limited student/faculty mobility; in this regard, there is a need to increase the Faculty's visibility and to establish new agreements

B. EDUCATION AND INSTRUCTION

Strengths

Publishing program outcomes in a transparent manner by linking them to the Turkish Qualifications Framework (TYYÇ)

Ensuring course information packs are complete and accessible

Continuing improvement practices based on examination analysis results through outcome-based monitoring

Providing student orientation training across all of our Faculty's programs and sharing information regarding the distance education process

Updating the student orientation training guide for every academic year in our Faculty and sharing it on the website

At the end of each academic term, holding an evaluation meeting with our external stakeholders—our students—to collect improvement suggestions

Conduct regular student satisfaction assessments for all courses and analyze students' workload related to the course.

Applying the principle of linking assessment and evaluation tools (exams, assignments, presentations, practical performance) to course learning outcomes as a fundamental approach, and supporting it with a mapping table (specification table) approach

Creating the Program Competencies Matrix and announcing the relationship between course learning outcomes and program outputs through the Course Information Package (Bologna Information System)

Providing, in a standard format, comprehensively and in an accessible manner, information in course information packages regarding the course purpose, content, learning outcomes, ECTS workload, and assessment methods.

Adopting an approach aimed at expressing course learning outcomes in clear, measurable, and performance-focused terms using verbs, across the cognitive, affective, and psychomotor domains based on Bloom's Taxonomy.

Making a question-based mapping of learning outcomes so as to make visible the level to which the assessment tools meet the outcomes.

Supporting general competencies such as communication, ethics, teamwork, lifelong learning, and critical thinking through teaching methods and assessment-evaluation practices; and completing the systematic definition of how these competencies relate to activities and assessment tools in course information packages

□□ Conduct analyses aimed at calculating the degree of achievement of program outputs, and target translating monitoring results into improvement plans at the course and program level.

□□ Systematically operate the measurement–evaluation and improvement cycle through course syllabi, course files, course evaluation surveys, and exam analyses. Support students' active participation in research processes concretely through a high number of projects and student participation rates.

□□ Strengthen instructors' competencies regarding innovative teaching methods through faculty training programs for educators.

Areas for Improvement

□□ Strengthen the continuity by converting outcome-based monitoring into an improvement plan across all of our faculty's programs.

□□ Regularly report the results of improvement processes and the monitoring results across all programs of our faculty, based on the findings of student satisfaction and workload analyses.

- Making the connection between laboratory free-time practice and program outputs, and its contribution to learning outcomes, more visible through measurement and evaluation indicators.
- Structuring technology-supported learning practices within a more comprehensive, institutional strategy framework

C. RESEARCH AND DEVELOPMENT

Strengths

- Systematically monitoring R&D processes through the strategic plan, action plan, and activity reports
- Conducting awareness-raising activities aimed at improving the quality of scientific publications
- Carrying out research activities in a planned and systematic manner in line with the 2024–2028 Strategic Plan and the Research and Development Policy Document.
- Regularly planning trainings and scientific events aimed at improving research competence in accordance with the annual academic calendar.
- Handling academic performance through a multi-dimensional (360-degree) evaluation approach via meetings and surveys
- Conducting processes for national and international exchange programs in a planned and systematic manner through the Exchange Programs Commission

□□ The number of academic staff benefiting from international exchange programs shall be monitored and assessed through performance indicators within the scope of the strategic plan.

□□ In cases where targets are not met, the situation shall be brought up on the agenda at the Academic General Assembly and Department Board meetings to initiate improvement processes.

□□ Encouraging academic staff to participate in international research networks and supporting them to take active roles in projects carried out under COST Actions.

□□ Regularly monitoring performance related to research activities and collaborations through academic indicators such as publications, projects, and similar metrics, and reporting it in an evidence-based manner.

□□ The processes for monitoring and evaluating research performance shall be carried out in a planned and systematic manner within the framework of the Research and Development Quality Policy, the relevant legislation, directives, and defined sub-processes.

- The indicators regarding research performance are clearly defined in the faculty's strategic plan and are used as the basis for monitoring processes.
- In the evaluation of research performance, not only quantitative criteria but also qualitative criteria (Q1/Q2 journal quartiles, indexing status, etc.) are taken into account.
- Despite an overall decrease in the number of publications, a strong orientation toward producing qualified publications is demonstrated by achieving a significant increase in the number of publications in the Q1 category.
- At academic board meetings, performance results are brought up for discussion, and strengths and areas open to development are addressed at the institutional level, with decisions for improvement being made.
- Systematically carrying out practices aimed at making the achievements of high-performing faculty members visible, recognizing them, and rewarding them.
- Identifying faculty members whose performance falls below the expected level and supporting them through one-to-one meetings; addressing the factors causing low performance through a holistic approach.

Areas Open to Development

- Increasing the number of project applications in order to raise external funding source support.
- Using existing resources more effectively and efficiently.
- Implementing consultancy, training, and incentive mechanisms to increase outsourced project development capacity
- Establishing sectoral collaborations and project partnerships to increase diversity of resources
- Increasing the number of interdisciplinary projects and joint work .
- Promoting wider participation in international scientific events and project involvement .
- Monitoring and evaluation practices based on direct comparisons (benchmarking) between universities have not yet been carried out.
- Strategic targets set for research and project activities related to specialization areas have not yet been fully achieved .
- Strengthening practices aimed at converting performance evaluation results for academic staff into individual development plans in a more systematic manner.

D. SOCIAL CONTRIBUTION

Strengths

- The faculty's activity and project targets for social contribution being set out in the strategic plan and monitored every six months
- The number of community contribution activities in our unit increasing over time
- Our faculty having sufficient infrastructure and qualified human resources to enable social contribution activities
- Support being obtained from our faculty's human resources for community contribution activities
- Our faculty's academic staff carrying out various activities in line with the needs of our region and the province in which we live, and taking part in students' social responsibility activities and volunteering work .

Areas for Improvement

- Converting activities into social responsibility projects
- Increasing the number of joint projects our faculty will carry out with external stakeholders for its social contribution activities

Encouraging faculty members to participate in international projects for the purpose of contributing to society,

Increasing the number of students who take part in social responsibility activities and volunteer work.