ACTION PLAN

Follow up on Institutional Review -2019

Centre for Quality Assurance

Sabaragamuwa University of Sri Lanka

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SECTION 01

1.1 INTRODUCTION

The University commenced preparing the Institutional Review in December 2018 for ten Institutional Assessment Criteria. At the beginning of the year 2019 sub committees were appointed for each criterion and in early January 2019, the first working session of sub committees were appointed for the ten Assessment Criteria. Each subcommittees work on each criterion and SER document was finalized and submitted to the University Senate and to the University Council for the approval. Afterward the SER report was submitted to the Quality Assurance Council of the University Grants Commission on 7th April 2019 (details are given in the Table 1).

Expert review panel comprised with Prof. Ranjith Mahanama, Prof. Deepthi Bandara, Prof. Chitra Ranjani, Prof. M.M.M. Najim, Prof. Tilak P. D. Gamage and Dr. Karen Treloar visited the university from 27th January to 1st February 2020 (Details are given in the Table 2) for the onsite evaluation.

Table 1: Institutional Review details of Sabaragamuwa University of Sri Lanka

Description	Details
Submission Dates of SERs to QAC	7th April 2019
Site Visit Dates	From 27th January to 1st February 2020
Date of receipt of report	01.02.2020
Date of receipt of the final edited reports from UGC	01.07.2021

Table 2: Institutional Review Sabaragamuwa University of Sri Lanka - Review Team

Name of the reviewer	Details
Prof. Ranjith Mahanama	Senior Professor, University of Colombo
Prof. Deepthi Bandara	Professor, University of Peradeniya
Prof. Chitra Ranjani	Senior Professor, University of Kelaniya
Prof. M.M.M. Najim	Professor, University of Kelaniya
Prof. Tilak P. D. Gamage	Professor, University of Ruhuna
Dr. Karen Treloar	Director, Engagement Group, Tertiary Education Quality and Standards Agency Australia

It has been several communications with the Quality Assurance Council regarding the review process and the grade obtained by the institution. The University has send a response on reviewer report to the Director, QAC and as a reply, the Director, QAC, Prof. Nilanthi De Silva has sent an

email on 10 Aug 2020 with the responses of the review panel. As indicated in the reviewer's response document, they did not propose /agreed to make any changes to the review report or the grade given to the University.

Afterward a letter has been sent to the Director, QAC, by the Acting Vice Chancellor, Prof. W.K.A.C. Gnanapala, on 28th August 2020, standing again the disagreement with the review process and the grade obtained. This letter was written based on a decision taken at the Management Committee of Centre for Quality Assurance, SUSL on its meeting held on 20th August. There was no Email communication reported in this regard thereafter.

As per the discussion at several Management Committees (MC) of QA of SUSL, Director, Centre for Quality Assurance, SUSL raised the concerns of the University at several QAC, Standing Committees and the request made by SUSL has been taken up. At last, at the QAC SC 108th meeting held on November 2020, the Acting Director, CQA, SUSL requested to focus on having a meeting between the review team and the University regarding the IR report. However in response, Acting Director/QAC noted that the QAC would follow the recommendation of the SC on QA in line with the Circular letter dated 13 March 2019 under the heading "Finalization and Publication of the External Review Reports" which was sent to all the Vice Chancellors. Hence it was decided at SC on QA, only to concern the factual inaccuracies (if any) in the final report submitted by the review team those can be brought to the attention of the UGC.

This matter was taken at the 25th MC for Quality Assurance of SUSL held on 22.12.2020, in that the University stand on this matter was revised and decided to accept the Grade given by the reviewers. Further it was suggested to address all the recommendations made by the reviewers in future to uplift the grade of the University. Based on this decision, The Vice Chancellor, Prof. R.M.U.S.K. Rathnayake, sent the response letter on the IR, SUSL dated on 04.01.2021 to the Acting Director, QAC on accepting the grade given to the University. Acting Director, QAC acknowledged it thorough an email on 04.01.2021.

1.2 THE PROCESS FOLLOWED IN PREPARING THE ACTION PLAN

Following the acceptance of the reviewers' responses and the grade given by the Vice Chancellor, SUSL on 04.01.2021, based on the collective decision taken at the 25th MC held on December 2020, the preparation of action plan was initiated.

As the first step, a committee was appointed for the preparation of action plan as a follow up on Institutional Review done in 2020. The committee composition was decided at the 26th Senate Standing Committee on Quality Assurance held on February 2021. It was approved at the 249th Senate held on March 2021 and suggested few inclusions to the committee composition. This memo was confirmed at 250th Senate held on April 2021.

Subsequent to the Senate confirmation, the committee was appointed by the Vice Chancellor, SUSL for developing the action plan, follow up on institutional review. The first meeting of the committee was held on 12th May 2021 as a brainstorming session. During this meeting, it was decided to widen the groups by adding more members than suggested before. Also it was discussed, the way forward for developing the action plan in detailed. Ten assessment criteria were grouped in to five clusters / groups (Table 3) and the members were divided in to those clusters. Further the time line was fixed aiming the submission of report by October 2021 to the Quality Assurance Council, UGC.

Table 3: Grouping of criteria for subcommittees

No	Subcommittee	Target Criteria
1	**Group 1**	Governance and Management (CRITERIA 1) Learning Resources, Student Support and Progression (CRITERIA 4) Strength and Quality of Staff (CRITERIA 6)
2	**Group 2**	Curriculum Design and Development (CRITERIA 2) Teaching and Learning (CRITERIA 3) Student Assessment and Awards (CRITERIA 5)
3	**Group 3**	Postgraduate Studies, Research, Innovation and Commercialization (CRITERIA 7)
4	**Group 4**	Community Engagement, Consultancy and Outreach (8) Distance Education (CRITERIA 9)
5	**Group 5**	Quality Assurance (CRITERIA 10)

First progress of the action plan committee was reported to the 29th Senate Standing Committee on QA (SSC QA) held on May 2021. Expansion of the committee was suggested at the 29th SSC QA and it was recommended to the 252nd Senate held on June, 2021 and this was confirmed at 253rd Senate held on July. But meanwhile the appointed subcommittees, had several meetings to prepare the action plan for the respective criteria. All the subcommittees were working with the guidance provided by three expert advisory members who were engaged in quality assurance activities and serving as reviewers identified by UGC, QAC. Additional to the advisors this process of preparation of the action plan was supported by the Chairman, Strategic Management Planning Unit, Sabaragamuwa University of Sri Lanka. Moreover the guidance for the preparation of the action plan is given by the Vice Chancellor, SUSL.

Committees appointed for the preparation of action plan is indicated in Annex 1, the compilation group is indicated in the Annex 2

There were several meetings and activities during the last few months as indicated below. All the meetings were held as online meetings due to the prevailing Covid 19 Pandemic situation.

Table 4. Meetings and activities done during the process of Action plan preparation

No	Date	Activity
1	12.05 2021	meeting with all the members and made the road map for the preparation of action plan
2	12.05.2021 to 12.06.2021	Preparation of documents, preparation of appointment letters to group members and communication between group members, awareness activities with group members and also several discussion were done by Centre for Quality Assurance, SUSL.
3	12.06.2021	Meeting with group 03
4	14.06.2021	Send the document prepared for criterion 10 to all the subcommittee members
5	20.06.2021	Received the section 3 of the action plan format from group 03
6	21.06.2021	Meeting of group 4 members to draft the document
7	24.06.2021	Meeting of group 4 members to draft the document
8	24.06.2021	Meeting of group 1 Members
9	25.06.2021	Meeting of group 4 members to draft the document
10	25.06.2021	Received the section 3 of the action plan format from group 04
11	25.06.2021	Meeting of group 2 for the draft preparation
12	02.07.2021	Meeting of group 2 for the draft preparation

13	03.07.2021	Received the draft document from group 2
14	06.07.2021	Meeting of group 1 members for the draft preparation
15	11.07.2021	Meeting of group 1 members for the draft preparation
16	20.08.2021	Meeting of group 1 members for the draft preparation together with the Chairman, University Strategic Management Unit
17	04.09.2021	Meeting of group 1 members for the draft preparation together with the Chairman, University Strategic Management Unit
18	08.09.2021	Meeting of group 1 members for the draft preparation together with the Chairman, University Strategic Management Unit
19	18.09.2021	Meeting of group 1 members for the draft preparation together with the Chairman, University Strategic Management Unit
19	22.09.2021	Submission to the SSC QA meeting and Compilation of the document with SSC QA Members in line with the SSC QA meeting
20	03.10.2021	Receiving comments from advisory members, Chairman of Strategic management Unit, chairman of each committees of Action plan preparation and final amendments
21	12.10.2021	Submission to the Senate for approval (256th Senate held in October 2021)
22		Approval from the Council (277th Council held in October 2021)
23	28.10.2021	Meeting with Advisory members and the Vice Chancellor before submission the Action Plan to the QAC, UGC

SECTION 02

2.1 SWOT analysis of commendations and recommendations in review report

Table 5. SWOT Analysis

STRENGTHS	WEAKNESSES
Criterion 1: Governance and Management	**Criterion 1: Governance and Management**
• The University has established both an IQAU and FQACs in each Faculty to ensure the quality of study programs Gender Equity and Equality (GEE) is strong and student welfare is a strong focus at all levels of the university. • The University administration has taken considerable efforts to establish a range of facilities for staff and students. • The University has an adequate and transparent mechanism to recruit appropriately qualified staff. • The University conducts its financial procedures in a satisfactory manner.	• There is a need for university wide policy framework. Even though some polices are available in some faculties these need to be consistently developed and adopted across the university. • There is a need to focus on an integrated planning across all faculties to ensure that all faculty action plans align with the university corporate plan and there is regular performance reporting on these plans. • There is a need for a university wide policy and staff training on records management, which, includes consistent advice on how to handle confidential materials. • There is a need to enhance the facilities and practices at the Examinations Division to ensure confidentiality and timeliness of operations.
Criterion 2: Curriculum and Programme Development	**Criterion 2: Curriculum and Programme Development**
• Significant curriculum development activities have taken place in all faculties concerned.	• There should be an approved policy/framework for curriculum development in the University to which

• Faculty documentation indicates that pedagogical changes to curriculum have been made. • Student handbooks containing information on program content and assessment procedures are made available to all students. Program and course specifications are published in student handbooks, guidebooks, and prospectus and on websites. • The University offers supplementary courses for enhancement of personality and professional development.	Faculties would align their own processes of curriculum development • A consistent approach to obtaining feedback from students regarding course content and teaching/learning in all curriculum development activities across the university • Even though faculty graduate profiles were available, there was no University graduate profile – hence alignment of faculty profiles with a University profile is absent. • There should be a university statement or documentation and evidence regarding outcomes-based education and student- centred learning on an approved policy.
Criterion 3: Teaching and Learning	**Criterion 3: Teaching and Learning**
• Facilities and resources available for teaching and learning are relatively good and it has created a conducive environment for learning • The staff of most of the faculties are committed and enthusiastic and similarly students as well • The university has taken an effort to use ICT based learning tools and LMS system in support of teaching • There is evidence of the use of student and peer evaluation systems in some faculties. • Learning resources are shared between the faculties	• No evidence of a consistent application across the university to prove the effective use of feedback from student and peer evaluation. • Lack of evidence in use of subject benchmarks in all the study programs. • Limited evidence of student group activities in the curriculum to enhance learning processes. • There is a lack of evidence in the incorporation of innovations and current advances in knowledge into the curriculum • No evidence for rewarding innovative teaching, and there is no evidence that this is being addressed at a university level

Criterion 4: Learning Resources, Student Support and Progression	Criterion 4: Learning Resources, Student Support and Progression
• Good student support systems are provided by the hostels throughout a student's education • There are sufficient library, sports, cafeteria facilities and support services and there are initiatives in place to strengthen them. • The university offers a smooth transition to a university education with a good orientation programme. • Faculty websites and student handbooks are informative regarding student progression. • In some faculties there are established career guidance programme for developing soft skills and teamwork. Students also have access to internships. • Faculties have established student counselling programmes such as "Sith Arana"	• There is a need to strengthen interventions on destructive student interactions to maintain friendly learning environments. • Student-staff and student-student interaction are vital for an academic setting which could not be seen in evidence provided. Therefore, it is recommended to establish mechanisms to enhance student-staff and student-student interactions. • It is recommended to establish a mechanism to record for remedial action taken for feedback • It was observed that resources are not enough, and less attempt has taken to focus on developing student-centred leaning activities that should be an important concern • It was noted that policies and practices in monitoring student progression is not satisfactory.
Criterion 5: Student Assessment and Award	**Criterion 5: Student Assessment and Award**
• The University has effective procedures for designing, approving and monitoring the assessment strategies for programmes. • Students are assessed using published criteria, regulations and procedures, which are communicated to all students and staff. • Disciplinary procedures to handle copying and plagiarism are enforced	• It was noted that there is a need of university wide policy framework for nominations and appointments of external examiners. • There is a need of policy for credit transfer as to facilitate student enrolment.

• University appoints qualified staff for student assessments. • University ensures that assessments are conducted with rigour, honesty and transparency. • The University has accepted the Sri Lanka Qualifications Framework in principle.	• Also, it is recommended to find suitable mechanisms to expedite releasing results to avoid unnecessary delays that has been noted in some programmes.
Criterion 6: Strength and Quality of Staff	**Criterion 6: Strength and Quality of Staff**
• The University has sufficient number of staff who are suitably qualified and adequately trained. • Newly recruited staff are trained by the Staff Development Centre through an induction Programme.	• A Human resource plan or policies, including an approach to and performance appraisal are to be introduced and the management of underperformance should be adequately addressed • Formal grievance handling committees for academics and non-academics were not available • Newly recruited academic staff should be mentored by the senior staff. • There is a lack of periodic training programmes such as procurement management, office management for non-academic staff.
Criterion 7: Postgraduate studies, Research, Innovation and Commercialization	**Criterion 7: Postgraduate studies, Research, Innovation and Commercialization**
• University has formulated by-laws on postgraduate studies and those are made available to all stakeholders. • University has formulated a policy and follows procedures to promote research excellence. • University follows a defined process for appointing supervisors for postgraduate students.	• There is a need to give attention on innovation, commercialisation, and networking through actions based on the strategic plan by the University. • University needs to give more attention on ensuring a conducive environment that inculcates promotes innovation and commercialization.

• University has formulated IPR policy and Ethical Guidelines. • University supports academics to engage in research and disseminate research outputs.	• University need to give more attention to award and reward high impact innovations and research disseminations. • University needs to provide access to training programs for postgraduate students to enhance their skills and knowledge and feedback of such programmes need to be obtained to further improve the effectiveness of such programmes. • University needs to device appropriate monitoring mechanism to review postgraduate programs and monitor the progress of all the postgraduate students. • University needs to give attention on enacting and implementing policies on the management of personal data and overall record management including maintaining confidentiality, handling conflict of interests, complaints and appeals procedures. • University needs to give attention on enacting policies on criteria for authorship of research output and publications of papers. • University needs to make sure to implement the ethical guidelines through appropriate mechanisms. • University needs to give attention on interaction with industry on applied research and research incubation.
Criterion 8: Community Engagement, Consultancy and Outreach	**Criterion 8: Community Engagement, Consultancy and Outreach**
• University maintains a good reputation among its stakeholders. • University collaborates well with external partners in terms of providing work based industrial placements.	• University needs to devise clear policy on consultancy and extension services and their implementation to benefit a wider range of stakeholders including regional communities.

• University provides some professional services to public and more potential exists for expansion of such consulting, research and professional services	• University could periodically assess the impacts of the consultancy and extension services among the external stakeholders, alumni and community representatives.
Criterion 9: Distance Education	**Criterion 9: Distance Education**
• The university and CODL has made many efforts in providing Open and Distance Learning (ODL) to the community who are unable to enter a university. • CODL provides an array of programmes such as degrees, higher diplomas, diplomas and certificate courses in demanding subject areas. • CODL has developed their own facilities such as lecturing facilities, computer laboratories and communication facilities to offer their programmes smoothly	• Currently, distance education is not an option to those who are engaged in jobs but wish to continue their education. This is an important objective that CODL has to achive as all the CODL programmes are conducted through face to face sessions. • It is recommended to establish an internal mechanism to monitor the quality of programmes offered by the CODL as at present there is no such mechanism in place to obtain student feedback on CODL services and administration that to encourage continuous quality improvement. • For CODL students, there is no mechanism in place to access the library resources/e-library of the university that is much needed and was one of the main concerns of the students In delivering distance education effectively, LMS and MOODLE are important integral components which are recommended to bringing into the practice.
Criterion 10: Quality Assurance	**Criterion 10: Quality Assurance**
• IQAU and IQACs are well established and operating according to the guidelines of QAC of the UGC. The	• It is recommended to establish a suitable recoding mechanism for academic staff to record their workload and maintain transparency about their own accountably.

IQAU is located at a convenient place in the University where anyone can access easily. • IQAU office has been successfully established and is operating with the support of a qualified staff. • The IQAU has taken a leadership role in the adoption of quality assurance framework accepted by QAC through IRs PRs subject benchmarks and SLQF. • All levels of staff at the university are aware of the QA process and consider it as an important activity for the development of the University. Efforts of some members of the Faculties are commendable and have shown their understanding and ownership of the University's quality processes. • Actions proposed by the QA Management Committee are reported to the higher decisionmaking bodies such as Senate and Council for approvals. • QA is a permanent agenda item of the Senate and Faculty Boards and progress of QA activities are monitored by the Senate. • Institutional Reviews and Programme Reviews have been conducted on time and the recommendations have been addressed accordingly.	• There is a need for regular monitoring process to be established to evaluate the programmes and activities conducted by CODL to improve the quality of the Centre's outputs. • Updated procedures for conducting examinations and proper guidelines for examination procedures are important areas to be developed

OPPORTUNITIES	THREATS
- SUSL has the opportunity to develop its physical and human resource by accommodating a futuristic approach in line with the government's initiative of becoming the knowledge hub in Asia. - Increased value of higher education, competition and growing demand for graduates. - Increased demand for mid -career redirection and lifelong learning with Masters and PhD programmes. - Opportunities for fresh perspectives, programmes and partnership within our communities - Possibility of expanding the student enrolment with and enrolment management plan in line with the market demands - Location/ heritage and space for new construction and growth potential - Since located close proximity to the rich biodiversity locations such as Horton Plains, Sinharaja rainforest, Udawalawa National Park, SUSL has got an edge over developing several educational and research fields where attention of foreign universities and research institutions would be very high. This will further strengthen this opportunity and will help SUSL to develop as unique centers of "Environmental Education & Research" and "Anthropological & Archeological Research". - Loan schemes for student pursuing higher education in state institutions	- Tough competition from non-state and private HEIs with regard to language competency and soft skills of the students. - Graduates from less hidebound institutions providing to be more attractive to employers. - Lack of opportunities for lateral entries at SUSL - Increasing negative attitudes among stakeholders about the graduates of state universities. - Political involvement in the appointment process of nonacademic staff members. - Lack of skills of self-directed learning among incoming students due to being over reliant on private tution during school education. - Competition from postgraduates with foreign degrees and those from private higher educational institutions - Insufficient allocation of state financial resources and limited opportunities to obtain external funds - Limited employment opportunities in local industries - Reluctance of students to enroll in local postgraduate due to delays in admission and other negative perceptions - Culture of rote learning in students (less practical, less industry oriented etc.) - Location at an area with poorly developed facilities - Competition from other National Universities and private higher educational institutions.

- Availability of a large student oil after A/L examinations that is still interested in free higher education in the state sector - Fresh state investments to expand the university by forming new faculties. - There are no places to get the post-graduate qualifications out of the urban cities therefore the SUSL can capitalize the demand though offering such courses. - Attraction of Foreign Students: Since the university offers more unique course different BoS, there is an increased opportunity attracting foreign students from neighboring and no-neighboring countries. - Partnership with local industries for innovations through the UBLC. - Establishment of research and other collaborations with local /foreign universities/ research institutes - There is limited no. of places to get higher education qualifications outside urban cities. - There is a potential for development of research and skills development. - Having staff members with high caliber in research, best administrative individuals - There is a capability of introducing different courses to CODL as there are no any other higher educational institute nearby for the students coming from neibouring areas.	

SECTION 3

3.1 Planned Activities/ Actions to address recommendations made by Reviewers on IR

Table 6. Planned Activities / Actions

Based on the recommendations given by the reviewers on the Institutional Review, SUSL activities / actions were suggested as in the table below.

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
1	**Governance and Management**	There is a need for university wide policy framework. Even though some polices are available in some faculties these need to be consistently developed and adopted across the university.	Policy gap analysis faculty level/ Policy mapping and Development of process manual to relevant policies	No of policy gap analysis	CQA/FQAC
				No of procedures mapped and SOP prepared	CQA/FQAC
			Creation of awareness among and between faculties on existing policies and other relevant operational frameworks to harmonize them for effective implementation	No of Awareness programmes on policies	CQA/FQAC/ SDC
				% Implementation of developed policies – based on the outcome of the previous year's policy gap analysis	CQA/FQAC
			Develop a policy approval retain (policy repository) and distribution system through QAC to maintain consistency	% establishment of digital policy and procedure repository	CQA/ Director IT
			Develop a mechanism to monitor policy implementation/delegate responsibility to relevant FQACs	Continuous process	CQA/FQAC/ Dean

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		There is a need to focus on integrated planning across all faculties to ensure that all faculty action plans align with the university corporate plan and regular performance reporting on these plans (Monitoring).	Establishment of strategic management unit to monitor the progress of the actions and strengthen the Organizational Results Framework (ORF) in monitoring of Strategic Management Plan	Establishment of strategic management unit	VC/Deans/ Registrar
				Monitoring the progress of the action % completion of planed activities	VC/Deans/ Registrar
			Streamline proper communication channels to communicate planned actions	No of awareness programmes on planed actions	Deans/Regist rar/SDC
			Development of performance reporting and monitoring system - digital platform/ dashboard (prepare a format to gather data related to actions aligning with SDGs, Vista of prosper, Budgetary items. etc)	% Development of performance reporting and monitoring system	VC/Deans/R egistrar/ Strategic Management Unit
			Incorporate agenda item in the FB meeting to discuss the progress of implementation of planned action	% Incorporate agenda item in the FB meeting	Dean/HoDs/ FQAC
				Monitoring of the progress of implementation of actions - % Completion	Dean/HoDs/ FQAC
			Mechanism to motivate staff in recognition with voluntary contributions to implement planed actions	Develop a criterion to establish a reward system	VC/Deans/ Registrar/ Strategic Management Unit/CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Formalize the submission of faculty level action plan and subsequent progress of action to the Senate	Faculty level progress report submitted to the Senate	Dean/FQAC
1	**Governance and Management**	There is a need for a university-wide policy and staff training on records management, which includes consistent advice on handling confidential materials.	Develop a policy on defining, controlling and maintaining confidentiality of documented information.	% completion of Developing a policy on defining, controlling and maintaining confidentiality of documented information.	CQA
			Introduce a computerized MIS for the university covering main processors (Automation of workflows) maintaining the data security	% completion of Installation of computerized MIS for selected work process	Director IT/CQA/ Strategic Management Unit
			Implementation of document control and management system maintaining version control a, retention time and confidentiality	% completion of Implementation of document control and management system	Director IT/CQA/ Strategic Management Unit
			Awareness creation on maintaining confidentiality on document handling/ develop training module and offered through SDC specially targeting the administrative staff and nonacademic staff (mainly clerical staff)	Number of awareness programs on confidentiality on document handling specially targeting the administrative staff and nonacademic staff (mainly clerical staff)	CQA/SDC
				% cover of the relevant employee categories	CQA/SDC

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Conducting awareness sessions on duties, work norms and code of conduct for all categories of staff	No. of awareness workshops conducted	CQA/SDC/ SRA
		There is a need to enhance the facilities and practices at the Examinations Division to ensure confidentiality and timeliness of operations.	Establishment of digitalized (workflow automation) system to improve the efficiency of examination process	% completion of workflow automation	CQA/IT
			Analyze the feasibility to decentralize possible operations of examination process delegating the responsibilities to relevant faculties/ units	% Completion of the feasibility analysis	SAR Examination/ CQA/SMU
<td colspan="5" style="background:orange"></td>					
2	**Curriculum and Programme Development**	There should be an approved policy/framework for curriculum development in the University to which faculties would align their own processes of curriculum development.	1.Curriculum Development/Design and Revision Policy (CDRP) a.Upgrading the existing CDRP b. Assuring alignment of Faculty CDR policies to University CDRP	Overview of existing policies related CDRP in the Faculty level and University level	FQA / Dean/ Faculty level curriculum Committee/C QA Director
				Upgrading the existing policy or develop a new policy for University	CQA Director/ University Curriculum Committee
				Upgrading the existing policy or develop a new policy in Faculty	FQA/ Faculty level

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
				level aligning to the University level policy	Curriculum Committee
				Develop SOP with check list to execute the actions in the Policy in the case of developing a curriculum	CQA Director/ Deans
		A consistent approach to obtaining feedback from students regarding course content and teaching/learning in all curriculum development activities across the University	2 Developing a system to get student feedback on curriculum development (regularization of the existing mechanism) a. Incorporating Student Feedback (Semester basis) results in the CDR process b. Getting Student views in CDR process when designing new or revising existing curriculum	Annual students' feedback report at the Faculty level	FQA Coordinator/ Dean
				Developing an SOP for Students' Feedback collection for the curriculum development (Develop an SOP to submit Students' Feedback report to relevant parties)	CQA Director
		Even though faculty graduate profiles were available, there was no University graduate profile – hence alignment of faculty profiles with a University profile is absent	Development of a university-level Graduate Profile	Development of a university-level Graduate Profile	CQA Director / Deans
		There should be a university statement or	Implementation of the already existing Outcome Based education	Curriculum Development/Design and Revision	Deans/ Faculty

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		documentation and evidence regarding outcome-based education and student- centered learning on an approved policy	(OBE) and Student Centered Learning (SCL) in CDR documents (University/Faculty) and Degree program introductions *Already this is implemented*	(as identified by regular curriculum evaluations)	Curriculum Committee
3	**Teaching and Learning**	No evidence of a consistent application across the University to prove the effective use of feedback from student and peer evaluation.	Implementation of the already existing SOP for Students' Feedback collection and making necessary decisions based on feedback (e.g., Self-Assessment and development planning, Performance evaluation, Head's recommendations, SDC/Rewards)	% of completion of Student Feedback per semester. (Ideal is 100%) Report - Semester end report on Student Feedback to CQA Evidence of decisions based on Student Feedback (Annual Report to Dean and CQA)	HoDs/FQA/ Dean/ CQA Director
			Regularization of the Implementation process of the Peer Evaluation and making necessary decisions based on feedback (e.g., Self-Assessment and development planning, Performance evaluation, Head's recommendations)	% of completion of Peer Review per semester. (Ideal is 100%) Report - Semester end report on Peer Evaluation to CQA	HoDs/FQA/ Dean/ CQA Director

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
				Evidence of decisions based on Peer Evaluation\n\n(Annual Report to Dean and CQA)	
		Lack of evidence in use of subject benchmarks in all the study programs.	Assurance of using subject benchmarks (for the subjects which is not having SL SBs)\n\n(Inclusion in the CDRP, indicate benchmarks in communicating degree programs/Website update)	Incorporating subject benchmarks in developing degree prgramme / curricula\n\nReport of evidences of the usage of subject benchmarks (degree program introductions and Website evidences)	HoDs/CDC at Faculty/ Dean
		There is a lack of evidence in the incorporation of innovations and current advances in knowledge into the curriculum.	Incorporating innovations and advances in knowledge in the respective disciplines to the curriculum\na. Incorporation of a segment in the study guide to include current issues and development in the subject.\nb. Incorporating the latest research in the study guide and update with the latest textbooks.\nc. Regular curriculum committee meeting at departmental / faculty level and providing minutes of the discussion.	% of subjects that has a segment of current issues and development in the course. One ILO can be included in the course outline/study guide. (include this to CDRP)\n\n% of subjects that has incorporated updated latest research papers and the latest text books.\n\nRegular curriculum committee meeting at departmental / faculty level	Lecturers/ HoDs/ CDC at Faculty /Dean

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			d. Incorporation of Subject Benchmarks (to be included in CDRP)		
		No evidence for rewarding innovative teaching, and there is no evidence that this is being addressed at a University level.	Developing a reward system for innovative teaching. a. Appointing a team to prepare the proposal for the reward system b. Proposal Presenting to the stakeholders c. Getting feedback from the stakeholders d. Revise the proposed Appraisal/reward system as per the feedback d. Getting approval from the Senate e. Implementing the reward system to recognize innovative teaching	Completion of the reward system designing. Implementation of the reward system. Annual Report on Rewarding of innovative teaching	HoDs/Dean/ CQA/VC
4:	**Learning Resources, Student Support and Progression**	There is a need to strengthen interventions on destructive student interactions to maintain friendly learning environments.	Establish a centralized coordinating body address student's welfare	% completion - Appointing the committee to address student's welfare	SAR Students affaires/ Deans
				% completion of establishment of policy framework including procedures	CQA/SAR Students affaires/ Deans

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
				% of welfare matters resolved at the committee (from the reported matters)	SAR Students affaires/ Deans
			Establish and operationalize grievance handling and redress mechanism	Establishment of university grievance handling and redress committee	CV/Deans/S MU/CQA
				% Completion of development of policy on grievance handling and redress mechanism	Grievance Handling Committee / CQA
			Develop an online grievance, complaint and appeal submitting and response system for students and for staff, maintaining the confidentiality and impartiality	% Implementation of online grievance, complaint and appeal submitting and response system	Grievance Handling Committee /Director CCS
			Monitoring the welfare of students by active engagement of hostel committees under the supervision of director student support and welfare	Number of hostel welfare committees established and complaint resolved	SAR Students affaires/ Deans
			Conduct welfare meetings at regular intervals with relevant officers and student representatives, preferably at the hostel premises under the supervision of director student support and welfare	Number of meetings conducted	SAR Students affaires/ Deans

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Improving further the Canteen facilities, Recreational Room/Activity Rooms/etc at university/faculty level	Seating capacity of the cafeterias in the university	VC/SAR Students affaires/ SAR Admin/ Deans/ Bursar
				% of students using the recreational facilities	QAC/FQAC
4:	**Learning Resources, Student Support and Progression**	Student-staff and student-student interaction are vital for an academic setting which could not be seen in evidence provided. Therefore, it is recommended to establish mechanisms to enhance student-staff and student-student interactions.	Improve the mechanism exist at the University to facilitate in addressing counseling related matters	Number of trained counsellors	Deans/ Director Counselling center
			Creating awareness on counselling among staff and students (develop a training module)	Number of awareness sessions per faculty	Dean/ FQAC/ SDC
			Develop policy and procedures for establish and monitor subject association/ Students circles	% Completion of Policy document on establishment of subject association	Dean/ HoDs/ FQAC/CQA
			Develop web pages under the faculty websites, dedicated to Subject Associations/ Students circles	% Completion of development of web pages	FQAC/ Director CCS
			Develop a mechanism to formalize mentor mentee interaction with proper monitoring	% Completion of the development of formal mentor mentee interaction mechanism	Dean/ HoDs/ FQAC/CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Improve the existing mechanism to Formalize career counselling	% improvement of existing mechanism to Formalize career counselling	Director Career Guidance Unit/ Dean/ HoDs/ FQAC/CQA
			Further enhancement of engagement of students in collaborative research work (Undergraduate and Post graduate)	% participation in research works from total student population	Dean/HoDs/ FQAC
		It is recommended to establish a mechanism to record for remedial action taken for feedback	Develop a student feedback response mechanism	No of students satisfactory surveys conducted per each faculty	Dean/HoDs/ FQAC/CQA/ SAR Students affairs
			Obtaining student satisfaction survey on facilities and services provided from the University	Students' Satisfaction survey results (Per Batch)	Dean/HoDs/ FQAC/CQA/ SAR Students affairs
			Develop digital platform to gather data on students feedback on teaching , learning and satisfaction on conducive learning environment	% Completion of the development of digital platform	Director CCS /CQA
		It was observed that resources are not enough, and less attempt has	MOUs/agreements on research collaboration established with outside organizations	No. of MOUs signed for research collaboration	Deans/ University research

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		taken to focus on developing student-centered leaning activities that should be an important concern			committee/ Faculty research committee
			Expanding the band width and increasing the number of Access points proportionate to number of students and the staff	Increase the Bandwidth (mbps)	Director IT
				Number of Access points added	Director IT
			Upgrade the Library facilities (Increase of learner's space, Virtual access to library resources)	Lerner's spaces at the libraries	Librarian
				No of user accounts for virtual access to library resource	Librarian
				Improvement of the seating capacity of the library system	Librarian
			Develop a mechanism to screen students (new entrants) for their disabilities and provide facilities (E.g. visual impaired, hearing impaired, which can be linked with initial medical checkup of new entrants)	Number of requests for student support categories (sign language interpreters, electronic note takers, personal academic assistant, targeted transport) (Actual)	Deans/ Librarian/ HoDs/ Registrar/ Bursar
			Increase the accessibility to the industrial exposure of students and staff (using different approaches ex using video conference facilities, industrial visits, industry collaborations)	Percentage engagement of students for field visits/ site visits, industry collaborations	Deans/ HoDs

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Implementation of the already developed policy on differently abled students and relevant people among the university community	% Completion of development of procedures on facilitation of differently able students and relevant people among the university community (implementation of the existing policy on differently abled students)	CQA/FQAC/ Deans
			Develop a resource center at the main library to facilitate visually and hearing impaired people by providing necessary facilities and infrastructures for differently able community in the University	Percentage completion with Equipment and facilities purchased	Librarian
				Number of students/ Staff using the Resource Centre	Librarian
			Promote community and industry engagement of the University	Number of capacity building programmes facilitated by the academics	Deans/ HoDs/ registrar/ CQA
				Number of workshops conducted by the industry experts	Deans/ HoDs/ registrar/ CQA
				Number of community education programs (Per faculty)	Deans/ HoDs/ registrar/ CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
				Number of CSR projects conducted by the University	Deans/ HoDs/ registrar/ CQA/FQAC/ Bursar
5	**Student Assessment and Award**	It was noted that there is a need of University wide policy framework for nominations and appointments of external examiners.	Upgrading the Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners or development of policy for nominating & appointing second examiners/ external examiners	Assessment of the existing policies at the faculty/university level on Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners	HoDs, Deans, Director CQA
				Development of new policies for the university related to Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners KPI- University Policy Document/Report	HoDs, Deans, Director CQA, Examination SAR
				Annual list of external examiners (appointments/alterations, comments, etc) KPI-Annual Report on (external) examiners by each faculty	HoDs, Deans, Examination AR.

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		There is a need of policy for credit transfer as to facilitate student enrolment.	Developing a Policy on credit transfer	Assessment of the existing policies at the faculty/university level on credit transfer. KPI- Faculty level reports on credit Transfer	HoDs, Deans, Director CQA.
				Development of new policies for the university related to credit transfer. KPI- University Policy Document/Report	HoDs, Deans, Director CQA, Examination AR
				KPI- Annual list/report of transferred credits by each faculty/department	HoDs, Deans, Examination AR.
		Also, it is recommended to find suitable mechanisms to expedite releasing results to avoid unnecessary delays that has been noted in some programmes.	Expediting release of examination results. a. Paper marking as a Performance indicator of Lecturer Performance Evaluation b. Linking paper marking performance to annual increment.	A1-Development of new policies to link the paper marking and performance evaluation. KPI 1- University Policy Document/Report	HoDs, Deans, Director CQA, Examination AR, Establishment DR.

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			c. Implement the UGC Circular 15/2015 related to releasing of results (within 3 months)	KPI 2-Semester summary of paper marking progress report (including deadline meeting) at faculty level	HoDs, Deans, Examination AR.
6:	**Strength and Quality of Staff**	A Human resource plan or policies, including an approach to and performance appraisal are to be introduced and the management of underperformance should be adequately addressed	Development of policies on HR Planning, distribution of administrative positions, cadre planning, etc	% completion of HR Policy of the University	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
			Development of policies on Continuous Professional Development (CPD) and evaluation criteria	% completion of CPD policy and evaluation criteria	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
			Develop mechanism to engage staff in CPD	% participation of staff members in CPD programmes	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
			Develop expert matrix of the academic staff comparing with the national and international norms/benchmarks	Competency matrix (per degree Program) in the university	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
		Newly recruited academic staff should be mentored by the senior staff.	Formal mandatory induction program for all new recruits – academic and academic support (including work grade categories	Number of induction /training programmes for academic, non-academic, admin , temporary staff	SDC

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			and management assistant categories)		
		There is a need for a systematic peer evaluation system	Annual Award Ceremony for outstanding teaching/Research select based on both student and peer evaluation	Number of academic staff members received outstanding teaching awards per year covering all faculties	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
		Evidence on a Workload policy for the allocation of workloads according to established work norms was not available.	Development of Work norms, duty list (Procedure manual)	% completion of development of duty lists (Procedure manual)	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA
			Conducting awareness sessions on duties, work norms and code of conduct for all categories of staff	No. of awareness workshops conducted	SDC
			Preparation of TORs for all necessary positions/tasks/etc	No of TOR prepared and approved	VC/Deans/ HoDs/ Registrar/ Bursar/ CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
7	**Postgraduate Studies, Research, Innovation and Commercialization**	There is a need to give attention on innovation, commercialization, and networking through actions based on the strategic plan by the University University needs to give more attention on ensuring a conducive environment that inculcates and promotes innovation and commercialization.	Activities conducted through UBL cell such as awareness programmes on innovation and commercialization, industry collaborations, MoU with industry, facilitating the patent obtaining process	No of awareness programs on innovation and commercialization during the graduation period No of MoUs signed with industry No of Patents obtained No of Industry Collaborations NB. Considering PhDs/MPhils/MScs etc.	FGS and UBLC
			Conduct mock interviews for the postgraduates who are about to complete their courses	No of mock interviews during the graduation period	FGS
			Conduct Graduate Colloquium (GC)/symposia	No of Graduate Colloquiums (GC)/symposia during the graduation period	FGS and all Faculties
			Introduce a new course on innovation management at the induction period or as a workshop	No of innovation management workshops during the graduation period	FGS and UBLC
		University need to give more attention to award	Each BoS should grant awards for the Best Presenter, Best Poster	No of awards per year	FGS

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		and reward high impact innovations and research disseminations.	Presenter/Most Innovative Research Project/Best paper/Most outstanding thesis/Best Researcher etc.		
		University needs to provide access to training programs for postgraduate students to enhance their skills and knowledge and feedback of such programmes need to be obtained to further improve the effectiveness of such programmes	Workshops on manuscript preparation	No of manuscript preparation workshops during the graduation period	FGS
			Workshop on Bibliography managing and plagiarism checking (SI) related	No of Bibliography managing and plagiarism checking (SI) related workshops during the graduation period	FGS
			Workshop on Grant proposal writing	No of Grant proposal writing workshops during the graduation period	FGS
			Workshop on Soft skill Development	No of Soft skill Development related workshops during the graduation period	FGS

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Workshop on IT and graphic design development	No of IT and graphic design development workshops during the graduation period	FGS
			Workshop on Quality Assurance in Postgraduate	No of Quality Assurance in Postgraduates workshops during the graduation period	CQA and Faculty QACells
		University needs to device appropriate monitoring mechanism to review postgraduate programs and monitor the progress of all the postgraduate students	Each taught program curricula will be reviewed at regular intervals.	No of curriculum revisions 5 year duration Continuous monitoring of curriculum NB. Maintain 5 year interval	FGS
		University needs to give attention on enacting and implementing policies on the management of personal data and overall record management including maintaining confidentiality, handling conflict of interests, complaints and appeals procedures	Formulate a new policy on students' personal data management/handling	Policy document on students' personal data management/handling	FGS / CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		University needs to give attention on enacting policies on criteria for authorship of research output and publications of papers.	Formulate a new policy on authorship of research outputs and publications of papers (Authorship/Institutional affiliation/Acknowledgement etc)	Policy document on authorship of research outputs and publications of papers	University Research Grant committee /CQA
		University needs to make sure to implement the ethical guidelines through appropriate mechanisms.	Adopting the ethical guidelines of SUSL	SOP to comply with ethical guideline of SUSL	Ethical review committee / CQA
		University needs to give attention on interaction with industry on applied research and research incubation.	Industry link should be made via UBLC/personal contacts	No of industry linkages/year	UBLC
			Encourage post graduate students to obtain professional memberships (national/international) on their fields.	No of professional memberships/Year	UBLC
			Encourage postgraduate students to start venture capital businesses	No of venture capital businesses/year	UBLC
8					

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
	Community Engagement, Consultancy and Outreach	University needs to devise clear policy on consultancy and extension services and their implementation to benefit a wider range of stakeholders including regional communities.	Compilation of existing policies/ guidelines/mechanisms in conducting outreach activities	Faculty level report on existing policies/ guidelines/mechanisms in conducting outreach activities (Number of policies)	Deans of the faculties Director of UBLC
			Developing a clear policy on community Engagement, consultancy and Outreach activities	The comprehensive policy document on community engagement, consultancy and outreach activities of the Sabaragamuwa University of Sri Lanka	Deans of the faculties, Director of UBLC, Head of the departments, Centre for Quality Assurance, Faculty Quality Assurance cells
			Implementation of the policy through various community engagement, consultancy and outreach activities	Faculty level annual outreach activity reports including feedback reports Number of outreach activities conducted by each faculty annually	
		University could periodically assess the impacts of the consultancy and extension services among the external stakeholders, alumni and community representatives.	Preparation of Follow up summery reports on pervious outreach activities and stakeholder comments on outreach activities Stakeholder feedback on outreach activities	Number of Follow up summery reports on pervious outreach activities Number of stakeholder meeting/review reports (5 year cycle)	Deans of the Faculties, Director of UBLC, Curriculum coordinators, Centre for Quality Assurance,

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
9	**Distance Education**	Currently, distance education is not an option to those who are engaged in jobs but wish to continue their education. This is an important objective that CODL has to achiveas all the CODL programmes are conducted through face to face sessions.	Introducing new programmes to be delivered through distance mode	No. of programmes introduced to CODL	HODs/ Deans
			Preparing the By-Laws including the lateral qualifications for those who wish to continue their education	No. of students entered to CODL	Director (CODL) / SAR (CODL)
			Introducing flexible learning hours for CODL	No. of students entered to CODL	Programme Coordinators
			Improving the quality of infrastructure and developing infrastructure for online learning (Building, equipment for e-learning)	No. of CODL students following the course using the online mode	Vice Chancellor/ Director (CODL) / SAR (CODL)/ AB (CODL)
			Course manual development for CODL	No. of Course manuals introduced to CODL	Coordinator (Learning Resources)/ Programme Coordinators
				No. of MoUs signed by CODL	

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Signing the MoUs with the specific capable organizations to conduct the courses in CODL Convert the existing programmes into hybrid mode Introducing credit transfer facility (Diploma courses and degree) for CODL programme Introduce quota base system to CODL	No. of CODL programmes converted into hybrid mode No. of students entered to CODL No. of students entered thorough quota based	Vice Chancellor/ Director (CODL) / SAR (CODL) Coordinator (Learning Resources)/ Coordinator (Training)/ Programme Coordinators Director (CODL) / SAR (CODL)
		It is recommended to establish an internal mechanism to monitor the quality of programmes offered by the CODL as at present there is no such mechanism in place to obtain student feedback on CODL services and	Establish the Quality Assurance Cell for CODL and establish a method to monitor the quality assurance of CODL programmes Install a separate server for the CODL	No. of meetings conducted, No. of Student feedback forms, No of students comments Preparation of guide for Quality Assurance of CODL Programmes	Director (CODL) / SAR (CODL) Director (CODL) /

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		administration that to encourage continuous quality improvement		No. students accessing the services, No. of breakdowns, No. of complaints, No. of active hours	SAR (CODL) AB (CODL)
		For CODL students, there is no mechanism in place to access the library resources/elibrary of the university that is much needed and was one of the main concerns of the students	Establishing a mini library for the CODL Establishing E- library access for CODL	No. of books, No. of students accessed No. of students used e-library facilities, No. of hours used	Director (CODL) / Director (CODL) / SAR (CODL)/ Coordinator (Learning Resources)/ Coordinator (Training)/ Librarian
			Signing the MoUs with the public libraries and relevant authorities which provide library facilities – CODL	No. of MoUs signed	Vice Chancellor/ Director (CODL) / SAR (CODL)
		In delivering distance education effectively,	Providing the VLE facilities for the students of the CODL	No. of students using VLE facilities	Director (CCS)/

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		LMS and MOODLE are important integral components which are recommended to bringing into the practice.	Providing the virtual flat forms to the academic and administrative staff of CODL	No. of accounts created, No. of lecture hours conducted, No. of meetings conducted	Director (CODL) / SAR (CODL) Director (CCS)/ Director (CODL) / SAR (CODL)
	Quality Assurance	It is recommended to establish a suitable recoding mechanism for academic staff to record their workload and maintain transparency about their own accountably	Implementation of policy on academic accountability by Issuing an internal circular Regular monitoring of Workload of academic staff, through maintaining records Evaluation of workload of individuals and take necessary action to improve it.	Awareness programme on implementing work load calculation and record keeping on workload Implementation of the policy on academic accountability Internal circular on academic accountability Reports maintain at the faculties for work load	Deans /Heads/ CQA

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
		There is a need for regular monitoring process to be established to evaluate the programmes and activities conducted by CODL to improve the quality of the Centre"s outputs.	Formation of Quality Assurance cell of the CODL Develop a regular program development, monitoring and program revision mechanism for CODL Monitoring the quality enhancement of the teaching and learning process in CODL Maintaining best practices and produce Standard operating procedures for CODL Develop mechanism for student support and guidance for CODL Strengthen the mechanism for student assessment in CODL	Quality Assurance cell CODL Revised curricular and designed new programs (degree programmes and etc.) Establishment of curriculum development & monitoring committees Establishment of a proper method for the introduction of program (proper application process of newly identified programs, reviewing of such programs and proper pathway of approving the program in line with quality standard of HEI. Regular revisions of program, analysis of student feedback on teaching and learning process and peer evaluation. Communication of feedback out come with the relevant parties in order to enhance the quality of the CODL education.	Director/ CODL

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
				Develop manuals and procedures for best practices Establishing student grievances committee and produce a policy document for addressing student grievances Planning of carrier guidance programs or other student support services and also improving the access to library facilities in order to uplift the quality of student hence the QA of CODL	
		Updated procedures for conducting examinations and proper guidelines for examination procedures are important areas to be developed	Development of university wide policy on appointing second examiners/ external examiners/ moderators. Development of student assessment and examination policies	Preparation of guideline for student assessment and for quick release of exam results policy on appointing second examiners/ external examiners/ moderators- SUSL	

Criterion number	Criterion	Relevant recommendation in Review Report or item in your SWOT analysis	Proposed activity / sub-activity	Relevant key performance indicator	Responsible officer
			Developing an effective mechanism for monitoring overall performances of the assessment system	Policy on Student assessment and examination-SUSL/Manual of examination procedures Manual of examination procedures Development of alternative assessment (online) assessment policies.	

SECTION 04

4. Action plan for implementation of proposed activities

Institutional Review, SUSL was done for the period of 2014 -2018 based on the report submitted in 2019 by the University. Even though the submission of SER was in 2019, the site visit was delayed until February 2020. Meanwhile, during the period between SER submission and the site visit (2019 April to 2020 February), SUSL initiated developing many of the policies and actions before the site visit. But, these were not taken in to account by the reviewers as these were prepared outside the time of the review process (2014-2018). Therefore the reviewers have put these newly produced evidences in their recommendations as lacking evidences despite the SUSL have already developed many of them. Hence, during this Action Plan preparation process, despite the period of site visit, the actions are mentioned as from 2019. As the actions were identified, planned and implemented from 2018, there was no gap in enhancing the quality aspects of the University and it was done systematically with long term planning.

4.1 Summary of Goals, Objectives and Strategies of Strategic Management Plan SUSL

In preparation of the action plan, activities and sub-activities were proposed in alignment with the relevant goal of the university's strategic management plan. (Annexure III - Strategic Management Plan 2019-2023). There are five goals in the University Strategic Management Plan (Table 7).

- ➢ Goal 1: To achieve excellence in quality of teaching and learning
- ➢ Goal 2: Enhance the image of the university by enriching research culture
- ➢ Goal 3: To Improve Physical, Infra, Super Structures and Human Capital
- ➢ Goal 4: To enhance the social responsibility and harmony for sustainable development
- ➢ Goal 5: To strengthen the governance and administrative systems for effective service delivery

Table 7. Summary of Goals, Objectives and Strategies of Strategic Management Plan (2019-2023) SUSL

Goal	Objectives	Strategy
Goal 1: To achieve excellence in quality of teaching and learning	**Objective 1.1** To continuously improve the quality and relevance of academic programs	**Strategy 1.1.1** Set up a mechanism to systematically review existing academic programs and develop new programs **Strategy1.1.2** Review existing academic programs and develop new programs-in line with SLQF guideline
	Objective 1.2 To develop conducive environment for teaching and learning	**Strategy 1.2.1** Adopt different pedagogies to Strengthen teaching and learning **Strategy 1.2.2** strengthen student support services **Strategy 1.2.3** Strengthen career development and mentoring programs
	Objective 1.3 To increase the access to higher education	**Strategy 1.3.1** Strength and Develop new academic programmes
	Objective 1.4 To widen the University – Industry Linkage	**Strategy 1.4.1** Widen the scope of industrial exposure
Goal 2: Enhance the image of the university by enriching research culture	**Objective 2.1:** To develop a conducive environment for research	**Strategy 2.1.1:** Widen the access to funding opportunities for research **Strategy 2.1.2:** Improve the infrastructure facilities for research
	Objective 2.2: To encourage collaborative research	**Strategy 2.2.1:** Facilitate collaborative research **Strategy 2.2.2** Strengthen the University Industry Business Linkage
	Objective 2.3: To widen the research outcome disseminating channels	**Strategy 2.3.1:** Organizing research symposia **Strategy 2.3.2:** Publication of research journals
	Objective 2.4: To recognize and award the high quality research of university community	**Strategy 2.4.1:** Awarding and Rewarding systems for encouraging researchers
	Objective 2.5: To enhance the university image	**Strategy 2.5.1:** Conducting image building campaign of the university

Goal 3: To Improve Physical, Infra, Super Structures and Human Capital	**Objective 3.**1 To develop Physical, Infra and super structures facilities	**Strategy 3.1.1** Accelerate approved construction projects **Strategy 3.1.2** Accelerate the initiation of physical, Infra and super structures projects **Strategy 3.1.3** Renovate the existing building **Strategy 3.1.4** Introduce a Physical Development Plan for the University **Strategy 3.1.5** Enhance the physical facilities to improve the quality of teaching and learning environment
	Objective 3.2 Strengthen Human Resources	**Strategy 3.2.1**: Effective Human Resources Planning **Strategy 3.2.2**: Facilitate professional development of staff members
Goal 4: To enhance the social responsibility and harmony for sustainable development	**Objective 4.1:** To enhance the empowerment of local community through capacity building to share mutual economic Benefits	**Strategies 4.1.1**:Adapting sustainable entrepreneurial approaches **Strategies 4.1.2:**To persuade the public and private organizations to invest in the adjacent areas
	Objective 4.2: To promote harmony among university community and wider community.	**Strategy 4.2.1**. Develop service delivery mechanism for the wider community **Strategy 4.2.2**. Improving Social wellbeing of the community
Goal 5: To strengthen the governance and administrative systems for effective service delivery	**Objective 5.1** To Institutionalize the strategic management plan within the university community for successful implementation and wider acceptance	**Strategy 5.1.1:** To develop a mechanism to implement the strategic management plan and the annual action plan
	Objective 5.2 To strengthen the policy formulation process in the university	**Strategy 5.2.1** Streamline the policy and plan formulation process **Strategy 5.2.2:** Implement a management information system covering operational and administrative functions of the university.

Actions were aligned with the Strategies in the University Strategic Management Plan 2019-2023

4.2 Action plan for implementation of proposed activities

4.2.1 GOAL 1: TO ACHIEVE EXCELLENCE IN QUALITY OF TEACHING AND LEARNING

Table 8. Action Plan – Mapping with Goal 1 in the Strategic Plan - Goal 1: To achieve excellence in quality of teaching and learning

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Curriculum Development/Design and Revision Policy (CDRP) a. Upgrading the existing CDRP b. Assuring alignment of Faculty CDR policies to University CDRP	Overview of existing policies related CDRP in the Faculty level and University level (Final report should be submitted every year and maintain records)	1.1.1	05.2019	12.2023 (Continuous process)	75%	100%	100%	100%	100%
	% Development of SOPs for the existing policy on curriculum development	1.1.1	11.2021	12.2022			25%	100%	
	% completion of developing/ upgrading and preparation of SOPs related to Curriculum Revision and Development	1.1.1	12.2022	12.2023				50%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
	Develop SOP with check list to execute the actions in the Policy in the case of developing a curriculum (SOP and Check list)	1.1.1	05.2019	04.2022	50%	60%	80%	100%	
Developing a system to get student feedback on curriculum development (regularization of the mechanisms) a. Incorporating Student Feedback (Semester basis) results in the CDR process b. Getting Student views in CDR process when designing new or revising existing curriculum	Annual students' feedback report at the Faculty level (Annual report – this should be collected every year) ** Student feedback is taken for the curriculum development of all programmes offered by SUSL*	1.1.1			NA	NA	NA	NA	NA
	Developing an SOP for Students' Feedback collection for the curriculum development (Develop an SOP to submit Students' Feedback report to relevant parties) (SOP- KPI)	1.1.1	04.2020	04.2022		50%	60%	100%	
Development of a university-level Graduate Profile	Development of a university-level Graduate Profile	1.1.1	09.2021	04.2022			50%	100%	

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Implementation of taking feedback from students consistently from all faculties Students' Feedback collection and making necessary decisions based on feedback	% of completion of Student Feedback per semester. (Ideal is 100%) Report - Semester end report on Student Feedback to CQA Evidence of decisions based on Student Feedback (Annual Report to Dean and CQA)	1.1.1	06.2019	12.2023 (Continuous process)	50%	50%	100%	100%	100%
Developing a proper mechanisms in implementation / prepare a SOP for Peer Evaluation and making necessary decisions based on feedback (e.g., Self-Assessment and development planning, Performance evaluation, Head's recommendations, SDC/Rewards) (regularization of the existing mechanism)	% of completion of Peer Review per semester. (Ideal is 100%) Report - Semester end report on Peer Evaluation to CQA Evidence of decisions based on Peer Evaluation Annual Report to Dean and CQA) **This is already practicing at the University, this will be well maintained in coming years*	1.1.1	06.2019	12.2023	25%	25%	100%	100%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Assurance of using subject benchmarks. (Inclusion in the CDRP, indicate benchmarks in communicating degree programs/Website update)	Exiting programmes already incorporated the SBs in developing the curricular. New degree programes will be conducted incorporating relevant SBs.	1.1.2	12.2019	12.2023	NA	NA	NA	NA	NA
Incorporating innovations and advances in knowledge in the respective disciplines to the curriculum a. Incorporation of a segment in the study guide to include current issues and development in the subject. b. Incorporating the latest research in the study guide and update with the latest textbooks. c. Semester-wise curriculum upgrading discussion meeting and providing minutes of the discussion.	% of subjects that has a segment of current issues and development in the course. One ILO can be included in the course outline/study guide (include this to CDRP) % of subjects that has incorporated updated latest research papers and the latest text books. Report on Semester-wise curriculum upgrading meeting	1.1.2 1.2.1	01.2019	12.2023	20%	40%	60%	100%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
d. Incorporation of Subject Benchmarks (to be included in CDRP)									
Upgrading the Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners / or development of policy for nominating & appointing second examiners/ external examiners	Assessment of the existing policies at the faculty/university level on Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners.	1.2.1	06.2020	12.2022		50%	75%	100%	
	Development of new policies for the university related to Assessment Policy by incorporating nominations and appointments of external examiners and changes of examiners KPI- University Policy Document/Report	1.2.1	06.2019	12.2021	50%	75%	100%		
	Annual list of external examiners (appointments/alterations, comments, etc) KPI-Annual Report on (external) examiners by each faculty	1.2.1	01.2023	12.2023					100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Developing a Policy on credit transfer	Assessment of the existing policies at the faculty/university level on credit transfer. Faculty level reports on credit Transfer	1.1.1	08.2021	12.2021			100%		
	Development of new policies for the university related to credit transfer. University Policy Document/Report	1.1.1	08.2021	03.2022			50%	100%	
	Annual list/report of transferred credits by each faculty/department	1.1.1	05.2022	12.2023				100%	100%
Expediting release of examination results. a. Paper marking as a Performance indicator of Lecturer Performance Evaluation b. Linking paper marking performance to annual increment. c. Implement the UGC Circular 15/2015 related to releasing of results (within 3 months)	Development of new policies to link the paper marking and performance evaluation. University Policy Document/Report	1.2.1 1.1.1	12.2021	06.2022			10%	100%	

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
	Semester summary of paper marking progress report (including deadline meeting) at faculty level	1.2.1 1.1.1	12.2022	12.2023					100%
Conduct mock interviews for the postgraduates who are about to complete their courses	No of mock interviews during the graduation period	1.2.3	01.2022	12.2023				50%	100%
Workshop on Bibliography managing and plagiarism checking (SI) related	No of Bibliography managing and plagiarism checking (SI) related workshops during the graduation period	1.2.1	01.2022	12.2023				50%	100%
Workshop on Soft skill Development	No of Soft skill Development related workshops during the graduation period	1.2.2	01.2022	12.2023				50%	100%
Workshop on IT and graphic design development	No of IT and graphic design development workshops during the graduation period	1.2.2	01.2022	12.2023				50%	100%
Workshop on Quality Assurance in Postgraduate	No of Quality Assurance in Postgraduates workshops during the graduation period	1.2.2	01.2021	12.2023			10%	50%	100%
Each taught program curricula of FGS will be reviewed at regular intervals.	No of curriculum revisions 5 year duration (FGS) and curriculum monitoring as a continuous process	1.1.2	01.2023	12.2023					50%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
	NB. Maintain 5 year interval								
Industry link should be made via UBLC/personal contacts for post graduate students	Number of industry linkages/year	1.4.1	01.2022	12.2023				05	05
Encourage post graduate students to obtain professional memberships (national/international) on their fields.	No of professional memberships/Year	1.4.1	01.2022	12.2023				05	05
Encourage post graduate students to start venture capital businesses	No of venture capital businesses/year	1.4.1	01.2022	12.2023				05	05
Introducing new programmes to be delivered through distance mode to CODL	No. of programmes introduced to CODL	1.3.1	01.2021	12.2023 (continuous process)			04	03	03
Preparing the By-Laws including the lateral qualifications for those who wish to continue their education at CODL	No. of students entered to CODL	1.3.1	01. 2022	12.2023				50%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Introducing flexible learning hours for CODL	No. of students entered to CODL	1.3.1	01.01.2021	12.2023 (continuous process)			2000	2500	3000
Course manual development for CODL	No. of Course manuals introduced to CODL	1.1.2	01.01.2021	12.2023 (continuous process)			5%	25%	50%
Convert the existing programmes into hybrid mode	No. of CODL programmes converted into hybrid mode	1.2.1	01.2021	12.2023 (continuous process)			17	19	23
Introducing credit transfer facility (Diploma courses and degree) for CODL programme	No. of students entered to CODL	1.3.1	01.2022	12.2023				20	50
Introduce quota base system to CODL	No. of students entered thorough quota based	1.3.1	01.2022	12.2023 (continuous process)				50	50
Establish method /s to monitor the quality assurance of CODL programmes	No. of meetings conducted, No. of Student feedback forms, No of students comments Preparation of guide for Quality Assurance of CODL Programmes	1.3.1	08.2021	12.2023 (continuous process)			50%	75%	100%
Install a separate server for the CODL	No. students accessing the services, No. of breakdowns, No. of complaints, No. of active hours	1.3.1	01.2022	12.2023 (continuous process)				2500	2800

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Establishing a mini library for the CODL	No. of books, No. of students accessed	1.2.1	01.2022	12.2023 (continuous process)				50 350	100 2800
Establishing E- library access for CODL	No. of students used e-library facilities, No. of hours used	1.2.1	01.2023	(continuous process)					1500
Signing the MoUs with the public libraries and relevant authorities which provide library facilities – CODL	No. of MoUs signed	1.2.1	01.2022	12.2023				2	3
Providing the VLE facilities for the students of the CODL

Providing the virtual flat forms to the academic and administrative staff of CODL | No. of students using VLE facilities

No. of accounts created, No. of lecture hours conducted, No. of meetings conducted | 1.2.1 | 01.2021 | 12.2023 (Continuous process) | | | 2500 | 2700 | 3000 |
| Formation of Quality Assurance cell of the CODL | Quality Assurance cell CODL | 1.1.1 | 01.2020 | 06.2021 | | 50% | 100% | | |
| Develop a regular program development, monitoring and program revision mechanism for CODL | Revised curricular and designed new programs (degree programmes and external programmes, etc.) -CODL | 1.1.1 | 06.2021 | 12.2023 | | | 25% | 50% | 100% |

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
	Establishment of curriculum committees at CODL	1.1.1	09.2021	02.2021			100%		
Monitoring the quality enhancement of the teaching and learning process	Establishment of a proper method for the introduction of program (Proper application process of newly identified programs, reviewing of such programs and proper pathway of approving the program in line with quality standard of HEI.	1.1.1	01.2019	12.2023	25%	50%	100%	100%	100%
Maintaining best practices and produce Standard operating procedures	Regular revisions of program, analysis of student feedback on teaching and learning process and peer evaluation.	1.1.1 1.2.1	10.2019	12.2023	10%	20%	30%	100%	100%
Develop mechanism for student support and guidance -CODL	Communication of feedback out come with the relevant parties in order to enhance the quality of the CODL education.	1.1.2	01.2022	12.2023				100%	100%
	Develop manuals and procedures for best practices for CODL	1.1.1 1.2.2	10.2021	12.2023			25%	50%	100%
	Establishing student grievances committee, produce a policy document for addressing student grievances and developing a grievances redress mechanism – CODL	1.2.2	10.2021	12.2023			25%	50%	100%
	Planning of carrier guidance programs or other student support	1.2.3	01.2022	12.2023				50%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
	services and also improving the access to library facilities in order to uplift the quality of student hence the QA of CODL								
Improve the existing mechanism to facilitate to address counseling related matters	Number of trained psychological counsellors	1.2.2	01. 2022	12. 2023				14	14
Creating awareness on counselling among staff and students (develop a training module)	Number of awareness sessions	1.2.3	01.2022	12. 2023				4	4
Develop policy and procedures for establish and monitor subject association/ Students circles	% Completion of Policy document on establishment of subject association	1.2.2	11.2021	05.2022			10%	100%	
Develop web pages under the faculty websites, dedicated to Subject Associations/ Students circles	% Completion of development of web pages	1.2.3	01.2022	05.2022				100%	
Develop a mechanism to formalize mentor mentee interaction	% Completion of the development of formal mentor mentee interaction mechanism	1.2.2	01. 2020	March2023		25%	50%	75%	100%

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
with proper monitoring									
Improve the mechanism to Formalize career counselling	% Completion of the development of mechanism to Formalize career counselling	1.2.3	11.2021	05.2023			25%	75%	100%
Develop a student feedback response mechanism	No of students satisfactory surveys conducted per each faculty	1.2.2	01.2021	12.2023			7	7	7
Develop an online grievance, complaint and appeal submitting and response system for students and for staff, maintaining confidentiality and impartiality in addressing	% Implementation of online grievance, complaint and appeal submitting and response system	3.2.2 – Staff 1.2.2 – Students	11.2021	12.2023			10%	50%	100%
Monitoring the welfare of students by active engagement of hostel committees under the supervision of Director student support and welfare	% establishment of hostel welfare committees	1.2.2	01.2019	12.2023	50%	100%	100%	100%	100%
Conduct welfare meetings at regular intervals with relevant	Number of meetings conducted	1.2.2	01.2022	12.2023				4	4

Proposed activity / Sub-activity	Key Performance Indicator [KPI]	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
officers and student representatives, preferably at the hostel premises under the supervision of director student support and welfare									

4.2.2 GOAL 2: ENHANCE THE IMAGE OF THE UNIVERSITY BY ENRICHING RESEARCH CULTURE

Table 9. Action Plan – Mapping with Goal 2 in the Strategic Plan - Goal 2: Enhance the image of the university by enriching research culture

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Activities conducted through UBL cell such as awareness programmes on innovation and commercialization, industry collaborations, MoU with industry, facilitating the patent obtaining process	% of students made aware on innovation and commercialization during the graduation period (post graduate students) No of MoUs signed with industry Patents obtained No of Industry Collaborations	2.2.2	10.2021	12.2023			25%	50%	100%
Conduct Graduate Colloquium (GC)/symposia - FGS	No of Graduate Colloquiums (GC)/symposia during the graduation period	2.3.1	01.2019	12.2023	01	01	01	01	01
Each BoS should grant awards for the Best Presenter, Best Poster Presenter/Most Innovative Research Project/Best paper/Most outstanding thesis/Best Researcher etc. -FGS	No of awards per year	2.4.1	01.2022	12.2023				05	05
Workshops on manuscript preparation - FGS	No of manuscript preparation workshops uring the graduation period	2.3.2	01.2022	12.2023				04	04

Activity	Indicator	Code	Start	End					
Workshop on Grant proposal writing -FGS	No of Grant proposal writing workshops during the graduation period	2.1.1	01.2022	12.2023			02	02	
Signing the MoUs with the specific capable organizations to conduct the courses in CODL	No. of MoUs signed by CODL	2.2.1	01.2022	12.2023				02	02
Development of policies on HR Planning, Continuous Professional Development (CPD), staff trainings, distribution of administrative positions, etc and providing a brief orientation for newly hired staff	No of policy developed on CPD and evaluation criteria	2.4.1 2.1.1	12. 2021	06 2022	-	-	1		
	% participation of staff members completed CPD programmes		07. 2022	06.2023	-	-	-	25	75
Annual Award Ceremony for outstanding teaching/Research select based on both student and peer evaluation	Number of academic staff members received outstanding teaching awards per year	2.4.1 2.3.1 3.2.2	01.2022	12. 2023	-	-	-	1	1
Further enhancement of engagement of students in collaborative research work (Undergraduate and Post graduate)	% participation in research works from total student population	2.4.1	01 2019 (continuou s process)	12. 2023	100%	100%	100%	100%	100%
MOUs/agreements on research collaboration established with outside organizations	No. of MOUs signed for research collaboration	2.2.1 2.2.2	01.2022	12. 2023	2 per year	7 per year	7 per year	7 per year	7 per year

4.2.3 GOAL 3: TO IMPROVE PHYSICAL, INFRA, SUPER STRUCTURES AND HUMAN CAPITAL

Table 10. Action Plan – Mapping with Goal 3 in the Strategic Plan - Goal 3: To Improve Physical, Infra, Super Structures and Human Capital

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Developing a reward system for innovative teaching. a. Appointing a team to prepare the proposal for the reward system b. Proposal Presenting to the stakeholders c. Getting feedback from the stakeholders d. Revise the proposed Appraisal/reward system as per the feedback d. Getting approval from the Senate e. Implementing the reward system to recognize innovative teaching	Completion of the reward system designing. Implementation of the reward system. Annual Report on Rewarding of innovative teaching	3.2.2	01.2019	12.2023	10%	10%	25%	50%	100%
Expanding the band width and increasing the number of Access points proportionate to number of students and the staff	Bandwidth (mbps)	3.1.4	01.2019	12.2021	600	700	700	800	1000
	Number of Access points added						60	50	40

Development of Work norms, duty list (Procedure manual)	% completion of development of duty lists	3.2.1	01.2020	12. 2023	-	25%	25%	75%	100%
Conducting awareness sessions on duties, work norms and code of conduct for all categories of staff	No. of awareness workshops conducted	3.2.1	01. 2020	12. 2023		04	04	04	04
Training programmes for academic staff on counseling maintaining records on undertaking counseling/mentoring work	No. of awareness workshops conducted	3.2.2 3.1.5	01 2020	12. 2023		02	02	02	02
Development of policies on HR Planning, Continuous Professional Development (CPD), distribution of administrative positions, cadre planning, etc	% completion of HR Policy of the University	3.2.1 3.2.2	06.2019	10.2022	10%	25%	100%		
Upgrade the Library facilities (Increase of learner's space, Virtual access to library resources)	Lerner's spaces at the libraries	3.1.4	01.2022	12. 2023	-	-	-	60%	-
	No of user accounts for virtual access to library resource		01. 2022	12. 2023	-	-	N/A	N/A	N/A
	Improvement of the seating capacity of the library system		01.2022	12. 2023	-	-	-	400	75
Upgrade the Library , Canteen facilities, sports and physical facilities at university/faculty level	Seating capacity of the cafeterias in the university	3.1.4 1.2.1	01.2019	12. 2023	N/A	N/A	N/A	N/A	N/A
	% of students using the recreational facilities		01.2019	12. 2023	N/A	N/A	N/A	N/A	N/A

(Recreational Room/Activity Rooms/etc)									
Develop a mechanism to screen students (new entrants) for their disabilities (E.g. visual impaired, hearing impaired, which can be linked with initial medical checkup of new entrants)	Number of requests for student support categories (sign language interpreters, electronic note takers, personal academic assistant, additional tuition, targeted transport) (Actual)	3.1.4 1.2.1	10. 2021	12.2023			N/A	N/A	N/A
	Number of students registered under each disability type (Actual)		01.2022	12.2023			N/A	N/A	N/A
Expert matrix of the academic staff comparing with the national and international norms/benchmarks	Competency matrix (per degree Program) in the university	3.2.1	01.2021	12. 2023	-	-	1	1	1
Obtaining student satisfaction survey on facilities and services provided from the University	Students' Satisfaction survey results (Per Batch)	3.4.1 (1.2.2)	01.2019	12. 2023	1	1	1	1	1
Increase the accessibility to the industrial exposure of students and staff (using different approaches eg using video conference facilities, industrial visits, industry collaborations)	Percentage engagement of students for field visits/ site visits, industry collaborations	3.1.4 (1.4.1)	01.2019	12. 2023	10%	15%	25%	50%	75%
Implementation of the policy on differently able	% Completion of development of	3.1.4 (1.2.2)	01.2019	Continuous process	NA	NA	NA	NA	NA

students and relevant people among the university community	procedures on facilitation of differently able students and relevant people among the university community								
Develop a resource center at the main library to facilitate visually and hearing impaired people by providing necessary facilities and infrastructures for differently able community in the University	Percentage completion with Equipment and facilities purchased Number of students/ Staff using the Resource centre (Actual)	3.1.4	01.2022	12. 2023	-	-	-	50%	100%
Analyze the feasibility to restructure, ,decentralize possible operations of examination process delegating the responsibilities to relevant faculties/ units	% Completion of the feasibility analysis	3.1.2	10. 2021	12.2021	-	-	100 %	-	-
Formal mandatory induction program for all new recruits – academic and academic support (including work grade categories and management assistant categories)	Number of induction /training programmes for academic, non-academic, admin , temporary staff	3.2.1	12. 2021	06.2023			1	4	4

4.2.4 GOAL 4: TO ENHANCE THE SOCIAL RESPONSIBILITY AND HARMONY FOR SUSTAINABLE DEVELOPMENT

Table 11. Action Plan – Mapping with Goal 3 in the Strategic Plan - Goal 4: To enhance the social responsibility and harmony for sustainable development

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Preparation of Follow up summery reports on pervious outreach activities and stakeholder comments	Number of Follow up summery reports on pervious outreach activities	4.2.1 4.2.2	01.2022	12. 2022				100%	
Stakeholder feedback on outreach activities	Number of stakeholder meeting/review reports	4.2.1 4.2.2	01.2022	12. 2023				50%	100%
Promote community and industry engagement of the University	Number of capacity building programmes facilitated by the academics	4.1.1, 4.1.2, 4.2.1	01.2021	12. 2023	-	-	01	03	03
	Number of workshops conducted by the industry experts		01.2021	12. 2023	-	-	01	03	03
	Number of community education programs (Per faculty)		01.2021	12.2023	-	-		01	01
	Number of CSR projects conducted by the University		01 2021	12. 2023	-	-		01	01

Activity	Indicator		Start	End						
Establish a centralized coordinating body to address student's welfare	% completion - Appointing the committee to address student's welfare	4.2.1	06.2021	08. 2021			100 %			
	% completion of establishment of policy framework including procedures		06. 2021	07. 2022	-		20%	100%	-	
	% of welfare matters resolved at the committee (from the reported matters)				-	-	-	100%		
Establish and operationalize grievance handling and redress mechanism (Students and staff)	Establishment of university grievance handling and redress committee (actual number)	4.2.1	06. 2021	06. 2022		1		50%		100%
	% Completion of development of policy on grievance handling and redress mechanism of students, staff		09.2019	03.2022	10%	50%	100 %	-		

4.2.5 GOAL 5: TO STRENGTHEN THE GOVERNANCE AND ADMINISTRATIVE SYSTEMS FOR EFFECTIVE SERVICE DELIVERY

Table 12. Action Plan – Mapping with Goal 3 in the Strategic Plan - Goal 5: To strengthen the governance and administrative systems for effective service delivery

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Formulate a new policy on students' personal data management/handling	policy document on students' personal data management/handling	5.2.1	2022.01	2022.04				100%	
Formulate a new policy on authorship of research outputs and publications of papers (Authorship/Institutional affiliation/Acknowledgement etc)	policy document on authorship of research outputs and publications of papers	5.2.1	2022.01	2022.06				100%	
Adopting the ethical guidelines of SUSL	SOP to comply with ethical guideline of SUSL	5.2.1	2019.01	2022.06	5%	10%	25%	100%	
Compilation of existing policies/ guidelines/mechanisms in conducting outreach activities	Faculty level report on existing policies/ guidelines/mechanisms in conducting outreach activities (Number of policies	5.2.1	2020.01	2022.06		25%	50%	100%	
Developing a clear policy on community Engagement, consultancy and Outreach activities	The comprehensive policy document on community engagement, consultancy and outreach activities of the Sabaragamuwa University of Sri Lanka	5.2.1	2019.01	2022.06	5%	25%	50%	100%	

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Development of a policy and SOP for various community outreach programmes and consultancy conducted by the University	Development of policy and SOP	5.2.2	06.2022	12.2023				75%	100%
Regular monitoring of Workload of academic staff, through maintaining records	Implementation of the policy on academic accountability Issuing the internal circular on workload calculation	5.2.1	06.2019	05.2023	25%	50%	100%	100%	100%
	Awareness programme on implementing work load calculation and record keeping on workload	5.2.1	12.2020	04.2021		100%	100%		
Evaluation of workload of individuals and take necessary action to improve it	Reports maintain at the faculties for work load	5.2.1	12.2019	Continuous process	25%	25%	100%	100%	100%
Improving the quality of infrastructure and developing infrastructure for online learning (Building, equipment for e-learning) at CODL	No. of CODL students following the course using the online mode	5.2.2	01.2022	12.2023				50%	50%
Strengthen the mechanism for student assessment.	Preparation of guideline for student assessment and for quick release of exam results	5.2.1	10.2020	12.2022		25%	50%	100%	

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Development of student assessment and examination policies	Improvement of the examination procedures manual	5.2.1	01.2019	12.2022	5%	10%	25%	100%	
	Development of alternative assessment (online) assessment policies.	5.2.1	03.2021	06.2021			100%		
Developing an effective mechanism for monitoring overall performances of the assessment system	Developing a monitoring system to monitor the overall performances of the assessment system	5.2.1	11.2021	Continuous process		N/A	N/A	N/A	N/A
Evaluate the progress of Action Plan implementation	% of activities /sub activities completed	5.1.1	01.2019	12.2023	20%	50%	75%	80%	>80%
Introduce a computerized MIS for the university covering main processors (Automation of workflows)	Installation of computerized MIS for selected work process	5.2.2	01. 2021	12. 2023	-	-	50%	75%	>80%
Formalize the submission of faculty level action plan and subsequent progress of action to the Senate	Faculty level progress report submitted to the Senate	5.1.1	01.2019	Continuous process	NA	N/A	N/A	N/A	N/A
Preparation of TORs for all necessary positions/tasks/etc	% of No of TOR per need	5.2.1	01.2019	12. 2023	10%	20%	50%	100%	100%
Policy gap analysis faculty level	No of gap analysis	5.2.1	01.2021	Continuous process			1	1	1
Policy and procedure mapping	N/A	5.2.1	01. 2021	Continuous process	N/A	N/A	N/A	N/A	N/A

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Develop process manual to relevant policies	No of SOPs developed	5.2.1	01. 2021	Continuous process			01	05	10
Creation of awareness among and between faculties on existing policies and other relevant operational frameworks to harmonize them for effective implementation	No of Awareness programmes on policies	5.2.1	01. 2019	Continuous process	1	1	1	1	1
	% Implementation of developed policies – based on the outcome of the previous year's policy gap analysis	5.2.1	01. 2021	Continuous process			100%	100%	100%
Develop a policy approval, retain (policy repository) policy and distribution system through CQA to maintain consistency	% establishment of digital policy and procedure repository	5.2.1	01.2021	Continuous process			50%	75%	100%
Develop a mechanism to monitor policy implementation/ delegate responsibility to relevant FQACs	N/A	5.2.1	01.2021	Continuous process			N/A	N/A	N/A
Establishment of strategic planning unit to monitor the progress of the action Organizational results framework (ORF) exited in	Establishment of strategic management unit	5.1.1	01.2021	05. 2021			Completed		

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
the university to monitor KPI for past years									
	Monitoring the progress of the action % completion of planed activities	5.1.1	05.2021	Continuous process	20%	25%	50%	100%	100%
Streamline proper communication channels to communicate planned actions	No of awareness programmes on planed actions	5.1.1	11.2021	Continuous process			1	1	1
Development of performance reporting and monitoring system - digital platform/ dashboard (prepare a format to gather data related to actions aligning with SDGs, Vista of prosper, Budgetary items. Etc..)	% Development of performance reporting and monitoring system	5.1.1	09.2021	09. 2023			50%	75%	100%
Incorporate agenda item in the FB meeting to discuss the progress of implementation of planned action. Monitoring of the progress of implementation of actions related to SDGs	% Incorporate agenda item in the FB meeting	5.1.1	09. 2019	Continuous	10%	15%	100%		
	Monitoring of the progress of implementation of actions	5.1.1	09. 2021	Continuous			100%	100%	100%

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
Mechanism to motivate staff in recognition with voluntary contributions to implement planed actions	Develop a criterion to establish a reward system	5.1.1	09.2021	12. 2021			100%		
Develop policy and procedures on handling confidential document	% completion of Develop policy and procedures on handling confidential document	5.2.1	09.2021	12. 2021			100%		
IT policy / procedure maintaining confidentiality on e – documents (digital contents)	% completion	5.2.2	04.2021	02.2021			80%	100%	
Implementation of document control and management system maintaining version control a, retention time and confidentiality	% completion of Implementation of document control and management system	5.2.2	09. 2021	12. 2022			75%	100%	
Develop a policy on defining, controlling and maintaining confidentiality of documented information.	% completion of Developing a policy on defining, controlling and maintaining confidentiality of documented information.	5.2.1	12. 2021	06. 2022			25%	75%	
Awareness creation on maintaining confidentiality on document handling/ develop training module	Number of awareness programs on confidentiality on document handling	5.2.1	12.2021	06. 2023	-	-	-	12	12

Proposed activity / Sub-activity	Key performance Indicator (KPI)	Activity number in Corporate Plan	Start date (mm/yyyy)	End date (mm/yyyy)	Annual targets for key performance indicator				
					2019	2020	2021	2022	2023
and offered through SDC (Training manual for SDC)									
	% cover of the relevant employee categories		12. 2021	06. 2023				100%	100%
Establishment of digitalized (workflow automation) system to improve the efficiency of examination process	% completion of workflow automation	5.2.2	08 2021	07.2022	-	-	20%	100%	-

ANNEX 1. COMMITTEES APPOINTED FOR THE PREPARATION OF ACTION PLAN

1. GROUP 1

Criteria addressed by group 1

Governance and Management (Criterion 1),

Learning Resources, Student Support and Progression (Criterion 4)

Strength and Quality of Staff (Criterion 6)

Table 13. Group members – Group 1

No	Name	Designation
1	Dr. Sampath Wahala (Chairman)	Senior Lecturer, Faculty of Management Studies
2	Prof. H.M.S. Priyanath	Dean / Faculty of Graduate Studies
3	Prof. M.P. Sumith Magamage	Dean / Faculty of Agricultural Sciences
4	Dr. (Mrs) R.S. Sabaragamuwa	Dean / Faculty of Applied Sciences
5	Prof. W.K. Athula C. Gnanapala	Dean / Faculty of Management Studies
6	Prof. Nirmali Wickramaratne	Dean / Faculty of Medicine
7	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
8	Dr. A.D. Ampitiyawatta	Dean / Faculty of Technology
9	Prof. A.A.Y. Amarasinghe	Senior Professor / Faculty of Agricultural Sciences
10	Prof. H.A. Darshanee Ruwandeepika	Director / Centre for Quality Assurance
11	Prof. W. Manoj Ariyarathne	Chairman, Strategic Management Unit, SUSL
12	Dr. R.G.U. Jayalal	Senior Lecturer / Faculty of Applied Sciences
13	Mr. Saman Uyangoda	Registrar
14	Mr. J.G.P.U. Rathnayake	Deputy Registrar, General Administration
15	T.N. Neighsoorie	Librarian
16	Mr. W.A.M.P. Senadheera	Acting Bursar
17	Mr. Kamal Gunawardana	Deputy Registrar / Academic Establishments Branch
18	Mr. W.M.K. Upuldeniya	Senior Assistant Registrar, Examinations Branch
19	Ms. Gayani Dias	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)

2. GROUP 2

Criteria addressed by group 2

Curriculum Design and Development (Criterion 2)

Teaching and Learning (Criterion 3)

Student Assessment and Awards (Criterion 5)

Table 14. Group members – Group 2

No	Name	Designation
1	Dr. H.P. Rasika Priyankara (Chairman)	Senior Lecturer, Department of Business Management, Faculty of Management Studies
2	Prof. W.K. Athula C. Gnanapala	Dean / Faculty of Management Studies
3	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
4	Prof. W. Manoj Ariyarathne	Chairman, Strategic Management Unit, SUSL
5	Prof. S.K. Gunathilake	Professor, Faculty of Applied Sciences
6	Dr. P.D.V.M. Perera	Lecturer, Department of Microbiology / Faculty of Medicine
7	Prof. K.R. Koswattage	Professor, Department of Engineering Technology / Faculty of Technology
8	Dr. H.M. Indika Prasanna	Senior Lecturer / Faculty of Geomatics
9	Dr. M.D.E.K. Gunathilaka	Senior Lecturer / Faculty of Geomatics
10	Mr. W.M.K. Upuldeniya	Senior Assistant Registrar / Examinations Branch
11	Ms. Gayani Dias, Secretary / CQA	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)

3. GROUP 3

Criteria addressed by group 3

Postgraduate Studies, Research, Innovation and Commercialization (Criterion 7)

Table 15. Group members – Group 3

No	Name	Designation
1	Dr. E.P.N Udayakumara (Chairman)	Senior Lecturer / Faculty of Applied Sciences
2	Prof. H.M.S. Priyanath	Dean / Faculty of Graduate Studies
3	Dr. (Mrs.) R.S. Sabaragamuwa	Dean / Faculty of Applied Sciences
4	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
5	Prof. W. Manoj Ariyarathne	Chairman, Strategic Management Unit, SUSL
6	Prof. D.A.I. Dayaratne	Director / University Business Linkage Cell
7	Dr. Saman Koswatte	Senior Lecturer, Department of Remote Sensing and GIS / Faculty of Geomatics
8	Dr. Iraj Rathnayake	Senior Lecturer / Faculty of Management Studies
9	Ms. Gayani Dias	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)

4. GROUP 4

Criteria addressed by group 4

Community Engagement, Consultancy and Outreach (Criterion 8)
Distance Education (Criterion 9)

Table 16. Group members – Group 4

No	Name	Designation
1	Mr. D. Jasinghe (Chairman)	Director / Centre for Open and Distance Learning
2	Prof. W. Manoj Ariyarathne	Chairman, Strategic Management Unit, SUSL
3	Mrs. T.S.H Perera	Senior Lecturer, Department of Sports Sciences and Physical Education, Faculty of Applied Sciences
4	Dr. K.S.N. Prasangani	Senior Lecturer, Department of English Language Teaching, Faculty of Social Sciences and Languages
5	Dr. R.K.C. Jeewanthi	Senior Lecturer, Faculty of Agricultural Sciences
6	Dr. D.D. Wickramanayake	Senior Lecturer, Faculty of Agricultural Sciences
7	Dr. Hasintha Wijesekara	Senior Lecturer, Faculty of Applied Sciences
8	Dr. M.D.E.K. Gunathilaka	Senior Lecturer, Faculty of Geomatics
9	Dr. Nishamani Ranasinghe	Senior Lecturer, Faculty of Geomatics
10	Dr. P.K.G.S.S. Bandara	Senior Lecturer, Faculty of Technology
11	Ms. Gayani Dias	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)

5. GROUP 5

Criteria addressed by group 5

Quality Assurance

Table 17. Group members – Group 5

No	Name	Designation
1	Prof. H.A.Darshanee Ruwandeepika (Chairperson)	Director / Centre for Quality Assurance
2	Prof. J.M.C.K. Jayawardana	Former Director Centre for Quality Assurance, Professor, Faculty of Applied Sciences
3	Dr. (Mrs.) R.S. Sabaragamuwa	Dean / Faculty of Applied Sciences
4	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
5	Prof. W. Manoj Ariyarathne	Chairman, Strategic Management Unit, SUSL
6	Prof. K.R. Koswattage	Professor, Department of Engineering Technology / Faculty of Technology
7	Dr. Saman Koswatte	Senior Lecturer, Department of Remote Sensing and GIS / Faculty of Geomatics
8	Dr. Sampath Wahala	Senior Lecturer, Faculty of Management Studies
9	Dr. D.D. Wickramanayake	Senior Lecturer, Faculty of Agricultural Sciences
10	Dr. E.P.N. Udayakumara	Senior Lecturer, Faculty of Applied Sciences
11	Mr. A.L.C.J. Liyanage	Senior Lecturer, Faculty of Applied Sciences
12	Dr. P.D.V.M. Perera	Lecturer / Department of Microbiology, Faculty of Medicine
13	Ms. Gayani Dias, Secretary / CQA	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)

6. ADVISORY COMMITTEE

Prof J.M.C.K. Jayawardana
Professor, Faculty of Applied Sciences,
Former Director, Centre for Quality Assurance, SUSL
(jayawardanack@appsc.sab.ac.lk /jayawardanack@yahoo.com)

Prof. W.K. Athula C. Gnanapala
Professor, Faculty of Management Sciences
Dean, Faculty of Management Sciences, SUSL
(gnanapala@mgt.sab.ac.lk / dean@mgt.sab.ac.lk)

Prof. H.M.S. Priyanath
Professor, Faculty of Social Sciences and Languages, SUSL
Dean, Faculty of Graduate Studies, SUSL
(priya@ssl.sab.ac.lk / dean@fgs.sab.ac.lk)

ANNEX 2 COMPILATION OF ACTION PLAN

Compilation by: **I.** Strategic Management Plan Committee, CQA, SUSL and

II. Senate Standing Committee on Quality Assurance, SUSL

Table 18. I. Strategic Management Plan Committee, CQA, SUSL

No	Name	Designation
1	Prof. H.A.D. Ruwandeepika	Director, CQA
2	Dr. R.S. Sabaragamuwa	Dean/ Faculty of Applied Sciences (FAPS)
3	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
4	Dr. D.D. Wickramanayake	Senior Lecturer, Faculty of Agricultural Sciences
5	Dr. E.P.N. Udayakumara	Senior Lecturer, Coordinator / Faculty Quality Assurance Cell, FAPS
6	Dr. Sampath Wahala	Senior Lecturer, Coordinator / Faculty Quality Assurance Cell, Faculty of Management Sciences
7	Prof. K.R. Koswattage	Professor, Coordinator / Faculty Quality Assurance Cell, Faculty of Technology
8	Dr. Saman Koswatte	Senior Lecturer, Faculty of Geomatics
9	Dr. P.D.V.M. Perera	Lecturer, Faculty of Medicine
10	Ms. Gayani DIas	Assistant Registrar, Vice Chancellors' Office, Secretary / CQA

Table 19. II. Senate Standing Committee on Quality Assurance, SUSL

No	Name	Designation
1	Prof. Udaya Rathnayake	Chairman /Vice Chancellor
2	Prof. H.A.D. Ruwandeepika	Director / CQA
3	Prof. H.M.S. Priyanath	Dean / Faculty of Graduate Studies
4	Prof. M.M.P. Sumith	Dean / Faculty of Agricultural Sciences
5	Dr. (Mrs) R.S. Sabaragamuwa	Dean / Faculty of Applied Sciences
6	Mr. P.G. Vipula Abeyrathne	Dean / Faculty of Geomatics
7	Prof. W.K. Athula C. Gnanapala	Dean / Faculty of Management Studies
8	Prof. M.N. Wickramaratne	Dean / Faculty of Medicine
9	Dr. M.A.C.S.S. Fernando	Dean / Faculty of Social Sciences and Languages
10	Dr. A.D. Ampitiyawatta	Dean / Faculty of Technology
11	Mr. Saman Uyangoda	Registrar
12	Mrs. T.N. Neighsoorie	Librarian
13	Mr. W.A.M.P. Senadheera	Acting Bursa

14	Mr D. Jasinghe	Director / Centre for Open and Distance Learning (CODL)
15	Mr. R.L. Dangalla	Director / Centre for Computer Studies (on invitation)
16	Prof. Aruna Shantha	Director / Staff Development Centre
17	Prof. M. Esham	Coordinator/ Faculty of Graduate Studies
18	Dr. D.D. Wickramanayake	Coordinator / Faculty of Agricultural Sciences
19	Dr E.P.N. Udayakumara	Coordinator / Faculty of Applied Sciences
20	Prof. D.G. Dharmarathne	Coordinator / Quality Assurance Cell, CODL
21	Dr. M.D.E.K. Gunathilake	Coordinator / Faculty of Geomatics
22	Dr. Sampath Wahala	Coordinator / Faculty of Management Studies
23	Dr. Amal Wageesha	Coordinator / Faculty of Medicine
24	Dr. U.P. Lekamge	Coordinator / Faculty of Social Sciences and Languages
25	Prof. K.R. Koswattage	Coordinator / Faculty of Technology
26	Dr. Upali Mampitiya	External Member, SSC QA, SUSL
27	Ms. Gayani Dias	Secretary / CQA (Assistant Registrar / Vice Chancellor's Office)