



**FIRAT UNIVERSITY
INTERNAL EVALUATION REPORT**

FACULTY OF PHARMACY

Report Preparation Commission Members

Prof. Dr. Seval YILMAZ (Bařkan, sevalyilmaz@firat.edu.tr)

Assistant Prof. Harun USLU (Üye, huslu@firat.edu.tr)

Assistant Prof. Özge SOYLU ETER (Üye, oseter@firat.edu.tr)

Assistant Prof. YILDIRIM (Üye, aybeniz.yildirim@firat.edu.tr)

Assistant Prof. Zeliha KESKİN ALKAÇ (Üye, zkeskin@firat.edu.tr)

About the Fırat University Internal Evaluation Report

Fırat University carries out its quality management processes through the Fırat University Quality Coordination (FÜKAK). As the university's senior management, great importance is placed on delegation of authority and the plurality of governance. In this understanding, active support is provided for the work of the committees, and the senior management takes a proactive role in implementing the decisions made and monitoring their outcomes by operating the necessary monitoring and evaluation mechanisms.

The foundation of quality work at our university is based on the Higher Education Quality Council (YÖKAK) Main Criteria. In line with these criteria, the Unit Internal Evaluation Reports (BİDR) prepared annually by academic and administrative units are evaluated by FÜKAK, allowing the systematic monitoring of the quality development of each unit. This process enables the units to identify their strengths and areas for improvement, while also helping them to objectively analyze their current status within the framework of the relevant criteria.

The BİDRs prepared by academic and administrative units serve as an important data source for the Institutional Internal Evaluation Report (KİDR) that our university prepares annually. Through these reports, our university can make an overall assessment of its status and, in light of the obtained information, plan and monitor development processes within the scope of the main and sub-criteria of the YÖKAK evaluation process. In this cycle, the continuous improvement of quality processes and the understanding of sustainable development are supported by the PDCA (Plan-Do-Check-Act) approach.

After the annual KİDR report is completed and sent to YÖKAK, the FÜKAK experts thoroughly review the BİDRs and prepare a Unit Feedback Report (BGBR) for each unit. These feedback reports help the units see their strengths and areas for improvement on a criterion-based level and guide them in developing action plans for the next period.

With this approach, Fırat University adopts a quality, transparent, and sustainable management understanding both at the unit level and the institutional level. The goal is for our academic and administrative units to comply with national and international standards.

Points to Consider When Preparing the BIDR

Preparation Timeline

The Unit Internal Evaluation Reports (BIDR) are prepared by academic and administrative units between January 2nd and February 15th of each year. They are submitted to FUKAK through the Electronic Document Management System (EBYS). The responsibility for preparing the BIDR is not assigned to a single individual but is the duty of the unit's quality commission, with the unit manager taking the lead, involving all stakeholders in participation and collaboration. A BIDR report that is not internalized immediately stands out during field evaluations and is not well received in the evaluation process.

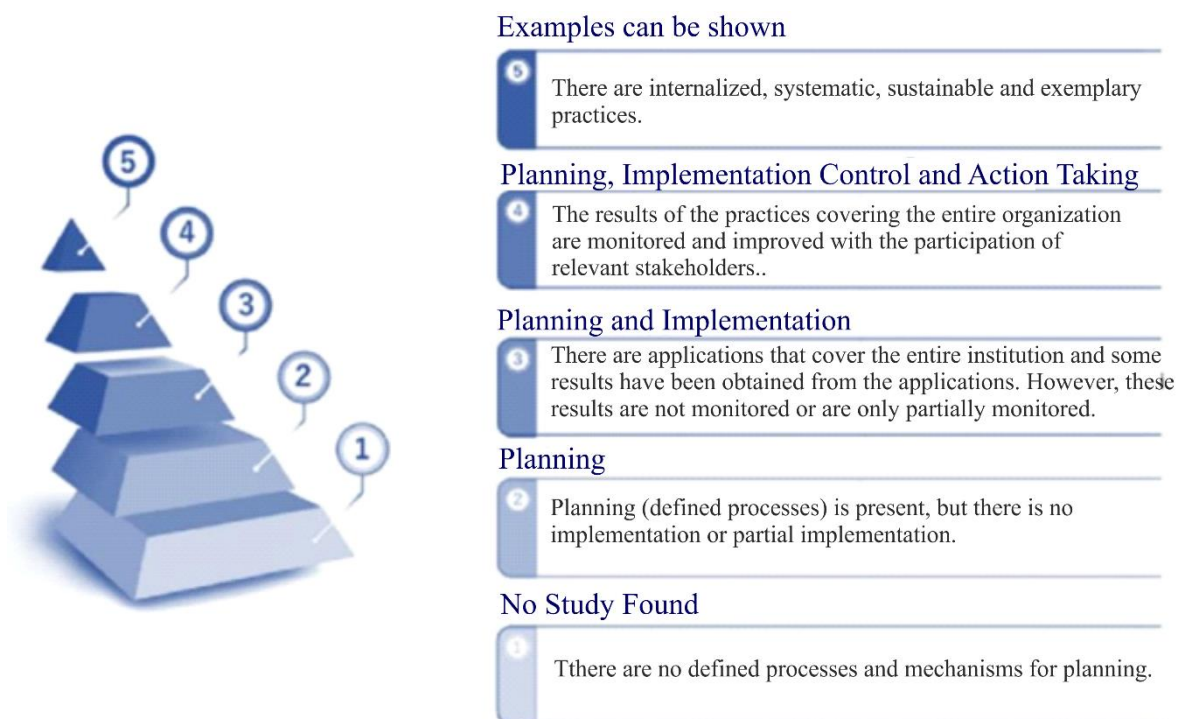
Content

The content of the Unit Internal Evaluation Reports (BIDR) is limited to the activities carried out by the units during the previous calendar year.

My Criterion Values Shape

Each criterion and sub-criterion should be evaluated independently. The evidence used for evaluation must be directly related to that specific criterion. A rubric method based on a 5-point Likert scale is used for the evaluation. In this method, you are expected to assign a value between 1 and 5 to the relevant criterion. This evaluation should be done as explained in **Figure 1**.

Figure 1. Criterion Evaluation Method



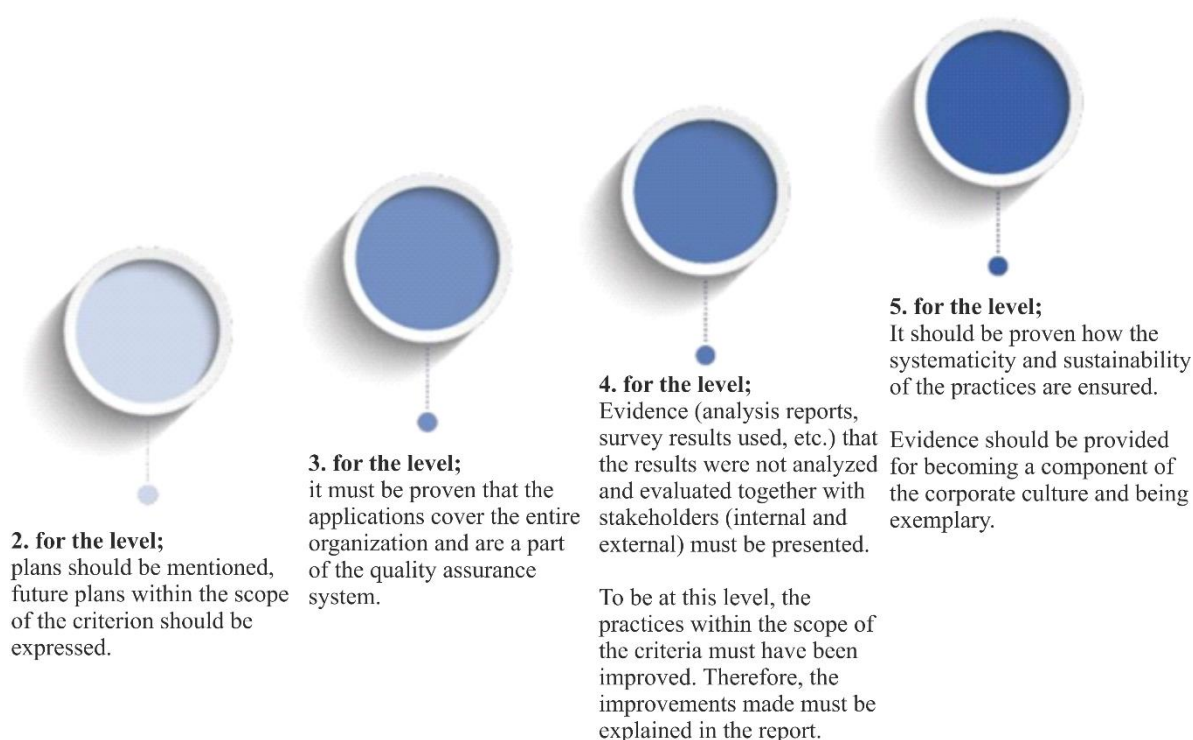
As seen in **Figure 1**, when evaluating the criterion we are considering:

- If no action has been taken, it is evaluated with 1 (one) point,
- If there is only planning, it is evaluated with 2 (two) points,
- If there is planning and implementation covering the entire unit, it is evaluated with 3 (three) points,

- If the processes of planning, implementation, post-implementation control, and taking corrective actions are being carried out, it is evaluated with 4 (four) points.
- If the process is internalized by the unit stakeholders, can be systematically sustained, and is demonstrable, it is evaluated with 5 (five) points.

The evaluation process is briefly summarized in **Figure 2**.

Figure 2. Summary of the Evaluation Process



Writing Rules

In the entire report, the following formatting guidelines should be followed:

The font should be **Times New Roman**. Headings should be **12pt** and bold. Numbering should follow the format **A.1.x.x.x**. The body text should be **10pt**. Object names (e.g., figures, tables, graphs) should be italicized and **10pt** in size above the respective table. References and citations within the text should follow the **APA 7th edition** standard. In table and figure displays, the description should be positioned above the object, aligned to the right, **10pt**, and italicized. The line spacing option for the entire text should be **0 pt before** and **0.6 pt after**.

Evidence Display

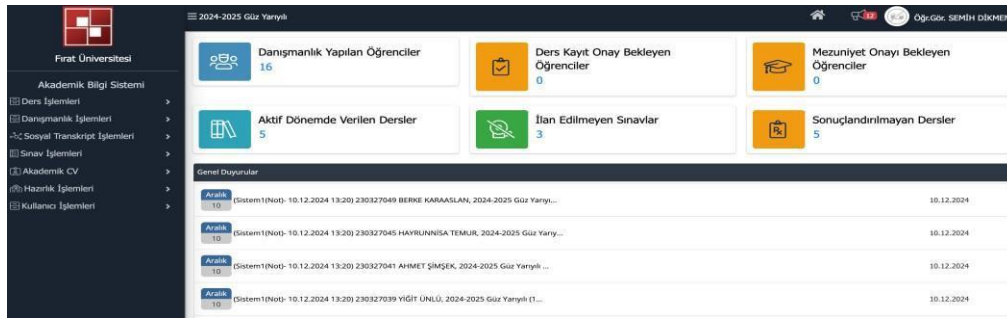
The most important part of the BIDR preparation process is the evidence presentation. The evidence should be directly related to the criterion and be verifiable. There are two types of evidence presentation: one within the text and one at the end of the criterion.

Example Notation;

B.1.1. Program Design and Approval

At our university, principles and rules have been established regarding the acquisition of competencies through various types of education, depending on the field differences (OD2). Practices are carried out in accordance with defined processes related to the design and approval of programs [1_OD3].

Figure 1. OBS Screen Output



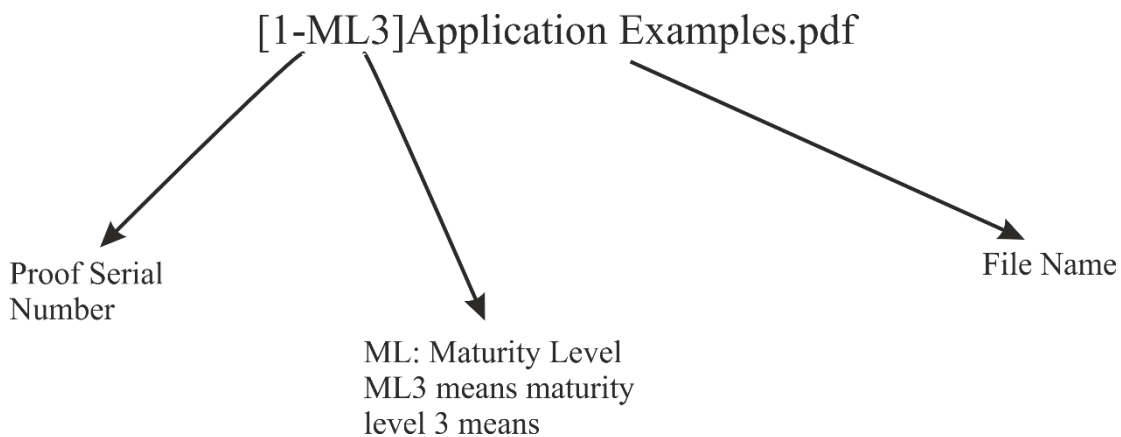
Some results are obtained from these practices, and the monitoring of these results with stakeholders is carried out systematically [2_OD4]. In this context, curriculum development activities, along with the Bologna Process, have aligned the course objectives, course learning outcomes, and program outcomes with the National Qualifications Framework for Higher Education (TYYÇ), and they have been updated by gathering feedback from relevant internal and external stakeholders [3_OD4].

Evidence:

[1-OD3]. Application Examples.pdf

[2-OD4]. Improvement Evidence.pdf

[3-OD4]. Monitoring Results.docx



CRITERIA AND EVIDENCE

A.1. The unit should have a governance model that will ensure its transformation, apply leadership approaches, establish internal quality assurance mechanisms, and internalize the quality assurance culture.

A.1.1 Governance Model and Administrative Structure

The unit's governance model has been established within the framework of legal regulations, shaped by traditions and preferences, and structured within a unitary framework. Decision-making processes, control and balance mechanisms, the independence of committees, and the representation of stakeholders have been ensured. The organizational chart, job descriptions, and workflow processes reflect reality and are published and known by stakeholders.

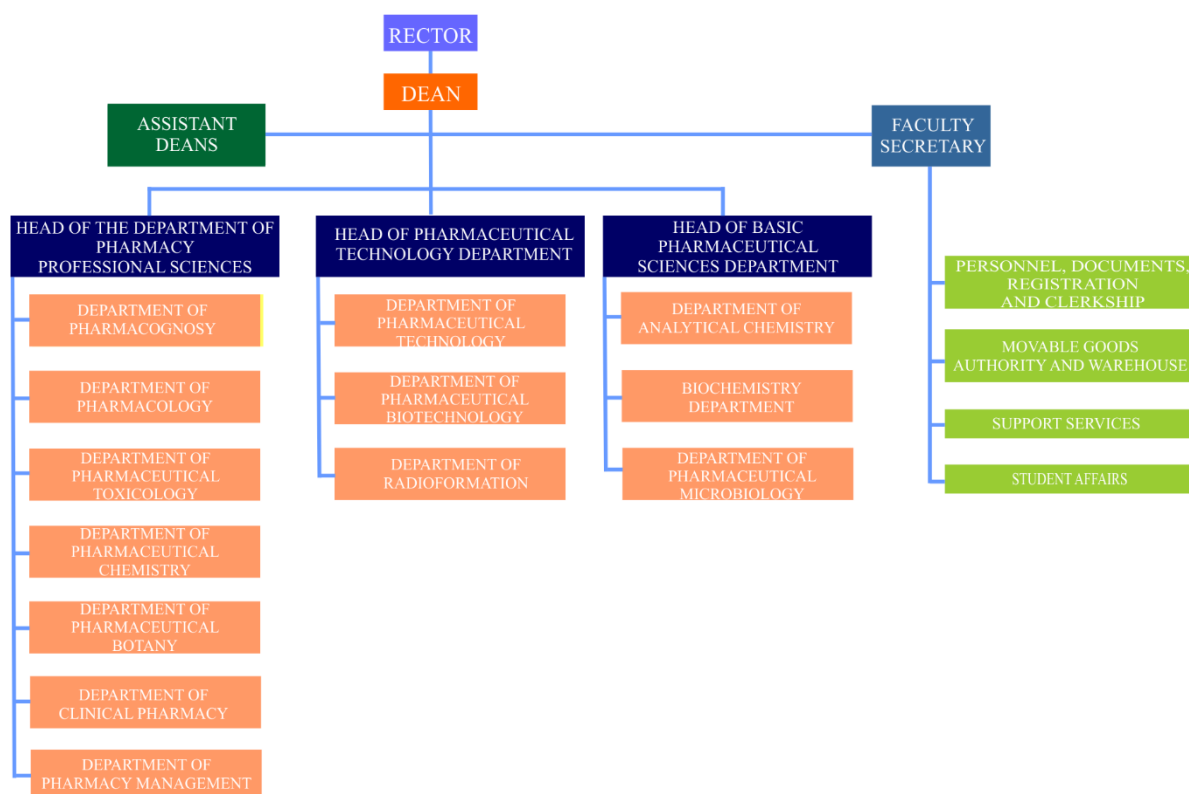
1	2	3	4	5
The unit does not have a governance model and organizational structure that is aligned with its mission and enables the achievement of its strategic goals.	A governance model and administrative structure that ensures the achievement of the unit's mission and strategic goals, and is aligned with its processes, have been established.	The unit's governance model and organizational structure operate in a way that covers the overall activities of the unit and its areas.	The practices related to the unit's governance and organizational structure are being monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Governance model and organizational chart
- Practices/evidence that demonstrate the unit's implementation of its governance and administrative policies and strategic objectives
- Evidence of monitoring and improvement related to governance and organizational structure practices
- Evidence of standard practices and regulations, as well as unique approaches and practices developed by the unit in line with its needs

The governance model of the Faculty of Pharmacy has been established within the framework of legal regulations, shaped by traditions, and structured within a unitary framework [1_OD2].

Figure 1. Faculty Organizational Chart taken from the Faculty's website.



Decision-making processes, control and balance mechanisms, the independence of committees, and the representation of stakeholders have been ensured, particularly by including the Unit Advisory Board, the 23rd Region Elazığ Pharmacists' Association, Pharmaceutical Warehouses, and Private Pharmacies. The organizational chart reflects reality and has been published and is known by stakeholders [2_OD3]. Studies regarding job descriptions and workflow processes are in the planning stage [3_OD2].

Evidence:

[1-OD2]. Faculty Council and Faculty Management Board website output.pdf
 [2-OD3]. Unit Advisory Board website output.pdf
 [3-OD2]. Medical Faculty workflow diagram.jpeg

A.1.2 Leadership

In the unit, Deans and leaders are sensitive to change and uncertainty, and are motivated and determined to develop a quality assurance system and culture. Leadership processes are managed with an agile approach, while coordination and effective communication between units have been ensured. Leaders manage strategies, delegation of authority, relationships, and unit motivation in a balanced manner, in line with the unit's values. The effectiveness of these processes is regularly evaluated and improved.

1	2	3	4	5
There is no effective leadership approach in the unit to manage the quality assurance system and support the internalization of the quality culture.	In the unit, leaders have ownership and motivation regarding the management of the quality assurance system and the internalization of its culture.	There are effective leadership practices spread throughout the unit that support the development of the quality assurance system and culture.	Leadership practices and their contribution to the development of the quality assurance system and culture are monitored, and associated improvements are made.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- **Leadership Evaluation Reports** (360-degree feedback analyses regularly conducted for managers, performance evaluation results.)
- **Training Records** (Certificates or participation documents from seminars, workshops, and training programs related to leadership, strategic planning, and quality management attended by managers.)
- **Survey and Interview Results** (Feedback surveys or one-on-one interview results collected from academic and administrative staff.)
- **Improvement Plans** (Documents related to leadership development programs created based on evaluation results or changes made in task distribution.)

The Dean of the Faculty of Pharmacy, vice deans, and the faculty secretary are working resolutely to develop the quality assurance system and culture, being sensitive to change and uncertainty. The managers of the Faculty of Pharmacy manage strategies, delegation of authority, relationships, and unit motivation in a balanced manner, in line with the values of the faculty, regularly evaluating and improving the effectiveness of processes. The Dean of the Faculty of Pharmacy regularly participates in the Council of Deans of Pharmacy Faculties [4-OD3].

Evidence:

[4-OD3]. Participation in the Council of Deans of Pharmacy Faculties webpage output.pdf

A.1.3. Unit Transformation Capacity

The unit has agile management competence that ensures its readiness for the future by considering changes in the higher education ecosystem, global trends, national goals, and stakeholder expectations. To adapt to the future, it uses approaches such as change management, benchmarking, and innovation management to transform the unit in line with its purpose, mission, and goals, while strengthening its uniqueness.

1	2	3	4	5
There is no change management in the unit.	The need for change has been determined at a maturity level in the unit.	The change management approach in the unit is spread across the entire unit and is carried out in a holistic manner.	Change management practices carried out in line with the purpose, mission, and goals are monitored, and measures are taken.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Change management model (A system or approach in the unit that plans how to adapt to changes and manage them. For example, the strategies the unit follows during crisis periods.)*
- *Change plans, roadmaps (Detailed plans prepared by the unit for changes it wants to implement in the future. For example, a step-by-step guide for transitioning to a new technology or improving a system.)*
- *Change analysis reports (Reports prepared by the unit after evaluating the changes occurring around it, such as legal regulations, student needs, or technological developments.)*
- *Future scenarios (Scenarios prepared by the unit for possible situations it may face in the future. For example, measures to be taken in case of an increase in the number of students.)*
- *Benchmarking reports (Reports in which the unit compares its processes and performance with other units. For example, comparing the employment rate of its graduates with other universities.)*
- *Innovation management system (A system showing how the unit tracks, applies, and integrates innovations into its processes. For example, digital transformation efforts.)*
- *Change team documents (Meeting minutes, task distribution documents, or work reports from teams that manage change processes.)*
- *Evidence related to standard and customized practices (Documents related to special solutions and projects developed by the unit according to its specific needs, in addition to standard procedures. For example, software or processes developed for the specific needs of a unit.)*

The Faculty of Pharmacy has agile management competence that ensures its readiness for the future by considering changes in the higher education ecosystem, global trends, national goals, and stakeholder expectations [5_OD3]. To adapt to the future, it uses approaches such as change management, benchmarking, and innovation to transform the Faculty of Pharmacy in line with its purpose, mission, and goals, while striving to strengthen its uniqueness [6_OD3] [7_OD3].

Evidence:

[5_OD3]. Faculty unit advisory board news webpage output.pdf
[6_OD3]. Faculty mission webpage output.pdf
[7_OD3]. Dean's message webpage output.pdf

A.1.4. Internal Quality Assurance Mechanisms

In the unit, processes are planned on a calendar year basis within the framework of the PDCA (Plan, Do, Check, Act) cycle, with flowcharts and responsibilities defined. Other quality cycles, which are not dependent on the calendar year, also have all stages supported by evidence, and practices are regularly evaluated. The unit has an accessible and updated quality assurance guide. The Quality Commission plays an active role in defining and improving processes, supports program accreditations, and contributes to decision-making processes by evaluating the results of activities.

1	2	3	4	5
The unit does not have a defined internal quality assurance system.	The unit's internal quality assurance processes and mechanisms have been defined.	The internal quality assurance system is implemented transparently and holistically across the entire unit.	The internal quality assurance system mechanisms are monitored and improved in collaboration with relevant stakeholders.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Quality assurance guide and process documents (The unit's guides and documents explaining the quality processes, policies, and how they operate. These documents clearly define the responsibilities of employees and how processes will be carried out.)*
- *Workflow diagrams and task descriptions (Diagrams showing who will carry out processes and in what order, along with documents that clearly define employee responsibilities. This ensures everyone knows what they need to do.)*
- *Information Management System (A system where the unit manages, shares, and tracks its processes and data digitally. For example, a platform that provides easy access to quality-related data.)*
- *Unit Risk Management Plan (A plan in which the unit identifies potential risks (e.g., financial, academic, or technical risks) it may face and explains how to address them.)*
- *Feedback methods (Tools such as surveys, meetings, or digital forms used to regularly collect opinions and suggestions from employees, students, and other stakeholders.)*
- *Stakeholder participation documents (Protocols, meeting minutes, or cooperation agreements that show how the unit collaborates with students, employees, the business world, and other relevant parties.)*
- *Annual monitoring and improvement reports (Reports from the unit on evaluations conducted annually and the improvement actions taken based on these evaluations. For example, measures taken to address shortcomings in processes.)*
- *Unique approaches and practices (Innovative solutions developed by the unit tailored to its specific needs, in addition to standard methods. For example, an application or project developed to increase student satisfaction.)*

At the Faculty of Pharmacy, all processes are planned on a calendar year basis, with responsibilities defined. Other quality cycles, which are not dependent on the calendar year, also have all stages supported by evidence, and practices are regularly evaluated [8_OD4]. The Faculty of Pharmacy's quality assurance guide is in the planning phase (OD2). The Faculty of Pharmacy Quality Commission plays an active role in defining and improving processes, supports program accreditations, and contributes to decision-making processes by evaluating the results of activities [9_OD3].

Evidence:

[8_OD4]. Faculty activity report webpage output.pdf

[9_OD3]. Internal evaluation report preparation meeting minutes output.pdf

A.1.5. Public Information and Accountability

The unit has adopted informing the public as a fundamental principle, and has designed and announced the channels and methods to be used for this purpose in an accessible manner. The unit's website provides accurate, up-to-date, and easily accessible information, supported by mechanisms. A balanced approach to unit autonomy and accountability is applied, with internal and external accountability processes being systematically carried out. These processes are executed within a specific calendar and clear responsibilities. The effectiveness of these processes is regularly evaluated with feedback received. Additionally, the unit's relationships with local governments, other universities, public institutions, civil society organizations, industry, and the local community are assessed.

1	2	3	4	5
The unit does not have mechanisms in place to inform the public and ensure accountability.	The unit has defined processes in place to inform the public in line with the principles of transparency and accountability.	The unit operates mechanisms for informing the public and ensuring accountability in line with defined processes.	The unit's mechanisms for informing the public and ensuring accountability are monitored and improved based on stakeholder feedback.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Announcement of information steps and methods (The unit clearly announces the rules and methods it has defined for informing the public and ensuring accountability, making them accessible to everyone. For example, there may be a section on a webpage explaining how these processes work.)*
- *Up-to-date and accessible web pages (The unit's website is organized with accurate and current information. Users can easily access the information they need from these pages. For example, contact details, process explanations, or event calendars are regularly updated.)*
- *Implementation of accountability processes (The unit's internal (for staff and students) and external (for the public and stakeholders) accountability processes are defined, and documents are available showing how these processes work. For example, reports, meeting minutes, or records of regularly held evaluation meetings.)*
- *Stakeholder feedback (Surveys or feedback reports measuring the opinions and satisfaction of internal and external stakeholders (such as students, staff, local community, and business world) regarding the public information and accountability processes.)*
- *Monitoring and improvement efforts: The functioning of the public information and accountability mechanisms is regularly monitored, shortcomings are identified, and actions are taken to improve them. For example, making a report easier to understand or developing a more effective communication channel.*
- *Unique approaches and practices (In addition to standard practices, the unit may develop specific methods suited to its needs. For example, organizing a local information campaign to inform the local community or holding a special accountability meeting for staff.)*

The Faculty of Pharmacy has adopted informing the public as a fundamental principle and makes its faculty website accessible for this purpose [10-OD3].

Figure 2. Current homepage image taken from the Faculty's website.



FACULTY OF PHARMACY



EN ▼

Quick Access ▼

[Home Page](#) [About Us](#) [Management](#) [Staff](#) [Departments](#) [Documents](#) [Student](#) [Contact](#) [Bologna](#)



[2024-2025 Academic Year Fall Semester Supplemental Exam Sch...](#)

>22 Jan 2025 ,13:59

[2024-2025 Academic Year Fall Semester General Exam Schedule](#)

>22 Jan 2025 ,13:58

[Seminar on "Pharmaceutical Services in Disasters and Emergen...](#)

>22 Jan 2025 ,13:58

[2024-2025 Academic Year Fall Semester Midterm Exam Schedule](#)

>22 Jan 2025 ,13:57

[Seminar on "Forensic Pharmacy"](#)

>22 Jan 2025 ,13:57

[Click to see all announcements...](#)

News from the Unit



Faculty Unit Advisory Board Convened

...

16.01.2025,13:54



A Meeting was Held with Faculty ...

18.01.2024,21:21

The Faculty of Pharmacy's website provides accurate, up-to-date, and easily accessible information, and is also maintained in English to support this [11-OD3]. All processes are carried out within a specific calendar and clear responsibilities. Additionally, the Faculty of Pharmacy is strengthening its relationships with local governments, other universities, public institutions, civil society organizations, industry, and the local community [2-OD3].

Evidence:

[10-OD3]. Turkish webpage output.pdf

[11-OD3]. English webpage output.pdf

[2-OD3]. Unit Advisory Board webpage output.pdf

A.2. Mission and Strategic Objectives

The unit should plan and implement its strategic objectives and goals in line with its policies to achieve its vision, mission, and purpose. It should monitor and evaluate the results within the scope of performance management and share them with the public.

A.2.1 Mission, Vision, and Policies

The unit's mission and vision are defined, embraced by its employees, and serve as a guide for a sustainable future. The quality assurance policy, developed with input from stakeholders, is well-known by employees and is expressed in a clear, concrete manner. The policy clearly defines the structure and functioning of the quality assurance system. Additionally, policies on education and teaching, research, community contribution, governance, and internationalization have been established, and there are tangible results reflecting these policies in practice.

1	2	3	4	5
The unit does not have defined mission, vision, and policies.	The unit has defined and unit-specific mission, vision, and policies.	The unit operates mechanisms for informing the public and ensuring accountability in line with defined processes.	Applications carried out in line with the mission, vision, and policies are monitored, evaluated with stakeholders, and measures are taken accordingly.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be considered:

- Mission and vision (Statements that outline the unit's goals and future plans, adopted by employees and stakeholders.)
- Policy documents (Documents explaining the unit's approaches in areas such as education and teaching (including distance education), research, community service, and internationalization.)
- Stakeholder participation documents (Meeting minutes, survey results, or other documents showing that stakeholders (such as students, employees, alumni) were consulted during the preparation of policy documents.)
- Holistic relationship examples (Statements and practices that explain how different areas are interconnected in the policy documents.)
- Monitoring and evaluation of policies (Reports or analyses showing that the implementation of policy documents is regularly monitored and the outcomes are evaluated.)
- Original approaches and practices (Examples of innovative and different methods developed by the unit tailored to its specific needs. For example, developing a special platform for distance education or applying a unique model in community service projects.)

The mission and vision of the Faculty of Pharmacy are defined, embraced by employees, and serve as a guide for a sustainable future [12_OD3]. The quality assurance policy has been planned with input from stakeholders (OD2). Policies on education and teaching, research, community contribution, governance, and internationalization have also been established, and there are tangible results reflecting these policies in practice [13_OD3] [14_OD3].

Evidence:

[12_OD3]. Faculty Vision Web Page Output.pdf

[13_OD3]. Anti-Drug Training by Elazığ Provincial Police Department Web Page Output.pdf

[14_OD3]. 2209-A Project Writing and Information Web Page Output.pdf

A.2.2. Strategic Goals and Objectives

The strategic plan has a culture and tradition, covering the current period with short/medium-term goals, objectives, sub-objectives, actions, their timing, prioritization, responsible parties, and financial resources. It has been prepared by gathering the opinions of all stakeholders (especially strategic stakeholders). When preparing the current strategic plan, a detailed evaluation of the previous one was conducted and used; the annual progress is tracked and discussed in relevant committees, and necessary measures are taken.

1	2	3	4	5
The unit does not have a strategic plan..	The unit has a published strategic plan.	The unit has a holistic strategic plan that is adopted by all units and known by stakeholders, along with practices that align with this plan..	The unit monitors the implemented strategic plan and evaluates it with relevant stakeholders, incorporating the findings into future plans.	İçselleştirilmiş, sistematik, sürdürülebilir ve örnek gösterilebilir uygulamalar bulunmaktadır.

Evidence to be considered:

- Documents publicly announced, containing the unit's strategic goals and objectives (strategic plan, strategy document, etc.), and the process of developing the document.
- Evidence showing the participation of internal and external stakeholders in the stages of planning, implementation, monitoring, and taking corrective actions in the unit's strategic plan.
- Evidence demonstrating the alignment of the strategic plan and goals with the United Nations Sustainable Development Goals.
- Performance reports containing the annual tracking of indicators in the strategic plan and recommendations for improvement.
- Improvement reports analyzing the results of practices, including requests, complaints, etc., from stakeholders within the scope of strategic goals and objectives.
- Evidence related to the standard practices and regulations, as well as the original approach and practices developed by the unit based on its needs.

The Strategic Plan of the Faculty of Pharmacy includes short/medium-long term goals, objectives, actions, their timelines, responsible parties, and financial resources. This plan has been prepared by obtaining the views of all stakeholders. While preparing the current strategic plan, a detailed evaluation of the previous one has been conducted and utilized; annual progress is monitored, discussed in the relevant boards, and necessary measures are taken [15_OD4]. [8_OD4].

Evidence:

[15_OD4]. 2024 Strategic Plan Table.pdf

[8_OD4]. Faculty Activity Report.pdf

A.2.2. Strategic Goals and Objectives

Performance management mechanisms within the unit are addressed with a holistic approach. These mechanisms help the unit's continuous improvement and preparation for the future in line with its strategic goals. By being supported by information systems, performance management is ensured to be accurate and reliable. The performance management process, reflecting the unit's strategic perspective, is maintained with a focus on processes and stakeholder participation. Performance indicators covering all key activities (general, key, distance education, etc.) have been defined and shared. It is defined and documented how the performance indicators are related to the internal quality assurance system. Examples of how decisions are reflected are available. The changes over the years are tracked, and the results of this monitoring are documented, with evidence showing that they have been used appropriately when needed.

1	2	3	4	5
There is no performance management within the unit.	Performance indicators and performance management mechanisms have been defined within the unit.	There are performance management practices spread across the entire unit.	The functionality of performance indicators and performance management mechanisms within the unit are monitored, and improvements are made based on the results of this monitoring.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be considered:

- Documents related to performance management procedures
- Performance indicators and key performance indicators
- Evidence showing how the performance management process works
- Performance program report
- Evidence that performance management mechanisms are monitored and improved
- Evidence related to the standard practices and regulations, as well as the original approaches and practices developed by the unit based on its needs

"The performance management mechanisms of the Faculty of Pharmacy are addressed with a holistic approach. These mechanisms are recreated each year through Google Drive file sharing with the participation of all academics, in order to reveal the academic performance of the faculty and to assist in the unit's continuous improvement and preparation for the future, in line with the unit's strategic goals [16_OD3]. By being supported by information systems, performance management is ensured to be accurate and reliable. The performance management process, reflecting the unit's strategic perspective, is maintained with a focus on processes and stakeholder participation. The changes in academic activities over the years are tracked, and since the academics' YÖKSİS pages are up to date, the academics' pages on the Fırat Academic Information System also provide up-to-date evidence [17_OD3].

Evidence:

[16_OD3].Faculty Academic Activity List Output.pdf

[17_OD3]. Academic's Fırat ABS Web Page Output.pdf

A.3. Management Systems

The unit must have a system in place to manage its financial, human, and informational resources, as well as its processes, in order to secure both the qualitative and quantitative achievement of its strategic objectives.

****Note: The Management Systems (A.3.1) criterion will be filled out by the Digital Transformation and Software Office Coordination.**

A.3.1. Management Systems

Birimin önemli etkinlikleri ve süreçlerine ilişkin veriler toplanmakta, analiz edilmekte, raporlanmakta ve stratejik yönetim için kullanılmaktadır. Akademik ve idari birimlerin kullandıkları Bilgi Yönetim Sistemi entegredir ve kalite yönetim süreçlerini beslemektedir. Bilgi Yönetim Sistemi güvenliği, gizliliği ve güvenilirliği sağlanmıştır.

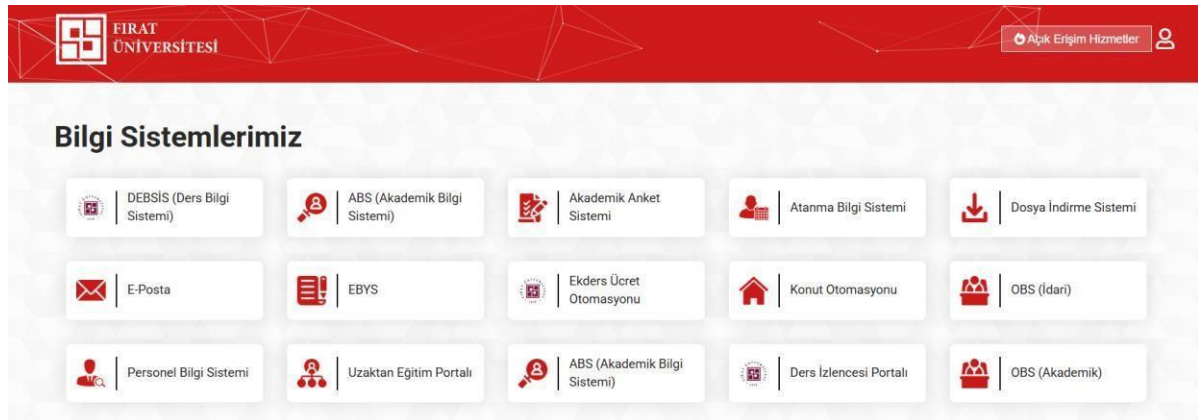
1	2	3	4	5
There is no information management system within the unit.	Information management systems have been created within the unit to support the acquisition, storage, usage, processing, and evaluation of unit-specific information.	An integrated information management system is operated within the unit to support key processes (education and teaching, research and development, community contribution, quality assurance).	The integrated information management system within the unit is being monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be considered:

- Evidence related to the Information Management System and its functions
- Processes and practices related to the processing of personal data
- Evidence related to the monitoring and improvement of the Information Management System
- Processes and practices aimed at ensuring information security and reliability
- Risks, penetration tests, and related improvements for cybersecurity threats
- Evidence related to the standard practices and regulations, as well as the original approach and practices developed by the unit based on its needs

Data related to the important activities and processes of the Faculty of Pharmacy are collected, reported, and used for strategic management. The Information Management Systems used by academic and administrative units are integrated and support the quality management processes [18-OD3].

Figure 3. Image taken from our university's information systems website.



EBYS is used to ensure the security, confidentiality, and reliability of the Information Management System [19-OD3].

Evidence:

[18-OD3]. Firat Integrated Management System web page
output.pdf

[19-OD3]. EBYS web page output.pdf

A.3.2. Human Resources Management

There are rules and processes related to human resources management. These processes, which are carried out transparently, are known by everyone within the unit. Education and competence are the primary criteria, and increasing competencies is the main goal. Methods and mechanisms developed to identify and track employee (academic-administrative) satisfaction, complaints, and suggestions are being applied, and improvements are made by evaluating the results.

1	2	3	4	5
There are no defined processes related to human resources management within the unit.	There are defined processes related to human resources management that are aligned with the unit's strategic goals.	Across the unit, practices related to human resources management are carried out in accordance with defined processes.	Human resources management practices within the unit are being monitored and improved through evaluation with relevant internal stakeholders.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be considered:

- *Human resources policy and objectives, and related practices (Competence, recruitment, in-service training, incentives and rewards, etc.)*
- *Employee (academic and administrative) satisfaction surveys, implementation methodology, and survey results*
- *Evidence of monitoring and improvement of human resources management practices*
- *Evidence related to the standard practices and regulations, as well as the original approach and practices developed by the unit based on its needs*

Rules and processes related to human resources management are in the planning phase (OD2). Increasing competencies is the main goal. Methods and mechanisms developed to identify and track the satisfaction, complaints, and suggestions of academic and administrative staff are being applied, and improvements are made by evaluating the results [20_OD4].

Evidence:

[20_OD4]. Survey result output showing the satisfaction level of academic and administrative staff..pdf

A.3.3. Financial Management

Basic income and expenditure items have been defined and are monitored over the years. Total Current Budget (income) = State education contribution (all income from the central budget that is not related to research and development activities) + student income (all income from students: first and second education, non-thesis master's, summer school, services/fees, meals/accommodation fees, etc.) + research income (income from the central budget from the state + national allocation - non-competitive projects-) + national competitive research supports + international research supports [special accounts, revolving funds, contributions from foundations, or other accounted sources] + community contribution income (medical, dental, etc.) faculty health service income [revolving funds or other accounted sources] + engineering, architecture, etc. faculties' income from knowledge and technology transfer/projects/applications [revolving funds or other accounted sources] + adult education/lifelong learning income + rental income + laboratory/experiment/measurement income, etc. [special accounts, revolving funds, contributions from foundations, or other accounted sources] + donations (resources transferred to the university from non-state sources, either conditional or unconditional) are monitored in detail and are associated with the unit's profile.

1	2	3	4	5
There are no defined processes related to the management of financial resources within the unit.	There are defined processes related to the management of financial resources within the unit, aligned with strategic goals.	Practices related to the management of financial resources across the unit are carried out in accordance with defined processes.	Financial resource management processes within the unit are being monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be considered:

- *Defined processes and practices related to the management of financial resources (Resource allocation, effective and efficient use of resources, resource diversification)*
- *Documents showing the alignment of financial resource planning, usage, and monitoring practices with the unit's strategic plan*
- *Monitoring reports and analyses related to the management of financial resources and evidence of improvements*
- *Evidence related to the standard practices and regulations, as well as the original approach and practices developed by the unit based on its needs*

The basic income and expenditure items of the Faculty of Pharmacy have been defined and are monitored over the years since the establishment of the faculty. The budget information allocated to our faculty and how this allocation is distributed is shared annually and updated on our website as part of our annual activity reports [21_OD3].

Evidence:

[21_OD3]. Web page output related to the financial information section in the activity report.pdf

A.3.4. Process Management

Processes and subprocesses (including distance education) for all activities are defined. The responsibilities, workflow, management, and ownership in the processes are written and internalized by the unit. There is evidence that process management is successful. A continuous process improvement cycle has been established.

1	2	3	4	5
Processes and subprocesses (including distance education) for all activities are defined. The responsibilities, workflow, management, and ownership in the processes are written and internalized by the unit. There is evidence that process management is successful. A continuous process improvement cycle has been established.	Processes and subprocesses related to education and teaching, research and development, community contribution, and management systems have been defined within the unit.	Defined processes are being managed across the unit.	Process management mechanisms are being monitored within the unit and are being evaluated and improved in collaboration with relevant stakeholders.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Process management model and/or Process Management Handbook*
- *Process Guides and Process Responsible Training Documents*
- *Process management practices (including distance education)*
- *Evidence of stakeholder participation*
- *Evidence of monitoring and improving process management mechanisms*
- *Evidence related to the standard practices and regulations, as well as the original approach and practices developed by the unit based on its needs*

The processes and subprocesses (including distance education) for all activities of the Faculty of Pharmacy, including the responsibilities, workflow, management, and ownership, have not yet been defined (OD1). A plan is being made to benefit from the faculties of our university, especially the Faculty of Medicine, in this regard.

Evidence:

A.4. Stakeholder Participation

The unit should establish and manage the necessary systems to collect feedback from its internal and external stakeholders, respond to them, and use them in its decision-making processes and strategies.

A.4.1. Internal and External Stakeholder Participation

Mechanisms for the participation of internal and external stakeholders in decision-making, governance, and improvement processes have been defined. The effectiveness, unit-specific nature, and continuity of the participation are being examined. Application examples, particularly the participation and effectiveness of students and external stakeholders, exist in the internal quality assurance system. The results are evaluated, and associated improvements are implemented.

1	2	3	4	5
There are no mechanisms in place to ensure stakeholder participation in the unit's internal quality assurance system.	In the unit, there are plans to ensure stakeholder participation in the PDCA layers of the quality assurance, education and teaching, research and development, societal contribution, management system, and internationalization processes.	There are mechanisms spread across the unit to ensure stakeholder participation in the PDCA layers of all processes.	The functioning of stakeholder participation mechanisms is monitored, and associated improvements are implemented.	There are no mechanisms in place to ensure stakeholder participation in the unit's internal quality assurance system.

Evidence to be Considered:

- Evidence of the internal and external stakeholder lists created specifically for the unit's processes and the prioritization of stakeholders.
- Data collection tools and methods used in the process of gathering stakeholder opinions (surveys, focus group meetings, workshops, information management systems, etc.).
- Documents showing that stakeholder participation is ensured in decision-making processes.
- Evidence of monitoring and improving the functioning of stakeholder participation mechanisms.
- Evidence of the unit's standard practices, regulations, and its unique approaches and applications developed according to the unit's needs.

It has been determined that the internal and external stakeholders of the Faculty of Pharmacy participate in decision-making and improvement processes. The effectiveness and continuity of the participation are ensured, and every year, internal and external stakeholders meet at least once. In the internal quality assurance system, particularly external stakeholder participation and effectiveness are ensured, and the results are evaluated, with improvements being made. Every year, a white coat ceremony for students is organized with the support and contributions of the 23rd Region Elazığ Chamber of Pharmacists, and Pharmacy Week celebrations are held on May 14th. [5_OD4] [22_OD4] [23_OD4] [24_OD4].

Kanıtlar:

[5_OD3].Faculty unit advisory board project activities and internship news webpage output.pdf
[22_OD3].Student promotional visit to Elazığ Fethi Sekin City Hospital webpage output.pdf
[23_OD3].White coat ceremony news webpage output.pdf
[24_OD3].May 14th Pharmacy Day Program webpage output.pdf

A.4.2. Student Feedback

Student opinions (on courses, course instructors, degree programs, services, general satisfaction levels, etc.) are systematically collected through various methods, effectively utilized, and the results are shared. The methods used ensure that the data collected is valid and reliable, and that the data is consistent and representative. There are various channels for student complaints and/or suggestions, which are well-known among students, and it is monitored that these channels operate fairly and effectively.

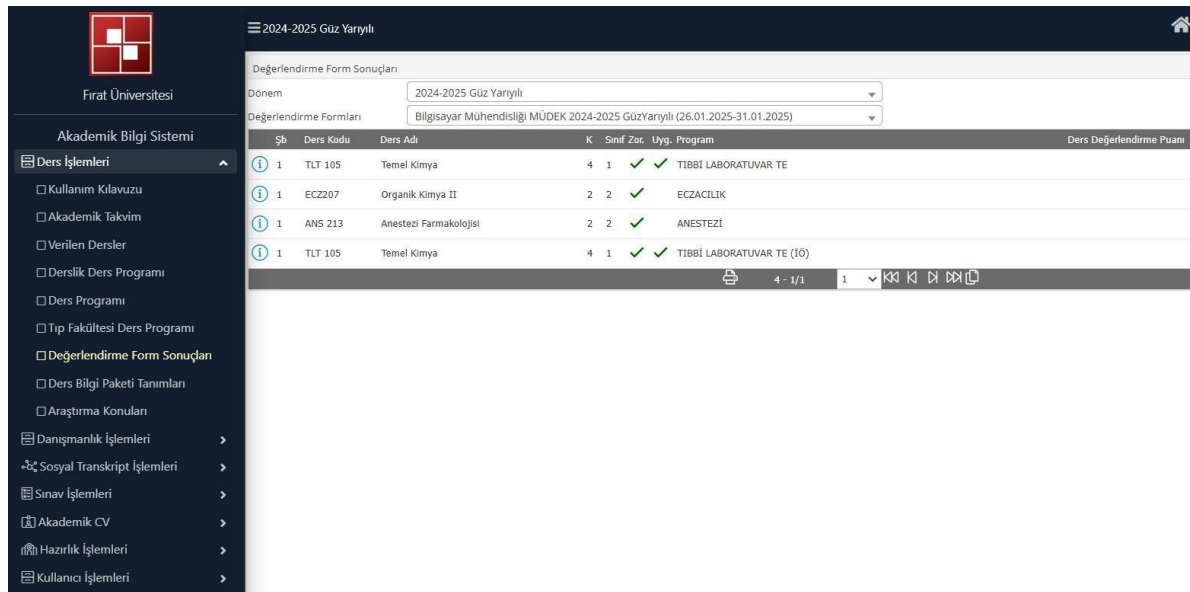
1	2	3	4	5
There are no mechanisms for collecting student feedback within the unit.	Principles and rules for collecting student feedback (such as on courses, course instructors, programs, student workload, etc.) regarding the teaching processes have been established within the unit.	Student feedback is collected at the end of each semester or academic year across all programs.	In all programs, the practices for collecting student feedback are monitored and improved based on student participation. Feedback results are reflected in the decision-making processes.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- Principles and rules for obtaining student feedback
- Evidence of defined student feedback mechanisms, including types, methods, and diversity (including distance/hybrid education)
- Implemented improvements based on student feedback
- Examples of student participation in decision-making mechanisms
- Evidence of monitoring and improving the student feedback mechanism
- Evidence of standard practices and regulations, as well as the unit's own approach and practices developed in line with its needs

Student feedback (such as on courses, course instructors, degree programs, services, and overall satisfaction levels, etc.) is systematically gathered through various methods, effectively used, and the results are shared. The methods used are valid and reliable, and data consistency is ensured. There are various channels for student complaints and/or suggestions, which are known to students, and it is monitored to ensure they function fairly and effectively [25-OD3].

Figure 4. Screenshot taken from the Evaluation Form Results page of our university's student information system.



Sıf	Ders Kodu	Ders Adı	K	Sınıf Zor.	Uyg. Program	Ders Değerlendirme Puanı
1	TLT 105	Temel Kimya	4	1	TIBBİ LABORATUVAR TE	
1	ECZ207	Organik Kimya II	2	2	ECZACILIK	
1	ANS 213	Anestezi Farmakolojisi	2	2	ANESTEZİ	
1	TLT 105	Temel Kimya	4	1	TIBBİ LABORATUVAR TE (10)	

Evidence:

[25-OD3]. Faculty Student Feedback Form Output.pdf

A.4.3. Alumni relations management

Employment data such as graduates' job placement, continuation of education, income levels, and employer/graduates' satisfaction are systematically and comprehensively collected, evaluated, and used in the unit's development strategies.

1	2	3	4	5
The unit does not have an alumni tracking system.	A planning for an alumni tracking system is in place to assess whether the goals and objectives of the programs have been achieved.	The programs in the unit generally have alumni tracking system practices.	Alumni tracking system practices are monitored, and updates are made to the programs based on needs.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *The characteristics of the alumni tracking system*
- *The level of satisfaction regarding the qualifications held by the graduates and the achievement of the program's objectives and goals*
- *Update activities carried out in the programs within the alumni tracking system*
- *Alumni feedback*
- *Evidence regarding standard practices, regulations, and the unit's original approach and practices developed according to its needs*

Since the Faculty of Pharmacy has been admitting students for 2 years, there are no graduates yet, and no such work has been conducted in this regard (OD1).

Evidence:

****Note: The three criteria for internationalization will only be filled out by the International Relations Unit Coordination.**

A.5. Internationalization

The unit should manage its processes in line with its internationalization strategy and objectives, establish its organizational structure, and periodically monitor and evaluate the results.

A.5.1. Management of Internationalization Processes

The management of internationalization processes and organizational structure has been internalized. It is aligned with the unit's internationalization policy. The operation and effectiveness of the management and organizational structure are being examined.

1	2	3	4	5
The unit does not have a managerial and organizational structure related to its internationalization processes.	The unit has plans related to the management and organizational structure of its internationalization processes.	The organizational structure for the management of internationalization processes in the unit has been completed and operates in a transparent, inclusive, and participatory manner.	The administrative and organizational structure of the internationalization processes is being monitored and improved.	The unit does not have an administrative and organizational structure for its internationalization processes.

Evidence to be Considered:

- *Management and organizational structure of internationalization processes*
- *Evidence of the implementation of internationalization process management*
- *Evidence of monitoring and improvement of management and organizational structure*
- *Evidence of the unit's development of unique approaches and practices, in addition to standard practices and regulations, based on its needs.*

Bu bölüme açıklayıcı metin yazılmalı, Time News Roman 10pt, Başlıklar 12 pt ve kalın olmalıdır.

Evidence:

Kanıtlar buraya yazılmalı, kanıt gösterim şekline bağlı kalınmalı 10pt Time News Roman olmalı

A.5.2. Internationalization Resources

The resources allocated for internationalization (financial, physical, human resources) have been identified, shared, and institutionalized. These resources are monitored and evaluated in terms of both quantity and quality.

1	2	3	4	5
The unit does not have sufficient resources to sustain its internationalization activities.	The distribution of internationalization resources within the unit is monitored and improved.	The unit does not have sufficient resources to sustain its internationalization activities.	The unit has plans to create physical, technical, and financial resources of appropriate quantity and quality to sustain its internationalization activities.	The unit's internationalization resources are managed with inter-unit balance in mind.

Evidence to be Considered:

- *Evidence of planning for resources to sustain the unit's internationalization activities.*
- *Documents related to the management of resources allocated for international activities (e.g., usage rates of Erasmus budgets, management of EU project budgets, and management of resources within bilateral agreements).*
- *Evidence of monitoring and improving the distribution of internationalization resources.*
- *Evidence of the unit's unique approaches and practices developed in accordance with its needs, in addition to standard practices and regulations.*

Bu bölüme açıklayıcı metin yazılmalı, Time News Roman 10pt, Başlıklar 12 pt ve kalın olmalıdır.

Evidence:

Kanıtlar buraya yazılmalı, kanıt gösterim şekline bağlı kalınmalı 10pt Time News Roman olmalı

A.5.3. Internationalization Performance

The internationalization performance is being monitored. The mechanisms and processes for monitoring are established, sustainable, and there is evidence of improvement steps.

1	2	3	4	5
There is no internationalization activity in the unit.	There are plans for activities in line with the internationalization policy.	There are internationalization activities spread across the entire unit.	Internationalization activities are being monitored and improved within the unit.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Performance indicators related to the strategic plan and internationalization policy*
- *Internationalization activities (Meetings organized internationally, programs participated in, activities within the scope of protocols, etc.)*
- *Mechanisms established to monitor whether internationalization goals have been achieved*
- *Annual self-assessment reports on internationalization processes and improvement efforts*
- *Evidence related to standard practices and regulations as well as the unit's original approaches and practices developed according to its needs*

Bu bölüme açıklayıcı metin yazılmalı, Time News Roman 10pt, Başlıklar 12 pt ve kalın olmalıdır.

Evidence:

Kanıtlar buraya yazılmalı, kanıt gösterim şekline bağlı kalınmalı 10pt Time News Roman olmalı

B.1. Program Design, Evaluation, and Update

The unit should design its academic programs in accordance with the Turkish Higher Education Qualifications Framework, aligning them with teaching objectives and learning outcomes. It should periodically evaluate and update the programs to ensure they meet the needs of students and society.

B.1.1. Program Design and Approval

The program objectives and learning outcomes (gains) have been established, their alignment with the Turkish Higher Education Qualifications Framework (TYÇ) has been specified, and they have been publicly announced. When determining program qualifications, the mission and vision of the unit have been taken into account. If course information packages exist, the national core program and any applicable standards (such as accreditation criteria) have been considered. The expression of the learning outcomes clearly indicates the expected cognitive, affective, and psychomotor levels. A plan has been made for how to monitor the achievement of program outcomes, and the methods and process for evaluating common (generic) outcomes of the unit are specified in detail. Department-specific principles and rules exist for the structuring of learning outcomes and the necessary teaching processes. The actions through which the qualifications can be achieved at the program level (qualification-course-teaching method matrices) have been determined. It is defined how qualifications can be achieved in different educational modes (face-to-face, blended, distance learning) according to the field differences. In the design of the programs, physical and technological possibilities (access, social distancing, etc.) are taken into account.

1	2	3	4	5
The processes for the design and approval of programs have not been defined within the unit.	Within the unit, there are defined processes related to the design and approval of programs, including principles, methods, alignment with the TYÇ, and stakeholder participation.	In accordance with the defined processes, programs that have been designed and approved within the unit are being conducted in accordance with the program objectives and learning outcomes.	The design and approval processes of the programs are systematically monitored, evaluated in collaboration with relevant stakeholders, and improved.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- Documents showing the defined processes (documents such as handbooks, guidelines, procedures, and regulations showing the defined processes used for program design and approval in alignment with the education policy).
- Proof of managerial and organizational structure (evidence showing how the program design and approval processes are managed and organized, such as committees, process owners, and process flow diagrams).
- Proof of alignment with the TYÇ (documents showing that the program objectives and outcomes are aligned with the Turkish Qualifications Framework (TYÇ), such as course programs and current course syllabi).
- Proof of distance and blended learning applications (evidence documenting that the department's requests for distance learning have been taken into consideration and that different applications have been developed).
- Stakeholder participation (documents showing the participation of stakeholders such as students, graduates, and employers in the program design processes).
- Monitoring and improvement of the process (evidence documenting that program design and approval processes are monitored, and improvements made according to these processes).
- Innovative approaches and applications (documents related to innovative methods and applications developed outside of standard practices, specific to the program's needs).

The objectives and learning outcomes (program qualifications) of the Pharmacy program have been created, linked to the TYÇ (Turkish Qualifications Framework), and published in the Fırat University Bologna Information System [OD2]. The course syllabi of the program are planned and implemented considering the principles of Pharmacy Education Standardization and the Core Curriculum Program [26_OD3]. Since the Pharmacy Faculty's teaching program is being taught for the first time, it is monitored by the Faculty Education Commission, and course syllabi are continuously reviewed and revised [27_OD4]. However, there has not yet been a plan developed regarding how to track the achievement of program outcomes.

Evidence:

[26_OD3]. Pharmacy Faculty Course Schedule.pdf
[27_OD4]. Faculty Education Commission Decision

B.1.2. Program's Course Distribution Balance

The principles, rules, and methods regarding the distribution of courses are defined. In course distribution, the expertise areas and workloads of the teaching staff are taken into account, and the distribution is determined in a participatory manner. The structure of the curriculum takes into consideration the balance between compulsory-elective courses and field-specific and non-field courses, providing opportunities to explore cultural depth and different disciplines. The number of courses and weekly course hours are arranged in a way that allows students to allocate time for non-academic activities as well. The relevance and functionality of the course syllabi developed in this context are monitored, and necessary improvements are made.

1	2	3	4	5
The principles and methods regarding course distribution have not been defined.	Regarding course distribution, there are defined processes that include principles and methods related to the expertise areas of teaching staff, field/professional knowledge/general culture, the balance of compulsory-elective courses, opportunities to gain cultural depth, and exposure to different disciplines.	Applications are in place across the unit in accordance with defined processes regarding course distribution balance.	The balance of course distribution in programs is monitored and improved.	There are integrated, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Course Distribution Principles and Evidence (Supporting documents for the established principles and methods related to course distribution.)*
- *Monitoring of Course Distribution Balance (Evidence showing the balance of course distribution in the published course syllabi.)*
- *Decisions and Approval Documents (Official documents related to processes such as decisions of the education committee, board decisions, etc.)*
- *Monitoring and Improvement of Course Distribution (Documents showing the monitoring of course distribution balance and the improvements made in this regard.)*
- *Original Approaches and Practices (Evidence of original methods and practices developed by the unit in line with its specific needs, in addition to standard practices.)*

The rules for the distribution of courses in the Pharmacy program have been defined. Each department is responsible for the courses it offers to achieve the program's qualifications. For other common courses, a suitable expert faculty member is assigned, and balance is maintained in the workload distribution [28_OD3]. The course distribution is renewed for each academic term using a participatory approach based on the faculty's needs and the voluntary principles of academic staff [29_OD4]. The curriculum of the Pharmacy Bachelor's program is supported by elective courses that the students can take in addition to their mandatory courses each semester [24_OD3]. The number of courses and the placement of total course hours in the weekly schedule are organized by considering effective time management principles, ensuring that students also have time for social activities [30_OD4]. Furthermore, these times are also used to organize extracurricular activities for students (seminars, field trips, etc.).

Evidence:

[28_OD3]. Faculty Board Decision for the 2024-2025 Fall Semester Course Schedule
 [29_OD4]. Academic Council Meeting Decision for the 2024-2025 Fall Semester
 [26_OD3]. Pharmacy Faculty Course Schedule.pdf
 [30_OD4]. 2024-2025 Fall Semester Course Schedules.pdf

B.1.3. Alignment of Course Outcomes with Program Outcomes

The learning outcomes of the courses (including blended and distance education) have been defined, and a mapping of course outcomes with program outcomes has been established and published. The way the outcomes are expressed clearly indicates the intended cognitive, affective, and psychomotor levels. A plan has been made on how the achievement of the course learning outcomes will be monitored, particularly detailing the methods and processes for examining non-disciplinary (generic) outcomes.

1	2	3	4	5
Course outcomes have not been mapped with program outcomes.	Defined processes are in place, which include principles, methods, and classifications for creating course outcomes and aligning them with program outcomes.	The alignment of course outcomes with program outcomes is monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices.	Course outcomes have been aligned with program outcomes across all programs and are shared with course syllabi.

Evidence to be Considered:

- *Evaluation Processes of Course Outcomes and Program Outputs*
(Guidelines and planning documents that ensure the evaluation of course outcomes, achievement of curriculum learning objectives, and alignment with program outcomes.)
- *Correlation of Program Outcomes and Course Outcomes*
(Evidence showing how program outcomes are correlated with course outcomes.)
- *Courses Taken Outside the Program*
(Evidence documenting the alignment of courses taken outside the program, whether in-person or online, with program outcomes.)
- *Monitoring and Improvement of Alignment*
(Documents demonstrating the processes and practices used to monitor and improve the alignment of course outcomes with program outcomes.)
- *Innovative Approaches and Applications*
(Evidence of innovative methods and applications developed by the unit, in addition to standard practices, to meet its needs.)

The learning outcomes of the courses in the Faculty of Pharmacy curriculum have been defined, their contribution to the program outcomes has been aligned on a scale, and they have been published in the Firat University Bologna Information System [OD2] [31_OD3].
The planning for monitoring the achievement of course learning outcomes has been left to the evaluation of the teaching staff.

Evidence:

[31_OD3]. Pharmacy Faculty Course-Program Competency Relationship Table.xlsx

B.1.4. Course Design Based on Student Workload

The ECTS value for all courses is shared through the website and verified by tracking the student workload. Internship and practical learning opportunities related to the profession are available and evaluated within the scope of sufficient student workload and credit. The quality of the implemented practices is being examined. The variations arising from distance education are also considered in the design based on student workload.

1	2	3	4	5
Courses have not been designed based on student workload.	Defined processes are in place that include principles and methods related to how student workload will be calculated, covering aspects such as internships, professional practice, and mobility.	There are internalized, systematic, sustainable, and exemplary practices.	Courses have been designed, announced, and implemented in accordance with student workload.	In the programs, student workload is monitored, and course designs are updated accordingly.

Evidence to be Considered:

- *AKTS Course Information Packages* (Course information packages in accordance with the key principles in the 2015 ECTS Users' Guide, including for distance and blended learning programs.)
- *Student Workload Credits* (Evidence showing that student workload credits are defined for activities such as professional practices, exchange programs, internships, and projects.)
- *Credit Transfer and Recognition Processes* (Documents that evidence defined processes for the transfer and recognition of workload-based credits.)
- *Student Participation* (Documents and mechanisms that show student participation in determining the student workload in programs.)
- *Diploma Supplement* (Documents regarding the diploma supplement practices for the programs.)
- *ECTS Tracking* (Evidence showing the tracking of the course ECTS credits and calculation tables.)
- *ECTS Calculation and Feedback* (Evidence showing that workload-based credits are updated based on feedback, including ECTS calculation tables, surveys conducted with teaching staff and students.)
- *Innovative Approaches and Practices* (Evidence of original methods and practices developed according to the unit's needs in addition to standard practices.)

All theoretical, practical, laboratory hours, and ECTS credits of the courses in the Faculty of Pharmacy curriculum are shared via the Faculty's official website and the Bologna Information System [OD2]. Calculations regarding how the ECTS credits of the courses are determined are maintained and continuously tracked in accordance with revisions in course content [32-OD3].

The curriculum includes a high proportion of laboratory courses, and there are also summer internships and in-term internship obligations. All compulsory and elective theoretical courses, laboratory courses, and internships are distributed across terms with sufficient student workload and ECTS calculations.

Evidence:

[32-OD3]. Sample ECTS Calculation Table - Pharmacy 1st Year.xlsx

B.1.5. Monitoring and Updating of Programs

For each program and course (whether face-to-face, distance, blended, or open), the monitoring of program objectives and learning outcomes is carried out as planned. The functioning and results of this process are evaluated together with stakeholders. Statistical indicators related to education and teaching (such as the number of courses offered each semester, student numbers, success rates, feedback results, course diversity, lab applications, balance between undergraduate/graduate programs, dropout rates/reasons, etc.) are monitored periodically and systematically, discussed, evaluated, compared, and ongoing improvements in quality education are maintained. There is planning, encouragement, and implementation for program accreditation; the unit's accreditation strategy is defined and its results are discussed. The benefits of accreditation and its contribution to the internal quality assurance system are evaluated.

1	2	3	4	5
There is no mechanism in place for monitoring and updating program outcomes.	A period, principles, rules, and indicators have been established for the monitoring and updating of program outcomes.	Mechanisms for monitoring and updating program outcomes are being implemented across the programs.	Program outcomes are monitored through these mechanisms and updated with input from relevant stakeholders.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Monitoring and Updating Processes* (Principles, rules, indicators, plans, and practices related to the monitoring and updating of programs at the end of each year and throughout the program duration).
- *Mechanisms* (Mechanisms established by the unit to update its programs in line with its mission, vision, and goals).
- *Annual Self-Assessment Reports* (Annual self-assessment reports of programs, especially evaluations made regarding program outcomes).
- *Monitoring Systems* (Processes such as information management systems that track whether program outcomes are being achieved).
- *Improvement Works* (Improvements made based on the monitoring results, either annually or throughout the program duration).
- *Stakeholder Information* (Practices where stakeholders are informed about the improvements and changes made).
- *Feedback* (Feedback from stakeholders such as students, alumni, and employers regarding whether the program's objectives have been achieved).
- *Sustainable Teaching Models* (Evidence of sustainable teaching models developed to continue the program in case of extraordinary situations, such as natural disasters).
- *Original Approaches and Practices* (Documents related to original methods and practices developed by the unit based on its needs, beyond standard practices).

The monitoring of program goals and learning outcomes for the pharmacy program courses is carried out at the end of each academic semester by checking the course success status through the Student Information System. Additionally, the development of program outcomes is supported by extracurricular activities such as seminars, training, and educational trips, alongside theoretical courses [33_OD2]. However, a plan for monitoring the achievement of program outcomes has not been established yet.

Through the Faculty Unit Advisory Board meetings, external stakeholders are brought together to evaluate the activities carried out and the planned goals for each year (OD3).

Evidence:

[33_OD2]. Pharmacy Faculty 2024 Activity Report.pdf

B.1.6. Management of Education and Teaching Processes

The unit has an organizational structure (university education and teaching commission, learning and teaching center, etc.), information management system, and specialized human resources to manage education and teaching processes holistically. Education and teaching processes are carried out under the coordination of upper management, and responsibilities and duties related to these processes are defined.

Principles, procedures, and a calendar for the design, implementation, evaluation, and updating of education and teaching programs are determined throughout the unit.

The alignment of learning outcomes, curriculum, delivery method (face-to-face, distance, blended, open), teaching methods, and assessment and evaluation are coordinated and followed by upper management.

1	2	3	4	5
There is no system in the unit to manage education and teaching processes holistically.	The unit has systems, principles, and rules to manage education and teaching processes holistically.	Education and teaching processes are managed in accordance with established principles and rules throughout the unit.	Applications related to the education and teaching management system are monitored, and improvements are made based on the results of the monitoring.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Organizational Structure and Workflow Diagrams: (Evidence of the organizational structure and workflow diagrams related to the management of education and teaching processes.)*
- *Principles, Rules, and Calendar: (Principles, rules, and academic calendar related to the management of education, teaching, assessment, and evaluation processes.)*
- *Information Management System: (The information management system and applications used in the management of education and teaching processes.)*
- *Monitoring and Improvement Evidence: (Documents and applications related to monitoring and improving education and teaching processes.)*
- *Evaluation and Feedback Reports: (Evaluation reports on monitoring activities, feedback analysis reports, and documents that document improvements made based on these analyses.)*
- *Innovative Approaches and Practices: (Evidence of innovative methods and practices developed to meet the unit's needs, beyond standard applications.)*

The procedures and principles determined by the University are valid for the design, implementation, evaluation, and updating of educational programs across the Faculty of Pharmacy, and they are applied within the framework of the University's academic calendar [34_OD3].

The creation and/or renewal of the Faculty of Pharmacy curriculum, monitoring of educational activities, and alignment of teaching methods and assessment and evaluation are reviewed by the Faculty Education Commission, the Board of Directors, the University Education Commission, and the Senate, in that order [OD2] [35-37_OD3].

Evidence:

[34_OD3]. 2024-2025 Academic Year General Academic Calendar.pdf

[35_OD3]. Curriculum Revision - Faculty Board Decision.pdf

[36_OD3]. Curriculum Revision - University Education Commission Decision.pdf

[37_OD3]. Curriculum Revision - University Senate Decision.pdf

B.2. Execution of Programs (Student-Centered Learning, Teaching, and Assessment)

The unit should apply student-centered and competency-based teaching, assessment, and evaluation methods to achieve the desired qualified graduate qualifications. The unit should establish clear criteria for student admissions, diplomas, degrees, and other qualifications recognition and certification, and consistently apply the predefined and announced rules.

B.2.1. Teaching Methods and Techniques

Teaching methods focus on active student participation and interactive learning. For all types of education (face-to-face, distance, and blended), approaches that are student-centered, competency-based, process and performance-oriented, interdisciplinary, integrative, and application/case-based are used, in line with the nature of each educational mode. The focus is on deep learning rather than just knowledge transfer, with a strong emphasis on student interest, motivation, and engagement.

Face-to-face education processes, which include associate degree, undergraduate, and graduate students, are enriched by technologies such as flipped learning, project-based learning, and other innovative approaches. Students' participation in research processes is supported by the curriculum, methods, and approaches. The implementation, monitoring, and necessary corrective actions for all these processes are systematically evaluated.

1	2	3	4	5
There are no student-centered approaches in the teaching-learning processes.	There are principles, rules, and plans for the implementation of a student-centered approach in the teaching-learning processes.	In general, student-centered teaching methods and techniques are applied in accordance with defined processes in the programs.	Student-centered practices are followed and improved with the participation of relevant internal stakeholders.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Student-Centered Teaching in Course Information Packages (Evidence documenting the presence of student-centered teaching methods in course information packages)*
- *Distance Education Materials and Methods (Principles and mechanisms for developing teaching materials and methods specific to distance education)*
- *Active and Interactive Teaching Methods (Defined processes and practices for active and interactive teaching methods)*
- *Trainer Training (Applications related to the student-centered learning-teaching approach in the trainer training program content)*
- *Monitoring and Improvement Processes (Evidence of monitoring processes and the improvement efforts made based on the results of this monitoring)*
- *Original Approaches and Applications (Documents related to original methods and applications developed according to the needs of the unit, in addition to standard practices)*

The curriculum of the Faculty of Pharmacy, which operates through formal education, has a structure that is heavily focused on laboratory practices. Since practical work is one of the most effective methods of learning, various teaching methods are used to increase program competence and facilitate deep learning by boosting motivation. Some of these methods include:

- Organizing a student poster competition and herbarium exhibition as part of the Pharmaceutical Botany course [38-39_OD3]
- Organizing seminars to share current developments in the field of pharmacy, helping students gain insights [OD3]
- Educators conducting field trips [OD3]
- Enabling students to gain academic experience by participating in research processes through TÜBİTAK 2209 undergraduate student projects [OD3]
- Ensuring students' participation in training programs organized by the Elazığ Chamber of Pharmacists [OD3]

It is planned that these activities will be developed and carried out in increasing numbers at different times during each academic year.

Evidence:

[38_OD3]. Poster Competition Image-1.jpeg

[39_OD3]. Poster Competition Image-2.jpeg

B.2.2. Assessment and Evaluation

Student-centered assessment and evaluation are conducted based on competence and performance, and the opportunities for students to express themselves are diversified as much as possible.

The continuity of assessment and evaluation is ensured through multiple exam opportunities, some of which are process-oriented (formative) methods such as assignments, projects, and portfolios. Exam methods suitable for course outcomes and types of education (in-person, distance, hybrid) are planned and implemented. There are mechanisms for exam implementation and security (in-person/online exams, exams for disadvantaged groups).

The consistency and reliability of assessment and evaluation practices are ensured across time and between individuals. The unit continuously improves its assessment and evaluation approaches and opportunities based on feedback from students and teaching staff. These improvements are examined in terms of announcement, implementation, control, alignment with goals, and the measures taken.

1	2	3	4	5
There are no student-centered assessment and evaluation approaches in the programs.	There are principles, rules, and plans regarding student-centered assessment and evaluation.	In general, the programs include student-centered and diversified assessment and evaluation practices.	Student-centered assessment and evaluation practices are monitored and improved with the participation of relevant internal stakeholders.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Student-Centered Assessment and Evaluation Plans*
(Planning documents, organizational structures, and job descriptions containing student-centered assessment and evaluation approaches.)
- *Variety of Assessment and Evaluation*
(Examples of implementation of different assessment and evaluation methods in the programs.)
- *Exam Examples*
(Examples of exams used in in-person, distance, or hybrid courses; examples of various assessment tools in the program.)
- *Relation Between Course Outcomes and Program Competencies*
(Examples of course information packages showing that assessment and evaluation practices are linked to course outcomes and program competencies and based on student workload, in accordance with the 2015 ECTS User Guide principles.)
- *Special Assessment Types and Mechanisms*
(Assessment and evaluation mechanisms developed for special situations such as disadvantaged groups and online exams.)
- *Exam Security*
(Evidence related to the mechanisms and practices established to ensure exam security.)
- *Monitoring and Improvement Studies*
(Evidence documenting the improvement efforts based on monitoring of assessment and evaluation processes and stakeholder participation.)
- *Original Approaches and Applications*
(Documents related to original methods and practices developed according to the needs of the unit, in addition to standard practices.)

At the Faculty of Pharmacy, student-centered assessment and evaluation are carried out based on competence and performance, and the opportunities for students to express themselves are diversified as much as possible. Assessment and evaluation are conducted through assignments, group work, projects, midterm exams, mini exams, and final exams, and various types of questions such as open-ended, multiple-choice, multiple-selection, fill-in-the-blank, and matching are used in these exams [40,41,30_OD3]. Depending on the students' tendencies to solve exam questions, the instructor may change the question type.

There are rules established by the Dean's Office regarding the implementation and security of exams. These rules have been shared both verbally in meetings with the teaching staff and in writing through the announcement board and the website with the students [OD3].

Evidence:

[40_OD3]. General Exam Application Example.pdf

[41_OD3]. Mini Exam Application Example.pdf

[32_OD3]. Sample ECTS Calculation Table - Pharmacy 1st Year.xlsx

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

Principles and rules regarding student admission (including students other than those placed through central placement) have been defined and published. These principles and rules are consistent with each other, and the practices are transparent. Requests for documents such as diplomas and certificates are carefully followed up.

Recognition and crediting of prior learning (knowledge and skills acquired through formal, non-formal, distance/hybrid education, and self-directed learning) are carried out. In line with the internationalization policy, mobility support, student encouragement, and facilitative measures are available, and practices are in place to ensure that there is no loss of credit during mobility.

1	2	3	4	5
The processes related to student admission, recognition of prior learning, and credit transfer have not been defined in the unit.	There are principles, rules, and related plans regarding student admission, recognition of prior learning, and credit transfer in the unit.	There are practices related to student admission, recognition of prior learning, and credit transfer in the unit, in accordance with the plans.	Processes related to student admission, recognition of prior learning, and credit transfer are being monitored, improved, and updates are being announced.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Principles and Rules Regarding Student Admission, Recognition of Prior Learning, and Credit Transfer*
- *Documents showing that student workload-based credits are used in the recognition of prior learning (in accordance with the 2015 ECTS User Guide principles).*
- *Evidence documenting that the practices are in line with defined processes and that the continuity of these processes is ensured.*
- *Stakeholder Information Mechanisms (Documents related to mechanisms through which stakeholders, especially students, are informed about the processes.)*
- *Evidence of original methods and practices developed according to the needs of the unit, in addition to standard practices.*

The principles and rules defined in the university's regulations and guidelines regarding student admission are applied. For students coming through situations such as horizontal transfer or special student status, the recognition and crediting of prior learning are carefully carried out in accordance with the University's Exemption and Equivalency Procedures Guidelines, by the Horizontal Transfer and Equivalency Commission [42_OD3]. Furthermore, the recognition of prior learning processes are shared through the Bologna Information System [OD2].

In line with the internationalization policy, ERASMUS student mobility is encouraged and has been initiated with the participation of two students in the first application period. In such mobility programs, the Faculty Unit Erasmus Coordinator provides guidance on the most suitable semester and course selection to ensure that the student completes the semester with minimal loss.

Evidence:

[42_OD3]. Sample Exemption and Adjustment Form.docx

B.2.4. Certification of Competencies and Diploma

The approval of competencies, graduation requirements, and graduation decision processes are clearly, understandably, comprehensively, and consistently defined and shared with the public. Certification and diploma procedures are carried out, monitored, and necessary measures are taken in accordance with this defined process.

1	2	3	4	5
The processes related to diploma approval and certification of other competencies have not been defined in the unit.	The unit has comprehensive, consistent, and published principles, rules, and processes related to diploma approval and certification of other competencies.	In general, the unit implements practices related to diploma approval and certification of other competencies.	The practices are monitored, and the defined processes are being improved.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Defined Processes and Current Practices for Monitoring Students' Academic and Career Development, Diploma Approval, and Certification of Competencies*
- *Documents related to the criteria applied for student admissions outside of central placement, such as horizontal transfer, the Foreign National Student Exam (YOS), double major programs (ÇAP), and minor programs.*
- *Documents showing that student workload credits are recognized in exchange programs without the need for additional work (in accordance with the 2015 ECTS User Guide principles).*
- *Evidence of original methods and practices developed according to the needs of the unit, in addition to standard practices.*

The graduation requirements for the Faculty of Pharmacy are clearly defined and shared with students in a clear and understandable manner [OD2].

For students coming through horizontal transfer outside of central placement, the Associate and Undergraduate Programs Horizontal Transfer Guidelines are used. Students are not admitted to the double major (ÇAP) and minor programs.

Evidence:

B.3. Learning Resources and Academic Support Services

The unit must have the appropriate infrastructure, resources, and environments to achieve the targeted qualified graduate competencies and to carry out its educational activities. It must ensure that learning opportunities are sufficient and accessible for all students. The unit should also provide support services for students' academic development and career planning.

B.3.1. Learning Environment and Resources

Classrooms, laboratories, libraries, studios; textbooks, online (digital) books/documents/videos, and other resources are of appropriate quality and quantity, accessible, and made available for students' knowledge/use. The use of learning environments and resources is monitored and improved.

The unit has a learning management system that fully meets the educational needs, is user-friendly, ergonomic, supports both synchronous and asynchronous learning, enriched content development, as well as assessment and evaluation, and in-service training opportunities.

Learning environments and resources aim to enhance student-student, student-teacher, and student-material interactions.

1	2	3	4	5
The unit does not have sufficient resources to carry out its educational activities.	The unit has plans for creating learning resources of appropriate quality and quantity (classrooms, laboratories, studios, learning management systems, printed/e-resources and materials, human resources, etc.) to sustain its educational activities.	There are internalized, systematic, sustainable, and exemplary practices.	In the unit, the management of learning resources is carried out considering field-specific conditions, accessibility, and inter-departmental balance.	Monitoring and improvement are carried out regarding the development and use of learning resources.

Evidence to be Considered:

- The adequacy of learning resources (library, laboratory, etc.), planning and practices related to their development.
- Analyses of students' access to learning resources such as the library and laboratory.
- Evidence documenting the accessibility of learning resources (including distance education applications).
- Examples of practices related to the use of the learning management system.
- Student feedback tools related to learning resources (e.g., surveys).
- Evidence that learning resources are regularly monitored and improved.
- Documents related to original methods and practices developed according to the needs of the unit, in addition to standard practices.

The Faculty of Pharmacy is located in the Bioengineering Building, which includes 5 lecture halls, 2 student laboratories, 1 microscope laboratory, 1 pharmacy practice lab, 1 conference hall, and 1 meeting room. One of the lecture halls is equipped to hold online classes and hybrid sessions. In addition to the limited number of lecture halls and laboratories, there are no facilities such as a faculty library, study room, or computer room available for student use. Therefore, students are allowed to use these spaces for their studies outside of class hours.

A list of textbooks for the courses has been compiled, and a request will be made to the Library and Documentation Department to provide them to the central library for student access [43_OD2].

The usage of learning environments and resources is monitored and improved based on student demands. For example, some lecture halls are opened as study rooms for students during exam periods. Additionally, a survey is conducted at the end of the first semester for first-year students every year to gather feedback on the faculty's status, particularly regarding physical conditions, and to identify areas for improvement [25_OD4].

Evidence:

[43_OD2]. Pharmacy Faculty Required Resource Book List.docx

[25_OD4]. Pharmacy Faculty Student Feedback Form.pdf

B.3.2. Academic Support Services

There is an academic advisor who follows the academic development of the student, provides guidance, and supports their academic problems and career planning. The advisory system is monitored and improved through methods such as the student portfolio. Students have easy access to their academic advisors, and various access options (in-person, online) are available.

There are psychological counseling and career center services, which are accessible (both in-person and online) and have been made available to students. The adequacy of these services is monitored.

1	2	3	4	5
There are no support services for students' academic development and career planning in the unit.	There are defined principles and rules regarding students' academic development and career planning processes in the unit.	Support services for students' academic development and career planning are provided in accordance with the defined principles and rules in the unit.	The implementation of students' academic development and career planning is monitored and improved with the participation of students.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Defined processes used for academic support services and, if applicable, academic and technical student advisory mechanisms in distance education.*
- *Mechanisms created for students to access their advisors.*
- *Organizational structure of psychological counseling or career centers, planning and implementation of guidance, psychological counseling, and career services.*
- *Services offered by the career center and related practices.*
- *Evidence documenting student participation in academic support, guidance, and career services.*
- *Feedback tools related to the services offered to students, and monitoring activities conducted based on the results.*
- *Evidence documenting updates and improvements made to processes.*
- *Documents related to unique methods and practices developed according to the needs of the unit, in addition to standard practices.*

At the Faculty of Pharmacy, each new student is assigned an academic advisor to follow their academic development, guide them, and support their academic issues and career planning. The advisory system is actively used in accordance with the University Academic Advisory Directive. Student-advisor communication is facilitated through various channels (phone, email, face-to-face, etc.). Additionally, all faculty members, including academic advisors, have posted their available hours on notice boards, ensuring that students can easily reach them [44_OD3]. Feedback surveys show that students do not encounter any issues accessing their advisors.

Evidence:

[44_OD3]. Advisor-Student Meeting Information

B.3.3. Facilities and Infrastructure

The facilities and infrastructure (such as cafeteria, dormitories, technology-equipped study areas, health services, transportation, IT services, and distance education infrastructure) are suitable in both quality and quantity for the needs, are accessible, and are made available for students' knowledge and use. The usage of these facilities and infrastructures is being reviewed.

1	2	3	4	5
The unit does not have facilities and infrastructure of appropriate quality and quantity.	The unit has plans for the establishment and use of suitable quality and quantity of facilities and infrastructure (such as cafeteria, dormitories, health services, library, transportation, IT infrastructure, remote education infrastructure, etc.).	In the unit, facilities and infrastructure are accessible and are utilized based on equal opportunities.	The usage of facilities and infrastructure is monitored and improved according to the needs.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- Principles and rules established for the use of facilities and infrastructure.
- Applications related to the access and usage of facilities and infrastructure.
- Evidence documenting the development of facilities and infrastructure in relation to the unit's growth (e.g., the relationship between the increase in the number of units and the expansion of physical spaces).
- Evidence regarding the infrastructure, facilities, equipment, and software related to remote education programs and applications, if available.
- Documents showing that the facilities and infrastructure services are regularly monitored, diversified, and improved.
- Evidence of standard practices, as well as original methods and practices developed in accordance with the unit's needs.

There are no facilities such as a cafeteria or lounge area available in the Faculty. Due to the distance to the student cafeteria and the insufficiency of the closest facility, the Faculty of Theology's cafeteria, students have expressed their dissatisfaction with the canteen services [25_OD3]. Efforts to improve the facilities and infrastructure are ongoing.

Evidence:

[25_OD3]. Pharmacy Faculty Student Feedback Form.pdf

B.3.4. Disadvantaged Groups

The access of disadvantaged, vulnerable, and underrepresented groups (such as individuals with disabilities, those in poverty, minorities, migrants, etc.) to educational opportunities is ensured with a focus on equality, fairness, diversity, and inclusivity. The distance education infrastructure has been designed with the specific needs of these groups in mind. On-campus, inclusive university practices are implemented based on the needs of the students. The access of these groups to educational opportunities is monitored and improved based on their feedback.

1	2	3	4	5
There are no plans for the access of disadvantaged groups to educational opportunities within the unit.	Plans are in place for the qualified and fair access of disadvantaged groups to educational opportunities.	Applications are being carried out to ensure the access of disadvantaged groups to educational opportunities.	The applications for the access of disadvantaged groups to educational opportunities are being monitored and improved with the feedback of the disadvantaged groups.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Planning and applications related to services provided for disadvantaged student groups (such as representation in committees, inclusive university practices, applications in distance education processes, etc.).*
- *Documents showing that feedback from disadvantaged groups is used in monitoring and improvement processes.*
- *Evidence of monitoring, evaluation, and improvement of inclusive unit practices.*
- *Evidence of customized methods and applications developed according to the needs of the unit, in addition to standard practices.*

Physical Access and Infrastructure Arrangements for Disabled Students:

To enable visually impaired individuals to move easily within the campus, there are yellow pathways and tactile writings. All classrooms are located on the ground floor, and there are no stairs at the main entrance that would pose a barrier. Additionally, elevators are available within the building to facilitate access for students with disabilities [45_OD3].

Financial Support Mechanisms for Economically Disadvantaged Students:

Need-based scholarships are provided by the scholarship commission to ensure that financially disadvantaged students do not face hardships, and this process is managed according to the students' needs. Compared to previous years, it has been observed that more students require scholarships, and scholarship opportunities have been provided accordingly [46_OD4].

Evidence:

[45_OD3]. Official Document on Facilities Provided for Disabled Individuals.docx

[46_OD4]. Scholarship Recipient Information and Student Identification Survey.docx

B.3.5. Social, Cultural, and Sports Activities

Student clubs and their activities have support in terms of space, budget, and guidance for social, cultural, and sports activities. Additionally, there is an administrative organization responsible for managing and overseeing social, cultural, and sports activities. The activities carried out are monitored and improved based on identified needs.

1	2	3	4	5
The unit does not have sufficient and appropriate social, cultural, and sports activity opportunities.	There are plans for creating social, cultural, and sports activity opportunities.	In the unit, social, cultural, and sports activities are accessible and utilized based on equal opportunities.	The mechanisms for social, cultural, and sports activities are monitored, and activities are diversified and improved according to needs/requests.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence be Considered::

- Documents related to the planning and implementation of social, cultural, and sports activities.
- A list of sports, cultural, and social activities organized for students during the year (including information such as type of activity, topic, number of participants, etc.).
- Evidence that the activities ensure accessibility and equal opportunities.
- Documents showing the diversity of activities and how feedback from stakeholders is taken into account.
- Tools used for monitoring social, cultural, and sports activities, monitoring reports, and evidence of improvement or diversification efforts.
- Documents regarding unique methods and practices developed according to the unit's specific needs, beyond standard practices.

Sports Activities and Student Participation:

A volleyball and football team has been formed under the guidance of faculty members. This team encourages students to actively participate in sports activities.

Student Requests and Improvement Processes:

Based on the requests from students, shortcomings are identified and quickly addressed, leading to the diversification of activities. This process increases student satisfaction and ensures the sustainability of the activities [25_OD4].

Social Activities and Student Participation:

The establishment of student clubs, Farmagenç and FUPSA, has been supported, and our faculty members provide academic guidance for these clubs [OD3]. The clubs actively organize various events [OD3].

Evidence:

[25-OD4]. Faculty Student Feedback Form Output.pdf

B.4. Teaching Staff

The unit should be fair and transparent in all processes related to the recruitment, appointment, promotion, and assignment of faculty members. In order to achieve the targeted qualified graduate competencies, it should provide opportunities for faculty members to continuously improve their teaching skills.

B.4.1. Appointment, Promotion, and Assignment Criteria

The processes and criteria for the appointment, promotion, and assignment of faculty members (including international faculty) are clearly defined and publicly accessible. These processes and criteria ensure academic merit and provide equal opportunities. The practice is demonstrated to comply with these criteria. The faculty workload and distribution balance are transparently shared. The expectations of the unit from its faculty members are well known. When assigning external faculty to teach, merit is prioritized, and their performance is transparently and effectively evaluated at the end of each term. The unit ensures alignment with educational principles and culture.

1	2	3	4	5
The unit has not defined its appointment, promotion, and assignment processes.	The unit has defined the criteria for appointment, promotion, and assignment; however, specific needs of the field have not been addressed in the planning.	The unit applies defined and widely known appointment, promotion, and assignment criteria for all areas, and these criteria are used in decision-making processes (such as recruitment, appointment, promotion, and course assignments for the educational staff).	The results of appointment, promotion, and assignment practices are monitored, and actions are taken based on the evaluation of the monitoring results.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Evidence showing that the criteria for the appointment, promotion, and assignment of teaching staff are defined and publicly available.
- Practices aimed at ensuring the alignment between the academic staff's area of expertise and the courses they teach.
- Evidence regarding the monitoring and improvement of appointment, promotion, and assignment criteria.
- Documents related to the development of unique methods and practices that are tailored to the needs of the unit, in addition to standard practices.

Transparent and Merit-Based Appointment Processes:

In the recruitment of research assistants, exam papers are evaluated anonymously, and candidates with the highest scores are selected. This process is carried out in a completely transparent and fair manner.

For faculty member appointments, candidates are assessed based on faculty appointment criteria. They deliver a trial lecture in front of a jury after their peer review is completed. Following the evaluation by the jury, their qualifications are approved. This process ensures the direct observation of the candidates' teaching competencies. [OD3]

Field Appropriateness and Expertise:

Researchers with a Bachelor's degree in Pharmacy are primarily recruited to the Faculty of Pharmacy [47_OD3].

Each faculty member is required to have a PhD in their field and only teaches courses related to their area of expertise.

External Faculty Appointments:

In the selection of faculty members appointed to teach from outside, the condition of expertise in their field is required, and these individuals only teach courses related to their area of expertise [28_OD3].

Course Load and Distribution Balance:

The teaching load and distribution of faculty members are shared transparently, and a balanced distribution is ensured [29_OD4].

Evidence:

[47_OD3]. Example of Pharmacy Graduate Faculty Members.jpg

[28_OD3]. Faculty Board Decision for the 2024-2025 Fall Semester Course Schedule

[29_OD4]. Academic Council Meeting Decision for the 2024-2025 Fall Semester

B.4.2. Teaching Competencies and Development

The processes for developing teaching competencies are planned based on needs analysis, are carried out extensively, and their effectiveness is regularly monitored. Systematic train-the-trainer activities (courses, workshops, lessons, seminars, etc.) and a teaching-learning center structure are in place to enable all faculty members to learn and use interactive-active teaching methods and distance learning processes. The pedagogical and technological competencies of faculty members are being enhanced. The unit's performance in developing teaching competencies is evaluated.

1	2	3	4	5
In the unit, there are no plans to develop faculty members' teaching competencies.	The unit has plans to develop faculty members' competencies in areas such as student-centered learning, distance education, assessment and evaluation, material development, and quality assurance systems.	There are practices across the unit to develop faculty members' teaching competencies.	The findings from the practices for developing teaching competencies are monitored, and the results are discussed with faculty members to take necessary measures.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- *Plans related to the implementation of trainer training (scope, delivery method, participation information, etc.) and evidence related to these (including distance education applications).*
- *Documents and evidence related to applications conducted by learning-teaching centers.*
- *Evidence of applications aimed at improving teaching staff's teaching competence, apart from trainer training.*
- *Documents that record the processes of monitoring the educational performance of the teaching staff.*
- *Evidence showing the participation of teaching staff in monitoring and improvement processes.*
- *Evidence related to the monitoring and improvement of teaching competence development processes.*
- *Documents related to standard applications as well as original methods and practices developed to meet the specific needs of the unit.*
-

Device Usage Training of Instructors:

Training sessions are organized for faculty members to ensure the effective use of all equipment purchased by the faculty and to ensure that the knowledge is properly transferred to students. These training programs are conducted by expert trainers in the relevant fields, and faculty members who successfully complete the training receive certificates. This practice enhances the technical expertise of the faculty members and ensures that students receive a higher quality of education [48_OD3].

Online Courses for Students and the Opportunity to Meet Faculty Members from Different Universities:

Online courses are organized for students to meet faculty members from different universities and gain various perspectives. These courses are taught by expert faculty members in their fields and enrich students' knowledge.

To measure the effectiveness of the online courses, feedback is collected from students, and based on this feedback, course content and presentation methods are improved. This practice encourages active student participation in the learning process and increases their satisfaction [49_OD3].

Evidence:

[48_OD3]. Certificate Images.pdf

[49_OD3]. Photos of Professors Teaching Online.docx

B.4.3. Incentive and reward for educational activities

There are creative/innovative teaching practices for faculty members, along with incentive and reward processes such as the "Good Teaching Award" to increase competition in this area. Appointment and promotion criteria prioritize creative teaching activities to emphasize education and teaching.

1	2	3	4	5
There are no incentive and reward mechanisms for the teaching staff.	There are plans to establish incentive and reward mechanisms in a competence-based, fair, and transparent manner.	Incentive and reward practices are implemented throughout the unit.	Incentive and reward practices are monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- Documents related to the incentive mechanisms and defined processes implemented across the unit to acknowledge, recognize, and reward the educational performance of the teaching staff.
- Examples of practices related to activities carried out in this area.
- Evidence documenting the incentive and reward practices for the teaching staff's educational activities.
- Evidence regarding the monitoring and improvement of activities aimed at acknowledging, recognizing, and rewarding the teaching staff's educational performance.
- Documents related to unique methods and practices developed to suit the unit's needs in addition to standard applications.

The unit does not have a mechanism for encouraging and rewarding educational activities.

Evidence:

C.1. Management of Research Processes and Research Resources

The unit should manage its research activities in a way that aligns with the academic priorities outlined in its strategic plan, as well as with local, regional, and national development goals. These activities should be designed to generate value and be transformed into societal benefits. The unit should also create appropriate physical infrastructure and financial resources for these activities and ensure their effective utilization.

C.1.1. Management of research processes

The approaches adopted for the management of research processes, how the motivation and guidance functions are designed, and how short- and long-term goals are clearly defined, have been established. The research management team and their role descriptions are determined, and practices are developing in line with these unit-specific preferences. The effectiveness and success of managing scientific research and artistic processes are regularly monitored and improved.

1	2	3	4	5
There is no planning related to the management of research processes and organizational structure within the unit.	The unit has planning that takes into account aspects such as guidance and motivation related to the management of research processes and organizational structure.	The management of research processes and the organizational structure across the unit are implemented in line with the unit's preferences.	The effectiveness of the management of research processes and organizational structure within the unit is monitored, and measures are taken accordingly.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Documents and evidence related to the management and organizational structure of research processes.
- Evidence of the unit's research governance model and how this model is applied.
- Evidence that the functionality of research management and organizational structure is monitored, and improvements made to these processes are documented.
- Evidence of original methods and practices developed to meet the unit's needs, in addition to standard practices.

Monitoring and Improving Research Processes:

The effectiveness and success of research activities are regularly monitored, and improvement efforts are undertaken for these processes. For example, the completion rates of research projects, the number of publications, and the social impact of projects are regularly evaluated. [16_OD3]

Feedback from faculty members and researchers is collected to improve research processes, and the processes are updated based on this feedback. In cases where there are issues such as insufficient laboratory conditions or the lack of necessary equipment, the university provides the necessary support based on requests. [29_OD4]

Kanıtlar:

[16_OD4]. Faculty Academic Activities List Output.pdf

[29_OD4]. Academic Council Meeting Decision for the 2024-2025 Fall Semester.pdf

C.1.2. Internal and external sources

The unit's physical, technical, and financial research resources are aligned with its mission, goals, and strategies, and they are sufficient. The diversity and adequacy of these resources are monitored and improved.

There are core internal funds available for those starting research, and access to these funds is easy. To enhance research potential, there are supports for projects, conference participation, travel, expert invitations, personal funds, rewards to increase motivation, and competitive promotion criteria.

The change in internal university resources over the years, the effectiveness of these resources, their sufficiency, areas for improvement, and the level of fulfillment of expectations are evaluated.

In line with the mission and goals, the orientation towards external resources is supported. For this purpose, supporting units and methods are defined and well-known by researchers.

1	2	3	4	5
The unit does not have sufficient resources to sustain its research and development activities.	The unit has plans to create physical, technical, and financial resources of appropriate quality and quantity to sustain its research and development activities.	The unit manages its research and development resources while considering the research strategy and inter-departmental balance.	The adequacy and diversity of research resources are monitored and improved within the unit.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Evidence related to the research and development budget and its distribution:*
- *Evidence of strategic partnerships made within the research framework (with the public or private sector):*
- *Evidence demonstrating that research and development resources are managed in accordance with the research strategy:*
- *Documents showing that the diversity and adequacy of research resources are monitored and improved:*
- *Defined processes for managing internal resources (e.g., BAP Regulation, Internal Resource Use Regulation, etc.):*
- *Evidence of the distribution of internal resources across departments:*
- *Methods and units established to support the use of external resources:*
- *Evidence documenting the distribution and management of external resources:*
- *Documents showing the changes in external resources over the years:*
- *Evidence of standard practices as well as original methods and applications developed according to the unit's needs.*

Support for Start-up Projects for New Faculty Members:

The unit encourages new faculty members to apply for start-up projects to begin their research activities.

Incentive and Support Mechanisms for External Funded Projects

Our faculty primarily encourages faculty members to apply for external funded projects. If no external funding is obtained, internal resources are provided.

When external funded projects are successfully awarded, additional budgets are allocated to researchers, and institutional funds are assigned when necessary. This support ensures the successful completion of the projects [51_OD3].

Addressing Infrastructure Gaps:

Infrastructure gaps hindering research activities are addressed by the university. In this context, laboratory equipment, technical tools, and other physical needs are promptly fulfilled.

Monitoring and Improvement of Research Resources:

The adequacy and diversity of research resources are regularly monitored, and the effectiveness of these processes is evaluated. For instance, metrics such as the utilization rates of internal and external resources, project completion rates, and publication numbers are tracked [16_OD3].

Units and Methods Supporting the Use of External Resources:

There are activities in place to support researchers in applying for external funding sources, including guidance and assistance throughout the application processes [OD3].

Evidence:

[16_OD4]. Faculty Academic Activities List Output.pdf

[50_OD3]. Institutional Contribution Image.jpeg

C.1.3. Doctoral Programs and Post-Doctoral Opportunities

The application processes of doctoral programs, the number of enrolled students and graduates, and development trends are regularly monitored. The unit provides post-doctoral (post-doc) opportunities, and the unit's policy on hiring its own graduates (inbreeding) is clearly stated.

1	2	3	4	5
The unit does not have a doctoral program or post-doctoral opportunities.	The unit has plans for a doctoral program and post-doctoral opportunities that align with its research policy, goals, and strategies.	Doctoral programs and post-doctoral opportunities that align with and support the unit's research policy, goals, and strategies are being implemented.	The outputs of doctoral programs and post-doctoral opportunities in the unit are regularly monitored and improved.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Evidence of doctoral programs and post-doctoral opportunities
- Number of students/researchers benefiting from these programs and opportunities, and their distribution by departments
- Evidence of monitoring and improvement of doctoral programs and post-doctoral opportunities
- Evidence of the unit's development of unique approaches and practices based on its needs, in addition to standard practices

and regulations.

Infrastructure for Doctoral and Post-Doctoral Research:

The unit does not have a doctoral program; however, it provides the necessary laboratory, technical equipment, and other physical infrastructure required for conducting doctoral and post-doctoral research. These facilities support the work of researchers [52_OD2].

Research Assistants' Doctoral Education:

Research assistants complete their doctoral education at different universities, and they can carry out part of their research at our department. This demonstrates the department's capacity to support doctoral students and researchers.

Postdoctoral Research Opportunities:

The unit provides suitable working environments and resources for postdoctoral researchers. These opportunities support the sustainability of postdoctoral research.

Evidence:

[51_OD2]. F.U. Pharmacy Faculty Equipment List

C.2. Research Competence, Collaborations, and Support

The unit should provide opportunities (such as training, collaborations, support, etc.) for faculty members and researchers to maintain and improve their scientific research and artistic competencies.

C.2.1. Research Competencies and Development

The proportion of researchers with a doctoral degree, the distribution of the units where the doctoral degrees were obtained, the analysis of clustering/expertise accumulation, and the alignment with research goals are examined. Systematic activities such as training, workshops, and project markets are conducted to develop the research and development competence of academic staff.

1	2	3	4	5
There are no mechanisms in place within the unit to develop the research competence of academic staff.	There are plans in place within the unit to develop the research competence of academic staff.	The unit implements practices aimed at developing the research competence of academic staff.	In the unit, practices aimed at developing the research competence of academic staff are monitored, and the results of the monitoring are evaluated together with the academic staff to take necessary actions.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Planning and practices for improving the research competence of faculty members (supportive training, international opportunities, project collaboration efforts, etc.).*
- *Feedback from faculty members.*
- *Evidence related to the monitoring and improvement of faculty members' research competence.*
- *Evidence related to unique approaches and practices developed by the unit in accordance with its needs, in addition to standard practices and regulations.*

PhD Degree

All of our researchers hold a doctoral degree.

Collaborations:

Projects are carried out in collaboration with other universities.

International Support

Our researchers who wish to go abroad are supported by the department [53_OD3].

Project Writing Trainings

They are encouraged to regularly participate in project writing training to be able to apply for TÜBİTAK projects [54_OD3].

Performance Monitoring

A system has been established and is actively used to continuously monitor and evaluate the research activities of researchers each year, including criteria such as the number of project applications and publication counts [55_OD3].

Evidence:

[52_OD3]. Faculty Member Applying for Erasmus.jpg
 [53_OD3]. TÜBİTAK Project Writing Training for Graduate Students.jpg
 [54_OD3]. Academic Performance Tracking System.jpg

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

There are mechanisms in place that encourage inter-departmental collaborations, interdisciplinary initiatives, and synergistic joint ventures, and these mechanisms are effective. Joint research or graduate programs, participation in research networks, the presence of joint research units, and national and international collaborations are defined, supported, and systematically monitored, with improvements being made in alignment with the unit's goals.

1	2	3	4	5
There are no mechanisms for establishing joint programs and joint research units at the national and international levels within the unit.	The unit has plans and mechanisms for participation in joint programs, joint research units, and research networks, as well as for establishing collaborations for multiple research activities at the national and international levels.	The unit conducts joint programs and research activities at both the national and international levels.	At the unit, joint programs and research activities both within and between departments at national and international levels are monitored, evaluated with relevant stakeholders, and improved accordingly.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Evidence of mechanisms for the establishment of joint programs and joint research units at national and international levels.
- Documents regarding bilateral agreements and collaborations for joint programs and research activities.
- Evidence of the works and projects produced from the research networks, joint programs, research units, and collaborative research that the unit is involved in.
- Documents related to feedback received from stakeholders regarding joint programs and research activities.
- Processes for monitoring and improving joint programs and research activities, along with related evidence.
- Evidence of original methods and practices developed according to the needs of the unit, in addition to standard practices.

Collaborations and Research Networks

Scientific papers co-published with other universities and ongoing projects demonstrate that these collaborations are active and sustainable. [56_OD3].

Joint Research Units

Joint research units have been established, and through these units, interdisciplinary studies are supported. Our faculty members collaborate with other faculties, taking on doctoral supervision roles and strengthening academic partnerships. [57_OD3].

Studies Produced from Research Activities

Scientific papers, projects, and patents published within the scope of joint programs and research demonstrate the research capacity of the unit. [58_OD3].

Evidence:

[55_OD3]. Joint Master's Degree Supervision with Other Faculties.pdf

[56_OD3]. Joint Article Example with Other Universities.pdf

[57_OD3]. Joint Patent Application with Other Faculties.jpg

C.3. Research Performance

The unit should measure, evaluate, and publish its research activities based on data and on a periodic basis. The findings obtained should be used for the periodic review and continuous improvement of the unit's research and development performance.

C.3.1. Monitoring and Evaluation of Research Performance

The unit's research activities are monitored and evaluated on an annual basis, compared to targets, and the causes of deviations are examined. The unit's focus areas are systematically analyzed for their visibility within the university, external visibility, international presence, and areas of expertise. Their alignment with the targets is also analyzed. Incentive and recognition mechanisms are employed based on performance. Competition with rivals and benchmarking with selected units are followed. Performance evaluations are ensured to be systematic and sustainable.

1	2	3	4	5
There are no mechanisms in the unit for monitoring and evaluating research performance.	The unit has principles, rules, and indicators for monitoring and evaluating research performance.	The mechanisms established for monitoring and evaluating research performance are used across the unit.	Research performance is monitored in the unit and evaluated in collaboration with relevant stakeholders for improvement.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- Documents related to defined processes created to monitor research performance.
- Evidence of mechanisms created to track whether research goals have been achieved.
- Documents related to feedback from stakeholders regarding research performance.
- Processes related to the monitoring and improvement of research performance, along with evidence of their implementation.
- Documents related to standard practices and regulations, as well as unique methods and applications developed to meet the unit's needs.

Every year, researchers' annual goals are set and recorded through the system. At the end of the year, the Academic Activities Commission prepares activity reports for the researchers, systematically tracking how much they have achieved their goals. Researchers who have not met their goals are provided with feedback, and the problems arising from this feedback are shared with school resources and higher authorities for resolution. This process demonstrates a systematic mechanism for monitoring, evaluating, and improving research performance [16_OD4].

Evidence:

[16_OD4]. Faculty Academic Activities List Output.pdf

C.3.2. Evaluation of Faculty Member/Researcher Performance

Faculty members are expected to share their research performance; defined processes for this are in place and are known by the relevant stakeholders. Research performance is monitored and evaluated on an annual basis and used in line with the unit's policies. The results, including average values and distribution, are transparently shared. Performance evaluations are systematic and sustainable.

1	2	3	4	5
The unit does not have mechanisms in place for monitoring and evaluating the research performance of faculty members.	The unit has principles, rules, and indicators in place for monitoring and evaluating the research performance of faculty members.	The research and development performance of faculty members is monitored and evaluated in collaboration with the faculty members, and improvements are made accordingly.	The research and development performance of faculty members is monitored and assessed in collaboration with the faculty, and improvements are made accordingly.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Defined processes in place to monitor the research and development performance of academic staff (such as regulations, guidelines, process definitions, measurement tools, handbooks, guides, recognition systems, incentive mechanisms, etc.)*
- *Analysis reports on the research performance of faculty members.*
- *Feedback from faculty members.*
- *Evidence of monitoring and improvement related to research and development performance.*
- *Evidence of standard practices and regulations, as well as unique approaches and practices developed by the unit based on its needs.*

Researchers' academic activities are announced through various media platforms such as the Firat University Academic Information System, YÖKSİS, Web of Science (WOS), and Google Scholar. The data on these platforms are updated annually and monitored by our unit. [55_OD3], [59_OD3].

Evidence:

[54_OD3]. Academic Performance Tracking System.jpg

[58_OD3]. Monitoring Faculty Members Through the Academic Information System.jpg

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

The unit should manage social contribution activities in line with its strategic goals and objectives. It should create appropriate physical infrastructure and financial resources for these activities and ensure their effective utilization.

D.1.1. Management of Social Contribution Processes

The unit's social contribution policy and the management and organizational structure of its social contribution processes have been institutionalized. The management and organizational structure of social contribution processes is aligned with the unit's social contribution policy, and job descriptions have been defined. The functionality of the structure is monitored, and necessary improvements are made accordingly.

1	2	3	4	5
There is no planning regarding the management of social contribution processes and the organizational structure in the unit.	The unit has planning regarding the management of social contribution processes and the organizational structure.	The management of social contribution processes and the organizational structure across the unit are implemented in line with unit-specific preferences.	The outcomes related to the functionality of the management of social contribution processes and the organizational structure in the unit are monitored, and measures are taken.	There are internalized, systematic, sustainable, and exemplary practices.

Evidence to be Considered:

- Evidence of the management and organizational structure of societal contribution processes.
- Evidence of the societal contribution governance model.
- Units conducting societal contribution activities and examples of their applications.
- Evidence of monitoring and improvement related to the functionality of the management and organizational structure of societal contribution processes.
- Evidence of standard practices and regulations, as well as unique approaches and practices developed by the unit based on its needs.

As a Faculty of Pharmacy, we come together with the Pharmacists' Association to contribute to society, and discussions are held regarding the future roles of students and current pharmacists. Protocols and agreements are being planned to establish collaborations in various areas [OD3]. Training is provided to students on topics of societal interest [OD3].

Evidence :

D.1.2. Resources

The resources allocated for societal contribution activities (financial, physical, human resources) have been defined, shared, and institutionalized, and these are being monitored and evaluated.

1	2	3	4	5
The unit does not have sufficient resources to sustain its societal contribution activities.	The unit has plans to create physical, technical, and financial resources of appropriate quality and quantity to sustain its societal contribution activities.	The unit manages its societal contribution resources by considering the societal contribution strategy and inter-unit balance.	The adequacy and diversity of societal contribution resources are monitored and improved within the unit.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Evidence of research and application centers, and other units, conducting societal contribution activities.*
- *Evidence of the budget allocated for societal contribution activities and its distribution over the years.*
- *Evidence showing that societal contribution resources are managed in line with the societal contribution strategy.*
- *Evidence that the diversity and adequacy of societal contribution resources are monitored and improved.*
- *Evidence of standard practices and regulations, as well as unique approaches and practices developed by the unit based on its needs.*

This year, a sugar and blood pressure measurement day will be organized on Pharmacy Day to contribute to society and raise public awareness. The event will be carried out in strong collaboration with the Pharmacists' Association, with the necessary devices and budget provided through this partnership. Our students will be assigned to this meaningful event, directly serving the community, while our esteemed faculty members will also provide guidance to our students by offering consultancy. This event will not only contribute to improving public health but will also give our students practical experience, further supporting their professional development. [60_OD2]

Evidence:

[59_OD2]. 2025 Event Plan List. jpg

D.2. Social Contribution Performance

The unit should periodically monitor and continuously improve the activities it conducts in line with its societal contribution strategy and objectives.

D.2.1. Storage and evaluation of social contribution

The unit engages in societal contribution activities that are aligned with the UN Sustainable Development Goals, addressing the needs of society and the environment, including disadvantaged groups, and creating value. National and international collaborations, assignments to various public units and organizations, and societal contribution activities such as education, services, research, and consultancy conducted through units within the faculty are monitored. The monitoring mechanisms and processes are established and sustainable. There is evidence of improvement steps.

1	2	3	4	5
There are no mechanisms in place for monitoring and evaluating the societal contribution performance within the unit.	The unit has principles, rules, and indicators for monitoring and evaluating societal contribution performance.	The mechanisms established to monitor and evaluate societal contribution performance are being used across the unit.	Societal contribution performance is monitored within the unit, evaluated with relevant stakeholders, and improved accordingly.	There are internalized, systematic, sustainable, and exemplary practices in place.

Evidence to be Considered:

- *Evidence of societal contribution activities aligned with the unit's objectives.*
- *Documents related to defined processes used to monitor and evaluate societal contribution performance.*
- *Evidence of mechanisms established to track whether societal contribution goals have been achieved.*
- *Evidence and monitoring reports indicating that societal contribution activities within the unit have been evaluated.*
- *Evidence or reports showing that improvements based on monitoring have been made in societal contribution activities.*
- *Protocols and agreements signed with units collaborating on societal contribution activities.*
- *Documents related to feedback received from stakeholders regarding societal contribution activities.*
- *Processes for monitoring and improving societal contribution performance, along with supporting evidence.*
- *Documents related to unique methods and practices developed to meet the unit's needs, in addition to standard practices.*

There are no mechanisms in place for monitoring and evaluating the societal contribution performance within the unit.

Evidence:

A. LEADERSHIP, GOVERNANCE AND QUALITY	
Strengths	Areas for Improvement
<ol style="list-style-type: none"> 1. The faculty management effectively carries out leadership processes by adopting a quality assurance system. 2. The governance model within the faculty has been established in accordance with legal regulations, and stakeholder participation has been ensured. 3. Independence of committees, control and balance mechanisms, and diversity of voices are supported in decision-making processes. 4. The faculty has adopted internal quality assurance mechanisms and ensures the sustainability of these processes. 5. The dean and administrators are committed to improving the quality assurance system and regularly participate in evaluation processes. 6. Coordination and effective communication between academic and administrative units are ensured. 7. The PDSA (Plan-Do-Check-Act) cycle for the faculty's quality processes is effectively implemented. 8. Student and stakeholder feedback is regularly collected and considered in quality processes. 	<ol style="list-style-type: none"> 1. To make the quality assurance processes within the faculty more systematic, the mechanisms for continuous improvement need to be strengthened. 2. More data should be collected regarding leadership and governance processes to increase their measurability. 3. Awareness among academic and administrative staff should be raised for the internal quality assurance mechanisms to function more effectively. 4. Improvement processes based on stakeholder feedback should be made more regular. 5. Training and development programs should be organized to enhance the leadership competencies of administrators. 6. The quality commission within the faculty should be made more active, and it should take a more prominent role in the evaluation processes. 7. Strategic plans should be communicated more effectively to all academic and administrative staff and integrated into their practices. 8. The faculty's accreditation processes should be strengthened by increasing alignment with international quality standards.
B. EDUCATION AND TRAINING	
Strengths	Areas for Improvement

1. The presence of the main departments required for the pharmaceutical undergraduate program. 2. 85.7% of the faculty members are graduates of the Faculty of Pharmacy. 3. The majority of faculty members hold a "train-the-trainer" certification. 4. High research capacity and publication performance of the academic staff. 5. The faculty has Erasmus agreements with international Pharmacy Faculties. 6. Achieving a performance higher than expected in student-centered education and research activities.	1. Increasing the number of academic staff. 2. Increasing the number of technical staff. 3. Ensuring the building infrastructure is suitable for the healthy, safe, and long-term use of pharmacy applications. 4. Developing the building infrastructure in terms of social spaces for students, such as library, study rooms, cafeteria, seating areas, etc. 5. Providing computer/computer rooms for student use in the faculty. 6. Supporting participation in national and international conferences. 7. Increasing national and international collaborations.
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7. Organizing seminars and talks to introduce various fields of pharmacy and events to guide students in their career paths. 8. Supporting students' active participation in scientific and social activities. 9. Having two student communities. 10. Evaluating student satisfaction by gathering feedback from students. 11. Organizing project preparation training for both students and faculty members. 12. Supporting students' participation in scientific and social activities. 13. Maintaining good faculty-student relationships.	
C. RESEARCH AND DEVELOPMENT	
Strengths	Areas for Improvement

<p>Strategic Planning: The unit has defined strategic objectives and policies for its research and development activities, and work is being carried out in line with these objectives.</p> <p>Integrated Information Management System: An integrated information management system is used for collecting, analyzing, and reporting data related to research and development activities. This ensures more effective management of the research processes.</p> <p>National and International Collaborations: The unit's involvement in research projects and collaborations at both national and international levels enhances its research capacity.</p> <p>Original Research Projects: The unique research projects developed by the unit in accordance with its own needs and priorities can be considered a standout element in this area.</p>	<p>Diversification of Research Resources: The resources used for research and development activities could be diversified, and these resources could be used more effectively. In particular, more support could be obtained from the private sector and non-governmental organizations.</p> <p>Commercialization of Research Outputs: A more effective approach could be adopted for the commercialization of research results and their transformation into societal benefits.</p> <p>Developing Research Culture: The research culture within the unit could be further developed, and participation in research activities could be increased. This could be achieved, particularly by encouraging young researchers.</p> <p>Strengthening Research Infrastructure: Further strengthening the necessary infrastructure for research and development activities (such as laboratories, technological equipment, etc.) could enhance the research capacity.</p>
D. SOCIAL CONTRIBUTION	
Strengths	Areas for Improvement

<p>Policy and Strategic Planning: The unit's policies and strategic objectives related to societal contribution have been defined, and practices are carried out in line with these objectives. This demonstrates that societal contribution is a priority area for the unit.</p> <p>Stakeholder Engagement: In societal contribution activities, the inclusion of internal and external stakeholders by gathering their opinions and involving them in the processes enhances the effectiveness of the activities.</p> <p>Sustainability: The establishment of the necessary mechanisms for the sustainable implementation of societal contribution activities indicates that a long-term approach has been adopted in this area.</p> <p>Original Practices: The unique societal contribution projects and models developed by the unit to meet its own needs provide exemplary practices in this area.</p>	<p>Measurement and Evaluation: A more systematic approach could be developed for measuring and evaluating the impact of societal contribution activities. This could help make the activities more effective.</p> <p>Stakeholder Feedback: Regular feedback could be collected from stakeholders participating in societal contribution activities, and this feedback could be used to improve the activities.</p> <p>Resource Allocation: Increasing the resources allocated for societal contribution activities and using these resources more effectively could expand the scope of the activities.</p> <p>Social Impact Analysis: More comprehensive analyses could be conducted to measure the impact of societal contribution activities on society. This could provide a clearer understanding of the social benefits of the activities.</p>
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SUMMARY

The Firat University Faculty of Pharmacy Unit Internal Evaluation Report (BİDR) has been prepared to assess the faculty's quality management processes, education and teaching activities, research and development efforts, and societal contributions. The report details the faculty's governance model, leadership approaches, internal quality assurance mechanisms, and strategic planning processes.

In the field of education and teaching, the faculty's existing departments, academic staff structure, and student-centered approaches have been addressed, and the effectiveness of curriculum development and teaching processes has been evaluated. In the area of research and development, scientific studies, national and international collaborations, and research projects have been analyzed to determine the faculty's research capacity. In the section on societal contribution, the faculty's relationships with stakeholders, community-oriented projects, and sustainability approach have been emphasized.

As a result, the strengths and areas for improvement of the faculty have been identified, and suggestions for the sustainability and improvement of quality assurance processes have been presented. In this context, continuous improvement efforts in the academic and administrative

structure will continue to ensure the faculty's compliance with national and international standards.