Compliance Implementation Plan (CIP) in response to Self-Review of Institutional Performance and Enhancement (RIPE) 2025-26 MNS University of Agriculture, Multan

Introduction:

This Compliance Implementation Plan (CIP) has been prepared in response to the findings and recommendations of the Self-Review of Institutional Performance & Enhancement (RIPE) Report 2025-26, submitted by the Review Panel following its visit on April 20–22, 2026. The plan translates standard-wise findings, and observations raised during the review meetings, into a concrete, owned, and time-bound action, together with the Continuous Quality Improvement (CQI) mechanism that will sustain the gain.

Summary:

Of the 15 rated standards (Standard 5 is not applicable), eight (8) standards were graded **GREEN (Effective/EIR, 53.33%)**, four (4) standards as **BLUE (Progressive/LIR, 26.67%)**, and three (3) standards as **YELLOW (Adequate Improvement Required/AIR, 20.00%)**; no standard was graded GREY (Significant Improvement Required). The actions below are prioritized accordingly.

1. Standard-wise Implementation Plan:

Sr. No.	Observations/Recommendations of Internal RIPE Report	Actions /Tasks Proposed in Response to Observations/Recommendations of CIP Committee	Timeline to accomplish actions/ tasks	Responsible Office/Officer
Standard 1: Vision, Mission, Goals, and Strategic Planning				
1.1	Strategic Plan (2025–2030) needs to be aligned with updated Vision/Mission.	Updated Strategic Plan will be finalized and disseminated considering updated Vision/Mission.	September 2026	VC Office/ Directorate of P&D
1.2	Mid-term and long-term goals must reflect MNSUAM's new directions.	Mid- and long-term goals will be aligned with new institutional directions.	September 2026	VC Office/ Directorate of P&D

Sr. No.	Observations/Recommendations of Internal RIPE Report	Actions /Tasks Proposed in Response to Observations/Recommendations of CIP Committee	Timeline to accomplish actions/ tasks	Responsible Office/Officer
Standard 02: Governance, Leadership, and Organization				
2.1	R&D policy is not available and need to be establish.	R&D policy will be drafted, approved and notified.	September 2026	PO ORIC and Registrar Office
2.2	Dropout data not analyzed.	Annual dropout-data will be analyzed and reported to concerned quarters.	Winter 2026-27 semester	Registrar Office
Standard 03: Institutional Resources and Planning				
3.1	Lack of infrastructure audit.	• Campus infrastructure audit report will be prepared and approved. • Annual review of campus infrastructure and resource adequacy will be conducted every year.	December 2026	Director P&D & Treasurer Office
3.2	ICT policy is not available.	ICT policy will be prepared and approved.		Director IT
Standard 04: Audit and Finance				
4.1	Financial operations are functional, transparent and digitalized but lack analytics.	• Financial analytics dashboard will be made available through SAP ERP. • Training on annual financial risk assessment will be organized.	December 2026	Treasurer Office
4.2	Audit Report of FY 2024–25 not yet available.	Signed/ verified Audit Report of FY 2024–25 will be made available.	August 2026	
Standard 05: Affiliated Colleges / Institutions				
NOT Applicable as MNSUA does not have any affiliated colleges/ institutions.				
Standard 06: Internationalization of Higher Education and Global Engagement				
6.1	No MOOCs policy in place.	Institutional MOOCs policy will be drafted and implemented and global partnerships will also	December 2026	Director IT / Director

Sr. No.	Observations/Recommendations of Internal RIPE Report	Actions /Tasks Proposed in Response to Observations/Recommendations of CIP Committee	Timeline to accomplish actions/ tasks	Responsible Office/Officer
		be expanded.		Academics
6.2	Annual global partnership audit and expansion plan	A strategic framework covering these aspects will be developed and followed.	December 2026	Director External Linkages
Standard 07: Faculty Recruitment, Development and Support Services				
7.1	Continuous Professional Development (CPD) activities are not systematic.	An annual/bi-annual staff training calendar will be developed and implemented.	December 2026	Director HR/ Registrar Office
Standard 08: Academic Programs and Curricula				
8.1	No structured mechanism for collecting feedback on student support/facilities.	Annual Student Support & Facilities Feedback survey will be designed and administered; Feedback will be incorporated into curriculum review.	December 2026	Director QEC /Dirctor Academics/ PO Student Affairs
Standard 09: Admission, Progression, Assessment, and Certification				
9.1	No significant gaps identified.	Maintain current practices; monitor through routine QEC review.		
Standard 10: Student Support Services				
10.1	Comprehensive services exist (Financial Aid, Career Development, Counselling, Disability Support, Student Council) but lack formalized SOPs/feedback loop.	Student support policy with defined roles and SOPs will be developed and implemented; e-helpdesk and satisfaction surveys will also be introduced.	Winter 2026-27 semester	PO Student Affairs / Senior Tutor Office
Standard 11: Impactful Teaching and Learning and Community Engagement				
11.1	OBE-focused Faculty Development Programme is needed.	OBE-focused Faculty Development Programmes will be conducted.	December 2026	Director HR / Director Academics / Director QEC

Sr. No.	Observations/Recommendations of Internal RIPE Report	Actions /Tasks Proposed in Response to Observations/Recommendations of CIP Committee	Timeline to accomplish actions/ tasks	Responsible Office/Officer
		SDG-linked outreach will be planned and executed.	December 2026	Department of Outreach and Continuing Education
11.2	Launch guest portal.	• Guest portal will be made available on MNSUAM official website.	September 2026	Director IT and Website team
11.3	Administrative staff feedback mechanism is missing.	• Administrative staff feedback will be initiated.	At the end of each semester	Respective Dean/ Director/ Chairperson
Standard 12: Research, Innovation, Entrepreneurship, and Industrial Linkage				
12.1	Industrial-linkage database and strategic-plan visibility need strengthening.	• Comprehensive industry-linkage database will be developed and strategic plan in this regard will be developed and uploaded. • Annual R&I roadmap targeting patents/products/services will be chalked out.	December 2026	Director Industrial Linkages PO ORIC
Standard 13: Fairness and Integrity				
13.1	Strong policy base exists (Conflict of Interest, IP framework, hiring SOPs etc.) however, documentation/ compliance tracking will further strengthen implementation.	• Complete documentation of integrity practices will be ensured while integrating HR compliance checks. • Annual staff ethics training will be conducted and robust anonymous reporting system will be implemented.	December 2026	Director HR / Registrar Office
Standard 14: Public Information and Transparency				
~~14.1~~	Alumni engagement and graduate employment data not systematically	Employment statistics will be collected and published; mechanism will be instituted for	December 2026	CDC/PB & MNSUAM

Sr. No.	Observations/Recommendations of Internal RIPE Report	Actions /Tasks Proposed in Response to Observations/Recommendations of CIP Committee	Timeline to accomplish actions/ tasks	Responsible Office/Officer
	published.	periodic alumni feedback and digital engagement.		Alumni Association Network (MAAN)
Standard 15: Institutional Effectiveness, Quality Assurance and Enhancement				
15.1	QEC functioning well; scope exists to introduce automation/analytics and benchmarking.	Benchmarking against peer HEIs will be introduced; Good practices will be shared with stakeholders; QA automation tools will be adopted.	December 2026	Director QEC
Standard 16: CQI and Cyclical External Quality Assurance				
16.1	Follow-up documentation exists but tracking of resulting improvements needs consolidation.	• Track record of improvements arising from CQI efforts will be compiled. • Annual CQI review calendar with department-level reporting will be developed and implemented.	Ongoing (annual calendar)	Director QEC

1. Observations and Recommendations:

a. Statutory Bodies

Sr. No.	Findings	Action Required	Timeline	Responsible Office
1.	Academic Council meetings during 2024–25 were not conducted in accordance with the University Act.	Frequency of Academic Council meetings will be considered to comply with the approved frequency.	August, 2026	Registrar Office / Director Academics

Sr. No.	Findings	Action Required	Timeline	Responsible Office
2.	Minutes of the 28th BASR meeting have not been distributed.	The MoM of 28th BASR minutes have been finalized and circulated to all members; A maximum turnaround time for future MoM distribution will be fixed.	September, 2026	Director Graduate Studies
3.	Financial Audit Report for FY 2024–25 is missing.	Signed/Verified copy of Financial Audit Report for FY 2024–25 will be furnished for the compliance.	August, 2026	Treasurer Office

b. Teaching and Faculty Development

Sr. No.	Findings	Action Required	Timeline	Responsible Office
1.	Teaching methodologies require improvement, particularly mental wellbeing, peer counseling and student-engagement techniques.	Regular faculty training sessions covering these areas will be organized.	Winter 2026-27 semester	Director HR / Director Academics / Director QEC
2.	No bi-annual training calendar currently exists.	A bi-annual staff training calendar will be developed and implemented.	September, 2026	Registrar Office / Director QEC
3.	Faculty requires training in project development, research-grant writing, and funding management.	Structured workshops/ certifications in grant writing and research-funding management will be organized.	Ongoing (annual)	PO ORIC

c. Infrastructure and Facilities

Sr. No.	Findings	Action Required	Timeline	Responsible Office
1.	Internet connectivity is inadequate, affecting effective use of the LMS.	Campus network bandwidth and Wi-Fi coverage will be upgraded while prioritizing academic blocks and hostels.	August, 2026	Directorate of IT
2.	Faculty Information System (FIS) portal access unavailable for many faculty members.	FIS portal access will be restored/extended to all faculty; user accounts audit will be done.	Immediate	Directorate of IT
3.	Lack of study tours limiting practical/experiential learning.	A departmental study-tour calendar with budget allocation will be developed.	Ongoing (annual)	Director Academics / Deans' Offices
4.	No live kitchen facility for faculty/ practical training.	Live kitchen facility for relevant programs will be made available.	December, 2026	Directorate of Estate Management
5.	Parking sheds and day-care center facilities are inadequate.	Parking-shed capacity will be expanded and the day-care center facilities will be improved.	November, 2026	
6.	No dispensary or on-campus doctor available.	Efforts will be made to establish on-campus dispensary with a regular/on-call doctor.	December, 2026	PO Student Affairs

d. Students Facilities and Support

Sr. No.	Findings	Action Required	Timeline	Responsible Office
1.	Extra-curricular activities need to be increased for student	The frequency of extra-curricular/co-curricular activities and societies will be	Ongoing (annual)	DSA / In-charge Clubs & Societies

Sr. No.	Findings	Action Required	Timeline	Responsible Office
	engagement and personality development.	increased.		
2.	Smart classroom infrastructure requires development/upgrading.	Classrooms will be upgraded with smart teaching technology in phases.	Academic Year 2026-27	Directorate of IT / Directorate of Estate Management
3.	Shortage of water dispensers across floors.	Water dispensers will be installed at appropriate places in academic and hostel buildings.	September, 2026	Directorate of Estate Management/Department of Soil and Environmental Sciences/Department of Outreach and Continuing Education
4.	Cafeterias lack shaded areas and sufficient seating.	Shaded seating areas will be added and cafeteria capacity will also be expand.		
5.	Insufficient trash bins across campus.	Additional trash bins will be installed campus-wide and waste-collection schedule will also be notified; efforts regarding environmental sensitization for campus community will also be undertaken.		

Director QEC / Secretary IQC

Vice Chancellor / Convener IQC