Doc. 300.3.1

Date: May 5th 2022

External Evaluation Report
(Departmental)

- **Higher Education Institution:**
  European University Cyprus

- **Town: Nicosia, Cyprus**

- **School/Faculty: School of dentistry**

- **Department: Department of Dentistry**

- **Department's Status: Currently Operating**

- **Programme(s) of study under evaluation:**
  Name (Duration, ECTS, Cycle)

Programme 1
In Greek:
Programme Name
In English:
Bachelor of Dental Surgery (BDS)

Programme 2
In Greek:
Programme Name
In English:
Master of science (MSc) Orthodontics

Programme 3
In Greek:
Programme Name
In English:
 Programme Name

ΚΥΠΡΙΑΚΗ ΔΗΜΟΚΡΑΤΙΑ
REPUBLIC OF CYPRUS

Department's programmes (to be filled by the CYQAA officer and verified by the EEC):

DEPARTMENT	PROGRAMMES OF STUDY
	Bachelor of Dental Surgery (BDS)
	Master of science (MSc) Orthodontics

A. Introduction

This part includes basic information regarding the onsite visit.

The 7 members of the EEC attended the facilities of the European University of Cyprus on the 2nd and 3rd May 2022. Prior to the visit the EEC had been provided with extensive information and data and adequate time to review. The visit was well organized, was run in a timely manner and provided adequate opportunity for the EEC to be satisfied and appropriately complete the evaluation. The visit consisted of a brief introduction of the members of the EEC, meeting with the Head of the Institution and the Head or/and members of the Internal Evaluation Committee, meeting with the CYQAA Officer, meeting with the Head of the Department and the program Coordinator of the Master of Science in Orthodontics, meeting with members of the teaching staff on each course for all the years of study (QA session), meeting only with students and or/and their representatives, on site visit to the premises of the School/ Department and observation of one lesson. The Medical School was established 10 years ago and has developed its education and curriculum, which is now firmly established. They have developed clinical training and research profile and community outreach. The Dental Department was established in 2017 and is now looking for independence as Dental School. The admission of the first cohort of dental students was in September 2017 and these students are expected to graduate in July 2022. The senior leadership of the university (Rector's office) are encouraging and supportive of new schools within the university including a dental school as a separate from a medical school. The leadership of the school of Medicine, including the dean are also supportive of the project of establishing an independent dental school within the university and the position of the department within the School of Dentistry will be strengthened for international recognition.

B. External Evaluation Committee (EEC)

Name	Position	University
Coulthard, Paul	**Full-time professor**	**Queen Mary University of London**
Ren, Yijin	**Full-time professor**	**University of Groningen**
Valmaseda-Castellón, Eduardo	**Full-time professor**	**University of Barcelona**
Christodoulou, Panayiota	**Student**	**University of Cyprus**

ΔΙΠΑΕ
CYQAA

ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ
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C. Guidelines on content and structure of the report

- *The external evaluation report refers to the Department as a whole (programmes offered, teaching staff, administrative staff, infrastructure, resources, etc.).*

- *The external evaluation report follows the structure of assessment areas and sub-areas.*

- *Under each assessment area there are quality indicators (criteria) to be scored by the EEC on a scale from one (1) to five (5), based on the degree of compliance for the above mentioned quality indicators (criteria). The scale used is explained below:*

  1 or 2:   *Non-compliant*

  3:     *Partially compliant*

  4 or 5:   *Compliant*

- *The EEC must justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.*

- *It is pointed out that, in the case of indicators (criteria) that cannot be applied due to the status of the Department, N/A (= Not Applicable) should be noted and a detailed explanation should be provided on the Department's corresponding policy regarding the specific quality indicator.*

- *In addition, for each assessment area, it is important to provide information regarding the compliance with the requirements. In particular, the following must be included:*

  Findings

  A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

  Strengths

  A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.

  Areas of improvement and recommendations

  A list of problem areas followed by or linked to the recommendations of how to improve the situation.

- *The EEC should state the compliance for each sub-area (Non-compliant, Partially compliant, Compliant),* ***which must be in agreement with everything stated in the report.***

- ***The report may also address other issues which the EEC finds relevant.***

1. Department's academic profile and orientation
(ESG 1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9)

Sub-areas

   1.1   **Mission and strategic planning (including SWOT analysis)**
   1.2   **Connecting with society**
   1.3   **Development processes**

Mark from 1 to 5 the degree of compliance for each quality indicator/criterion

    1 or 2: Non-compliant
    3:   Partially compliant
    4 or 5: Compliant

Quality indicators/criteria	
1. Department's academic profile and orientation	
1.1 Mission and strategic planning (including SWOT analysis)	**1 - 5**
1.1.1 The Department has formally adopted a mission statement, which is available to the public and easily accessible.	5
1.1.2 The Department has developed its strategic planning aiming at fulfilling its mission.	5
1.1.3 The Department's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted.	4
1.1.4 The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice.	5
1.1.5 The academic community is involved in shaping and monitoring the implementation of the Department's development strategies.	5
1.1.6 Stakeholders such as academics, students, graduates and other professional and scientific associations participate in the Department's development strategy.	3
1.1.7 The mechanism for collecting and analysing data and indicators needed to effectively design the Department's academic development is adequate and effective.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.	

Click to enter text.

There are clear strategic objectives of the School of Medicine. These are the following: 1. education and curriculum development, 2. clinical training, 3. research and external profile, 4. community outreach. We understand that the School of Medicine has firmly established 1. & 2. and is now developing its research profile and believes that the time is right for a Dental Department to develop independently and develop its own education and curriculum. The Department of Dentistry in the same institution has 10 years experience of delivering its goals and objectives and we believe that the Department of Dentistry will take a shorter time given the learning from the strategical planning of the Department of Medicine. However, precise delivery time points were not provided. Cyprus Dental Association and the student body, as far as we know, have not contributed to the strategic discussions to develop a Department of Dentistry independently from the Department of Medicine, although they are now contributing to the quality assurance and accreditation. The application of the Department of Dentistry specifies adequate criteria and quality indicators.

The Department offers a BDS in Dentistry and will offer an MSc in Orthodontics. Both programmes are compatible and coherent with the mission of the Department. The leadership of the Department of Medicine fully supports the establishment of an independent Department of Dentistry organising the BDS in Dentistry programme and other postgraduate programs.

Provide suggestions for changes in case of incompatibility.

N/A

1. Department's academic profile and orientation

1.2 Connecting with society	**1 - 5**

1.2.1	The Department has effective mechanisms to assess the needs and demands of society and takes them into account in its various activities.	5
1.2.2	The Department provides sufficient information to the public about its activities and offered programmes of study.	5
1.2.3	The Department ensures that its operation and activities have a positive impact on society.	5
1.2.4	The Department has an effective communication mechanism with its graduates.	5

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

The Department of Dentistry will contribute to meeting the oral health needs of the local community. One of the 3 mission statements of the academic profile and orientation of the institution is to "understand and serve the needs of our society", and among the specific aims, there is to build "strong partnerships with industry and society". Strategic pillar II is "Engagement with Industry and Society". We understood from verbal presentation the intention to provide dental services to schools, prisons or institutions for elderly people. Department's social contribution is specifically addressed in page 86 of the institutional application.

1. Department's academic profile and orientation	
1.3 Development processes	**1 - 5**
1.3.1	Effective procedures and measures are in place to attract and select teaching staff to ensure that they possess the formal and substantive skills to teach, carry out research and effectively carry out their work.	5
1.3.2	Planning teaching staff recruitment and their professional development is in line with the Department's academic development plan.	4
1.3.3	The Department applies an effective strategy of attracting high-level students from Cyprus and abroad.	5
1.3.4	The funding processes for the operation of the Department and the continuous improvement of the quality of its programmes of study are adequate and transparent.	5

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

The application of the Department of Dentistry states that it has the resources to adequately deliver the educational programs. We were not provided with the detailed business plans or financial information data.

-        Expected number of Cypriot and international students: approximately 70 students per year, with approximately 30% Cypriot students, 30% Greek and 40% others. The program admissions is open to all countries, without specific targets, which we believe is good and avoids the risk of focusing on one region alone. Approximately half of the countries are European with current cohorts.

-        Countries of origin of international students and number from each country. Some of this information is specified in the Department application (Information about students).

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Findings
A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

There is a well-developed mission statement, which is publicly accessible.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.
- Five-year BDS degree with English language of instruction. The programs offered by the Department prepare graduates for immediate employment, specialization, academia and / or research.
- Modelled on European Union Directives and other international health care standards.
- Dynamic and technology-driven learning approaches.

- Clinical and communication skills training in state-of-the-art simulated preclinical dental facilities.
- Access to the most advanced dental laboratory facilities.
- Recognisability of the EUC BDS program:

(a) International students from different countries promote multicultural environment.
(b) Excellent faculty with international recognition and who have held positions in other academic institutions.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

We support the development of a Dental School from the Dental Department so that it can continue to flourish and especially in areas that are dental specific.

Please select what is appropriate for each of the following sub-areas:

Sub-area	Non-compliant / Partially Compliant / Compliant
1.1 Mission and strategic planning	Compliant
1.2 Connecting with society	Compliant
1.3 Development processes	Compliant

2. Quality Assurance
(ESG 1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 1.8)

Sub-areas
2.1 System and quality assurance strategy
2.2 Quality assurance for the programmes of study

Mark from 1 to 5 the degree of compliance for each quality indicator/criterion

1 or 2: Non-compliant
3:   Partially compliant
4 or 5: Compliant

Quality indicators/criteria		
2. Quality Assurance		
2.1 System and quality assurance strategy		**1 - 5**
2.1.1	The Department has a policy for quality assurance that is made public and forms part of the Institution's strategic management.	5
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	5
2.1.3	The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.	5
2.1.4	The quality assurance system adequately covers all the functions and sectors of the Department's activities:	
	2.1.4.1 Teaching and learning	5
	2.1.4.2 Research	5
	2.1.4.3 The connection with society	5
	2.1.4.4 Management and support services	5
2.1.5	The quality assurance system promotes a culture of quality.	5
2.1.6	Students' evaluation and feedback	5

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

The assessment policy includes course evaluation, teacher evaluation, internal management control/assessment within university, external management control/assessment by government or other external body, Quality reports, Publicity and Analysis.
We presume that a transcript is available upon request by student on graduation although we were not provided with evidence of such.

2. Quality Assurance		
2.2 Quality assurance for the programmes of study		**1 - 5**
2.2.1	The responsibility for decision-making and monitoring the implementation of the programmes of study offered by the Department lies with the teaching staff.	5
2.2.2	The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Department are clear, sufficient and known to the students.	5
2.2.3	The quality control system refers to specific indicators and is effective, which have been presented and discussed.	5
2.2.4	The results from student assessments are used to improve the programmes of study.	5
2.2.5	The policy dealing with plagiarism committed by students as well as mechanisms for identifying and preventing it are effective.	5
2.2.6	The established procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective.	5
2.2.7	The Department publishes information related to the programmes of study, credit units, learning outcomes, methodology, student admission criteria, completion of studies, facilities, number of teaching staff and the expertise of teaching staff.	5
2.2.8	Names and position of the teaching staff of each programme are published and easily accessible.	5
2.2.9	The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered.	5
2.2.10	The Department flexibly uses a variety of teaching methods.	5

2.2.11	The Department systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place.		5
2.2.12	The Department analyses and publishes graduate employment information.		5
2.2.13	The Department ensures adequate and appropriate learning resources in line with European and international standards and/or international practices, particularly:		
	2.2.12.1	Building facilities	5
	2.2.12.2	Library	5
	2.2.12.3	Rooms for theoretical, practical and laboratory lessons	5
	2.2.12.4	Technological infrastructure	5
	2.2.12.5	Academic support	5
2.2.14	There is a student welfare service that supports students in regard to academic, personal problems and difficulties.		5
2.2.15	The Department's mechanisms, processes and infrastructure consider the needs of a diverse student population such as mature, part-time, employed and international students as well as students with disabilities.		5
2.2.16	Mentoring of each student is provided and the number of students per each permanent teaching member is adequate.		5
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.		5
2.2.18	The number of doctoral students, under the supervision of a member of the teaching staff, enables continuous and effective feedback to the students and it complies with the European and international standards.		N/A
2.2.19	The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates.		5
2.2.20	There is a clear policy on authorship and intellectual property.		4

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

The on site visit provided information about the policy to detect and eliminate plagiarism, but we could not find the Department's policy on authorship.

Findings

A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

The department's application specifies and details the composition, duties, responsibilities and methodology of an examination committee.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.

Student feedback used to improve programs of study.
We noted a broad range of innovative teaching methodologies and use of technology for effective teaching.
Learning experience is enhanced by recovering data using specific learning software.
The group sizes were small, which facilitates the quality of education, engagement and interaction.
It was pleasing to see a good gender balance, with approximately 55% female undergraduates.
We also noted the diversity of nationalities, with 33 nationalities.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

Greater involvement of external stakeholders in curriculum design would be helpful. For example, the use of external examiners, would offer annual opportunity for development rather than the five-year review, or a mid-term review with external academics.

Whilst during the visit on site we were provided with information about the policy to detect and eliminate plagiarism, we could not find the Department's policy on authorship.

Please √ what is appropriate for each of the following sub-areas:

Sub-area	Non-compliant / Partially Compliant / Compliant
2.1 System and quality assurance strategy	Compliant
2.2 Quality assurance for the programmes of study	Compliant

3. Administration
(ESG 1.1, 1.3, 1.6)

<u>Mark from 1 to 5 the degree of compliance for each quality indicator/criterion</u>

1 or 2:   Non-compliant
3:   Partially compliant
4 or 5:   Compliant

Quality indicators/criteria	
3. Administration	**1 - 5**
3.1	The administrative structure is in line with the legislation and the Department's mission.	5
3.2	The members of the teaching and administrative staff and the students participate, at a satisfactory degree and on the basis of specified procedures, in the management of the Department.	5
3.3	The administrative staff adequately supports the operation of the Department.	5
3.4	Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Department's council competently exercises legal control over such decisions.	5
3.5	The Department applies effective procedures to ensure transparency in the decision-making process.	5
3.6	Statutory sessions of the Department are held and minutes are kept.	5
3.7	The Department's council operates systematically and autonomously and exercise the full powers provided for by the law and / or the constitution of the Department without the intervention or involvement of a body or person outside the law provisions.	5
3.8	The manner in which the Department's council operates and the procedures for disseminating and implementing their decisions are clearly formulated and implemented precisely and effectively.	5
3.9	The Department applies procedures for the prevention and disciplinary control of academic misconduct of students, teaching and administrative staff, including plagiarism.	5
3.10	The Department has appropriate procedures for dealing with students' complaints.	5

ΔΙΠΑΕ CYQAA ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ
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3.11	Internationalization of the Department and external collaborations.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
Click to enter text.		

Findings
A short description of the situation in the Department based on evidence from the Department's application and the site - visit.
We found a broad range of administrative support employees appropriate to the needs of the Dental School and Department.
We did not find evidence of external collaboration. However, we understand that the profile of the teaching staff will facilitate the establishment of such.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.
- Robust administration of admissions was evident.

- Use of deposit payment system for tuition fees.

- Team of administrators across the universities is growing to match the changing needs.

- Well-organised faculty development seminars.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

Monitor needs for changing administrative support as the Dental School and University develops.

Please select what is appropriate for the following assessment area:

Assessment area	Non-compliant / Partially Compliant / Compliant
3. Administration	Compliant

4. Learning and Teaching
(ESG 1.2, 1.3, 1.4, 1.9)

Sub-areas

4.1 Planning the programmes of study
4.2 Organisation of teaching

Mark from 1 to 5 the degree of compliance for each quality indicator/criterion

1 or 2: Non-compliant
3:   Partially compliant
4 or 5: Compliant

Quality indicators/criteria	
4. Learning and Teaching	
4.1 Planning the programmes of study	**1 - 5**
4.1.1	The Department provides an effective system for designing, approving, monitoring and periodically reviewing the programmes of study.	5
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	5
4.1.3	Intended learning outcomes, the content of the programmes of study, the assignments and the final exams correspond to the appropriate level as indicated by the European Qualifications Framework (EQF).	5
4.1.4	The programmes of study are in compliance with the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable.	5
4.1.5	The Department ensures that its programmes of study integrate effectively theory and practice.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.	
Click or tap here to enter text.	
4. Learning and Teaching	
4.2 Organisation of teaching	**1 - 5**

4.2.1	The Department establishes student admission criteria for each programme, which are adhered to consistently.	5
4.2.2	Recognition of prior studies and credit transfer is regulated by procedures and regulations that are in line with European standards and/or international practices.	5
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	5
4.2.4	The teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship.	5
4.2.5	Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process.	5
4.2.6	The teaching staff of the Department provides timely and effective feedback to their students.	5
4.2.7	The criteria and the method of assessment as well as the criteria for marking are published in advance.	5
4.2.8	The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
Click to enter text.		

Findings
A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

In the clinical flow of patients is not clear if each student has access to the number of required clinical procedures. For instance, a patient taken on by a dental student may require treatments the student has already gained competence in. It would be helpful when students graduate that patients be transferred to junior students taking into account the type of dental procedures needed by the next student.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.

The Medical School is accredited by the World Federation of Medical Education and the Higher Education Accademy (HEA).
The Dental School has an integrated spiral curriculum structure, which is innovative and allows the students to revisit knowledge, whilst driving towards mastery. The curriculum is designed to deliver active learning in the later years.

There is an extensive use of learning technology (technologically driven teaching and learning), including the use of simulation, virtual reality, clinical skills and haptics.

Teaching includes research methodology, biostatistics, epidemiology, so that students can undertake review of the scientific literature and understand the principles of critical appraisal.

A comprehensive hard copy logbook is used to assess the quality and volume of dental procedures undertaken by students. We understand there is a plan in development for an e-logbook, which will be excellent in terms of data security and monitoring for the fair allocation of patient treatment.

Induction and orientation days are good for development of professionalism. Professional behaviours and ethics are a significant part of the dental curriculum in developing attitudes for professional behaviour.

We noted diversity and inclusivity of staff and student body and their pride in this.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

We noted that undergraduate dental students assisted each other on clinics, which seems to be acceptable both to staff and students. However, in very many European countries, the traditional model would be the students to be assisted by a dental nurse/assistant. We presume that local graduate dentists will work with such an assistant in general dental practice. In addition, many international graduates will definitely be working with a dental assistant. We recommend that consideration be given therefore for dental nurses to be employed, so that students can gain the necessary teamwork experience.

Representatives of the students expressed that they preferred more short lecture sessions and more small group seminar workshops and lab hours.

We recommend considering peer teaching and support across the curriculum.

The growth of student numbers in the following years must be addressed by expanding the number of facilities and recruiting more patients.

Please select what is appropriate for each of the following sub-areas:

Sub-area	Non-compliant / Partially Compliant / Compliant
4.1 Planning the programmes of study	Compliant
4.2 Organisation of teaching	Compliant

5. Teaching Staff *(ESG 1.5)*

Mark from 1 to 5 the degree of compliance for each quality indicator/criterion

1 or 2: Non-compliant
3: Partially compliant
4 or 5: Compliant

Quality indicators/criteria	
5. Teaching Staff	**1 - 5**
5.1	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	5
5.2	The teaching staff of the Department has the relevant formal and substantive qualifications for teaching the individual subjects as described in the relevant legislation.	5
5.3	The visiting Professors' subject areas adequately support the Department's programmes of study.	3
5.4	The special teaching staff and special scientists have the required qualifications, sufficient professional experience and expertise to teach a limited number of programmes of study.	5
5.5	The ratio of special teaching staff to the total number of teaching staff is satisfactory.	5
5.6	The ratio of the number of subjects of the programme of study taught by teaching staff working fulltime and exclusively to the number of subjects taught by part-time teaching staff ensures the quality of the programme of study.	5
5.7	The ratio of the number of students to the total number of teaching staff is sufficient to support and ensure the quality of the programme of study.	5
5.8	Feedback processes for teaching staff in regard to the evaluation of their teaching work, by the students, are satisfactory.	5

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

Although we were informed of teaching staff number, we do not know the number of visiting professors or special scientists on lease services. We could not find evidence of the subject areas of the visiting professors or special scientists on lease services.
- Number of teaching staff working full-time and having exclusive work
- Number of special teaching staff working full-time and having exclusive work
- Number of visiting Professors
- Number of special scientists on lease services

Findings

A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

Fourteen full-time staff includes the following: 4 professors, 2 associate professors, 3 assistant professors, 5 lecturers. The supporting staff included 2 administrators, 1 assistant, 2 X-ray assistant, 4 laboratory assistents, 1 purchasing officer. Further academic positions are due to be advertised.
The institution rewards successful research by reducing teaching hours.

Strengths

A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.

The institution rewards successful research by reducing teaching hours.
A high staff to student ratio was noted, with 1 staff to 10 students for clinical simulation teaching and 1 to 5 staff to student ratio for patient clinical experience.
Staff development is adequate, and we are pleased to see opportunities for reward as annual award for teaching excellence.
The institution is committed with gender equality and is already showing good evidence of this.

Areas of improvement and recommendations

A list of problem areas followed by or linked to the recommendations of how to improve the situation.

We understand that there may not be a system in place for external examiners and would recommend this.

Please √ what is appropriate for the following assessment area:

Assessment area	Non-compliant / Partially Compliant / Compliant
Teaching staff number, adequacy and suitability	Compliant
Teaching staff recruitment and development	Compliant
Synergies of teaching and research	Compliant

6. Research

(ESG 1.1, 1.3, 1.5, 1.6)

<u>Mark from 1 to 5 the degree of compliance for each quality indicator/criterion</u>

1 or 2: Non-compliant
3:   Partially compliant
4 or 5: Compliant

Quality indicators/criteria	
6. Research	**1 - 5**
6.1 The Department has a research policy formulated in line with its mission.	5
6.2 The Department consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes.	5
6.3 The Department provides adequate facilities and equipment to cover the staff and students' research activities.	5
6.4 The Department has the appropriate mechanisms for the development of students' research skills.	5
6.5 The results of the teaching staff research activity are published to a satisfactory extent in international journals which work with critics, international conferences, conference proceedings, publications, etc. The Department also uses an open access policy for publications, which is consistent with the corresponding national and European policy.	5
6.6 The Department ensures that research results are integrated into teaching and, to the extent applicable, promotes and implements a policy of transferring know-how to society and the production sector.	3
6.7 The Department provides mechanisms which ensure compliance with international rules of research ethics, both in relation to research activity and the rights of researchers.	5
6.8 The external, non-governmental, funding of research activities of teaching staff is similar to other Departments in Cyprus and abroad.	3
6.9 The policy, indirect or direct of internal funding of the research activities of the teaching staff is satisfactory, based on European and international practices.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.	

We marked point 6.6 as partially compliant because Dentistry had not yet the opportunity to deliver research outcomes to inform education.

We marked point 6.8 as partially compliant as we were unable to compare research funding with other institutions in Cyprus and abroad because Dentistry is not yet at the position to obtain external grant income.

Findings
A short description of the situation in the Department based on evidence from the Department's application and the site - visit.
We mark point 6.6 and 6.8 as partially compliant because Dentistry had not yet the opportunity to deliver research outputs to inform education.
We marked point 6.**8** as partially compliant as we were unable to compare research funding with other institutions in Cyprus and abroad because Dentistry is not yet at the position to obtain external grant income.

It is pleasing to see that efforts are made to encourage research, such as the Annual Award in Teaching Excellence.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.
- Eligibility is being sought for 'Time's Higher' recognition. Dentistry already is included in impact ratings.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

A research strategy should be developed, so there are clearly focused areas of research that will show impact, in addition to high quality publications. This will enable the building of research reputation and international recognition for the new school.
We also recommend the appointment of high-profile experienced researchers to lead research teams. This will lead to the opportunity to attract PhD students.
We encourage leadership of research in collaboration with academics across the university and also externally.

Please √ what is appropriate for the following assessment area:

Assessment area	Non-compliant / Partially Compliant / Compliant
Research mechanisms and regulations	Compliant
External and internal funding	Partially Compliant
Motives for research	Compliant
Publications	Partially Compliant

ΔΙΠΑΕ CYQAA ΦΟΡΕΑΣ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΤΗΣ ΑΝΩΤΕΡΗΣ ΕΚΠΑΙΔΕΥΣΗΣ
CYPRUS AGENCY OF QUALITY ASSURANCE AND ACCREDITATION IN HIGHER EDUCATION

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7. Resources *(ESG 1.6)*

Mark from 1 to 5 the degree of compliance for each quality indicator/criterion

1 or 2: Non-compliant
3:   Partially compliant
4 or 5: Compliant

Quality indicators/criteria	
7. Resources	**1 - 5**
7.1	The Department has sufficient financial resources to support its functions, managed by the Institutional and Departmental bodies.	5
7.2	The Department follows sound and efficient management of the available financial resources in order to develop academically and research wise.	5
7.3	The Department's profits and donations are used for its development and for the benefit of the university community.	3
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	5
7.5	The Department carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.	5
7.6	The Department's external audit and the transparent management of its finances are ensured.	5
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	5

Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

We marked point 7.3 as partially compliant. Considering that the institution has made extensive investment in both teaching and research material and the policy of resources is specified in the application form, profits and donations will be used in the benefit of the university community. It is too early in the business cycle to expect significant profits yet.

Findings
A short description of the situation in the Department based on evidence from the Department's application and the site - visit.

The institution seems to have allocated the adequate resources to support the learning objectives.

Regarding patient resources, we were not provided with clear evidence of patient numbers for clinical session, although we understand that clinics are generally busy and provide an adequate clinical experience for the students. We note that students have a comprehensive logbook to complete, but we were not provided with the information about the number of procedures required to complete before graduation. We are not sure if students are exposed to surgical procedures beyond extractions, such as implantology.

Strengths
A list of strengths, e.g. examples of good practices, achievements, innovative solutions etc.

We're pleased to see the leadership team for Dentistry has sufficient autonomy for management of its resources for education, research and community engagement.

Areas of improvement and recommendations
A list of problem areas followed by or linked to the recommendations of how to improve the situation.

Three-dimensional image techniques (particularly CBCT) should be provided.
It is unclear to the EEC how many patients are treated by year, so it is hard to evaluate whether the number and type of clinical treatments will be enough to meet student and patient needs.

Please √ what is appropriate for the following assessment area:

Assessment area	Non-compliant / Partially Compliant / Compliant
7. Resources	Compliant

D. Conclusions and final remarks

Please provide constructive conclusions and final remarks, which may form the basis upon which improvements of the quality of the Department under review may be achieved.

We were pleased to see the support from the senior leadership. In addition to provide education and research, the establishment of a new School of Dentistry to strengthen the position of the Department of Dentistry will offer clinical service to provide the needs of the local population and increase employment opportunities for local population.

The Medical School was established 10 years ago and has developed its education and curriculum, which is now firmly established. They have developed clinical training and research profile and community outreach. The Dental Department was established in 2017 and is now looking for independence as Dental School. The admission of the first cohort of dental students was in September 2017 and these students are expected to graduate in July 2022. The senior leadership of the university (Rector's office) are encouraging and supportive of new schools within the university including a Dental School as a separate from a Medical School. The leadership of the school of Medicine and the Department of Medicine, including the dean are also supportive of the project of establishing an independent Dental Department within the university.

Despite the challenges posed by the COVID19 pandemic and its particular impact on the practice of dentistry, the leadership team has demonstrated resourcefulness and innovation in providing adequate clinical experience for the students.

In addition to reseach and teaching we were pleased to find community engagement, such as students producing posters, pamphlets and examination of patients in the community during oral cancer prevention week.

We the EEC confirm that we fully support the accreditation of the Department of Dentistry. We recognized that this is a successful department in the university, and we understand that there will be challenges, but we believe that the strength of leadership and planning that we have seen the evidences of will enable this department to continue to flourish and develop.

E.   Signatures of the EEC

Name	Signature
Coulthard, Paul	
Ren, Yijin	
Valmaseda-Castellón, Eduardo	
Christodoulou, Panayiota	

Date: May 5th 2022