

Doc. 300.3.1

Date: Date

External Evaluation Report (Departmental)

- **Higher Education Institution:**
University of Nicosia
- **Town:** Nicosia
- **School/Faculty:** Medicine
- **Department:** Primary Care and Population Sciences
- **Department's Status:** Currently Operating

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

Programme 1

In Greek:

Programme Name

In English:

Masters of Science in Family Medicine

Programme 2

In Greek:

Programme Name

In English:

Programme Name

Programme 3

In Greek:

Programme Name

In English:

Programme Name



The present document has been prepared within the framework of the authority and competencies of the Cyprus Agency of Quality Assurance and Accreditation in Higher Education, according to the provisions of the “Quality Assurance and Accreditation of Higher Education and the Establishment and Operation of an Agency on Related Matters Laws” of 2015 to 2021 [L.136(I)/2015 – L.132(I)/2021].



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

DEPARTMENT	PROGRAMMES OF STUDY



A. Introduction

This part includes basic information regarding the onsite visit.

We were commissioned to undertake an evaluation of the Department of Primary Care and Population Health in November 2022. We attended a full day of presentations on 14th November 2022, and spent the next 2 days producing this report. We were provided with extensive background information on UNIC, the medical school and the department. In producing this report we combined information from the day of presentations, our discussions with students and staff and the background documents. We would like to commend the department and its staff on the exceptional organisation associated with this evaluation – every detail was given a lot of attention, and the staff were very responsive to our queries.

B. External Evaluation Committee (EEC)

<i>Name</i>	<i>Position</i>	<i>University</i>
Eva Hummers	Professor, Head, Dept. of General Practice	Göttingen University Medical Center
David Weller	Professor, Head, Dept. of General Practice	University of Edinburgh
Henk van Weert	Professor, Head Dept. of General Practice	Amsterdam University Medical Center
Teresa Guasch	Dean of the Faculty of Psychology and Education	Open University of Catalonia (UOC)
Stephanos Cheilidis	Medical Student	University of Cyprus
Name	Position	University

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:	<i>Non-compliant</i>
3:	<i>Partially compliant</i>
4 or 5:	<i>Compliant</i>

- *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.	4
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.	4
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.	3
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

Click to enter text.

Additionally, provide information on the following:

1. Coherence and compatibility among programmes of study offered by the Department.
2. Coherence and compatibility among Departments within the School/Faculty (to which the Department , under evaluation belongs).

The mission statement is very good. In terms of strategic planning we think there could be some improvements – eg in research, development of the discipline. There are well-formulated ideas, but they're not so far in the context of an operational plan with clear milestones, targets and timeframe. The programmes reflect the profile and skills of the academics, but in terms of alignment with European and international practice there could be more information and specifics – and there is some non-compliance with European regulations for training in general practice, but this could be readily achieved in the future (if critical). Great involvement of academic community, we are less certain about the broader profile of stakeholders – eg the exact nature of the relationship with RCGP/contact with local and internal scientific organisations. In terms of collecting data, the urgent issue is patient data in the medical centre – this is a potentially valuable resource which is, at present, under-utilised and under-developed. So it can't fulfill its societal task. Conversely the metrics of academic performance of the department are transparent and thorough.

Provide suggestions for changes in case of incompatibility.

In terms of coherence and compatibility we were, on the whole, impressed. There seems to be good buy-in from members of academic and admin staff to the department's vision, and good sharing of information and skills. Across the 3 programmes there are many modules which integrate well, allowing students to 'mix and match' through electives. This is enhanced by a benevolent and supportive organisational culture, which actively promotes coherence and collaboration.

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.	3
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.	4
1.2.4	The Department has an effective communication mechanism with its graduates.	4

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

In terms of assessing needs and demands of society, it's difficult. They are serving both a global and Cypriot community. There isn't much available data to measure global health impact of family medicine initiatives – so the challenge arises more from lack of data than through any fault of the department. In terms of 'positive impact', again there aren't many valid indicators to measure impact, despite the best efforts of the department. Ideally the department might serve as a catalyst to encourage development of better indicators. There are good communication mechanisms with graduates – there should be pro-active efforts to nurture this graduate community and secure their ongoing engagement. The careers office seems to be an excellent initiative – their activities are reflective of best international practice.

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.	5
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.	4

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

There do appear to be difficulties in attracting family doctors, but this is being actively addressed. This, to some extent, reflects global pressures and workforce shortages. 1.3.2 – we didn't get a lot of information about staff professional development. We wondered about broadening the recruitment base – with a focus beyond Europe and North America (although this may have already been considered). We didn't ask specifically about internal funding transfers and budgets. Overall the medical school appears to be in good financial shape, and we didn't hear any concerns about lack of funds inhibiting ambitions. There were good, and well-funded, induction procedures for new staff.

Additionally, write:

- Expected number of Cypriot and international students
- Countries of origin of international students and number from each country

These data are available from departmental admin staff

Findings

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

See above – nothing further to add

Strengths

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

Overall we were very impressed. The administrative guidance for procedures (in areas such as induction, mentoring etc) seem excellent. We've highlighted further strengths above – we'd particularly emphasise the care that is taken over nurturing staff and students. Their success in attracting students from around the world is great to see – and we are pleased to see there are positive mechanisms to broaden access. Their academic mission is ambitious, recognising that international development of family medicine is a significant challenge; further, in Cyprus, there is a health system in transition which is still defining roles for primary care. This presents very considerable challenges for department staff, but this is being met with a thoughtful and rigorous approach, enthusiasm and commitment.

Areas of improvement and recommendations

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

It's important that staff have access to mechanisms to keep up to date with FM developments internationally and in Cyprus. Access to health data (including primary care data) is imperative in this environment. We see potential for departmental staff to be real agents for change in this regard – they are well-placed to persuade government and policy makers of the benefits of developing their health data infrastructure, both in terms of basic health intelligence and monitoring/surveillance, and in research. The development of an equivalent to CPRD, and the capacity to link health data sets, would be game-changing in Cyprus. Information systems within primary care practices are an integral component to this. To teach the complete spectrum of primary care, and to emphasise evidence into practice, more family doctors, with appropriate support, would really help.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
1.1 Mission and strategic planning	Compliant
1.2 Connecting with society	Partially 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	4
2.1.4.3	The connection with society	4
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.

Research is inhibited by poor data infrastructure, although QA mechanisms can't really alleviate this. Metrics on research are readily available. There is a paucity of FM research (compared to other areas) but this can hopefully be addressed as the department grows and better data become available. As we've previously mentioned, we are impressed with mechanisms for student feedback; we're less clear on how the extensive student feedback data are used to effect change.

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.	4
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.	4
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.	4
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.	4
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.	N/A
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.	5

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

2.2.2: there is a degree of subjectivity to student assessment – this might be expressed more explicitly. We acknowledge this is a problem which is common to all institutions working in this field. As previously discussed, we're not entirely clear on how student feedback actually modifies and refines the curriculum. We're a little unclear about how student objections to a grade are dealt with – are students included in the ongoing process of working through a complaint. In terms of mentoring, we only have limited information on programmes outside the FM masters. The number

of permanent teaching staff may not be sufficient to provide adequate mentoring for such a large student body (particularly if undergraduate students included). We weren't really provided with info needed to comment on doctoral studies. We also emphasise that the vast majority of information we received related to the FM masters – we have received written info on other masters programmes but there wasn't time to discuss. So our comments are based largely on our impressions of the FM teaching. We also had very limited discussion of the undergraduate curriculum. These aren't criticisms – just caveats to our comments. We note that research QA doesn't appear to feature heavily in these QA topics, despite being central to the department's mission

Findings

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

As described above, we were, overall, very impressed with QA mechanisms in place. There is a prevailing culture at UNIC medical school of transparency and openness, with rigorous and frequent assessment of all academic activities.

Strengths

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

As described above there are numerous strengths. There are robust processes in place

Areas of improvement and recommendations

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

We've highlighted a small number of areas – largely relating to clarity and transparency. Strengthening research QA might be a priority going forward.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
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)

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		
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

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.

We have scored every domain 5. We were very impressed with the administrative team we met. They appear to function well as a team, and have well-delineated functions and roles. We didn't have the time to discuss these issues in detail with the team, but these are the impressions we formed based on those we did meet, and the written materials we received.

Findings

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

As above

Strengths

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

As above, we see this as a particular strength of the department.

Areas of improvement and recommendations

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

In all honesty, we couldn't identify areas of improvement. We were impressed.

Please select what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
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.

The planning process seems impressive to us. As previously discussed, there is effective integration of theory and practice in the programme. Much of the 'practice' does, of course, happen in distant and diverse settings, and it's challenging to assess such a diverse range of 'practice' environments.

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.	N/A
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.	4
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.

Overall, again we were impressed. In terms of 'the teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship' we base this on what we saw in the FM masters. We have very limited information on the undergraduate programme. We didn't see a lot of examples of student-centred learning, but that may be just lack of information we had access to.

Findings

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

See above, we have rated this domain highly

Strengths

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

There are numerous strengths, as we've highlighted – based largely on the course we examined (MSc Fam Med). Most processes seemed to work very well, with robust mechanisms for collecting

student feedback. The wide range of teaching methodologies is impressive – although we lacked granular detail on individual methods in individual topics.

Areas of improvement and recommendations

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

More explicit expression of student-centred learning might be an area for development – although what we saw in the FM masters looked impressive.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
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.	2
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.	5
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.	N/A
5.5	The ratio of special teaching staff to the total number of teaching staff is satisfactory.	N/A
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.	N/A
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.	3
5.8	Feedback processes for teaching staff in regard to the evaluation of their teaching work, by the students, are satisfactory.	4

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

As we've previously highlighted, the number of GPs on the faculty is a problem. While there is a strong case for a multidisciplinary team for teaching a FM masters, GP input is critical. We struggled with some of these answers as they require a level of detail we don't have. We gather that the number of students exceeds the capacity of the teaching staff, and many students are sent away for placements, but we don't have a detailed grasp of this problem – our medical student colleague relayed that students complain about clinical experience in the undergraduate

courses. Clearly universities need to think carefully about capping numbers of students on Cyprus.

Also, write the following:

- 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

We'll leave this to the local administrative staff to complete

Findings

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

As described above, we are generally very impressed but there are some teaching challenges, particularly around capacity and profile of staff

Strengths

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

We've already provided a number of strengths

Areas of improvement and recommendations

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

Capacity development, caps on undergraduate students, aligning students to staff capacity

Please ✓ what is appropriate for the following assessment area:

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

6. Research

(ESG 1.1, 1.3, 1.5, 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		
6. Research		1 - 5
6.1	The Department has a research policy formulated in line with its mission.	3
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.	4
6.3	The Department provides adequate facilities and equipment to cover the staff and students' research activities.	4
6.4	The Department has the appropriate mechanisms for the development of students' research skills.	4
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.	4
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.	4
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.	N/A
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.	N/A

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

In terms of research policy there was some detail missin - particularly, aspirations around capacity development, capacity to deliver a variety of research methods etc. While there is clearly an aspiration to grow research, there might have been more detail on funding bodies to target, a research framework etc. There are very few areas of relevance to primary care/general practice – eg diagnosis, primary care-based trials, health services research, management of multimorbidity, data-driven innovation in primary care, quality of life etc. However, it is a young department, and opportunities to focus on research are just becoming available. Recent increases in research time available for staff are welcome. We would like to have seen more complete information on papers, and needed to go to Google Scholar in some cases. There’s good outputs on the public health side (for example in diabetes, adolescent health, obesity) but we struggled a little to get a comprehensive picture over overall research output content and performance. It would be good to know if there’s a Cyprus equivalent to the UK’s Research Excellence Framework – and how the department would score. Perhaps a mock REF, applying international criteria would be a useful exercise. The lack of GP research at present represents a real opportunity for the future. Note on 6.9: we saw examples of internally-funded research but struggled to make judgements over its compliance with stated regulations. We lack the benchmarks to judge how well the department is doing in comparison with other similar departments.

Findings

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

As above, we’ve found some strengths. It is a young department, and research is just beginning to gain traction. There is a paucity of FM research, as discussed. There are numerous methodological strengths in public health and epidemiology – so primary care research would be well-supported

Strengths

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

Public health research, good research leadership from head of department.

Areas of improvement and recommendations

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

As described above. Development of a more detailed strategy, and building primary care research should be particular priorities

Please ✓ what is appropriate for the following assessment area:

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

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.	4
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.	N/A
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	4
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.	N/A
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. See below		

Findings

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

We generally struggled with these questions. We didn't do into detail about finances in the department and their deployment. Our impression is one of very good administrative support, and compliance with regulations. We know much less about strategic deployment of funds to support research

Strengths

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

Very strong admin support

Areas of improvement and recommendations

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

Difficult to say based on our knowledge

Please ✓ what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
7. Resources	Partially 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.

As you can see from this report we are very impressed by the Department of Primary Care and Population Health. It is a young department with great ambitions, and staff who are dedicated and passionate in all they do. The University of Nicosia provides an excellent environment in which the department can thrive; all of the necessary infrastructure is there, from student support services to research support facilities of a very high standard. The prevailing culture at the university and medical school is one of excellence and support.

The students we met on the MSc Family Medicine programme (a total of 4 students) described their involvement in the programme in very positive ways – indicating it had had a profound effect on their personal and professional development. They came from a variety of countries including Jamaica, Iraq and Kenya. Despite their dispersed locations they all felt a strong bond with UNIC. Their sense of belonging to a ‘group’ of fellow students was expressed strongly.

We are impressed with the efficacy of the administration of the department – the processes we observed functioned well, and contributed to the smooth running of the department. Throughout the document we highlight many strengths of the department. As a combined department of primary care and population health, there is a broad and multi-disciplinary faculty, including epidemiologists, statisticians and social scientists. Our focus was on evaluating the primary care element, and one of its flagship postgraduate programmes (the MSc in Family Medicine). There are noticeably few GPs in the department, although

We’ve made some recommendations throughout the document. They are in a number of areas:

Research

- Definition of research themes, and development of primary care components
- Primary care is relatively under-developed, with modest research outputs inhibited, to some extent, by poor research infrastructure (particularly availability of data). It would be good to see a trajectory outlining future ambitions for primary care research – for example, capacity building, PhD students, links to the health service, targets for funding applications etc.
- We note there is a reasonable number of core-funded academic staff with protected research time (now 30% or more). This gives some scope to realise ambitions around growth. From what we know competitive research funding is limited in Cyprus, but we’d hope to see a stronger portfolio of externally-funded posts and projects in the years ahead.

Teaching

- As can be seen in our evaluation of the Masters of Family Medicine programme, we were impressed with the programme and its ambitious agenda.
- We’ve made comments on the scope of the course, in both clinical and non-clinical areas. The content of the course might be the subject of more ongoing review – nevertheless, we are impressed by the continuous overall evaluation of the courses
- We really appreciated the myriad of teaching methods used in the department

Staff

- We noted high morale, and a team of people signed up to the department's mission. They are driven by a shared belief in the department's mission. The international focus of the department is both challenging and enriching for the staff – they need to engage with students and colleagues around the world.
- As mentioned a number of times in the document, there is a need for more GPs in the department. We recognise the challenges of GP recruitment – particularly GPs with academic credentials. Ideally the GP staff in the department should cover a broad range of primary care topics

Clinical Service

- We noted the good links with primary care practices on the island. The medical centre is clearly a beacon of excellence, and a great facility for clinical teaching.
- We've made recommendations on improving the data infrastructure within the centre and, more broadly, in primary care across the island. Improvements in the registration system would also help.

In conclusion, we have found it a privilege to evaluate the Department of Primary Care and Population Health Sciences. Every indication suggests this is a department on an upward trajectory, with a bright future – ably supported by its medical school and university. We would like to thank staff for their amazing efforts in providing information for this review. The day of presentations was extremely informative – the pride and the passion of staff really shone through. We look forward to seeing how the department develops in the years ahead.



E. Signatures of the EEC

<i>Name</i>	<i>Signature</i>
Eva Hummer	Eva Hummer
David Weller	David Weller
Henk van Weert	Henk van Weert
Teresa Guasch	
Stephanos Cheilidis	Stephanos Cheilidis
FullName	

Date: 16th November 2022

