Doc. 300.3.1

Date: Date

External Evaluation Report

(Departmental)

- **Higher Education Institution:**

  University of Nicosia

- **Town:** Nicosia

- **School/Faculty:** Medicine

- **Department:** Basic and Clinical Sciences (BCS)

- **Department's Status:** Registered but not evaluated - accredited

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

Programme 1
In Greek:
Διδακτορικό στις Ιατρικές Επιστήμες (3 Έτη / 180 ECTS, Διδακτορικό)

In English:
Doctoral Degree in Medical Sciences (PhD, (3 years / 180 ECTS, Doctoral Programme)

Programme 2
In Greek:
In English:

Programme 3
In Greek:
In English:

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

DEPARTMENT	PROGRAMMES OF STUDY

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

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A. Introduction

This part includes basic information regarding the onsite visit.

The panel visited the Department of Basic and Clinical Sciences, University of Nicosia Medical School on 26th June 2023.

We first met with the Rector of the University who presented an overview of the University as a whole, its strengths, achievements, and its international focus. He presented details of the overriding structure of the organisation, its vision, strategy and some future developments.

We then met with the Executive Vice President for Health, UNIC Health, and Dean of the Medical School who gave a presentation about UNIC Health and the programmes offered. He introduced the senior members of his team. We had an in-depth conversation about departmental activity and strategic development. We then heard from the Departmental Head followed by the Programme Director of the PhD programme who provided a thorough review.

We spent time with senior administrators who described the overall administrative structure and harmonious way of working to support University function. This meeting highlighted to us how Faculty and Administrators alike are supportive and encouraging of diversity across all protected characteristics (such as disability, sexual orientation, pregnancy, race, religion or belief).

Finally, we met with students from the Department who stressed the personalised support provided, academic opportunities and way in which many managed study alongside teaching roles in Department and family lives.

Because of the in-depth discussions, we skipped a tour of the facilities. Details of the day, our findings and recommendations are included through the remainder of this report.

B. External Evaluation Committee (EEC)

Name	Position	University
Professor Nicki Cohen	Professor of Neuropathology & Medical Education, Dean of Medical Education	King's College London, UK
Professor Reinold Gans	Professor of Medicine	Rijksuniversiteit Groningen, University Medical Center Groningen, The Netherlands
Professor Tea Lallukka	Professor of Medical Sociology, Head of the Department of Public Health	University of Helsinki, Finland
Mr Stephanos Hilides	Year 6 Medical Student and Student representative	University of Cyprus, Cyprus

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)

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.	4
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.	
We were impressed with 1.1.1 and 1.1.2. We sense, within 1.1.3, that the relatively new and evolving work of the Faculty has limited the long-term goals and objectives to a degree, but trust this will mature with time.	

We imagine that there is broad stakeholder involvement at the University level for developing strategy. While we heard that some academic colleagues have roles with scientific and patient organisations that encourage dialogue, we were not convinced of evidence that scientific associations have participated in the Department's developing strategy. We were impressed by the department's Quality Assurance system and the factors in place to ensure the Department's academic development is adequate and effective.

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 programmes offered are evolving. There is a useful degree of overlap between them to bolster the overall academic output. They demonstrated clear coherence and compatibility within the Department and among other departments within the School and Faculty.

We commend the University for the recent development of the Veterinary School, and the coalescence of the Life & Health Sciences, Veterinary and Medical schools into UNIC Health with many synergies and opportunities for growth.

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.	4
1.2.2	The Department provides sufficient information to the public about its activities and offered programmes of study.	4
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.	5

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

It is clear that the Department has some really excellent projects with the community (for example its outreach "mobile clinic" for medical students which provide basic screening evaluation for regional populations).

We sense there are opportunities to improve patient and public engagement. This is not surprising given the rapid and ambitious growth of the department. We would encourage the Department to seek ways to strengthen their engagement with the public and patients, particularly to improve relationships and demonstrable outcomes with General Healthcare System, GHS (GeSY) colleagues.

This may come for example through the planned growth of the University of Nicosia Medical Clinic which will provide an excellent opportunity for clinical trials and clinical basis of the biobank (and preferably an aligned prospective cohort study) in the future.

We would like to commend the Department for the strong links and activity it has built with its (medical) alumni.

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.	3
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 Department has succeeded in recruiting excellent faculty. The overall aims to grow research time in the department were discussed and we note that this is for the overall shape of the department, based on individual variation and preference. We would suggest that the Department could be more explicit in stating future research and education career tracks effectively and in considering how this might explicitly relate to promotion.

The highest priority here relates to closer working between Universities and GHS, and we understand that Government support in this area would be helpful. This appears to be outside the circle of influence of the Faculty, so while we consider the overall picture to be compliant, this remains an issue to address.

Additionally, write:

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

We refer to the documentation provided by the Department in the visit pack. We recognise the world-wide nature of student recruitment. However, waivers for students from less affluent countries could be encouraged.

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

The overall situation is strong. There are some limitations and room for the improvement but in general the Department is compliant in each section.

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

1. Attention to Quality and Quality Assurance
2. Active recruitment strategy, as exemplified by the actual faculty recruited.
3. We heard of excellent funded opportunities for faculty development
4. The way in which the faculty have involved their alumni, with 44% contributing to guidance for final year medical students on world-wide working. We look forward to hearing of similar activities with PhD students in due course.

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

1. Stakeholder involvement at the Departmental level, with a view to using this as a tool to enhancing patient / public partnership and with GHS colleagues.
2. Long-term goals and explicit attention to career track ambition.
3. While outside the power of the University, we would strongly encourage all stakeholders to work towards more effective partnership between Academia and GHS Hospitals, for mutual benefit. This may include dual appointments, funding and performance review, for example.

While we feel that the Department is compliant throughout the section above, the two areas highlighted above provide opportunity for further strengthening

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.	4
2.1.3	The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.	4
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	3
	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.

2.1.2 As described in the earlier section, we feel that more effort may be possible related to engaging with external stakeholders at the departmental level.

2.1.3 It is clear from observations and conversations that the department is incredibly supportive of all individuals with protected characteristics. Given the strength in this area we did not discuss how this is quality assured but have no real concerns in this area.

2.1.4.3 In line with 2.1.2, we also feel that there is more that the Department can do to explore how to involve society in their research and educational programmes. This would be assisted by stronger links with GHS colleagues, which we would recommend the University assists them with.

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.	4
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.	5
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.

2.2.12 We congratulate the programme on their strengths with alumni and were happy to hear that 99.8% are employed. It would be useful for the Department to publish more information on the types of roles, rate of progression and other data relating to their alumni success. This would be useful for future recruitment of students and for mapping opportunities research and possible funding and collaboration activities.

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

The Department, generally, is very strong in this area and provided an insightful and considered approach. We would encourage them to consider what additional data relating to the successes of its alumni it could publish. This may still be an area in evolution given the relatively young nature of the programmes and that no PhD student has yet graduated.

We do feel that there is more that the Department can do to explore how to involve society in their research and educational programmes. This would be assisted by stronger links with GHS colleagues, which we would recommend the University assists them with.

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

1. The strategic plans around the growth of the University of Nicosia Clinic, with potential for integration of clinical care and research, potentially including clinical trials work alongside the biobank facility are excellent and will be a source of major impact in the future. This is likely to impact reciprocally on the quality of clinical research staff the Department attracts, its future partnerships with GHS colleagues and future funding or industry partnership potential.

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

See under findings.

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)

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.		
N/A		

Findings

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

The administration of the Department appears exemplary, and we would like to highlight the efforts of all involved in achieving this. Diverse background of staff is a strength, and this was highlighted by the people we met. The staff described their work as rewarding.

Strengths

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

1. We observed that Faculty and Administrative staff work together incredibly well, with a harmonious supportive community basis.
2. We were struck by very transparent lines of communication and sense that all were involved, without siloes or strict hierarchy.
3. The internationalisation of the Department in terms of students, academic work and management (the NEOLAiA Alliance) is a strength likely to bring significant awards in the future.

Areas of improvement and recommendations

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

N/A

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.	4
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.		
4.1.2 We were unclear on how patients, as stakeholders, are involved in the programmes' review and development. We heard limited input from employers because of the nature of the programmes.		
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.

N/A

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

The scores awarded are based on the documentation provided as well as previous experience, rather than detailed discussion.

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

Please see above.

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

1. The UNIC Health structure provides the potential for interprofessional / interdisciplinary teaching and learning across the schools, for the benefit of its students particularly related to transferable skills. This would provide graduates with a notable unique selling point for employment.

2. Projects such as this also provide opportunities for pedagogical research. Given the diversity of the student population, UNIC Health is well placed to develop in this area.
3. Given the modern approach of the Department and its Faculty, we suggest that consideration is made to the development of an MD PhD Programme to develop research potential alongside clinical skills (running modules and/or programmes synchronously rather than sequentially, to aid learning to ensure all skills are current at the time of graduation). This would enhance the research potential of the school and provide notable opportunities for applicants and help to propel UNIC to the forefront of medical education internationally.

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.	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.	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.

N/A

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 refer to the documentation provided by the Department in the visit pack.

Findings

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

The teaching staff have excellent qualifications and experience and there is a sufficient number of teachers to support the students. Everything appeared transparent.

Strengths

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

1. The ambitions of the Department are echoed in the enthusiasm and drive dedicated in its academic and administrative staff. They described themselves as hard working people.
2. We are enthused by the way faculty encourage and respond to feedback.

Areas of improvement and recommendations

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

N/A

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)

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.	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.	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.	4
6.8	The external, non-governmental, funding of research activities of teaching staff is similar to other Departments in Cyprus and abroad.	4
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.	4
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

Findings

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

Having reviewed the documentation and information provided at talks, including the SWOT analysis, we have no major concerns relating to compliance, but have highlighted a number of areas where improvement may be possible.

Strengths

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

1. We are impressed by the strategic attention paid and transparency of research output.
2. We are particularly struck by Times Higher Education Impact Rankings: Good Health and Wellbeing.

Areas of improvement and recommendations

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

1. Opportunities to apply for funding nationally should be increased. Funding is currently mostly internal and European, which potentially limits the opportunity for research-informed teaching, as explained in the application document.
2. A more strategic approach to publication and publication journals would help the department evolve and target their research areas more towards impact in the future.
3. We would encourage the University to work with the Government to ensure that a proportion of income the island sees from its students and their visitors is assigned back into financial resources to drive the output of the university.
4. We would suggest that the Department leverages its international teaching partnerships to be more proactive in applying for international funding of research.
5. We would suggest a clear, well-publicised Research Integrity Policy was established. There are some processes in place (and we note the National Bioethics Committee approach), but some of this training appears voluntary in nature. PhD students appeared not to be fully aware of the meaning of research integrity. A course early on could be helpful, or clear guidance to all materials available.

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	compliant
Motives for research	compliant
Publications	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.	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.	5
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.	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.

7.4 We would encourage the University to work with the Government to ensure that a proportion of income the island sees from its students and their visitors is assigned back into financial resources to drive the output of the university. This would provide an additional welcome and needed stream of national funding that could be aligned with national priorities in research and health.

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

From the documentation provided, we have been able to judge 7.6 and 7.7, but did not discuss this specifically during the visit.

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

1. The Department has developed significant educational and research impact, supported by the University, despite relative paucity of national funding.
2. The strategic union of schools to form UNIC Health will be a major source of impact in the future.

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

1. While we note the external audit procedure is excellent, we note the recommendation in the documentation for an appointment of an internal auditor.

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.

It is clear that UNIC is a nimble, ambitious and successful university, and the recent development of UNIC Health is testament to its strategic development and potential for the future. The culture and values clearly demonstrated by Faculty and Administrators within the Medical School are markers for future potential and have enabled its successes to date across research and education.

Plans such as the expansion of the UNIC Health Clinic and the Biobank are exciting and strategically align with the potential for sizeable international impact. We have identified two factors that would drive future successes at scale, both of which seem outside UNIC's immediate influence:

A. Ability to draw upon **enhanced national funding,** through a partial re-investment in local economic growth caused by students and visitors, for research and university funding. This may, for example, support high impact work such as a prospective cohort study alongside the biobank, which could be aligned with the national healthcare needs of Cypriot society.

B. Governmental support in **developing closer synergy to alleviate the tension** between Academic and GHS clinicians through appointments and planning, funding and appraisal. This would promote a richer community for clinical research and better support educational endeavours.

UNIC Health provides excellent opportunities for development of further educational programmes. Developing a combined **MD PhD programme** would be a clear signal of its potential to develop graduates who will be excellent clinicians, able to lead research and drive the research economy of Cyprus and Internationally through alumni networks. There are also possibilities around interdisciplinary and interprofessional education which would be beneficial for the Faculty to explore.

At the Departmental level, the strategic growth of international academic staff has been successful, such that the Department is now able to offer a wide range of research projects to both medical and PhD students. We recognise the Departmental vision to identify areas of true strength and to move, in time, to a more structured / selective approach to research endeavours. We would anticipate that this, together with the opportunity of staff to move towards education or research-dominant careers will be effective, and would encourage the Faculty to explore other Universities promotion criteria in order that academic excellence can be celebrated in different ways.

The harmonious, diverse and supportive nature of the Department is a sure sign of future success and we would like to thank all for their transparent and enthusiastic approach to the visit.

E.   Signatures of the EEC

Name	Signature
Nicki Cohen	
Reinold Gans	
Tea Lallukka	
Stephanos Hilides	Stephanos Hilides

Date: 28 June 2023