



Doc. 300.2.1

**External** 

**Evaluation** 

Report (Institutional)

Date: Date

Higher Education Institution:
 European University Cyprus

Town: Nicosia/Frankfurt

• Institution Status: Currently Operating



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].

#### A. Introduction

This part includes basic information regarding the onsite visit.

The European University Cyprus (EUC) has applied for accreditation to set up a Frankfurt branch of the Department of Medicine, within the School of Medicine, to deliver an identical medical programme and student experience as that delivered in Cyprus. The EUC was evaluated by the External Evaluation Committee (EEC) in December 2019 and accredited by the CYQAA in spring 2020.

The EEC visited the EUC (Frankfurt) branch on 1 and 2 June 2022 where we had a tour of the building and facilities that the School plans to use for the first few years of the medical programme. There is a plan to develop adjacent buildings to cope with larger intakes of students from the 5th year of operation.

Throughout our visit we had several meetings with key personnel including the University Vice Rector (Academic Affairs), the Dean and Chair of Medicine, and the Director of the EUC (Frankfurt) branch. We also met six members of academic (teaching) staff, three of whom have full-time continuing appointments and three with visiting, scientific collaborator contracts. There was also a meeting with the administrative, professional and technical staff.

The EEC wrote the report together on 3 and 4 June 2022, and were provided with 3 more documents on request and in addition we requested another discussion with the Director of the EUC (Frankfurt) branch to clarify a few points.

This report draws on the visit tour, the meetings with staff, the documents provided by the School and the findings by the EEC in their December 2019 report. Since the EUC (Frankfurt) branch is not yet operational, the EEC was not able to explore the implementation with students or staff. This must be taken into account when reading the report since we were unable to fully evaluate the criteria based on effective and efficient implementation.



### **B. External Evaluation Committee (EEC)**

Name	Position	University
Professor Helen Cameron	Interim Head of School,  Dean of Medical Education,  Aston Medical School	Aston University Birmingham UK
Professor Reinold Gans	Head and Chair of Medicine, University Medical Center Groningen, The Netherlands	Rijksuniversiteit Groningen (RUG)
Eleni Vasileiou	Medical Student	Heinrich Heine University Düsseldorf
Dr Sonja Mikeska	Quality Manager / Higher Education Manager	FH Münster University of Applied Sciences
Professor Dr Matthias Siebeck, MME	Senior Researcher Institute of Medical Education	Ludwig-Maximilians Universität München
Professor Dr Dr Timo Ulrichs	Professor of International Emergency and Disaster Relief  Chair of Global Health and Development Cooperation	Akkon University of Human Sciences Germany

Maximilians

### C. Building Facilities - Student Welfare Services - Infrastructure

- Under plans and licenses, choose Yes or No depending on the existence of the given documents.
- Note whether the statements given under the other facilities, the student welfare services and the infrastructure are considered satisfactory/poor/unsatisfactory for the operation of the Institution.
- The EEC must justify the answers provided for the building facilities, the student welfare services and the infrastructure by specifying (if any) the deficiencies.

### 1. Building facilities

### 1.1 Plans and licenses

Choose Yes or No depending on the existence of the following documents.

1. Building facilities			
1.1 Pla	ns and li	censes	Yes / No
		owing should be copies from the original building permit. On the there should be a visible official stamp of approval from the reies.	
1.1.1	1.1.1.1	A topographical plan, which displays in a clear manner the extent of the development.	Yes
	1.1.1.2	A general site plan, which marks the building facilities, allocated parking spaces (for students, academic and teaching personnel, visitors and disabled individuals), sports premises and outdoor areas.	Yes
1.1.2	An oper	rating license issued by the Local Authorities	Yes
	The follo	owing operating license certificates, duly completed:	
	1.1.3.1	Visual Inspection Form E.O.E. 102	N/A
1.1.3	1.1.3.2	Visual Inspection for the Building's Seismic Sufficiency Form E.O.E. $\!\Sigma$ . E.K 103	N/A
1.1.3	1.1.3.3	Inspection Certificate Form 104	N/A
	1.1.3.4	Fire Safety Certificate, issued by the Fire Department	Yes
	1.1.3.5	Certificate for Adequate Electrical and Mechanical Installations, issued by the Electromechanical Department	No
Justify the answers provided for the building facilities by specifying (if any) the deficiencies.			
Justifications for the answers above			





Certificates for 1.1.3.1, -2 and -3 are not applicable for German licencing procedures. Fire protection assessment (Brandschutzkonzept und –beurteilung), 1.1.3.4, is complete and will be accepted after having finished all construction works. Certificate for the electrical and mechanical installations, 1.1.3.5, will also be issued after completion of all works, i.e. in September 2022.

### **Findings**

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

- A visit around the area/quarter together with the campus manager Dr. Bux revealed that the whole area provides enough space both external for parking lots, security areas and within the buildings via reconstruction of the four floors for the needs of a school of medicine.
- The whole area is owned by a real estate agency that has a comprehensive plan to develop the quarter into a "mixed urban area" for living, recreation, learning, shopping and working. The school of medicine should play an important role for contributing higher academic education into the whole concept. The plan has already been adopted by the Frankfurt city administration.
- The medical school will temporarily be established in the main building that has previously been occupied by the local chamber of physicians. Reconstruction of all floors will allow the medical school to start their educational programme by the end of September 2022 and run it for the next five years. Meanwhile, the final medical school campus will be erected nearby.
- Security concept: The fire protection concept, air circulation, electrical and mechanical installations fall under German legislation and regularities and will be externally checked upon completion of all construction works. In addition to all requirements, the construction plans contain an external empty tube for the fire brigade to provide water to the upper floors immediately, and three external emergency staircases for all floors in addition to the central staircase in the building.
  - The reaction time of the fire brigade in case of any emergency is 2 min, 40 sec.
- An assessment for healthy working conditions for both staff and students was not possible at the time of this evaluation as there is still no routine work in the building. Healthy working and studying conditions can be recommended based on the construction plans in the folders, see below.



### Strengths

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

- Teaching infrastructure, being situated in the Western part of Frankfurt, the connections by public transportation are optimal – also for the temporary situation of the medical school in the central former office building.
  - However, student housing situation is difficult and should be supported by the medical school administration.
- With further development planned, and an increase of enrolled student numbers, expansion in lab space and research facilities will be required and can be based on the plan to move to a well-tailored new building on the campus after five years.
- The total space for auditoria, seminar rooms, offices, cafeteria etc. will be sufficient for the starting phase of the medical education programme of the Frankfurt branch.
- The overall security concept (fire protection, emergency aid, emergency shut-offs, evacuation plans etc.) is optimal and very suitable for the already established (and now internally reconstructed and revitalized) building(s).

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

### Safety/security

- After the start of the routine processes, a written risk assessment must be added to all job/work descriptions after first semester. This will be at the interface between safety issues of the infrastructure and work safety issues.
- Training on how to evacuate a lab, a seminar room and an auditorium should be done on a regular basis and the results/weaknesses documented accordingly.
- Standard operating procedures for accidents, health incidents/threats must be developed.
- Focal points within the staff responsible for safety trainings, fire protection and other safety issues must be identified (and trained).







### Health

- In Germany, there is the programme "healthy university" (Gesunde Hochschule) with special additional requirements for recreation areas, sport activities, green environment. A certificate can be issued if these requirements are fulfilled.
- Medical check-ups for all staff members must be organized (occupational medicine).
- As construction works will accompany the first years of the Frankfurt branch, a policy should be developed and implemented to protect staff and students from dust, noise and potentially threatening situations.

### 1.2 Other Facilities

Choose Satisfactory or Poor or Unsatisfactory depending on the level of compliance of each statement.

1. Building Facilities			
1.2 Oti	her Facilities	Satisfactory - Poor - Unsatisfactory	
1.2.1	Number of teaching rooms and their respective areas, capacity and the percentage of daily occupancy for all units	Satisfactory	
1.2.2	Number of offices for teaching staff and their respective areas and capacity	Satisfactory	
1.2.3	Number of laboratories and their respective areas and capacity	Satisfactory	
1.2.4	Number of rooms/offices for directors/administrators and their respective areas and capacity	Satisfactory	
1.2.5	Number of rooms/offices for administrative services and their respective areas and capacity	Satisfactory	
1.2.6	Number of parking spaces designated for students	Satisfactory	
1.2.7	Number of parking spaces designated for teaching staff	Satisfactory	
1.2.8	Number of parking spaces designated for people with disabilities	Satisfactory	

Justify the answers provided for the building facilities by specifying (if any) the deficiencies.

See above for findings, strengths, and recommendations that relate to Other Facilities also.



### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- The answers above within 1.2 Other Facilities refer to the starting phase of the medical school, when a limited number of students will be at the main building at the same time. Enrolling more and more students in the coming years will require more space. There should be a plan B in case of delays or difficulties with providing the new campus facilities.

#### 2. Student Welfare Services

Choose Satisfactory or Poor or Unsatisfactory depending on the level of compliance of each statement.

2. Stud	Satisfactory - Poor - Unsatisfactory	
2.1	Special access for students with disabilities (PWD)	Satisfactory
2.2	Recreation areas	Satisfactory
2.3	Policy and statutes for academic student support	Satisfactory
2.4	Policy and statutes for financial student support	Satisfactory
2.5	Counselling services	Satisfactory
2.6	Career office	Satisfactory
2.7	Service linking the institution with business	Satisfactory
2.8	Mobility office	Satisfactory
2.9	Student clubs/organisations/associations	Satisfactory
2.10	Other services	Choose answer

Justify the answers provided for the student welfare services by specifying (if any) the deficiencies.

Please note: The following statements are made on the basis of the written documentation and our discussions with the EUC members. In many cases, the services have been planned, but have not yet been implemented and tested at the Frankfurt branch.

2.1 Support will be offered to students with disabilities (physical as well as psychological). There are internal regulations concerning "disadvantage compensation/reasonable adjustment" for disabled students and there is psychological counselling available on call. The rooms are mostly wheelchair accessible.







- 2.2 The premises of the Frankfurt branch provide a cafeteria for students, recreational space in the surrounding area according to the map and student rooms with kitchenette and balcony in the building. However, there are no university-owned facilities for sports/music, so only a limited number of recreational offers will be possible.
- 2.3 Academic support is being provided by the academic and clinical advisors. A special orientation week is offered at the beginning of studies.
- 2.4 Scholarships are offered and support is given to students in difficult financial situations (e.g. students from Ukraine). The EEC heard that support will be provided for finding accommodation, which is affordable for students.
- 2.5 There are various counselling options offered from:
- the personal advisor (for administrative help and for orientation) as well as informal counselling from the administrators for everyday life questions
- the academic advisor (for all questions related to teaching & learning)
- clinical advisor (at the hospital).

In addition there are counselling offers like stress management or other online offers from the Student Relationship Office.

- 2.6 The university helps the students with the transition from university to the employment phase with CV preparation for an international job market and there are specific counselling offers.
- 2.7 Link to Employers: Placement to hospitals / primary care: it is planned to cooperate with nearby teaching hospitals (or shuttle services will be made available in case of far distances)
- 2.8 Externships all over the world and Erasmus+ co-operations of the Medical School are available.
- 2.9 Student clubs are planned for the Frankfurt branch (similar to the ones in Cyprus). The university will encourage and support student initiatives to be founded in Frankfurt, e.g. in cooperation with society. An "inclusive culture" is being promoted by the department.

### **Findings**

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

See above within the justifications for scores

### Strengths

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

- There is an excellent service infrastructure for students provided by EUC.
- Both students' academic and personal cares will be taken care of.
- The service offers both online and on-site counselling and will be adapted to the needs of the students of the Frankfurt branch.
- The service will take account of the international and intercultural diversity of the student body.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- EUC should offer applicants with complex needs a consultation with medical and clinical educators before the start of their studies, to plan required adaptations to the facilities and reasonable adjustments to the learning.
- The School should consider how to gradually extend the recreational offering to students.
- The School should explore options to provide their Frankfurt students with funding for a "semester ticket", to use public transport with a discount, in view of the limited recreational facilities on site.
- The School should provide information and arrange for advice and counselling to be offered to those who would like to consider changing their career orientation from medicine to a different discipline.
- EUC should consider providing financial support for externships

#### 3. Infrastructure

Choose Satisfactory or Poor or Unsatisfactory depending on the level of compliance of each statement.

3. Infr	Satisfactory - Poor - Unsatisfactory	
3.1	Library	Satisfactory
3.2	Computers available for use by the students	Satisfactory
3.3	Technological support	Satisfactory
3.4	Technical support	Satisfactory

Justify the answers provided for the infrastructure services by specifying (if any) the deficiencies.

- 3.1 There will be 32 places in the library according to the documents (plus additional places in the study rooms nearby), which will be open during office hours and there will be online access to library services as well as a selection of essential hardcopy books. A librarian will be on site at the Frankfurt branch.
- 3.2 There are separate computer rooms for research and for Computer Assisted Learning (CAL) and also printers will be available.
- 3.3 / 3.4 According to our discussion with the EUC staff there will a person hired for technological & technical assistance at the Frankfurt branch. The EUC learning platform will be used to support the learning process and there will be technical support for this and other online tools.

### **Findings**

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

- See above within the justifications for scores

#### Strengths

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

 There is an excellent, modern and comfortable infrastructure adapted to the needs of the Frankfurt students.



 The learning environment and technological support offers are well designed to support the learning process of the students.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- The capacity and opening hours of the library must be kept under review with the gradually increasing size of the student body.
- Infrastructure (screens) and assistance should be provided for hybrid class meetings that allow for interaction with people in the room and people at home.



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







- 1.1.3 Goals and objectives are not always formulated as 'SMART'
- 1.1.4 This statement holds true for the Cyprus branch, but in the Frankfurt Branch the research topics of the recruited faculty are not necessarily aligned with the Strategic plan for research and innovation. Clinical partners or collaborators to facilitate translational research have yet to be found.
- 1.1.6 Participation of relevant internal as well as external stakeholders representing the Frankfurt branch and forging a development strategy for the School that is shared by all relevant stakeholders from the two branches of the School is not yet in effect.

1.2 Connecting with society		
1.2.1	The Institution 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 Institution provides sufficient information to the public about its activities and offered programmes of study.	4
1.2.3	The Institution ensures that its operation and activities have a positive impact on society.	3
1.2.4	The Institution 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.

- 1.2.1 The need and demands of the local communities in Frankfurt and how to take them into account has still to be developed
- 1.2.2 The institution has information available to inform the public but cannot promote them pending the accreditation.
- 1.2.3 The institution has yet to find ways to connect with the local society how they may reach out and thus ensure a positive impact

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 research and effectively carry out their work.	5
1.3.2	The Institution has a two-year growth budget that is consistent with its strategic planning.	5







1.3.3	Planning academic staff recruitment and their professional development is in line with the Institution's academic development plan.	3
1.3.4	The Institution applies an effective strategy of attracting students/high-level students from Cyprus.	4
1.3.5	The Institution applies an effective strategy to attract high-level students from abroad.	4
1.3.6	The funding processes for the operation of the Institution 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.

- 1.3.3 Recruitment is pending at the Frankfurt branch, but will be in line with the policy of the department of medicine. The School should refocus their strategy staff recruitment plan to attract expert personnel in the key areas of research and medical education.
- 1.3.4 The school succeeded in attracting students from 37 countries for the Cyprus branch. Student recruitment is pending at the Frankfurt branch, but will be in line with the policy of the department of Medicine. It is unclear how the school determines whether they have succeeded in attracting high-level students.
- 1.3.5 See 1.3.4
- 1.3.6 There is a business plan for the Frankfurt Branch that is itemized. The intention was expressed that sufficient funding will be available to jumpstart research of the senior faculty that has and will be recruited

### Additionally, write:

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

Two cohorts of students of 20 persons in the first year



### **Findings**

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

- The aims of the School were addressed through the Mission and Vision which were clearly stated on the website and in the documentation that stem from 2019.
- The official documents at that time contained clear learning outcomes and there were several other frameworks including competences, ACGME framework, WFME standards, EPAs\* and milestones. The EEC received the Clinical Competence Roadmap which represent an effort to harmonise the relationships between the different competencies frameworks with learning outcomes and EPAs.
  \*An EPA is an activity that integrates knowledge, skills and attitude across competency domains that are grounded in clinical practice
- Excerpts from official documents and interviews demonstrated that the School had autonomy to develop the medical curriculum with advice from the Advisory Body, and to operate its own budget.
- The Medical School has many specific policies and procedures and did not report any difficulties in seeking exemptions from standard University policies except for how to decide which students should pass and fail.
- The documentation describes student representation with voting powers on several of the Committees, including the Programme Committee, the Quality Committee and the School Council. Students contribute to all issues in committees except those relating to appointments, promotions, personal issues, and budgets. Students are included in other Governance Committees that are focused on curricular functions.
- Technical staff, administrators and patient groups have been included in the Advisory Board and/or other Governance bodies/committees.
- The EEC heard about Action Plans arising from programme evaluation and review, and read a Strategic Development Plan.
- The EEC read a strategic plan for research and innovation.

### Strengths

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

- All stakeholders sit on relevant committees with voting rights and contribute to policies and creating the Mission and Vision
- There is an Advisory Board that functions to assure the input from all relevant stakeholders but representatives from professional organizations, patient



representatives and the health sector relevant for the Frankfurt branch are yet to be recruited.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- The School must consider how to track learning outcomes across the years to ensure their objectives are met; for that purpose, advice from an expert in curriculum design should be considered.
- The School must ensure that all relevant stakeholders from the Frankfurt branch contribute to the Mission and Vision through participation in all relevant committees with voting rights that contribute to policies.
- The School must identify external stakeholders for the Frankfurt branch that provide input to their policies and thereby their mutual benefit.
- The School must bring more focus on their current main research areas to be able to achieve excellence in their research.
- The School should refocus their strategic staff recruitment plan to attract expert personnel in the key areas of research and medical education.
- The Frankfurt branch must develop their own 'SMART' Strategic Development plan with an indication of how it relates to the Action Plans of the Cyprus branch and with a timeline to help guide and manage these plans. The plan must focus on the development of research and education within the Frankfurt branch against its current resources, along with plans on how to scale up in response to increased student numbers. This plan should be communicated to all stakeholders.

### 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	Partially Compliant	
1.2 Connecting with society	Partially Compliant	
1.3 Development processes	Partially 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 Ensuring quality 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. Qua	lity Assura	ince			
2.1 Sys	tem and Q	uality Assurance Strategy	1 - 5		
2.1.1		ution has a policy for quality assurance that is made public part of its 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.				
2.1.3	The Institution's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.				
2.1.4	The quality assurance system adequately covers all the functions and sectors of the Institution's activities:				
	2.1.4.1	The teaching and learning	3		
	2.1.4.2	Research	4		
	2.1.4.3	The connection with society	1		







	2.1.4.4	Management and support services	4
2.1.5	The qualit	y assurance system promotes a culture of quality.	4
2.1.6	regulation	cution consistently applies pre-defined and published is covering all phases of student 'life cycle', e.g. student in progression, recognition and certification.	5
2.1.7	of the Lis	al practice for recognition being in line with the principles sbon Recognition Convention, cooperation with other and quality assurance agencies and the national RIC centre.	N/A
2.1.8	Graduates gained.	s receive documentation explaining the qualification	4

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

For questions awarded 4, the EEC requires evidence of implementation which will not be available until EUC (Frankfurt) can function.

2.1.3 Awarded 3 because the School policy does not address the need to seek out information about harassment, bullying, or academic / research misconduct.

### 2.1.4.

- 2.1.4.1 Awarded 3 because the School policy does not address the need to adopt an evidence based process to set a specific pass score for each individual assessment that is marked 'objectively' such as multiple choice questions and objective structured clinical examinations (OSCEs). There is a description of the Borderline Regression Method for OSCEs but we also heard that the School is constrained by University regulations to use a set pass score of 60%. Also it is not clear how the School: uses psychometric data; audits learning at each stage and longitudinally by comparing learning and assessment blueprints, and how it shares quality data with students and its other stakeholders.
- 2.1.4.3 Awarded 1 because currently the School does not describe a strategy to quality assure this domain of activity.
- 2.1.7 EEC is not confident to make a comment since it is not familiar with the application of the principles of the Lisbon Recognition Convention within Cyprus and asks the CYQAA to address this point.

### 2. Quality assurance







2.2 Ens	2.2 Ensuring quality for the programmes of study		1 - 5
2.2.1	implement	consibility for decision-making and monitoring the tation of the programmes of study offered by the lies with the teaching staff.	4
2.2.2	The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Institution are clear, sufficient and known to the students.		3
2.2.3	The quality effective.	y control system refers to specific indicators and is	4
2.2.4		ts from student assessments are used to improve the nes of study.	3
2.2.5	,	dealing with plagiarism committed by students as well as ms for identifying and preventing it are effective.	4
2.2.6	The institutionalised procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective.		3
2.2.7	The Institution provides information about its activities, including the programmes of study it offers and the selection criteria for them, the intended learning outcomes of these programmes, the qualifications awarded, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to the students as well as graduate employment information.		4
2.2.8	The Institute learning p	ution ensures that effective methodology is applied in the rocess.	3
2.2.9	The Institution systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place.		3
2.2.10		ution ensures adequate and appropriate learning resourd pean and international standards and / or international y:	
	2.2.10.1	Building facilities	5
	2.2.10.2	Library	4





2.2.10.3	Rooms for theoretical, practical and laboratory lessons	5
2.2.10.4	Technological infrastructure	5
2.2.10.5	Support structures for students with special needs and learning difficulties	4
2.2.10.6	Academic Support	4
2.2.10.7	Student Welfare Services	4

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

For questions awarded 4, we need evidence of implementation which will not be available until the EUC (Frankfurt) can function.

- 2.2.2 and 2.2.4 and 2.2.9 Awarded 3 because the School policy does not address the need to adopt an evidence based process to set a specific pass score for each individual assessment that is marked 'objectively' such as multiple choice questions and objective structured clinical examinations (OSCEs). There is a description of the Borderline Regression Method for OSCEs but we also heard that the School is constrained by University regulations to use a set pass score of 60%. Also it is not clear how the School: uses psychometric data; audits learning at each stage and longitudinally by comparing learning and assessment blueprints, and how it shares quality data with students and its other stakeholders.
- 2.2.6 Awarded 3 because it was not clear how the School would guard against all students submitting complaints and requiring re-marking and if there were any risks to the students such as losing as well as gaining marks. Also not clear how School seeks information on research ethics.
- 2.2.8 Awarded 3 due to lack of clarity about described teaching and learning methods and in some places undue emphasis on the teacher as the solution provider.

### <u>Findings</u>

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

The EEC were able to read the Quality Assurance (QA) Manual for the EUC (Central) – and assurance that these processes would be implemented for the Frankfurt Branch of the Department of Medicine also. We also discussed these with the Vice Rector of the University, and the Dean and the Chair of Medicine. In the absence of students we were not able to explore the implementation of the QA







standards and processes. Recently appointed staff were not yet fully familiar with the processes. We heard that the processes and standards for EUC (Frankfurt) would be identical to those for EUC (Central) and would operate as ONE system through the conjoint committee structure.

- Mechanisms for repeated, systematic programme monitoring and evaluation are planned for EUC (Frankfurt). Teachers and students will give feedback, and based on which strengths and weaknesses are identified, the programme will be modified.
- Students will provide routine feedback electronically, within class, in confidence without the presence of staff. Convenience samples of students will also be asked to give programme feedback in focus groups with staff.
- Students will give feedback on staff and all aspects of their experience.
- EUCMS graduated its first cohort in summer 2019 analysis of the cohorts of graduates demonstrated >90% employability (in clinical posts or undertaking PhD) but there was little further information on their readiness for practice.
- The performance of cohorts of students from EUC (Central) in relation to intended educational outcomes has not yet been tracked through use of assessment blueprinting.
- In its programme monitoring and evaluation activities, the School has involved a range of stakeholders. We heard that following the EEC report in December 2019, EUC (Central) has included representatives of all staff including administrative and technical staff, and representatives of the community such as government and healthcare authorities.
- EUC (Central) now includes patients in its QA and governance committees and processes.
- It was not evident that student feedback data, evaluation reports and development plans were made available to the students and all stakeholders by EUC (Central) or planned for EUC (Frankfurt).
- External reviews were reported but not provided for review by the EEC.

### Strengths

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

- The QA processes are well embedded in EUC (Central) now and the School intends that the Frankfurt branch will join with EUC (Central) to run a single system.







- Students and members of all staff will sit on a number of committees with voting rights and contribute to policies, creating the Mission and Vision and developing the School.
- Staff are eager to learn from student's feedback, and intend to follow a QA approach to development and implementing change.
- In 2019, the students in EUC (Central) were highly satisfied; 50 of the 52 students whom the EEC met recommended the school in a 'blind' vote.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- When implementing the QA strategy within the programme, the School must ensure that it does include representatives of patients and others using the healthcare system in Frankfurt and professional groups.
- The documentation on the programme outcomes should be simplified; the current description referring to the \*Scottish Doctor framework, the module learning objectives, the AGCME Competences and the Clinical Competences Roadmap is too complex and confusing. Consider a more limited model to clarify the relationship between the high level programme learning outcomes and the detailed module learning outcomes.
  - \*Learning Outcomes for the Medical Undergraduate, Scottish Deans' Medical Education Group, 3rd Edition, 2008; Harden et al, 1999
- The documentation on the programme should clarify its use of Contact Hours. There were several examples in the QA Manual where it was stated that Contact Hours were 70-98 hours per week. Contact Hours imply active teaching time between tutor and student. Contact Hours must leave time for independent practice, for example with patients, and also private study.
- The documentation on the programme should improve its use of terminology such as Problem Based Learning and Team Based Learning. Unless it follows the well described methodologies, the School should define what they mean by their terms and/or not capitalise the terms, to improve transparency and clarity and prevent confusion.







- The School must clarify how it ensures confidence (validity) in its decisions about passing and failing students and describe this clearly within policy and regulation documents.
- The Frankfurt branch should, over time, prepare its own evaluation of Frankfurt graduates, investigating their readiness for work in relation to the mission and intended educational outcomes of the curriculum.
- The School must track performance of cohorts of students in relation to the intended and assessed educational outcomes.
- The School should consider employing a curriculum development expert to help describe the intended learning outcomes at module and programme level, and track students' achievements throughout the programme.

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

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



### 3. Administration (ESG 1.1)

### 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. Admi	nistration	1 - 5
3.1	The administrative structure is in line with the legislation in force and the Institution's declared mission.	4
3.2	The members of the teaching and administrative staff and the students participate, at a satisfactory degree and on the basis of based on specified procedures, in the management of the Institution.	4
3.3	Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Institution's Council competently exercises legal control over such decisions.	4
3.4	The Institution applies effective procedures to ensure transparency in the decision-making process.	4
3.5	The Boards of Departments and Schools, as well as the institutionalised committees of the Institution, operate systematically and exercise fully the responsibilities provided by legislation and / or the constitution and / or the internal regulations of the Institution.	4
3.6	The Council, the Senate as well as the administrative and academic committees, operate systematically and autonomously and exercise the full powers provided for by the statute and / or the constitution of the Institution without the intervention or involvement of a body or person outside the law provisions.	4
3.6	The manner in which the Council, the Senate and/or and the administrative and academic committees operate and the	4







	procedures for disseminating and implementing their decisions are clearly formulated and implemented precisely and effectively.	
3.7	The Institution applies procedures for the prevention and disciplinary control of academic misconduct of students, academic and administrative staff, including plagiarism.	4
3.8	The administrative structure is in line with the legislation in force and the Institution's declared mission.	4

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

For questions awarded 4, the EEC requires evidence of implementation before a 5 can be awarded and this will not be possible until the EUC (Frankfurt) can function.

3.1 Awarded 4 – the EEC is not competent to comment on the legal aspects, and we ask the CYQAA to do so.

However we note in the EUC Charter p247 at Section 5 Access to Student Records, we read at 5.1 Access of Eligible Students and Parents, that parents are eligible to access their children's records. The extract reads: "The eligible student or the parent, shall have access to the student record. Upon request for access, the entire student record regardless of the physical location of its parts shall be made available."

The parent is not defined as requiring the student's consent.

The EEC requires reassurance that this is legal within the relevant jurisdictions.

3.8 This seems to be a duplication of 3.1

### **Findings**

- There is a full description of the University, School, and Department Committee structure and membership and the associated Governance processes; these appear appropriate and adequate for the initial phase of the operation of EUC (Frankfurt).
- It was noted that the names, but not the post-holders, of some members of the Committees is now out of date in the Quality Manual.
- There is a full complement of administrative, professional and technical staff described in the documents.
- There is thorough documentation on processes, areas of responsibility and lines of communication.



 The legal aspects are beyond the scope of expertise of the EEC but we note that Section 5 of the UEC Charter permits parents to access their children's records without explicit consent from the student.

### **Strengths**

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

- The EUC (Frankfurt) branch will benefit from the governance and administrative bodies, processes and practices working successfully in EUC (Central).
- The School demonstrates careful planning of the administration of the School, including the EUC (Frankfurt) branch and adequate staffing allocated for the initial phase of EUC (Frankfurt) branch.
- We met an enthusiastic, motivated, and knowledgeable group of staff who will support the administration of the EUC (Frankfurt) branch.
- The staff appeared to be committed to the initiative of the EUC (Frankfurt) branch, service orientated and supportive of their colleagues, and others in the School.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- The School should keep the implementation under review; it may be more difficult to keep all processes aligned than initially envisaged.
- The School should find a method of recording membership of committees in a way that remains current and/or record names (as well as roles) in only one master document that other documents can refer to.
- The EUC must reconsider the grounds on which parents can access students' records and ensure the regulations are both legally and ethically sound.

### 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. Lea	4. Learning and Teaching		
4.1 Planning the programmes of study		1 - 5	
4.1.1	The Institution provides an effective system for designing, approving, monitoring and periodically reviewing programmes of study.	3	
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	4	
4.1.3	The programmes of study are in compliance with the ESG and the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable.	3	
4.1.4	The Institution ensures that its programmes of study integrate effectively theory and practice.	3	
4.1.5	The assessment and evaluation procedures and content are in compliance with the level of the programme of study (in reference to EQF).	3	

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

- 4.1.1 The institutional policies as such are there, and for the medical school, these activities were not effective as observed by the EEC. They do not have a method of capturing the Outcomes.
- 4.1.2 Local stakeholders from the community in Frankfurt have still to be found







- 4.1.3 The areas requiring improvement were not corrected since the last visit of the EEC.
- 4.1.4 The programme of study that is the object of this evaluation integrates theory and practice. However, not effectively.
- 4.1.5 The assessment procedures have not changed since the last visit of the EEC.

4.2 Or	ganisation of teaching	1 - 5
4.2.1	The Institution establishes student admission criteria for each programme, which are adhered to consistently.	4
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 Institution have regular and effective communication with their students.	4
4.2.5	The teaching staff of the Institution provides timely and effective feedback to their students.	3

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

- 4.2.1 For the language issue, cf. recommendations
- 4.2.4 Effective communication with their students were not observed due to lack of students
- 4.2.5 The feedback from teachers to students that the EEC saw 2019 in Cyprus was more complimentary than constructive. That is an issue of the teaching and learning and does not affect the overall rating of the Organisation of Teaching.

### **Findings**

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

- Based on what the documents of the institution's applications and its members said during the site visit, the entire learning and teaching at the Frankfurt branch is equivalent to the Main Institution in Cyprus.







- 4.1.1 The institutional policies as such are there. For the medical school, these
  activities were not effective as observed by the EEC. They do not have a method of
  capturing the Learning Outcomes.
- 4.1.2 As the faculty said, local stakeholders from the community in Frankfurt, students and other stakeholders in Frankfurt, including employers, will be actively involved on the programmes' review and development, and they still have to be found.
- 4.1.3 The programmes of study were assessed by the EEC in 2019, and were not modified since then. The areas requiring improvement were not corrected since then.
- 4.1.4 The programme of study that is the object of this evaluation integrates theory and practice. However, not effectively.
- 4.1.5 As the EEC heard, assessment procedures (regarding the fail/pass mark) have not changed due to COVID pandemic and lack of response of the regulator.
- 4.2.1 Student admission criteria, recognition of prior studies and credit transfer were not changed since accreditation in 2019.
- 4.2.2 Admission criteria do not include language proficiency of the host country.
- 4.2.3 The planned number of students in the teaching rooms that the EEC inspected is suitable for theoretical, practical and laboratory sessions during the initial years of the development of the school. The number of students in the following years depends on the completion of the planned construction of a new building.
- 4.2.4 Since admission of students is planned for autumn 2022 only, effective communication with their students and timely and effective feedback to their students were not observed.
- 4.2.5 In Frankfurt, feedback between teachers and students was not observed due to the lack of students.

### **Strengths**

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

- The School admits candidates from several countries establishing a large cultural diversity.
- The school has enthusiastic, highly motivated teachers bringing in international experience and cultural diversity.
- The school has excellent facilities and equipment.



### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

- The language issue was not solved. From what the EEC saw at the site visit in 2019, there was an improvised way of handling that issue in an environment where international students are learning to communicate with patients whose language is Greek. The EEC has a concern that the needs of the learners are not met, e.g., when it comes to patient communication about serious and intimate health problems in German or Greek speaking environments. If that does not occur early on in the curriculum, it may become a serious concern.
- The School must introduce the students to real patients earlier than Year 4.
- In Years 1-3 assessment is delivered according to disciplines, not integrated into a systems approach and hence not aligned to the intended horizontal integration of the curriculum.
- Systematic compulsory training of examiners for OSCE is not routinely implemented.
   The MiniCEX is used summatively and has no constructive feedback. Outcomes for staff in the faculty development activities should be defined.
- Post-test item analysis and the reliability of assessments are now being performed.
   However it is not clear how that feeds back into the programme and contributes to quality assurance.
- The school must routinely use a procedure of standard setting for assessment items. The school must have the autonomy to set pass-marks and to deviate from the 60% rule. A rigid 60% rule interferes with the principle of patient safety. The school must be able to set a 100% rule for certain exams. Moreover, the school must make sure that weaknesses in life-saving competencies cannot be compensated with other exam items. On the opposite end of the scale, when exam items are too difficult for the developmental stage of the learner and at the same time are free from flaws, lower percentages must be applied.
- The University must allow external examiners to participate in final exams as a quality assurance measure.
- A longitudinal \*science curriculum was not well represented in the entire programme.
   Science is the basis for the medicine that the graduates are going to practise.
   Systematic teaching the scientific approach must start earlier in the programme.
   There is need for faculty development activities for integrating a science curriculum



into the overall programme. The science curriculum must become a longitudinal thread throughout the programme.

- Learning and Teaching need to involve modern methods like problem-based learning. The labels problem-based learning and team-based learning are used for teaching activities that do not meet the educational principles behind those terms.
- The feedback from teachers to students that the EEC saw 2019 in Cyprus was more complimentary than constructive. In Frankfurt, feedback was not observed due to the lack of students. Teachers must become competent in how to engage in a constructive feedback dialogue.

\*By science curriculum we mean the competences related to evidence based medicine and research including: defining a research question; identifying appropriate databases; undertaking a literature search; critically appraising literature; applying these skills to real world scientific or clinical problems; relating findings to specific patients and discussing them with patients for shared decision making.

### 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	Partially 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. Tea	ching 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 Institution have 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 Institution's programmes of study.	4
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.	N/A
5.8	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	N/A







5.9

The visiting Professors' subject areas adequately support the Institution's programmes of study.

5

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

Given that the Frankfurt branch has not yet been accredited at the time of the site visit, only a very limited number of teaching staff working full-time and having exclusive work, special teaching staff working full-time and having exclusive work, visiting Professors or special scientists on lease services were hired.

Criterion 5.9 appears to be duplication of Criterion 5.3

- Number of teaching staff working full-time and having exclusive work: 3
- Number of special teaching staff working full-time and having exclusive work: N/A
- Number of visiting Professors: 3
- Number of special scientists on lease services: N/A

Click to add text

### **Findings**

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

- The EEC met with 3 teaching staff and with 3 Visiting Professors or scientific collaborators or special teaching staff working part-time. Their number and their subject areas, their relevant formal and substantive qualifications for teaching are sufficient to support the programmes of study at the current time and the currently planned number of admissions.
- The EEC expects that the various numbers and ratios between student, teaching staff, visiting Professors etc. (criteria 5.4 to 5.8) will be satisfactory.
- The EEC saw the five-year smart strategic plan for education on one of the presentations, for the years 2020 to 2025 with short, medium and long-term goals and metrics. Presumably, this plan was delayed by the pandemic, and not yet implemented.

### **Strengths**

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

- The Frankfurt branch has enthusiastic, highly motivated teaching staff and Visiting Professors bringing in diversity, international experience, research expertise and teaching expertise. All have existing collaborations that will contribute to a growing network.
- The Frankfurt branch will benefit from the close link to the Cyprus branch and to the other faculties of the Institution in Cyprus and their networks.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

The school should keep the development of staffing under review.

### Please select what is appropriate for the following assessment area:

Assessment Area	Non-Compliant/ Partially Compliant/Compliant
5. Teaching staff	Compliant



### 6. Research

(ESG 1.1, 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. Rese	arch	1 - 5
6.1	The Institution has a research policy formulated in line with its mission.	4
6.2	The Institution 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 Institution provides adequate facilities and equipment to cover the staff and students' research activities.	4
6.4	Through its policy and practices, the Institution encourages research collaboration within and outside the Institution, as well as participation in collaborative research funding programmes.	4
6.5	The Institution uses a policy for the protection and exploitation of intellectual property, which is applied consistently.	4
6.6	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 Institution also uses an open access policy for publications, which is consistent with the corresponding national and European policy.	3
6.7	The Institution 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







6.8	The Institution provides mechanisms which ensure compliance with international rules of research ethics, both in relation to research activity and the rights of researchers.	3
6.9	The external, non-governmental, funding of research activities of academic staff is similar to other Institutions in Cyprus and abroad.	
6.10	The policy, indirect or direct of internal funding of the research activities of the academic staff is satisfactory, based on European and international practices.	
6.11	The programmes of study implement the Institution's recorded research policy.	N/A

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

- 6.1 The institution has a research policy in place, but the EEC has doubts whether the aims and the timeframe the school has formulated in their research and innovation plan are realistic.
- 6.2 There are internal regulations and procedures of research activities in place, but the EEC has not seen evidence that documents its compliance.
- 6.3 The EUC central provides adequate facilities and equipment to cover staff and students research activities, but at the Frankfurt branch this is under development. The staff that the EEC spoke with were uncertain about what kind of support will be offered for their personal research efforts.
- 6.4 The institution encourages research collaboration at the EUC Central but this is not in effect yet at the Frankfurt branch
- 6.5 The institution has a policy for intellectual property protection and exploitation, but the EEC has seen no evidence that documents its application
- 6.6 The institution provides the SCOPUS output, but no indicator(s) of the quality of the research output of the medical department; the institution has an open access publication policy in place in line with national and European policy.
- 6.7 In line with the policy by the institution, the EEC expects the (pre)clinical teaching staff to incorporate their research into their teachings with the caveat that teachers put too much emphasis on their own research hindering a more balanced view of the current evidence base. The EEC has seen no evidence that its policy of transferring know-how to society and the production sector has been implemented
- 6.8 The institution has formulated a research integrity policy but there are no tools or methods in place that ensure that breaches of research integrity does not happen.







- 6.9 Information documenting external, non-governmental funding e.g. private, philanthropic or funding by industry is not available
- 6.10 It is unknown if the policy of indirect or direct internal funding of the research activities is satisfactory, based on European and international practices
- 6.11 The item 'If the programmes of study implement the Institution's recorded research policy' is not evaluable. The EUC Research Policy makes no mention of undergraduate study. The EEC wonders whether research output instead of research policy is meant. In the latter case, the EEC has not seen evidence documenting implementation of research output in the study programme (see also 6.7).

### **Findings**

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

- The School has a policy and strategic plan for research and innovation in place with short-term and long-term goals; the EEC notes that the main research areas cover a wide range of biomedical research, thus ensuring that all of the current and ongoing research at the Cyprus branch are covered.
- The School has a strategy to recruit relatively young researchers with a potential for growth; the research topics of the newly recruited researches do not necessarily align with the strategic choices.

### Strengths

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

- The School has excellent facilities, and resources including equipment and wet labs that foster an excellent working environment for the staff and students
- The resources are reviewed and updated as necessary.
- The facilities offer excellent opportunities to support research of recruited faculty

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.





- The faculty will face a long trajectory in developing their research fulfilling the strategic aim of the school of medicine.
- The School must bring more focus in their current main research areas to be able to achieve excellence in their research. This will require a strategy that invests in high profile researchers, infrastructure and resources along with opportunities to collaborate, and possibly, forge strategic alliances with other high profile research groups and other schools with high research profiles.
- The School should refocus their strategy staff recruitment plan to attract expert personnel in the key areas of research and medical education based on a plan on the ideal staffing, workload and responsibilities, informed by the requirements of the curriculum.
- The School should consider inviting an external assessment committee for their research.
- The School must ensure that the research integrity policy has been successfully implemented.

### Please select what is appropriate for the following assessment area:

Assessment Area	Non-Compliant/ Partially Compliant/Compliant
6. Research	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 institution has sufficient financial resources to support its functions, managed by the Council/Senate.	N/A		
7.2	The Institution follows sound and efficient management of the available financial resources in order to develop academically and research wise.			
7.3	The Institution's profits and donations are used for its development N/A and for the benefit of the university community.			
7.4	The Institution's budget is appropriate for its mission and adequate for the implementation of strategic planning.			
7.5	The Institution carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.			
7.6	The Institution's external audit and the transparent management of its finances are ensured.			
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	3		

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

In the self-evaluation, the school has marked all criteria from 7.1 to 7.6 with "5", the highest level.

However, the EEC had little independent information for answering the indicators 7.1 to 7.4 as explained under Findings.







- 7.5 The School informed the EEC that risk assessments are carefully carried out but we had no relevant documentation to support this.
- 7.6 The EEC also read in the School's Self-evaluation and heard from senior staff that internal and independent external auditing of the finances was performed.
- 7.7 The EEC were informed by the School that review of spending follows the regular risk assessments, but again we had no independent evidence.

### **Findings**

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

- Financial resources to support the school's functions are managed by the Council/Senate of the Institution.
- The EEC has no independent information about assessment of the risks and sustainability of the programmes of study, adequacy of the feedback on their operation, the legally required external audit, fitness-for-purpose of support facilities and services other than through the self-assessment of the school.
- As per the self-evaluation of the School, "The relevant numerical evaluations are supported by specific documentation made available by the Accounts Department of the University. European University Cyprus is a financially healthy organization and well-equipped to financially support its functions. A sufficient percentage of its profit is made available towards its development and the benefit of the University community".
- "Finally, the management of the finances of the University are ensured through internal auditing processes as well as through the legally required external audit performed by a respectable certified auditors firm" and the EEC does not have the capacity to do comment further.
- Prioritisation of the available financial resources in order to develop core research areas has not yet taken place, as we learnt from the leadership.
- Appropriateness of the Institution's budget for its mission and adequacy for the implementation of strategic planning were not evaluated by the EEC.

### **Strengths**

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

- During the inspection, the EEC had the impression that the Institution has invested in high quality facilities and equipment of the Frankfurt branch.
- It is plausible that the Frankfurt branch and its programme will attract sufficient number of students to support the school and its facilities and its programme.

### Areas of improvement and recommendations

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

When the EEC uses the term 'must' it should be interpreted as essential to bring the School towards compliance in the relevant sub-area.

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### Please select what is appropriate for the following assessment area:

Assessment Area	Non-Compliant/ Partially Compliant/Compliant
7. Resources	N/A

The EEC did not have enough independent information available (or expertise) to make an overall judgement in this domain.

#### 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 Institution under review may be achieved.

The EEC was impressed by the excellent buildings and facilities for delivering the medical programme during the first phase of the EUC (Frankfurt) branch. There is a small but enthusiastic team of teaching, administration, professional and technical staff.

Throughout this report we have identified a good number of strengths. There are also some areas for improvement and for these, we have attempted to offer constructive recommendations.

We are of the opinion that with continuing preparations, EUC (Frankfurt) can be ready to accept students in September.

However we strongly recommend that the School carries out a short and medium term risk assessment and develops appropriate contingencies in the case of e.g. too few or too many applicants choosing EUC (Frankfurt); or plans for a new building being significantly delayed.

We also strongly recommend that the School creates a strategy to support students find affordable living accommodation within reasonable travelling distance to the EUC (Frankfurt) campus.

Furthermore, the School must waste no time in addressing the recommendations in this report to enhance the programme and student experience at both campuses.

The EEC was struck by the negative framing of the partnership through use of the terms EUC (Central) and EUC (Frankfurt) despite the School espousing the view that both branches are equal partners. We therefore recommend that the EUC and the Medical School consider further their naming protocol.

The EEC was unable to award many scores of 5 because we were unable to make judgements about the efficacy of policies and regulations not yet implemented, and without in-depth conversations with students and staff within an active programme. We were also unable to review the clinical programme in the absence of known clinical partners offering primary, secondary and tertiary care.

We would therefore recommend that the EUC (Frankfurt) is reviewed again approximately 18 months after the start of the medical programme in EUC (Frankfurt).

Finally, we would like to thank the EUC for another set of open and constructive discussions and for their generous hospitality for the meetings.

### E. Signatures of the EEC

Name	Signature
Professor Helen Cameron	
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