

Doc. 300.3.1

Date: 20 January 2022

External Evaluation Report (Departmental)

- **Higher Education Institution:**

American University of Cyprus (AUCY)

- **Town: Larnaca**

- **School/Faculty: Faculty of Arts and Humanities**

- **Department: Psychology**

- **Department's Status: new**

- **Programme(s) of study under evaluation:**

Name (Duration, ECTS, Cycle)

Programme 1

In Greek:

Ψυχολογία (4 Έτη, 240 ECTS, πτυχίο στις καλές τέχνες)

In English:

Psychology (4 years, 240 ECTS, B.A.)

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



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

DEPARTMENT	PROGRAMMES OF STUDY

A. Introduction

This part includes basic information regarding the onsite visit.

On 17/1/2022, a preliminary meeting of the EEC took place, in which first observations and comments on the application were exchanged.

The site visit took place on 18/1/2022 and was preceded by a briefing by the CYQAA officer. Due to the COVID-19 pandemic, the visit was run remotely, following this schedule:

10:00 – 10:10

- A brief introduction of the members of the External Evaluation Committee

10:10 – 10:40

A meeting with the Rector - Head of the Institution and the Vice Rector of Academic Affairs – short presentation of the Institution

A meeting with the members of the Internal Evaluation Committee

10:40 – 11:20

- A meeting with the Head of the relevant department.
Short presentation of the School's / Department's structure

11:20 – 11:30

- Coffee Break

11:30 – 12:30

Program: Psychology (4 years / 240 ECTS, Bachelor)

The program's standards, admission criteria for prospective students, the learning outcomes and ECTS, the content and the persons involved in the program's design and development

12:30 – 13:30

- Lunch Break

13:30 – 14:30

- A meeting with members of the teaching staff on each course for all the years of study (QA session).
 - Discussion on the CVs (i.e. academic qualifications, publications, research interests, research activity, compliance with Staff ESG), on any other duties in the institution and teaching obligations in other programmes.
 - Discussion on the content of each course and its implementation (i.e., methodologies, selected bibliography, students' workload, compliance with Teaching ESG).

- Discussion on the learning outcomes, the content and the assessment of each course and their compliance with the level of the program according to the EQF.
- Discussion on assessment criteria, samples of final exams or other teaching material and resources.

14:30 - 14:40

- Coffee Break

14:40 – 15:00

- A meeting with members of the administrative staff.

15:00 – 15:20

- A meeting with students (current students from other Departments)

15:20 – 16:00

- Discussion on the virtual visit of the premises of the institution (i.e. library, computer labs, teaching rooms, research facilities).

16:00 – 16:30

- A meeting with the Head of the relevant department and the program's Coordinator - exit discussion (questions, clarifications).

The EEC studied the following materials:

Document: 200.1 – APPLICATION FOR EVALUATION – ACCREDITATION PROGRAMME OF STUDY, including information about the programme's general profile, the programme's content (structure, course distribution per semester, course descriptions), teaching staff (qualifications, teaching periods, detailed biographical notes) and a SWOT analysis

+

virtual tour of the university premises

+

powerpoint presentations provided during the visit

Two colleagues who hold key roles in the development of the study programme were unable to take part in the discussion on short notice due to illness, as a consequence of which no detailed answers could be provided to some of the questions. Throughout the visit discussion time was limited, as the presentations tended to be very extensive (and partially overlapping) documentation provided during the visit.

B. External Evaluation Committee (EEC)

<i>Name</i>	<i>Position</i>	<i>University</i>
Patricia BIJTTEBIER	academic member + chair	KU Leuven
Martin CORLEY	academic member	University of Edinburgh
Ute GABRIEL	academic member	Norwegian University of Science and Technology
Natalia EFREM	student member	University of Cyprus
Name	Position	University
Name	Position	University

C. Guidelines on content and structure of the report

- *The external evaluation report refers to the Department as a whole (programmes offered, teaching staff, administrative staff, infrastructure, resources, etc.).*
- *The external evaluation report follows the structure of assessment areas and sub-areas.*
- *Under each assessment area there are quality indicators (criteria) to be scored by the EEC on a scale from one (1) to five (5), based on the degree of compliance for the above mentioned quality indicators (criteria). The scale used is explained below:*

1 or 2:	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.*

Clarification of the ratings. As the department is not yet accredited, no staff was employed at the time of the evaluation. The EEC was provided with MOUs for future employment under the condition of the BA-program's accreditation. Also, this university has only recently been established and general documentation at the university level is not yet fully accessible from the university's homepage. Against this background, the EEC decided to use *N/A* when there was not sufficient information available to assess an indicator, and mark 3 when intentions presented, that due to the early state in the process had not yet been implemented.

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

Sub-areas

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

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

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

Quality indicators/criteria		
1. Department's academic profile and orientation		
1.1 Mission and strategic planning (including SWOT analysis)		1 - 5
1.1.1	The Department has formally adopted a mission statement, which is available to the public and easily accessible.	3
1.1.2	The Department has developed its strategic planning aiming at fulfilling its mission.	1
1.1.3	The Department's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted.	1
1.1.4	The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice.	3
1.1.5	The academic community is involved in shaping and monitoring the implementation of the Department's development strategies.	N/A

1.1.6	Stakeholders such as academics, students, graduates and other professional and scientific associations participate in the Department's development strategy.	N/A
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.	N/A

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

The Department's mission statement is not yet accessible on the Department's homepage as the Department is not yet accredited.

Strategic planning does not go beyond 2022; goals and objectives are not structured into short, medium- and long term.

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).

Department plans to offer one study program. The Faculty offers study programs in design and the two departments (Design and Psychology) plan to cooperate towards the topics of psychology of space and psychology of arts.

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.	N/A
1.2.3	The Department ensures that its operation and activities have a positive impact on society.	N/A
1.2.4	The Department has an effective communication mechanism with its graduates.	N/A

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

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.	4
1.3.2	Planning teaching staff recruitment and their professional development is in line with the Department's academic development plan.	3
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.	2

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

1.3.2 The University has a promotion policy. A detailed (5-year) academic development plan for current and prospective staff was not provided.

1.3.4 Specific information on funding processes were not provided, see section 7 - resources

Additionally, write:

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

The department expects to recruit about 30 students for the new bachelor's programme. Marketing strategies mainly target prospective students from Cyprus, Greece, Russia and Middle Eastern countries.

Findings

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

1.1. Mission and Strategic Planning

The application document contains a mission statement and a strategic plan for the very short term (2022), mainly related to getting accredited, recruiting staff and establishing a number of governance bodies. As the department has not been accredited yet, the department's mission statement is not yet available on AUCY's website. Medium-term or long-term goals have not yet been articulated. Students and teaching staff will be able to participate in the department's development strategy through their membership of the Department's Council.

1.2. Connecting with Society

The department expresses the wish and intention to be strongly connected to society and "give back to the community" through its academic and social activities. Some staff members conduct research with high societal relevance (e.g., leading to the development of psychosocial interventions). The department plans to establish a Psychology Advisory Council, consisting of members from the Cypriot psychological community. This council will act as the bridge between the department and the psychological community in areas of curriculum development, internships, employability of graduates etc.

1.3. Development Processes

Teaching staff are recruited and selected using recruitment and interview procedures according to international standards. It is unclear to what extent the recruitment of staff members who are currently involved in the development of the new department and program has been guided by a targeted staff recruitment plan. The fact that at least part of the academic profiles of the future teaching staff does not match the courses assigned to these staff members suggests this is not the case.

Strengths

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

- Establishing a Psychology Advisory Council will be a clear strength and contribute to curriculum development.

Areas of improvement and recommendations

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

- Develop an implementation and a recruitment plan for the startup phase and a professional development plan that focuses on academic and pedagogical development. This should include the provision of an adequate research infrastructure, which is relevant to staff development because the University's criteria for promotion include research output, which may be difficult to achieve without support.

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

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

Quality Assurance

(ESG 1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 1.8)

Sub-areas

- 1.1 System and quality assurance strategy**
- 1.2 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.	3
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	3
2.1.3	The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.	1
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	4
2.1.4.2	Research	2
2.1.4.3	The connection with society	3
2.1.4.4	Management and support services	1
2.1.5	The quality assurance system promotes a culture of quality.	3
2.1.6	Students' evaluation and feedback	3

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

2.1.3, 2.1.4.2, 2.1.4.4 Relevant policies were not presented.

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.	3
2.2.2	The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Department are clear, sufficient and known to the students.	4
2.2.3	The quality control system refers to specific indicators and is effective, which have been presented and discussed.	2
2.2.4	The results from student assessments are used to improve the programmes of study.	N/A
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.	3
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.	N/A
2.2.8	Names and position of the teaching staff of each programme are published and easily accessible.	N/A
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.	3
2.2.12	The Department analyses and publishes graduate employment information.	N/A

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	2
2.2.12.4	Technological infrastructure	4
2.2.12.5	Academic support	4
2.2.14	There is a student welfare service that supports students in regard to academic, personal problems and difficulties.	3
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.	3
2.2.16	Mentoring of each student is provided and the number of students per each permanent teaching member is adequate.	4
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.	N/A
2.2.18	The number of doctoral students, under the supervision of a member of the teaching staff, enables continuous and effective feedback to the students and it complies with the European and international standards.	N/A
2.2.19	The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates.	N/A
2.2.20	There is a clear policy on authorship and intellectual property.	1
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
2.2.3 There is a robust procedure for quality control but there are no specific indicators.		
2.2.12.3 There are no specific plans for laboratory space, interview rooms, or experimental equipment.		
2.2.20 No relevant policy was presented.		

Findings

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

All new taught programs must be validated, using the validation process set out by the University. This is a key mechanism by which AUCY establishes academic standards, ensuring that:

- the academic rationale for new program is fully exposed and understood
- the requirements for students to achieve the intended learning outcomes are clear
- resources can be provided to deliver the program to standards acceptable to the university.

In addition to this, the validation process aims to ascertain that proposed programs are in line with the AUCY's overall vision and strategy and are responsive to market demands, and that the quality of a program is comparable to that of European and international partners.

The bodies involved in the program validation process are:

- Program Originators: develop an idea for a new program with the backing of the respective department within a faculty
- Department: responsible for considering approval of Stage 1 and Stage 2 proposals and making recommendations to the Program Validation Committee (PVC) through the board of the faculty
- Board of faculty: responsible for considering Stage 1 and Stage 2 proposals and making timely recommendations to the Senate through the PVC.
- Academic Program Quality and Resources Unit (APQRU): responsible for providing administrative support to academic staff in the planning stages of new courses to ensure that program of study offered by the University are in line with regulations, by-laws and university policies, whilst also considering their viability in relation to available resources and market demands.
- Program Validation Committee (PVC): responsible for recommending decisions for Senate approval after analysing the documentation submitted at both stages of approval.
- External Reviewer: responsible for providing expert independent feedback on various aspects of the proposed program.
- Senate: responsible for approving academic program offered by the University
- Council: responsible for approving additional funding for implementing programs of study (if required).

The quality assurance systems appear to be well thought-through, but it was not clear to the panel whether these were fully implemented at the time of review.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
2.1 System and quality assurance strategy	Partially 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.	N/A
3.3	The administrative staff adequately supports the operation of the Department.	N/A
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.	N/A
3.5	The Department applies effective procedures to ensure transparency in the decision-making process.	N/A
3.6	Statutory sessions of the Department are held and minutes are kept.	N/A
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.	N/A
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.	N/A
3.9	The Department applies procedures for the prevention and disciplinary control of academic misconduct of students, teaching and administrative staff, including plagiarism.	N/A
3.10	The Department has appropriate procedures for dealing with students' complaints.	3

3.11 Internalization of the Department and external collaborations. ?

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

Because the department is not yet functional, we were unable to provide scores for most of these items. We weren't clear on the meaning of 3.11.

Findings

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

The department aims to employ 2 administrators; these are in addition to a university-wide administration which carries out the usual functions. Because the department (and university) are still in development, the panel was not able to evaluate the efficacy of the planned systems. The score of "compliant" below is based on our view that the plans seem reasonable.

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.	2
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	1
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).	N/A
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.	N/A
4.1.5	The Department ensures that its programmes of study integrate effectively theory and practice.	N/A
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
4.1.1, 4.1.2 The curriculum appears to have been initially designed by a small committee, with no involvement from stakeholders. Any system for periodic review was not made clear.		
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.	3
4.2.2	Recognition of prior studies and credit transfer is regulated by procedures and regulations that are in line with European standards and/or international practices.	5
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	N/A
4.2.4	The teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship.	N/A
4.2.5	Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process.	N/A
4.2.6	The teaching staff of the Department provides timely and effective feedback to their students.	N/A
4.2.7	The criteria and the method of assessment as well as the criteria for marking are published in advance.	3
4.2.8	The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved.	N/A
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.

4.1. Planning the Programmes of Study

There are formal procedures with respect to program development and reform. However, it is unclear to which extent these procedures were operational and have been followed for the development of the new bachelor's in psychology programme. The discussion made clear that there is not an articulated view or rationale for several curriculum choices made.

4.2. Learning and Teaching

Teaching has not commenced yet and we were unable to evaluate this.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
4.1 Planning the programmes of study	Not compliant
4.2 Organisation of teaching	Partially compliant

5. Teaching Staff (ESG 1.5)

NB. Marked on the basis of MOUs with staff who were present during the visit.

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

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

Quality indicators/criteria		
5. Teaching Staff		1 - 5
5.1	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	2
5.2	The teaching staff of the Department has the relevant formal and substantive qualifications for teaching the individual subjects as described in the relevant legislation.	3
5.3	The visiting Professors' subject areas adequately support the Department'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.	4
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.	N/A
5.8	Feedback processes for teaching staff in regard to the evaluation of their teaching work, by the students, are satisfactory.	N/A

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

5.1 The planned degree is overambitious and, in the panel's opinion, presents too much work for a relatively small complement of teaching staff (especially since the stated aim of AUCY is that these staff remain research-active).

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 understand that there is no current teaching staff, but that a number of people have signed MOUs which signal the university's intent to employ them.

These comprise 14 faculty members, of whom 10 will be full time, and 4 part time. The distribution across ranks is as follows: 2 associate professors, 2 assistant professors, 7 lecturers, 2 visiting professors and 1 special teaching staff. One of the lecturers does not hold a PhD yet.

Findings

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

The proposed programme involves the development and teaching of 54 new courses. The teaching assignment of full time staff members in the bachelor of psychology programme ranges from 2 to 7 courses, that of part time staff members from 2 to 4 courses. Course syllabi have been developed before teaching staff was hired. Some staff members will be teaching courses outside of their domain of research expertise.

Strengths

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

The University has done well to attract a number of internationally-competitive staff. Many are well-qualified as psychologists.

Areas of improvement and recommendations

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

The program as presented includes 54 new 6-credit courses, across four years, to be developed and taught initially by 14 staff. There is no need to offer this degree of choice in the program. As AUCY teaches on the "American model" it may be instructive to take [the syllabus of UMASS Dartmouth](#), with whom a partnership agreement has been agreed, as an example. UMASS Dartmouth offers 26 courses, taught by 23 academics, serving an estimated 600 students.

The present mapping of courses to staff requires many staff to teach in quite disparate areas (PSY202 *Learning and Behaviour* vs ELE419 *Psychological Perspectives on Leadership*; PSY308 *Counselling Psychology* vs PSY402 *Psychopharmacology* etc.). Moreover, some expertise is not being used (there is no *Psychology of Language* course despite the hire of a psycholinguist, for example).

The panel was concerned that development plans for staff (onboarding, mentorship, research support, etc.) were not evident.



Please ✓ what is appropriate for the following assessment area:

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

6. Research

(ESG 1.1, 1.3, 1.5, 1.6)

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

1 or 2: *Non-compliant*

3: *Partially compliant*

4 or 5: *Compliant*

Quality indicators/criteria		
6. Research		1 - 5
6.1	The Department has a research policy formulated in line with its mission.	3
6.2	The Department consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes.	N/A
6.3	The Department provides adequate facilities and equipment to cover the staff and students' research activities.	1
6.4	The Department has the appropriate mechanisms for the development of students' research skills.	N/A
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.	N/A
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.	2
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.	N/A
6.9	The policy, indirect or direct of internal funding of the research activities of the teaching staff is satisfactory, based on European and international practices.	3
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

- 6.1 The department adopts the University's Research policy.
- 6.3 The panel were not satisfied that there were plans to invest in specialist equipment such as would support staff research in psychology, or offer choice in dissertation work to students.
- 6.6 Because the plan is for many staff to teach away from their research specialisms, this criterion is not satisfied.

Findings

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

The department adopts the AUCY research policy, with the following main priorities:

- development and enhancement of research activities
- attraction of external research funding
- exploitation and dissemination of research results

As one means to achieve these goals, a AUCY research center will be established. This research center will build cooperations with local industry, national and international research centers and external researchers and academics. A Memorandum of Agreement has already been signed with University of Massachusetts and CASS School of Management.

In addition,

An ethics committee will be established at AUCY. This committee will evaluate research protocols based on the procedures provided by the National Bioethics Committee of Cyprus.

Strengths

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

AUCY provides research incentives for faculty who publish their work in academic journals, participate in international conferences and make efforts to attract external research funding.

Areas of improvement and recommendations

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

Currently, research facilities at AUCY are extremely limited and key research infrastructure needed to foster some of the staff members' research programs (e.g. in domains as cognitive neuroscience) or to provide the students with a wide range of research opportunities is not yet available.

Importantly, the department does not yet seem to have a strategic plan for research development.

Please ✓ what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
Research mechanisms and regulations	Compliant
External and internal funding	N/A



Motives for research	Partially compliant
Publications	N/A

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.	N/A
7.2	The Department follows sound and efficient management of the available financial resources in order to develop academically and research wise.	N/A
7.3	The Department's profits and donations are used for its development and for the benefit of the university community.	N/A
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	N/A
7.5	The Department carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.	N/A
7.6	The Department's external audit and the transparent management of its finances are ensured.	N/A
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	N/A
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. The presented budget did not include sufficient information for the EEC to evaluate the financial resources/planning for the Department's start-up phase (i.e. first five years).		

Findings

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

The application document contains a very rough estimate of the department's budget, based on the first year of operation of the department:

- 10 Full time faculty members: 220,000/year
- 4 Part-time faculty members: 60,000/year

- Academic System within the Department (Stationary; software needed for registering and monitoring the students' progress): 30,000/year
- Technological Support (IT support; Cisco, Oracle, Blackboard): 35,000/year
- Two Administrative Assistants: 25,000/year
- Research Support: 10,000/year

It is unclear how this budget relates to genuine operational costs (for example, the panel understands that the salary cost for 14 academics would be considerably in excess of €220,000; in the IT presentation, we were told that the VLE would be based on Moodle, but Blackboard licensing is included).

In the absence of more detailed information, the panel was unable to evaluate §7.

Please ✓ what is appropriate for the following assessment area:

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

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 was a pleasure to meet representatives of AUCY and to experience the huge enthusiasm and energy that has gone into the daunting tasks of establishing a new university, department, and degree program. These tasks are all the more daunting in the face of the global pandemic, and AUCY is to be congratulated on progress.

Unfortunately, evaluation of the department was made harder for three reasons. First, in our understanding, the department doesn't quite exist yet (most, if not all, staff have signed MOUs dependent on successful recruitment of students to the degree programme). This document is designed for the evaluation of a department as a going concern, and for that reason the panel was not able to provide meaningful ratings in all of the categories requested. Second, the head of department was, unfortunately, mostly absent (due to illness), leaving many questions to be answered by a visiting professor from another university. Third, a number of things appeared to have changed between the submission of the documentation and the site visit (perhaps inevitable over eight months in a rapidly-developing university), but staff didn't always appear to be aware of what the documentation said.

With that said, some themes came up consistently in the panel's discussions, and we think that there are two key actions the department should urgently take as it develops.

1. The department needs a detailed strategic plan for the start-up phase, including an overview of what has to be prepared and implemented when. This should address: staff recruitment and retention, including plans for research support; student recruitment, including what the USP of the department is; the development of the organisational structure, procedures and (publicly accessible) documentation; engagement with stakeholders throughout.
2. The department should identify priorities in the implementation of this plan, and map them out on a timeline. Not everything can be done in parallel, and not everything needs to be done at once. Clear ownership of particular tasks is key here, as well as targets (KPIs) against which the implementation can be measured, evaluated, and revised if necessary.

Finally, establishing a department and its study and research program(s) is an ambitious and resource-consuming endeavour. Throughout the discussion it remained unclear what financial resources would be made available during the start-up phase, and, as fellow academics, we wonder what planning security is being provided for the (prospective) staff and why they should commit to this project.

E. Signatures of the EEC

Name	Signature
PATRICIA BIJTTEBIER	
MARTIN CORLEY	
UTE GABRIEL	
NATALIA EFREM	
FullName	
FullName	

Date: 20 January 2022

