Response to the External Evaluation Committee Report

Master of Science in Health Services Administration

Nicosia

19th July 2018

Contents

Section I: Introduction

We refer to the Report of the External Evaluation Committee (EEC) for the evaluation-accreditation of the programme of study "Master of Science in Health Services Administration (Distance Learning)," which was prepared following a site visit to the University of Nicosia Medical School by the members of the committee on June 21, 2018.

We would like to thank the EEC for the constructive time spent at the Medical School, and for their prompt and valuable feedback on our Master of Science in Health Services Administration (MHSA) Distance Learning programme.

In addition to meetings with the Rector, Vice Rector for Academic Affairs and other members of the senior management team, the committee held separate meetings with faculty and administration, as well as with four students of other programmes (three from a distance learning programme and one from a conventional face-to-face programme).

We are grateful for the EEC's recommendation to accredit the programme, subject to us addressing their findings. They have recognised a number of its strengths, based on the applicable Quality Standards and Indicators Criteria.

We would like to note that the report of the committee is very positive with 73 out of the 118 (applicable) quality standards and indicators receiving a score of 5, and a near perfect score, of 4 out of 5, in 23 of the remaining indicators. The resulting average score is 4.4 out of 5 which is in line with the committee's remarks that:

> "This is a well-designed and accomplished DL MSc program with clear aims and purpose that covers all expected scientific aspects and learning objectives. The presentation of the program to the EEC was very clear and the information that will be provided to future students and the courses material are meticulously prepared with remarkable attention to detail. The lecturers have adequate professional and educational backgrounds and are in a position to support students. All quality assurance aspects, student welfare services and administrative structures and procedures are of high standards."

We welcome the committee's recommendations for enhancement, which provide us with an opportunity to further improve the overall quality of the programme. On the following pages, we have responded to the all Findings of the EEC based on the comments set out in the External

Evaluation Report (pages 5-13), with specific reference to the relevant criteria that they relate to and provide details of how we have addressed each of the items.

We fully agree with the EEC's recommendations and have responded to each Quality Standard and Indicator Criterion separately for easy cross-referencing. Please note, that some of our responses have been combined to reflect comments, which apply to Quality Standards and Indicator Criteria in different sections of the report. These are clearly sign-posted in the report for easy cross-referencing.

Our response to the External Evaluation Report is structured as follows:

- Section II highlights the EEC's positive feedback and comments.
- Section III presents all the EEC's recommendations and our response to these, including all actions we have taken; the supporting documents testifying to this are provided in the Appendices.
- Section IV provides some concluding remarks.
- Section V is a list of the appendices that are submitted with our report.

Section II: Positive Comments provided by the External Evaluating Committee

There are a number of commendations in the EEC's report, which are positive about the work carried out at the University of Nicosia and the Medical School specifically. Some of the highlights of the positive comments from the Findings section are quoted below for easy reference:

Findings
1. Effectiveness of Teaching Work – Available Resources
Pages 7-8
- The number of expected students on the program is relatively low and in line with Higher Education standards, which will allow for meaningful and effecting learning procedures.
- Learning resources and facilities available to students are seen very positively.
Monitoring, plagiarism and generic student support processes are well-specified.
- The teaching methods and the planned courses content is suitable for the specified degree, conforming to comparative programs.
- … the ratio of students to the total number of teaching personnel is very positive and facilitates the delivery of a program of quality and relevance.

2. Program of Study and Higher Education Qualifications
Pages 8-9
- The purpose, objective and learning outcomes are clearly presented and are appropriate for the proposed program of study. There is a clearly detailed outline of the learning outcomes that the students will be able to demonstrate upon completion of the MHSA.
- The University has a clearly outlined structure for quality assurance and the internal procedures will be followed for the program of study.

- UNic has obtained accreditations from several international bodies including the prestigious QS five star excellence and these processes have resulted in the adoption of high quality assurance methods and tools.
- Effective management of the program of study with regard to its design, its approval, its monitoring and its review, is in place. The EEC is confident that all proposed learning outcomes can be achieved within the allocated timeframe.

3. Research Work and Synergies with Teaching
Pages 9-10
- The teaching content reflects recent research in the field and the recommended literature is up-to-date.
- The fact that students have the option to write an article in the end was perceived as a positive aspect of the program, steering students and lectures towards research, outreach and impact…

4. Administration Services, Student Welfare and Support of Teaching Work
Page 10
- Given the information the EEC had, both of the infrastructures mentioned above [student advising and support] seem to be working effectively and instantly.
- The [academic] mentoring service seems to be very helpful for the students. The EEC strongly believes that the frequency to which the mentor has a meeting with the student is of great importance for the guidance of the student.

5. Distance Learning Programs
Pages 10-11
- In particular, the EEC would like to mention that UNic has: a) Produced a new, more concrete and elaborate Distance Learning Faculty Handbook… b) Elaborated a well-structured and detailed written exams system, according to high level quality assurance criteria.
- The Study Guide of the proposed program can be considered as completely developed.
- UNic has well established structures, services and policies for DL programs. The design of the present program has taken them into account.

Section III: Recommendations and Responses

In this section we address the recommendations of the EEC by providing further information and evidence as required to demonstrate the actions taken in response to the EEC's suggestions.

1. Effectiveness of Teaching Work – Available Resources (Report pages 7-8)

EEC Finding:
1.2.5 UNic could explore the possibility to assign part of the mark (e.g.10%) to active participation in the course material that are interactive. However, a positive aspect of the course material is related to the design of the online lectures and PowerPoint presentations which encourages student interaction.

Response:

We thank the committee for their positive feedback related to the teaching methods, which were regarded as 'conforming to comparative programs'. Furthermore we are pleased to see that the EEC considers the teaching approaches and the use of technology to be 'aligned with standard international practice'. In addition, we are pleased to see that the EEC notes that the course 'encourages student interaction in online activities'.

We welcome the committee's recommendation to explore assigning part of the mark to further encourage active participation. A useful way of monitoring student engagement is through the use of learning analytics. The use of learning analytics as a monitoring mechanism was already incorporated in the programme's student support mechanisms. **We have now enhanced the use of learning analytics to inform a participation grade, based on research evidence and practice by other universities, which deliver distance learning programmes (Appendix 1).** Specifically, the participation grade will be based on the number of recorded lectures watched, number of webinars attended and engagement with in-course activities, for example Q&A fora and chats. **To this end, we have added a 10% participation grade to all courses in the programme** (with the exception of the research-based courses, namely HSA-585 (Field Project) and HSA-596 (Research Project), where a participation grade is not applicable since students complete individual projects under supervision). We have enclosed the revised syllabi (Appendix 2), study guides (Appendix 3), scheme of assessment (Appendix 4) and programme handbook (Appendix 5), which reflect the 10% participation grade. We will monitor the impact of the participation grade on student active engagement and revisions may be made to the Scheme of Assessment based on our findings.

EEC Findings:
1.3.2.2 Some of the core teaching staff have not yet started to accrue a portfolio of publications relevant with the disciplines so there should be clear plans in place to address this.
1.3.9 The academic personnel teaching load and capacity to undertake research does limit the conduct of research writing and consequently contribution to the program and society.

Response:
We are pleased that the EEC considers the subject specialization of our teaching personnel to be satisfactory and fulfilling the criteria for providing effective teaching in the program. We welcome the committee's recommendation to have 'clear plans' in place to increase publications relevant to each of their disciplines.

The response below relates to 1.3.2.2 and 1.3.9. In describing our plans aimed at increasing research activity, the following paragraphs also make reference to comments from the EEC's findings in other relevant Quality Standards and Indicators Criteria, namely 3.1.4-3.1.8.

We are pleased to see that the committee considers that the teaching faculty have 'the potential to enhance the research part of their CVs'. Indeed, the Medical School considers research activity of its faculty members of the utmost importance. **The Medical School's plans for enhancing research are based on:**
1) setting the requirements for research activity expected for career progression and professional development and
2) providing support to facilitate faculty development in research, as described below.

1) The strategies that have been implemented by the Medical School to highlight the importance of research in professional development are noted below:

- **In agreement with the EEC's comment that 'research activities should be explicitly included in the career development plans of the faculty and part of the annual evaluation process', the Medical School has implemented since its commencement in 2011, an annual evaluation process.** During the appraisal, clear goals are set for the faculty member's personal development plan for the following academic year, including research-related outputs. Some examples of specific goals may include application for external funding and write-up of work-in-progress. The evaluation form is provided as Appendix 6. Importantly, decisions on career progression, i.e. ranking and promotions, are informed by research outputs, in addition to other criteria.

2) The strategies implemented by the University to facilitate faculty development in research are outlined below:

- **The University provides faculty members with the opportunity to participate in Erasmus[+] exchange programmes.** In fact, four faculty members, namely Dr. Soulla Nicolaou, Dr. Ourania Kolokotroni, Dr. Alexandros Heraclides and Dr. Julia Hynes have recently, within the past three months, participated in staff mobility programmes, under the Erasmus[+] Staff Mobility program. Through these staff exchanges, the faculty members have identified common areas of interest for research and are currently working on securing joint external funding for research projects. For example, Dr. Nicolaou is currently writing up a proposal to be submitted for European funding through Erasmus[+] to further explore the impact of using virtual patients in pharmacology tutorials. This will be a joint proposal with the University of Crete, where the staff mobility took place.
- **The University has a policy to fund conference participation and networking for faculty.** Specifically, all faculty members are entitled to attend at least one conference per year.
- **Additionally, the University has also invested in promoting research and visibility in a number of ways. For example, faculty members are expected to create SCOPUS UNic profiles as well as create and maintain research profiles in the University of Nicosia's research information system, namely PURE.** Through this system, faculty members can record and showcase research outputs and activities, as well as identify synergies within the University. Importantly, this is visible to individuals external to the organization, which may further enhance visibility and increase the potential for external collaborations.
- **More recently, the University has established NLab within the University as a center responsible for helping researchers enhance their research grants for external funding applications.**
- We agree with the EEC's finding that 'Funding for research is also important' and welcome their suggestion to establish 'a formal policy related to internal funding in support of research activity'. **Indeed, the University has already invested in such internal funding policies. Specifically, in 2016 the University established the 'Universitas Endowment Fund', to foster the research activities within UNic. In addition to these 'seed grants', the Medical School is currently considering a policy for funding projects, which received positive evaluations from external funding sources but were not successful in securing funding due to budget**

depletion. Specifically, this policy (Appendix 7) has been approved by the Research Committee at the Medical School and is due to be submitted for approval at the next Senate meeting in Fall 2018. Finally, we welcome the committee's suggestion to 'ring-[fence] a proportion of the income from fees to be reinvested into opportunities for staff to apply for internal funding'. As part of our financial planning, we have started to consider implementation of this suggestion once the programme breaks even and starts to be profitable.

- As noted by the committee, the 'Medical School needs to take specific measures to ensure that the tutors are given incentives and are motivated to dedicate time and effort to research'. We believe that the aforementioned Erasmus⁺ staff exchanges and the importance of research outputs for career progression, as detailed above, provide evidence of our faculty's motivations and efforts in this area. **Further attesting to motivation in this area, the Medical School faculty members have been active in pursuing national and/or European funding, preparing manuscripts and attending conferences. An indicative list of ongoing research activity by MHSA faculty, based at the Medical School, is enclosed as Appendix 8.** It should be noted that students from our existing programmes are already benefiting from our faculty members' research activity to complete their research projects and go on to publish and present their work in national and/or international conferences. For example, one of our students from the MSc in Family Medicine programme is currently writing up his Master's thesis work for publication in a peer-reviewed journal. Furthermore, he will present this work in October 2018, at the European Geriatric Medicine Society (EuGMS) Congress in Berlin.

- **It should be noted that our students will benefit also from the research outputs of our external collaborators, whose accomplished CVs in research were provided in the original submission. Additionally, as discussed with the EEC, the programme's Inter-School nature, involving the Medical School and the School of Business, will further benefit our students.** We expect that the synergies between the two Schools will benefit the MHSA programme by identifying potential areas for research collaboration as well as the sharing of teaching expertise. The CVs of the School of Business faculty members clearly show their accomplishments in both research and teaching and were provided to the EEC on the accreditation visit.

In closing, the aforementioned activities, outline clearly our plans for further enhancing research, as recommended by the EEC. We agree with the committee that enhanced research activity will not only 'improve the education offered with respect to research but tutors will be in a better position to supervise students in the writing of articles'.

We would like to comment on the EEC's finding that: 'the current teaching load - above 200 hours per year - is relatively high compared to common practice in research-led universities in Europe and elsewhere'.

- **In setting the standards for the allocation of time to teaching, administration and research, specific allowances have been made for one day per week to be dedicated to research. Please note that the teaching load applied at the Medical School corresponds to 7 hours/week.**
- Importantly, the Medical School follows a strictly regulated policy on the number of required student contact hours for all faculty members and, in this way, it monitors and regulates

faculty workload, taking the appropriate actions to prevent excessive workload and facilitate professional development. Furthermore, as already noted, all faculty members are expected to be involved in research as part of their duties. Based on the research output of our faculty members (Appendix 8), we believe that the current teaching load does not prohibit the conduct of research.

Finally, we welcome the committee's recommendation, as stated on page 7 of the report, to recruit 'a member of staff with a specialised degree in biostatistics or in evidence-based medicine […] if the opportunity arises.' Indeed, we consider this field to be of vital importance in general and to the MHSA program more specifically. **Please note that currently the teaching needs in this area are fulfilled by three full-time faculty members, who hold specialized degrees in areas, which underpin evidence-based medicine, such as epidemiology and public health**, as listed below:
- Dr. Ourania Kolokotroni (course lead for HSA-596): Qualifications include a PhD in Epidemiology from the Cyprus University of Technology
- Dr. Behrooz Behbod (course lead for HSA-533 and co-lead for HSA-585): Qualifications include a Doctor of Science in Environmental Epidemiology from Harvard School of Public Health
- Dr. Alexandros Heraclides (course contributor for HSA-590): Qualifications include a PhD in Epidemiology and Public Health from University College London (UCL).

Furthermore, the core faculty team is currently supported by Dr. Christiana Demetriou (course lead for HSA-511 and HSA-590) who holds a PhD in Clinical Medicine Research from Imperial College London. Their full CVs were provided in the original application documentation.

We agree that as the programme expands, a need may indeed arise for another faculty member, with a specialized degree in biostatistics or evidence-based practice to complement our existing full-time faculty in this area. Faculty needs are monitored continuously by the School's Faculty Affairs Committee to ensure that needs are fulfilled in a timely and appropriate manner.

2. Program of Study and Higher Education Qualifications (Report pages 8-9)

2. Program of Study and Higher Education Qualifications
EEC Finding: **Note:** The EEC's finding quoted below was provided in the report on page 12. We have included our response in this section of our report, as the EEC's comment relates to Section 2. *'However, it is noted that with reference to the DIPAE criteria 2, the study guides of all courses include predicted interactive activities with the teacher and among the students, via on-line discussion (chat based), or forum asynchronous discussions. It is suggested to continue the effort, so as to conceive and add some collaborative learning among small group of students that goes beyond some simple wiki based written activities that are already mentioned in some cases.'*
Response: **We welcome the committee's recommendation to enhance collaborative learning activities within the program. To this end, we have included activities, where learners will be working in**

small groups in all courses (with the exception of the research project and field project courses, where students will need to work individually). Examples of these activities include Q&A fora, chats and wikis. The study guides (Appendix 3) have been updated to reflect these changes. **The small group activities are also summarized in Section 1 of Appendix 3a, for easy reference.**

Furthermore, we have included two collaborative summative in-course assessments in each of semesters 1 and 2. Specifically, the written assignments in HSA-512 (Managing Human Resources in Health Care Organisations)and HSA-522 (Hospital Operations, Quality and Patient Safety) and the oral presentations in HSA-511 (Epidemiology and Biostatistics) and HSA-523 (Managing Health Information Systems), will be completed and marked as collaborative work amongst small groups of learners. These changes have been reflected in the study guides (Appendix 3).

EEC Findings:

2.2.3 and 2.2.6 HSA-590 should be redefined as Research Methods and Methodology and should become a compulsory part of the program to provide students with adequate knowledge and skills to conduct research.

As a minimum evidence-based methods and practices should be taught in the first semester potentially embedded in the Epidemiology course.

With regard to HSA-596, it is noted that requiring students to produce a paper to be submitted to a peer-reviewed academic journal might not be suitable for all students. Therefore, consideration could be given to offering an option of either writing a manuscript or a more traditional dissertation.

Response:

The response below refers to 2.2.3 and 2.2.6 as well as criterion 3.1.9 which, additionally, relates to developing student research skills. We welcome the committee's recommendations to further enhance the training students receive in evidence-based practice and research skill development and to make this a compulsory component of the programme.

As recommended by the committee, evidence-based methods and practices have been further emphasized early on in the course. Specifically, these concepts have been further embedded within HSA-511 (Epidemiology and Biostatistics), a compulsory course in semester 1, as suggested by the EEC. HSA-511 has been significantly enhanced to introduce the concepts of evidence-base practice, including identification and critical evaluation of studies, critical appraisal of research methods and synthesis of evidence. The course has been re-designed to include the following thematic areas: a) Introduction to Epidemiology and Public Health; b) Introduction to Evidence-Based Practice *(New thematic area)*; c) Introduction to Measurement; d) Descriptive Analysis of Data; e) Measures of Association and Study Designs f) Methodological Insights; g) Statistical Analysis and h) Synthesis of evidence *(New thematic area)*. **The learning objectives and learning outcomes of the course have been modified to address these changes. Specifically, new learning objectives and outcomes have been added as well as existing ones modified.** These are shown in Appendix 3a (Section 2) for easy reference.

The full content of this course may be found in the syllabus (Appendix 2) and the study guide

(Appendix 3) for HSA-511.

In summary, the course has been re-structured to: 1) provide a framework for understanding the principles of evidence-based medicine and evidence-based decision-making early on; 2) enable critical appraisal of evidence throughout the different sections of the course and 3) enable synthesis of evidence and consolidation of knowledge at the end of the course.

Based on the EEC's recommendation, HSA-590 (Research methodology in primary care and public health) is redefined as 'Research methods and methodology'. Taking into account the importance of research methods and methodology, we welcome the committee's recommendation to adopt research methodology as a compulsory part of the programme, as part of HSA-511 (Epidemiology and Biostatistics), as addressed in the paragraph above. Additionally, **HSA-590 (Research Methods and Methodology) has been added as a compulsory part of Semester 3 in two out of the three paths available to students.** Specifically, in Semester 3, students can choose to follow the research path, the field project path or the 3 elective courses path. HSA-590 was already a pre-requisite for the research path. We have further adopted HSA-590 as a compulsory part of the 3 electives path, i.e. students will need to take HSA-590 and can additionally choose another two elective courses. In regards to the field project path, students currently have the option of taking HSA-590 or HSA-533 (Innovation and Entrepreneurship) prior to completing the field project. **The field project route was designed with HSA-533 as a potential pre-requisite to introduce students to highly specific management research methodology, which will allow students to produce a business plan based on the principles of evidence-based decision making.** This is expected to help students' professional development either by adopting a new service in their existing work-place or establishing a new start-up. The course in Innovation and Entrepreneurship (HSA-533) rigorously prepares the students for this highly-specific methodology in management research.

The creation of a business plan requires extensive research in relevant areas, for example situation analysis (including for example market analysis, competitive analysis, PEST and SWOT analyses), market research (including for example development of surveys for consumer analysis), future strategy development (including for example development of a marketing plan and an associated business model) and a specific action plan (including for example financial planning). We believe that HSA-533 will fully prepare students, who would like to pursue a career path by developing a new product/service or business by further enhancing their research skills and application of evidence-based decision making. **An indicative list of learning outcomes from HSA-533, which highlights the emphasis the course places on business-specific research methodology, is provided in Appendix 3a (Section 3) for easy reference.** The full study guide is enclosed in Appendix 3.

With regard to HSA-596 (Research Project), we welcome the committee's recommendation to additionally offer students the option of writing a more traditional dissertation. Indeed, a thesis in the form of a manuscript to be submitted to a peer-reviewed journal may not be suitable for all students. For example, a dissertation may be more suitable for students whose research projects and results lend themselves more to the format of a traditional thesis. The addition of a traditional dissertation thus provides more flexibility for students. **This change is reflected in the course's**

study guide, enclosed in Appendix 3.

EEC Findings:

2.2.9 Although UNic has specific policies for student with special needs, it is not entirely clear how these apply to DL students.

In reference to 2.2.9, although it was scored 4 by the EEC, we have provided further detail below with regard to how the policies for students with special needs are applied to DL students. Please note that this response is relevant also to 4.1.1.

Distance learning students are managed under the existing Disabilities Policy of the Medical School with face-to-face interaction via Skype and any local examinations/assessment to be performed by local independent clinicians or hospital physicians. The Programme Handbook (Appendix 5) has been amended to include the relevant procedure (pages 45-46).

EEC Finding:

2.5.2 The existing cadre of Visiting Professors could be complemented with individuals with an even higher international research profile.

Response:

Indeed, we are pleased that the committee recognizes that our Visiting Professors already have a high international research profile. For example Prof. Panteli and Prof. Tsiotras regularly publish in high-impact journals and present their work in national and international conferences. **As program needs grow, the recruitment of more Visiting Professors will be needed.** Further recruitment will fulfil the need of potentially teaching existing courses (e.g. if more than two sections are running per course), teaching new elective courses as we develop them, and supervising student research projects.

As these needs arise, we will further complement our Visiting Professors, with colleagues with an even higher international research profile. This will be implemented during the recruitment process, which will emphasise the need for high-impact research outputs. This will ensure that our students benefit from this expertise.

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3. Research Work and Synergies with Teaching (Report pages 9-10)

EEC Findings:

3.1 Overall, the EEC expresses concerns first on the level of training that students receive in relation to evaluating research and to use it effectively in their practice. Second, it is felt that this lack of introduction and explanation to research methods and methodologies is detrimental to the students understanding and ability to determine the quality of research underpinning the work related to the modules.

With reference to 3.1.6, 3.1.7 and 3.1.8, a formal policy related to internal funding in support of research activity should be introduced. One helpful option would be to capitalize on the income generated by the program by ring-fencing a proportion of the income from fees to be reinvested into opportunities for staff to apply for internal funding. In turn, this will enable staff to raise their

international profile and consequently their contribution to the quality of the program in relation to research-teaching synergies. Research activities should be explicitly included in the career development plans of the faculty and part of the annual evaluation process.

Response:

We welcome the committee's recommendation to further enhance student learning in research methodology and critical appraisal through early introduction of these concepts. **We have further enhanced HSA-511 (Epidemiology and Biostatistics), a compulsory course in Semester 1, to introduce evidence-based practice and critical appraisal early on. Additionally, we have included HSA-590 (Research Methods and Methodology) as a compulsory course in two of out the three elective routes in Semester 3.** Please refer to 2.2.3 and 2.2.6 (pages 9-11) for a detailed description of the adopted changes.

We welcome the EEC's recommendation to establish a policy for internal funding. **The policies for internal funding include the establishment of the 'Universitas Endowment Fund' and 'Second Opportunity Grants'. Furthermore, an annual evaluation process, which includes appraisal of research activity, has been implemented by the Medical School since its establishment.** Please refer to 1.3.2.2. and 1.3.9 (pages 5-8) for further details in regards to the plans for further increasing research outputs. Appendix 8 includes an indicative list of research activity of the MHSA teaching personnel based at the Medical School over the past two years.

4. Administration Services, Student Welfare & Support of Teaching Work (Report page 10)

EEC Finding:

4.1.1 UNic has a number of student welfare mechanisms in place and it is believed that these can potentially support DL students, however see comment 2.2.9.

4.1.3 It is not clear whether efficient mechanisms have been put in place for the continuous evaluation of these services.

Response:

We are pleased with the EEC's finding that overall the administrative mechanisms for supporting students are 'of high standards'.

In regards to 4.1.3., we would like to clarify that quality assurance mechanisms that have been implemented for the program apply both to the academic and administrative components. These are described in detail in the MHSA Quality Standards Manual, which was previously provided to the EEC.

The Medical School routinely collates data and assesses the quality of its provision of student support through a variety of different means. These form part of the Medical School's Quality Framework Aim 1, which is to 'improve outcomes for students through enhancing the quality of services delivered'.

Some examples of how this is undertaken include:

- Analysis of student feedback responses after each course, following student completion of questionnaires which include questions on administrative matters;

- A comprehensive annual Student Experience Survey which asks for student feedback on all areas of support from programme administration, management and organisation, academic support, and student welfare provision;
- The inclusion of student representation in key committees of the School and its programme, such as Programme Committee, Student Affairs Committee and the Medical School's Quality Assurance Group. Students are asked to provide feedback relating to their student support experience as well as more generally in terms of how they feel supported on their specific programme. Furthermore, there is student representation at the University's Internal Quality Assurance Committee;
- Programme Administrators and senior administrative staff are also integral members of committees enabling them to raise any concerns regarding the administrative support that they are able to provide to programmes and, in turn, to the student body.

In striving to continuously improve we are able to assess whether the support provided remains fit for purpose, accessible and inclusive.

Furthermore, in line with the "Standards and Guidelines for Quality Assurance in the European Higher Education Area" (ESG) (2015), specifically section 1.6: 'Learning Resources and Student Support' and the reference to the delivery of support services by appropriately developed staff, all Medical School administrative staff are provided with opportunities to develop through staff training, involvement in Erasmus⁺ staff exchanges, mentoring, and annual performance reviews (appraisals).

Additionally, we note that with regards to the support for DL students (4.1.1) there is a reference back to 2.2.9 as to how students with special needs are supported on DL programme. Our response with regards to this can be found on page 11 of this document.

EEC Finding:

4.2.7 The teaching personnel has experience of teaching on DL programs. It would be helpful for UNic to develop a full training program on DL teaching methods, interactive and collaborative learning activities specific for adult education. A person has been specifically appointed to carry this task from autumn 2018.

Response:

We welcome the committee's suggestion to develop a training plan for our faculty. Indeed, the committee has recognized that: 'A person has been specifically appointed to carry this task from autumn 2018'. The committee had the opportunity to meet Dr. Christos Anagiotos, who has already signed a contract, and will begin working at the University on September 1st, 2018 as the Director of the e-Learning Pedagogical Support Unit (ePSU). Dr. Anagiotos' educational qualifications include a Ph.D. in Adult Education. Further, he worked until recently as an Assistant Professor of Adult Education at North Carolina A&T State University and has extensive experience in consulting with faculty from various fields in regards to designing and teaching in online and distance learning settings at the Pennsylvania State University and the University of Connecticut.

One of the first activities of the ePSU will be to facilitate application of Adult Education and

Distance Learning pedagogical principles in each course by providing faculty support and training, through face-to-face sessions, online workshops, and one-to-one consultations. Dr. Anagiotios has developed the thematic areas for the faculty training to ensure that all faculty members will be trained in distance learning teaching methods and collaborative learning activities, as they relate to adult education. **The thematic areas are attached as Appendix 9 and the training will be concluded well in advance of the Spring 2019 launch of the programme.**

By the end of the training sessions and workshops we expect each lecturer to have developed a plan of how to implement activities and assessment methods, which are suitable for their individual courses, based on pedagogical principles of distance learning and adult learning. **Beyond this initial support, ePSU will provide support in designing the course activities and material and assessing their quality.** Consultation with faculty will be on a one-on-one basis according to the needs of each faculty and the course requirements. **The ePSU will continue to monitor and support each faculty member to ensure that their course runs smoothly and student learning outcomes are achieved.**

It is important to note that teaching personnel have already started receiving relevant training, including completion of two training workshops delivered by the University's Distance Learning Unit, namely Distance Learning Essentials and Moodle Essentials. **The training certificates are attached as Appendices 10 and 11, respectively.**

In addition, some of our teaching personnel have already completed training in regards to the pedagogical approaches relevant to DL delivery. This was a comprehensive one-week training programme on pedagogical methods and Instructional Design Models for Distance Learning Delivery. The specific training programme called 'Train the Trainer' was conducted by the non-profit research and development organization CARDET (Centre for the Advancement of Research and Development in Educational Technology) and has been accredited by the Cyprus Ministry of Education. **Please see Appendix 12 for the relevant certificates.**

Finally, a number of the faculty of the Medical School, including the MHSA course director, have successfully completed, or are currently enrolled in, the St George's University of London Postgraduate Certificate in Healthcare and Biomedical Education (PgCert HBE). This course complements effectively the training in DL-specific pedagogy. A core outcome is the applied understanding of pedagogical issues related to teaching and supporting the needs of adult learners. It comprises the following three modules and is Higher Education Academy UK (HEA)-accredited: 1. Principles of Teaching and Learning; 2. Principles of Assessment of Learning & Curriculum Design 3. Personal & Professional Development as a Teacher.

As noted above, clear plans have been further developed to conclude our training activities prior to the launch of the programme.

EEC Findings:
(4.3.1 no commentary provided)
4.3.2 The information provided is not sufficient to make a justifiable assessment.

> *4.3.3 It is understood that the remuneration of teaching staff is comparable to the one of staff employed by other private institutions but it is below the salary levels of academic staff employed in public universities.*
>
> *4.3.4 The tuition fees are higher than other comparable institutions however opportunities are available for student to apply for scholarships on the basis of needs. No scholarship is awarded for academic excellence.*

Response:

In regards to the management of financial resources (4.3.1 and 4.3.2):

- **We would like to clarify that the Medical School prepares an annual budget**, which adequately supports the development of the programme as well as its teaching personnel.
- **In compiling the budget for the forthcoming academic year, programme needs are communicated to the committee responsible for development of the budget by each of the programme coordinators, including the MHSA coordinator.** This ensures that any financial needs are planned for well in advance and that allocation of financial resources is informed by academic personnel.
- Importantly, the budget makes provisions for securing further funds to support the efficient operation of the program, in cases of unaccounted expenses e.g. replacing a faculty member for maternity leave. **Furthermore, the budget carefully allocates funds to meet further development of its faculty,** including for example provisions for attending research conferences or addressing additional training needs.

4.3.3: As mentioned above, the Medical School develops an annual budget.

- **Faculty remuneration forms an important part of the budget. The Medical School rewards its faculty members according to their rank, seniority and responsibility.**
- An annual appraisal system is in place to set and review faculty objectives and to ensure that faculty have the resources needed to achieve them.
- As a clarification on the EEC's comment that salaries of our faculty are 'below the salary levels of academic staff employed in public universities', our understanding is in fact that our salaries are comparable to those of the public universities.

In regards to 4.3.4, we would like to clarify that tuition fees for the MHSA are in line with those of other Distance Learning Master's programmes offered by the University of Nicosia, which range from €13,590 to €18,000.

For details on UNic's tuition for Distance Learning Master's programmes, please see:
1. http://www.unic.ac.cy/wp-content/uploads/a4_u0003-cy-eu_tuition_fees_18-19_4.18.pdf
2. http://www.unic.ac.cy/wp-content/uploads/a4_u0005-international_tuition_fees_18-19_4.18.pdf.

The tuition was also validated through a comparison with local and international competitors.

In line with the University policy, the Medical School provides generous scholarships, based on financial need, for the MHSA. For the first year of operation of the MHSA, these scholarships

will cover up to a 50% tuition reduction. This will bring tuition for the entire programme to a level that is equivalent to local programmes offered only in Greek, and considerably less than tuition for British or other equivalent programmes offered in the English language. It should be noted that one of the reasons for developing this course was to address a need identified by our partner hospitals: **importantly, substantial scholarships will be offered to employees of our partner hospitals.** The extensive network of partner hospitals was described to the EEC on their visit.

As is standard practice across all Medical School programmes, we will also review market conditions in future years to determine the appropriate level of tuition and scholarships to ensure that the program remains attractive to students.

5. Distance Learning Programs (Reports pages 10-12)

EEC Findings:

5.2 It would appear that the teaching personnel has been recruited regardless of whether they are teaching or not on a DL program.

5.3 See comment 4.2.7

Response:

In regards to 5.2, the teaching personnel were carefully selected to be fully qualified to teach their respective courses. Specifically, selection criteria included relevant higher education qualifications in the subject matter, prior teaching experience and relevant research activity. Indeed, a number of our teaching personnel also have extensive experience in teaching on distance learning programmes.

All teaching personnel, regardless of distance learning experience, will be fully trained and supported by the University to enable them to deliver successfully their courses. The training plans are discussed in detail in 4.2.7 above on pages 13-14. Faculty performance is monitored closely so that faculty can be supported to develop their skills further, as needed.

5.3 Please refer to the response given for 4.2.7 above, which describes the Medical School's plans for further supporting its teaching personnel. (See pages 13-14).

5.12. In regards to the quality assurance mechanisms that govern supportive services, please refer to 4.1.3 above, which describes the underlying quality assurance framework for administrative, supportive services in the MHSA programme. (See pages 12-13).

Conclusions and Suggestions of the External Evaluation Committee (Report page 13)

EEC Finding:

A number of suggestions and requests for improvements were made by the EEC throughout the report. In particular, UNic should focus, in the short term, on the research skills training the students receive and, in the long term, on the research opportunities for teaching staff as a whole

Response:

With regard to the training of students in research skills, we kindly refer you to the response provided on pages 9-11 relating to criteria 2.2.3 and 2.2.6.

With regard to the long-term approach to research opportunities for teaching staff, we kindly refer you to the response provided on pages 5-8.

Section IV: Concluding Remarks

We would like to highlight again the overall score of 4.4. We are pleased with the overall very positive assessment provided, and are very grateful for the EEC's thorough evaluation. We are very glad to see that the committee recommends accrediting the programme, provided that the issues presented in their report are adequately addressed.

We trust that the details contained herein provide an appropriate response to the items raised and look forward to hearing from you following your consideration of the above. We wish to thank the EEC once more for providing us with the above opportunities to enhance the programme.

Section V: List of Appendices

1. The role of learning analytics in Distance Learning assessment
2. Course syllabi
3. Course study guides
3a. Summary of module changes
4. Scheme of assessment
5. Programme handbook
6. Faculty performance review form
7. Internal grants initiative
8. Indicative faculty research activity
9. Thematic areas for faculty training: Pedagogical principles of Distance Learning and adult learning
10. 'Distance Learning Essentials' training certificates
11. 'Moodle Essentials' training certificates
12. 'Train the Trainer' training certificates

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