

Doc. 300.3.1

Date: 2-11-2020

External Evaluation Report (Departmental)

- **Higher Education Institution:**
CYPRUS UNIVERSITY OF TECHNOLOGY

- **Town:** : Limassol
- **School/Faculty:** : Faculty of Health Sciences
- **Department:** Department of Rehabilitation Sciences
- **Programme(s) of study under evaluation**
Name (Duration, ECTS, Cycle)

Programme 1

In Greek:

Programme Name

In English:

BSc Rehabilitation Sciences/Speech/Language Pathology

Programme 2

In Greek:

Programme Name

In English:

PhD Rehabilitation Science

Programme 3

In Greek:

Programme Name

In English:

Programme Name

- **Department's Status:** Choose status

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 2019” [N. 136 (I)/2015 to N. 35(I)/2019].

A. Introduction

The external examination committee (from now on EEC) was asked by the Cyprus Agency of Quality Assurance and Accreditation in Higher Education to evaluate the Bachelor in Rehabilitation Sciences – Speech- Language Therapy/Speech Pathology at the Cyprus University of Technology in October (26th) 2020. The evaluation included a thorough analysis of the report prepared by the institution. Also a virtual tour of the University of Technology and the specific rehabilitation clinic were added. There was also the possibility to follow live streaming of the courses.

Due to the Corona pandemic a remote site visit (using ZOOM) took place on the 26th of October 2020. The ECC had online meetings with the Vice Rector of Academic Affairs Prof. Keriles, with the dean of the Faculty of Health Sciences Prof. Middleton and the department head of the program Prof. Petinou. The EEC had also the opportunity to meet the teaching staff, one student from the bachelor program and the administrative staff.

The academic Bachelor program in Rehabilitation Sciences consist of 4 years (8 semesters/each semester has 30 ECTS) corresponding to 240 ECTS. The training of the students will be achieved through compulsory courses, elective courses, the writing of a thesis and several clinical education courses (different levels) and clinical placement opportunities. The PhD program in Rehabilitation Sciences coordinated by Prof. Konstantinou consists of 4 years (8 semester/each semester has 30 ECTS) corresponding to 240 ECTS. The program requirements are 60 ECTS compulsory courses and 180 ECTS (6 semesters of 30 ECTS/semester) undergraduate/postgraduate assignments.

After reading the accreditation report, the EEC had some questions on the various aspects that they needed to be evaluated in this report. Most of these questions were answered satisfactorily and the meetings led to insightful extra information. Some additional information was submitted after the online meetings. On the basis of this, the EEC can conclude that all standards are met. Below we will give a more elaborate description of how these standards are met and in some cases we give some suggestions for improvement.

B. This part includes basic information regarding the onsite visit.

C. External Evaluation Committee (EEC)

| <i>Name</i> | <i>Position</i> | <i>University</i> | |
|-----------------------------|---|---------------------------|------|
| Ona Bo Wie | Professor | University of Oslo | Name |
| Rosemary Varley | Professor | University College London | Name |
| Kristiane Van Lierde | Professor | University Ghent, Belgium | Name |
| Anna Theodoulou | Member of the Professional Association Body | University | Name |
| Evrydiki Kolokoudia | Student psychology | University of Cyprus | Name |
| Name | Position | University | Name |

D. Guidelines on content and structure of the report

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

| | |
|---------|----------------------------|
| 1 or 2: | <i>Non-compliant</i> |
| 3: | <i>Partially compliant</i> |
| 4 or 5: | <i>Compliant</i> |

- *The EEC must justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.*
- *It is pointed out that, in the case of indicators (criteria) that cannot be applied due to the status of the Department, N/A (= Not Applicable) should be noted and a detailed explanation should be provided on the Department's corresponding policy regarding the specific quality indicator.*
- *In addition, for each assessment area, it is important to provide information regarding the compliance with the requirements. In particular, the following must be included:*

Findings

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

Strengths

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

Areas of improvement and recommendations

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

- *The report may also address other issues which the EEC finds relevant.*

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

Sub-areas

- 1.1 Mission and strategic planning
- 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 | | 1 - 5 |
| 1.1.1 | The Department has formally adopted a mission statement, which is available to the public and easily accessible. | 5 |
| 1.1.2 | The Department has developed its strategic planning aiming at fulfilling its mission. | 5 |
| 1.1.3 | The Department's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted. | 5 |
| 1.1.4 | The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice. | 5 |
| 1.1.5 | The academic community is involved in shaping and monitoring the implementation of the Department's development strategies. | 5 |
| 1.1.6 | Stakeholders such as academics, students, graduates and other professional and scientific associations participate in the Department's development strategy. | 5 |
| 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. | 4 |
| Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. | | |

The mission statement, the short, medium and long-term goals were found in the main report of the department. They are also available on the website, both Greek and English.

Additionally, provide information on the following:

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

The academic and administrative bodies of the department of rehabilitation sciences and the department's internal quality committee have a strong connection. There is a strong coherence between the different programs delivered by the department in terms of theoretical knowledge, research skills, infrastructure, clinical rehabilitation practices and management of research output. A strong coherence between the different organizations and clubs is also present. A strong relationship with the institution of Academic affairs and with the school of Health Sciences was deduced from the report and the interviews.

Provide suggestions for changes in case of incompatibility.

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. | 5 |
| 1.2.2 | The Department provides sufficient information to the public about its activities and offered programmes of study. | 5 |
| 1.2.3 | The Department ensures that its operation and activities have a positive impact on society. | 5 |
| 1.2.4 | The Department has an effective communication mechanism with its graduates. | 5 |

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

The societal communication and the communication about the presence and goals of the specialized labs is excellent. The societal relevance of the university clinic for rehabilitation is extremely appreciated by the EEC.

1. Department's academic profile and orientation

1.3 Development processes

1 - 5

| | | |
|-------|--|---|
| 1.3.1 | Effective procedures and measures are in place to attract and select teaching staff to ensure that they possess the formal and substantive skills to teach, carry out research and effectively carry out their work. | 5 |
|-------|--|---|

| | | |
|-------|--|---|
| 1.3.2 | Planning teaching staff recruitment and their professional development is in line with the Department's academic development plan. | 5 |
| 1.3.3 | The Department applies an effective strategy of attracting high-level students from Cyprus and abroad. | 3 |
| 1.3.4 | The funding processes for the operation of the Department and the continuous improvement of the quality of its programmes of study are adequate and transparent. | 4 |

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

It would be nice to have more international students. The process of continuous improvement of the quality is good. It would be nice to implement a 4 eyes principle for examination questions and the evaluation of the essays (in the bachelor assessment process)

Additionally, write:

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

[Click to enter text.](#)

Findings

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

The structure of the Department of Rehabilitation Sciences with academic and administrative bodies and with the internal quality committee is clear and transparent. The organization of the different bodies and organizations in the department is clearly defined and the stakeholders of the department are enrolled in organized meetings and if necessary in special meetings. The department offers three programs of study (Bachelor in speech-language therapy/speech pathology + master in cognitive neurorehabilitation + PhD in rehabilitation sciences). Each program has a clear study program, a synergy between teaching- research and clinical practice and a quality assurance protocol. Student facilities and other services are present. The EEC was impressed by the motivation of the administrative staff especially the policy worker of the library Madame Kola.

Strengths

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

- 1) Academic profile and orientation of the department is very good
- 2) Strong coherence between the programs of study
- 3) Presence of qualified teaching staff with good motivation. They are the key to the success of the department
- 4) Well defined services for students (also for students with special needs)
- 5) Student facilities and other services and clubs are available
- 6) Presence of excellent research labs (with excellent equipment)
- 7) Good infrastructure for the students
- 8) The presence of qualified administrative staff

- 9) The social contributions through the organization of conferences and seminars is very good
10) The EEC appreciates the link with the business world
11) International collaboration is obviously present

Areas of improvement and recommendations

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

Increased recruitment of international students would be nice (in the bachelor program).
An increased collaboration between other departments and other universities is suggested by the EEC.

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

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

2. Quality Assurance

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

Sub-areas

- 2.1 System and quality assurance strategy
2.2 Quality assurance for the programmes of study

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

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

| Quality indicators/criteria | | |
|--|---|--------------|
| 2. Quality Assurance | | |
| 2.1 System and quality assurance strategy | | 1 - 5 |
| 2.1.1 | The Department has a policy for quality assurance that is made public and forms part of the Institution's strategic management. | 4 |
| 2.1.2 | Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders. | 4 |
| 2.1.3 | The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff. | 5 |
| 2.1.4 | The quality assurance system adequately covers all the functions and sectors of the Department's activities: | |
| 2.1.4.1 | Teaching and learning | 4 |
| 2.1.4.2 | Research | 5 |
| 2.1.4.3 | The connection with society | 5 |
| 2.1.4.4 | Management and support services | 4 |
| 2.1.5 | The quality assurance system promotes a culture of quality. | 4 |
| Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. | | |
| Discussions with staff revealed a strong commitment to quality in all the activities of the department. Staff and student representatives were able to describe systems for | | |

feedback on teaching. Their feedback was reviewed by the Head of Department. Head of Department would then discuss strengths and areas for improvement with staff. The EEC support the increase of the administrative staff as suggested in application (p 221-222 of the report).

2. Quality Assurance

| 2.2 Quality assurance for the programmes of study | | 1 - 5 |
|---|---|-------|
| 2.2.1 | The responsibility for decision-making and monitoring the implementation of the programmes of study offered by the Department lies with the teaching staff. | 5 |
| 2.2.2 | The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Department are clear, sufficient and known to the students. | 5 |
| 2.2.3 | The quality control system refers to specific indicators and is effective. | 4 |
| 2.2.4 | The results from student assessments are used to improve the programmes of study. | 4 |
| 2.2.5 | The policy dealing with plagiarism committed by students as well as mechanisms for identifying and preventing it are effective. | 5 |
| 2.2.6 | The established procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective. | 5 |
| 2.2.7 | The Department publishes information related to the programmes of study, credit units, learning outcomes, methodology, student admission criteria, completion of studies, facilities, number of teaching staff and the expertise of teaching staff. | 5 |
| 2.2.8 | The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered. | 5 |
| 2.2.9 | The Department flexibly uses a variety of pedagogical methods. | 5 |
| 2.2.10 | The Department systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place. | 5 |
| 2.2.11 | The Department analyses and publishes graduate employment information. | 5 |
| 2.2.12 | The Department ensures adequate and appropriate learning resources in line with European and international standards and/or international practices, particularly: | |
| 2.2.12.1 | Building facilities | 5 |
| 2.2.12.2 | Library | 5 |

| | | | |
|--------|--|---|---|
| | 2.2.12.3 | Rooms for theoretical, practical and laboratory lessons | 5 |
| | 2.2.12.4 | Technological infrastructure | 5 |
| | 2.2.12.5 | Academic support | 5 |
| 2.2.13 | There is a student welfare service that supports students in regard to academic, personal problems and difficulties. | | 5 |
| 2.2.14 | The Department's mechanisms, processes and infrastructure consider the needs of a diverse student population such as mature, part-time, employed and international students as well as students with disabilities. | | 5 |
| 2.2.15 | Mentoring of each student is provided and the number of students per each permanent teaching member is adequate. | | 5 |
| 2.2.16 | The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available. | | 5 |
| 2.2.17 | The number of doctoral students, under the supervision of a member of the teaching staff, enables continuous and effective feedback to the students and it complies with the European and international standards. | | 5 |
| 2.2.18 | The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates. | | 5 |
| 2.2.19 | There is a clear policy on authorship and intellectual property. | | 3 |

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

Staff were able to describe processes to ensure reliability in marking of student assignments, particularly with regard to training postgraduate instructors. The Department might want to explore mechanisms for ensuring reliability across all assessments, for example through blind sample second marking. The Department submitted a self-assessment of quality assurance for both the undergraduate and doctoral programmes, with all domains awarded a maximum score of 5 (e.g. BSc document Annex 5). However, sections within this self-assessment regarding evidence in support of these gradings was often incomplete. The review panel were disappointed that representatives from the Quality Assurance Department Committee did not attend the scheduled session and as a result we were unable to clarify process with regard to internal quality assessment. To the best of our knowledge the EEC has no opportunity to review the policy of authorship and intellectual property. Perhaps the policy is present but the EEC has not found it in the report and the information sent by email.

Findings

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

The panel were impressed by the infrastructure of the University and the Department, and in particular, the newly built clinic. In addition to the buildings, the various laboratories were very well

equipped with state-of-the-art resources. Library resources were excellent and there was ample evidence of outstanding support of students in information access. CUT use Turnitin to detect plagiarism and, importantly, use it as a tool to support student understanding of issues of plagiarism. We were also convinced that welfare services to support students were of an excellent standard. Staff were able to describe processes to ensure reliability in marking of student assignments, particularly with regard to training postgraduate instructors.

Strengths

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

Outstanding infrastructure and resources in support of the teaching and research
Highly motivated programme teams, displaying a commitment to quality in teaching and research
Strong library services and student welfare systems

Areas of improvement and recommendations

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

Lack of clarity of internal quality audit processes

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

| Sub-area | <i>Non-compliant / Partially Compliant / Compliant</i> |
|---|--|
| 2.1 System and quality assurance strategy | Compliant |
| 2.2 Quality assurance for the programmes of study | Compliant |

3. Administration (ESG 1.1, 1.3, 1.6)

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

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

| Quality indicators/criteria | | 1 - 5 |
|-----------------------------|--|--------------|
| 3. Administration | | 1 - 5 |
| 3.1 | The administrative structure is in line with the legislation and the Department's 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 specified procedures, in the management of the Department. | 5 |
| 3.3 | The administrative staff adequately supports the operation of the Department. | 3 |
| 3.4 | Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Department's council competently exercises legal control over such decisions. | 5 |
| 3.5 | The Department applies effective procedures to ensure transparency in the decision-making process. | 5 |
| 3.6 | Statutory sessions of the Department are held and minutes are kept. | 2 |
| 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. | 4 |
| 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. | 3 |
| 3.9 | The Department applies procedures for the prevention and disciplinary control of academic misconduct of students, teaching and administrative staff, including plagiarism. | 3 |
| 3.10 | The Department has appropriate procedures for dealing with students' complaints. | 3 |

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

The visiting panel believed that adequate processes were in place in all of the above domains. However, we were unable to see evidence in the documentation with regard to some of the criteria. In future accreditation exercises it might be helpful to collect committee minutes and include an online link to them. Panel members had difficulty navigating the documentation submitted by the Department and sent on by the Agency.

Findings

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

The clarity of documentation was not optimal. The panel were unable to locate evidence in relation to some of the criteria listed above (e.g. minutes of departmental meetings, disciplinary policy).

Strengths

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

Staff were autonomous and confident to assert views, revealing academic freedom and openness of management.

Areas of improvement and recommendations

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

The Agency should impose strict timelines for submission of information and not send panel members further links/documents after this deadline.

Departments are encouraged to produce document that clearly addresses each of the criteria of the evaluation.

CUT should ensure that support staff in the Bursar Office, Research and Program Office, and Quality Assurance Department Committee are aware of and attend meetings with the review panel, consistent with the schedule.

Better organization and timeliness of documentation might be assisted by increased administrative support to the Department and its academics.

Please select what is appropriate for the following assessment area:

| Assessment area | <i>Non-compliant / Partially Compliant / Compliant</i> |
|-------------------|--|
| 3. Administration | Partially Compliant |

4. Learning and Teaching (ESG 1.2, 1.3, 1.4, 1.9)

Sub-areas

- 4.1 Planning the programmes of study
- 4.2 Organisation of teaching

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

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

| Quality indicators/criteria | | |
|---|--|--------------|
| 4. Learning and Teaching | | |
| 4.1 Planning the programmes of study | | 1 - 5 |
| 4.1.1 | The Department provides an effective system for designing, approving, monitoring and periodically reviewing the programmes of study. | 5 |
| 4.1.2 | Students and other stakeholders, including employers, are actively involved on the programmes' review and development. | 5 |
| 4.1.3 | The content of the programmes of study, the assignments and the final exams correspond to the appropriate level as indicated by the European Qualifications Framework (EQF). | 5 |
| 4.1.4 | The programmes of study are in compliance with the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable. | 5 |
| 4.1.5 | The Department ensures that its programmes of study integrate effectively theory and practice. | 5 |

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

Both the BSc Speech Pathology and PhD Rehabilitation Science were very clearly described. The curriculum design was thoughtful and there was a clear rationale for the content and staging of modules. The programme teams had devised ways in which to incorporate theory and practice (e.g. case presentations, data analysis). There was address to the needs of employers and users of services. There was clear consideration of development of skills to enhance employability for doctoral students (e.g. teaching skills, effective presentations).

4. Learning and Teaching

| 4.2 Organisation of teaching | | 1 - 5 |
|------------------------------|--|-------|
| 4.2.1 | The Department establishes student admission criteria for each programme, which are adhered to consistently. | 5 |
| 4.2.2 | Recognition of prior studies and credit transfer is regulated by procedures and regulations that are in line with European standards and/or international practices. | 5 |
| 4.2.3 | The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons. | 5 |
| 4.2.4 | The teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship. | 5 |
| 4.2.5 | Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process. | 5 |
| 4.2.6 | The teaching staff of the Department provides timely and effective feedback to their students. | 4 |
| 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. | 3 |

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

The panel were provided with clear information on admissions policies. Staff-student ratios were appropriate. It was evident from the meeting with students that there was considerable respect for staff, and equally by staff for their students.

We had less evidence for the criteria for which lower scores were awarded, e.g. timeliness of feedback. Again, we encourage careful preparation of documentation in future accreditation exercises in order to facilitate the review process.

Findings

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

The EEC were convinced that high quality processes were in place across all the above criteria. The key issues were to provide documentation in support of the accreditation process.

Strengths

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

- 1) Clear and fair admissions processes
- 2) Strong communication and clear respect between staff and students

Areas of improvement and recommendations

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

Clearer documentation in future accreditation, particularly with regard to providing examples of assessment topics, a sample of marked student work and feedback. Ideally this would be translated to English to make information accessible to all members of the review panel, but it would be sufficient if Greek-speaking members of the panel were able to evaluate this information.

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

| Sub-area | <i>Non-compliant / Partially Compliant / Compliant</i> |
|--------------------------------------|---|
| 4.1 Planning the programmes of study | Compliant |
| 4.2 Organisation of teaching | Compliant |

5. Teaching Staff (ESG 1.5)

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

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

| Quality indicators/criteria | | 1 - 5 |
|-----------------------------|---|--------------|
| 5. Teaching Staff | | 1 - 5 |
| 5.1 | The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study. | 5 |
| 5.2 | The teaching staff of the Department has the relevant formal and substantive qualifications for teaching the individual subjects as described in the relevant legislation. | 5 |
| 5.3 | The visiting Professors' subject areas adequately support the Department's programmes of study. | 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. | 5 |
| 5.5 | The ratio of special teaching staff to the total number of teaching staff is satisfactory. | 5 |
| 5.6 | The ratio of the number of subjects of the programme of study taught by teaching staff working fulltime and exclusively to the number of subjects taught by part-time teaching staff ensures the quality of the programme of study. | 5 |
| 5.7 | The ratio of the number of students to the total number of teaching staff is sufficient to support and ensure the quality of the programme of study. | 5 |
| 5.8 | Feedback processes for teaching staff in regard to the evaluation of their teaching work, by the students, are satisfactory. | 5 |

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

During the interviews it was obvious that visiting professors with a specific expertise teach in the educational programs. It would be nice to introduce international seminars.

The EEC appreciated the introduction of two new professors with a specific expertise.

Also, write the following:

- Number of teaching staff working full-time and having exclusive work 9 FTE
- Number of special teaching staff working full-time and having exclusive work ratio of permanent and non-permanent personnel: 13:4 more information not available
- Number of visiting Professors (from 2016-2018): 12

- Number of special scientists on lease services: Not available

Click to enter text.

Findings

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

The Teaching staff qualifications are excellent and the number of teaching staff is adequate to run the bachelor program and two more professors have recently been recruited. The teaching staff were motivated and able to: 1. achieve the objectives and planned learning outcomes of the bachelor program, 2. ensure quality and sustainability of the teaching and learning, and (3) implement new educational principles and research technologies because they can rely on excellent research labs

The EEC would like to congratulate the teaching staff on their qualifications regarding teaching, research and their cooperative attitude. Moreover, the EEC congratulates Prof. Kakia Petinou, the head of the department, for her motivation and excellent entrepreneurship. It was obvious that each professor has their own expertise (educational expertise, research expertise and expertise regarding societal outreach) and that the professors are working together effectively to develop and evaluate the content and the quality of this bachelor program.

Strengths

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

- 1) Excellent researchers and teachers
- 2) Synergy between teaching- science and clinical experience is absolutely present
- 3) The program coordinator Prof. Petinou and Prof. Konstantinou are highly motivated and talented, and are well placed to coordinate and evaluate the program and to manage the teaching staff.
- 4) Both the Vice-Rector, Prof. Kelires, and the Dean of the School of Health Sciences, Professor Nico Middleton, support the program coordinator and the teaching staff by providing financial sources and other support

Areas of improvement and recommendations

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

Click to enter text.

Please ✓ what is appropriate for the following assessment area:

| Assessment area | <i>Non-compliant / Partially Compliant / Compliant</i> |
|-------------------|--|
| 5. Teaching Staff | Compliant |

6. Research

(ESG 1.1, 1.3, 1.5, 1.6)

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

1 or 2: *Non-compliant*

3: *Partially compliant*

4 or 5: *Compliant*

| Quality indicators/criteria | | |
|--|---|--------------|
| 6. Research | | 1 - 5 |
| 6.1 | The Department has a research policy formulated in line with its mission. | 5 |
| 6.2 | The Department consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes. | 5 |
| 6.3 | The Department provides adequate facilities and equipment to cover the staff and students' research activities. | 5 |
| 6.4 | The Department has the appropriate mechanisms for the development of students' research skills. | 5 |
| 6.5 | The results of the teaching staff research activity are published to a satisfactory extent in international journals which work with critics, international conferences, conference proceedings, publications, etc. The Department also uses an open access policy for publications, which is consistent with the corresponding national and European policy. | 4 |
| 6.6 | The Department ensures that research results are integrated into teaching and, to the extent applicable, promotes and implements a policy of transferring know-how to society and the production sector. | 4 |
| 6.7 | The Department provides mechanisms which ensure compliance with international rules of research ethics, both in relation to research activity and the rights of researchers. | 5 |
| 6.8 | The external, non-governmental, funding of research activities of teaching staff is similar to other Departments in Cyprus and abroad. | 5 |
| 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. | 5 |
| Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. | | |

Click to enter 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 finds that the required structure and formal regulations for performing high quality research is in place in the department. There is a clear strategy within the department to establish itself as a leading research institution, promoting innovative and high value research. The EEC acknowledge that it takes time to fulfil the high ambitions of the department and recognise the department's research as respectable and promising given the short time of existence. Some research activity is already of impressive quality resulting in publication in high-ranking journals. The EEC appreciate the departments focus on international and outside CUT collaboration. The close contact with the outside practices promotes the connection between evidence-based research and clinical practice.

Strengths

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

- 1) Promising research activity.
- 2) The departments focus on both international publications and their recognition of their social responsibility by contributing to the local community offering research cooperation.
- 3) The investment of in-house labs with access to cases, performing of experimental research is seen as a highly valuable asset to the departments' research activity.

Areas of improvement and recommendations

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

As the quality of the research thematically connected to BSc in rehabilitation Sciences-speech-language therapy/speech pathology are promising, the committee encourage the teaching staff to aim for journals with high impact factor for increased visibility internationally.

Please ✓ what is appropriate for the following assessment area:

| Assessment area | <i>Non-compliant / Partially Compliant / Compliant</i> |
|-----------------|--|
| 6. Research | Compliant |

7. Resources (ESG 1.6)

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

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

| Quality indicators/criteria | | |
|--|--|--------------|
| 7. Resources | | 1 - 5 |
| 7.1 | The Department has sufficient financial resources to support its functions, managed by the Institutional and Departmental bodies. | 4 |
| 7.2 | The Department follows sound and efficient management of the available financial resources in order to develop academically and research wise. | 5 |
| 7.3 | The Department's profits and donations are used for its development and for the benefit of the university community. | 5 |
| 7.4 | The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning. | 4 |
| 7.5 | The Department carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation. | 5 |
| 7.6 | The Department's external audit and the transparent management of its finances are ensured. | 5 |
| 7.7 | The fitness-for-purpose of support facilities and services is periodically reviewed. | 5 |
| <p>Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.</p> <p>The ambition is high and the activity is of good quality, thus the EEC see the potential for expanding the departments' activities offering a master program within developmental disorder from 2021. The faculty expressed a need for additional faculty positions to help meet the already existing growth of demands within the undergraduate and graduate programs.</p> | | |

Findings

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

The department

The EEC finds the department's management of the seven above stated areas to be sound and efficient.

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 finds room for improvement in increasing the effort of facilitating more funding for PhD-candidates and the possibly coming postdoctoral candidates.

Please ✓ what is appropriate for the following assessment area:

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

E. 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.

We thank the program team and staff from library and student services for their collegial approach to the review. We found out the discussion with the students informative and helpful and we appreciate the motivation of the teaching staff. Overall, we found the staff and the resources of the department of good quality and working practices were impressive. We recognize that the limitation from COVID-19 may have limited the availability of information and opportunities to clarify certain points.

F. Signatures of the EEC

| Name | Signature |
|----------------------|-----------|
| Ona Bø Wie | |
| Rosemary Varley | |
| Kristiane Van Lierde | |
| Anna Theodoulou | |
| Evrydiki Kolokoudia | |
| FullName | |

Date: 2.11.2020

| <i>Name</i> | <i>Signature</i> |
|----------------------|------------------|
| Ona Bø Wie | |
| Rosemary Varley | |
| Kristiane Van Lierde | |
| Anna Theodoulou | |
| Evrydiki Kolokoudia | |

Date: 02/11/2020

