Doc. 300.3.1

Date: 01-NOV-2024

External Evaluation Report (Departmental)

- **Higher Education Institution:**

  European University of Cyprus
- **Town:** Nicosia
- **School/Faculty:** School of Medicine
- **Department:** Medicine
- **Department's Status:** Running

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

Programme 1
In Greek:
Programme Name
In English:
Doctor of Medicine (6 years, 360 ECTS)

Programme 2
In Greek:
Programme Name
In English:
PhD Medical Sciences

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
School of Medicine	Doctor of Medicine (MD)
	PhD in Medical Sciences

A. Introduction

This part includes basic information regarding the onsite visit.

The European University Cyprus (EUC) is a private nonprofit university in Nicosia, Cyprus. It has 7 schools and 13 departments and is part of several international collaborations and networks (e.g. sunrise alliance, microsoft startup centre). It achieves respectable positions in international ranking (e.g. Times Higher Education), and has, notably, recently renewed its five-star ranking in the QS top universities. It should be congratulated on recently achieving a place in the THE's top 101 for University Impact. For the MD training, the school of medicine has opened a branch in Frankfurt (Germany) in 2022 which is considered a separate department, and will not be commented upon in this report.

This current visit was to evaluate EUC on an institutional and departmental level, as well as the 6-year MD and the PhD programme. About 80% of the medical school's students come from Cyprus or Greece; the rest are international students from all over the world. There is a great emphasis on student wellbeing reflected in several areas such as academic tutoring, mental health support and career advice.

The onsite visit took place on 29/10/2024 and 30/10/2024. The first day was held at EUC campus and included meetings with the institutional bodies (Vice Rector of academic affairs, Dean, Chair, coordinators, internal evaluation committee), members of the teaching staff and students. There was a separate meeting dealing with the PhD program (started 2021). This was followed by a tour of the premises including wet lab and skills training facilities as well as the incubator. The second day started with meeting external stakeholders and was followed by site visits in Limassol hospitals (Mediterranean Hospital, German Oncology Hospital).

The committee was provided with material before the visit (self-report, application form) in a timely manner. It was supported by further printed and electronic material at the onsite visit (budget information, logbooks, exams, MD thesis, etc.).

This report draws upon information from the material provided as well as from the onsite visits.

External Evaluation Committee (EEC)

Name	Position	University
Mr Michaelis Andreou	Medical Student	University of Cyprus
Professor Anne Herrmann-Werner	Professor of Medical Education	University of Tübingen, Germany
Professor J.-Matthias Löhr	Professor of Gastroenterology	Karolinska Institutet, Sweden
Professor Nicki Cohen	Dean of Medical Education	King's College London

B. Guidelines on content and structure of the report

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

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

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

Findings

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

Strengths

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

Areas of improvement and recommendations

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

- *The EEC should state the compliance for each sub-area (Non-compliant, Partially compliant, Compliant),* ***which must be in agreement with everything stated in the report.***
- ***The report may also address other issues which the EEC finds relevant.***

1. Department's academic profile and orientation

(ESG 1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9)

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.	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.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

The Medical School provided a program and SWOT analysis including a contingency plan.

There is a clear mission statement and strategic outlook which is communicated broadly with all stakeholders. Although they have already included most of the relevant stakeholders intensively, it would be recommended to include patients' views in future developments.

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).

We believe these are all coherent and compatible

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.	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.

We accept that the programme is already taking steps to be in close contact with needs and demands of the public, but feel there is still some room for improvement in terms of outreach and inclusion policies. This could also be an opportunity to further strengthen public health issues as part of the departmental profile.

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.	5
1.3.4	The funding processes for the operation of the Department and the continuous improvement of the quality of its programmes of study are adequate and transparent.	5

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

There is a transparent plan for recruitment and tenure track/promotion in place.

Additionally, write:

- Expected number of Cypriot and international students

Given the figures provided, we anticipate, as in previous years, there will be approximately 30-35 Cypriot students and 75-80 Greek students. Looking at past figures, Greek and Cypriot students together appear make up the majority of the student cohort.

Based on the information given to us (provided in percentages and regions), the distribution is as follows:

Country/Region	**2021-2022**	**2022-2023**	**2023-2024**
Cyprus	18%	21%	22%
Greece	49%	50%	52%
Europe	23%	20%	18%
America	2%	2%	2%
Middle East	7%	6%	6%
Africa	1%	1%	1%

Findings

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

Papers were provided describing the recruitment strategy. The process and criteria for promotion were explained. These are transparent, appropriate and understandable. EUC engages regularly in activities with the (Cypriotic) public as an orderly outreach to society, e.g. with information (Covid) or free short lectures etc.

Strengths

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

The rapid expansion of the work of the department in recent years has been effective, while the "family feel" of the department remains.

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

To align with the strategic plans of the department, we would suggest careful external recruitment of further full professors in key areas to strengthen the research capacity of the department and international reach.

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

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

2. Quality Assurance
(ESG 1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 1.8)

Sub-areas

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

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

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

Quality indicators/criteria		
2. Quality Assurance		
2.1 System and quality assurance strategy		**1 - 5**
2.1.1	The Department has a policy for quality assurance that is made public and forms part of the Institution's strategic management.	5
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	5

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	5
	2.1.4.2	Research	5
	2.1.4.3	The connection with society	4
	2.1.4.4	Management and support services	5
2.1.5	The quality assurance system promotes a culture of quality.		5
2.1.6	Students' evaluation and feedback		5

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

The department would benefit from a clear document delineating whom is considers "society", and outlining its strategic activities to engage accordingly.

2. Quality Assurance		
2.2 Quality assurance for the programmes of study		**1 - 5**
2.2.1	The responsibility for decision-making and monitoring the implementation of the programmes of study offered by the Department lies with the teaching staff.	5
2.2.2	The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Department are clear, sufficient and known to the students.	5
2.2.3	The quality control system refers to specific indicators and is effective, which have been presented and discussed.	5
2.2.4	The results from student assessments are used to improve the programmes of study.	5
2.2.5	The policy dealing with plagiarism committed by students as well as mechanisms for identifying and preventing it are effective.	5
2.2.6	The established procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective.	5

2.2.7	The Department publishes information related to the programmes of study, credit units, learning outcomes, methodology, student admission criteria, completion of studies, facilities, number of teaching staff and the expertise of teaching staff.		5
2.2.8	Names and position of the teaching staff of each programme are published and easily accessible.		5
2.2.9	The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered.		5
2.2.10	The Department flexibly uses a variety of teaching methods.		5
2.2.11	The Department systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place.		5
2.2.12	The Department analyses and publishes graduate employment information.		4
2.2.13	The Department ensures adequate and appropriate learning resources in line with European and international standards and/or international practices, particularly:		
	2.2.12.1	Building facilities	5
	2.2.12.2	Library	5
	2.2.12.3	Rooms for theoretical, practical and laboratory lessons	5
	2.2.12.4	Technological infrastructure	5
	2.2.12.5	Academic support	5
2.2.14	There is a student welfare service that supports students in regard to academic, personal problems and difficulties.		5
2.2.15	The Department's mechanisms, processes and infrastructure consider the needs of a diverse student population such as mature, part-time, employed and international students as well as students with disabilities.		5
2.2.16	Mentoring of each student is provided and the number of students per each permanent teaching member is adequate.		5
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.		5
2.2.18	The number of doctoral students, under the supervision of a member of the teaching staff, enables continuous and effective feedback to the students and it complies with the European and international standards.		5

2.2.19	The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates.	5
2.2.20	There is a clear policy on authorship and intellectual property.	5

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

In this area, the committee was fully satisfied. We recognise that capacity to provide information on graduate employment is limited at this stage in the lifecycle of the programme.

Findings

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

The effective running of the department and quality assurance of programmes was readily transparent and of high quality.

Strengths

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

Student support also includes grievance counselling. Compulsory meetings are in place if GPA drops. The logbook was transferred from paper to electronic. Also, the open-door policy is highly commendable.

Areas of improvement and recommendations

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

We could not identify any areas for Departmental improvement at present.

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

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

3. Administration

(ESG 1.1, 1.3, 1.6)

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

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

Quality indicators/criteria		
3. Administration		**1 - 5**
3.1	The administrative structure is in line with the legislation and the Department's mission.	5
3.2	The members of the teaching and administrative staff and the students participate, at a satisfactory degree and on the basis of specified procedures, in the management of the Department.	5
3.3	The administrative staff adequately supports the operation of the Department.	5
3.4	Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Department's council competently exercises legal control over such decisions.	5
3.5	The Department applies effective procedures to ensure transparency in the decision-making process.	5
3.6	Statutory sessions of the Department are held and minutes are kept.	5
3.7	The Department's council operates systematically and autonomously and exercise the full powers provided for by the law and / or the constitution of the Department without the intervention or involvement of a body or person outside the law provisions.	5
3.8	The manner in which the Department's council operates and the procedures for disseminating and implementing their decisions are clearly formulated and implemented precisely and effectively.	5
3.9	The Department applies procedures for the prevention and disciplinary control of academic misconduct of students, teaching and administrative staff, including plagiarism.	5
3.10	The Department has appropriate procedures for dealing with students' complaints.	5
3.11	Internationalization of the Department and external collaborations.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

In this area, the committee was fully satisfied.

Findings

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

The administrative team was passionate, committed and rightly extremely proud of their institution, and the EEC congratulates the department on providing culture and structures for this development.

Strengths

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

We anticipate that the historic knowledge carried by the administrative team has been a major part of the success of the new department growing and succeeding so rapidly.

Areas of improvement and recommendations

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

We could not identify any areas for improvement at present.

Please select what is appropriate for the following assessment area:

Assessment area	*Non-compliant / Partially Compliant / Compliant*
3. Administration	compliant

4. Learning and Teaching

(ESG 1.2, 1.3, 1.4, 1.9)

Sub-areas

4.1 Planning the programmes of study
4.2 Organisation of teaching

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

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

Quality indicators/criteria		
4. Learning and Teaching		
4.1 Planning the programmes of study		**1 - 5**
4.1.1	The Department provides an effective system for designing, approving, monitoring and periodically reviewing the programmes of study.	5
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	5
4.1.3	Intended learning outcomes, the content of the programmes of study, the assignments and the final exams correspond to the appropriate level as indicated by the European Qualifications Framework (EQF).	5
4.1.4	The programmes of study are in compliance with the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable.	5
4.1.5	The Department ensures that its programmes of study integrate effectively theory and practice.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. In this area, the committee was fully satisfied.		
4. Learning and Teaching		
4.2 Organisation of teaching		**1 - 5**
4.2.1	The Department establishes student admission criteria for each programme, which are adhered to consistently.	5
4.2.2	Recognition of prior studies and credit transfer is regulated by procedures and regulations that are in line with European standards and/or international practices.	5
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	5
4.2.4	The teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship.	5
4.2.5	Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process.	5

4.2.6	The teaching staff of the Department provides timely and effective feedback to their students.	5
4.2.7	The criteria and the method of assessment as well as the criteria for marking are published in advance.	5
4.2.8	The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved.	4

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

In this area, the committee was fully satisfied with all aspects except for 4.2.8, relating to the quality assurance processes surrounding the OSCE, as noted in the programme-specific documentation.

Findings

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

The system for assessments was demonstrated and explained in great detail.

Strengths

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

We have heard how the Department's open-door policy is recognised by all as a position of strength. It was highlighted by both staff and students alike as a key feature of the department.

Areas of improvement and recommendations

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

As discussed in verbal feedback, we feel that the reliability of the OSCE, as a high-stakes clinical assessment should be evaluated to ensure that it stands up to defensible international practice.

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

Sub-area	***Non-compliant / Partially Compliant / Compliant***
4.1 Planning the programmes of study	compliant
4.2 Organisation of teaching	compliant

5. Teaching Staff *(ESG 1.5)*

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

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

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

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

In this area, the committee was fully satisfied.

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

The information provided to us shows:

38 Full-time Faculty,
49 Clinical Faculty,
44 Visiting Faculty (in academic year 2022/3), all at Full / Associate / Assistant Professorial level.

No special teaching staff or special academic personnel are listed for the last three years.

Findings

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

The entire faculty - full-time, clinicians with additional teaching obligations and visiting faculty - was demonstrated in depth including their qualifications and career trajectories.

Strengths

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

Full-time faculty were well-qualified, enthusiastic and committed. We also commend the enthusiasm of clinical educators at hospital sites who recognise the need of all doctors to contribute to the future worldwide workforce.

Areas of improvement and recommendations

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

We recognise that clinical teachers are highly motivated, however, relying on altruism for the long-term sustainability of the programme, alongside elements such as the convocation ceremony, etc, may be insufficient incentives for long-term security.

There is benefit to be gained from educating clinical students from different universities in the same department, for shared best practice, but the impact this may have on clinical educator demand must be balanced.

Clinical teachers (particularly those early in the careers) should be encouraged and enabled to pursue a further academic career with EUC.

We would consider Pathology to represent an area with huge potential for research output. We recognise the current vacancy in this specialty and would support timely recruitment to this important post, recognising the enthusiasm for biomedical research.

Please √ what is appropriate for the following assessmentcon area:

Assessment area	***Non-compliant / Partially Compliant / Compliant***
Teaching staff number, adequacy and suitability	compliant
Teaching staff recruitment and development	compliant

Synergies of teaching and research	compliant

6. Research

(ESG 1.1, 1.3, 1.5, 1.6)

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

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

Quality indicators/criteria		
6. Research		**1 - 5**
6.1	The Department has a research policy formulated in line with its mission.	5
6.2	The Department consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes.	5
6.3	The Department provides adequate facilities and equipment to cover the staff and students' research activities.	5
6.4	The Department has the appropriate mechanisms for the development of students' research skills.	4
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.	5
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.	5
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.	4

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

While there seem to be sufficient measurements in place to secure the development of appropriate research skills in the PhD programme, we still see opportunities for growth considering these skills in MD students.

Findings

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

Both the research opportunities for MD students and PhD students (see separate evaluation) were presented.

Strengths

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

There is a clear policy to foster research.

Areas of improvement and recommendations

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

We see opportunities for improvement in the development of research skills in MD students during the three-year preclinical programme - which would benefit MD students and supervisors alike. Also, students might profit from a more structured leadership training throughout the entire program. Considering the international reach of EUS, joining and engaging in the Medical branch of AIESEC could represent a valuable option.

Please √ what is appropriate for the following assessment area:

Assessment area	***Non-compliant / Partially Compliant / Compliant***
Research mechanisms and regulations	***compliant***
External and internal funding	***compliant***
Motives for research	***compliant***
Publications	***compliant***

7. Resources *(ESG 1.6)*

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

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

Quality indicators/criteria		
7. Resources		**1 - 5**
7.1	The Department has sufficient financial resources to support its functions, managed by the Institutional and Departmental bodies.	5
7.2	The Department follows sound and efficient management of the available financial resources in order to develop academically and research wise.	5
7.3	The Department's profits and donations are used for its development and for the benefit of the university community.	5
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	5
7.5	The Department carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.	5
7.6	The Department's external audit and the transparent management of its finances are ensured.	5
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies. In this area, the committee was fully satisfied.		

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

Exemplified annual budgets were presented.

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

The provision of a balanced budget suggests that the Medical School is financially sustainable.

Areas of improvement and recommendations

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

With its growth, the Medical School may consider opening an office for philanthropy; soliciting donations, endowments, and foundations, eventually approaching successful alumni..

Please √ what is appropriate for the following assessment area:

Assessment area	***Non-compliant / Partially Compliant / Compliant***
7. Resources	compliant

C. 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.

The European University Cyprus is a relatively young university that is most certainly on an upward trajectory. The EEC was impressed by the convincing motivation of faculty and students involved as well as the excellent facilities at hand. There seemed to be distinctive structures in place to secure smoothly operated processes with maximum quality assurance.

The Medical School of EUC has developed and delivers a modern MD curriculum with a successful start 2013. A PhD program with three branches was started in 2021. It is currently going through an episode of rapid growth that, for the time being, is managed very well. Everybody, including faculty, students, administration and clinical teachers in the associated hospitals seemed to be passionate about their workplace. The three principal groups involved (see above) repeatedly mentioned considering themselves as family. EUC has embraced state-of-the art teaching and outcome measures, aligned with European and US standards.

Students are well taken care of through selection, enrollment and the programme itself. However, the PhD students would profit from a mentor not involved in their PhD studies. Since the PhD program is in its inception with the first students graduating at the end of this academic year (spring 2025), it is too early to assess the program. Thus, a re-evaluation in about five years time is suggested.

For medical students, the learning environment, especially the skills lab, is state-of-the-art with plentiful mannequins and low and high-fidelity simulation. Teaching goals are transparent. The first three years provide a comprehensive preclinical curriculum. Nevertheless, the EEC feels that the education could profit from authentic face-to face contact with real patients during these three years - despite the excellent skills lab/mannequins, even if this were to be short. There is work to be done in clinical assessments to enable the programme to assure itself that the high-stakes OSCE is sufficiently robust to produce reliable results, and this has been discussed in the document and in our face-to-face feedback (see separate MD program evaluation).

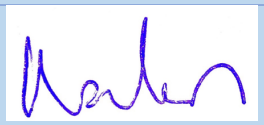
The EUC has identified research as a strategic area for future development and one of its unique selling points (a view shared by external stakeholders). The EEC welcomes this idea and would like to make some suggestions: For those interested in research, the EUC could provide the option to engage early on in research, eg. during the first three years. One possibility would be a facultative summer school, which would also benefit advanced MD students with an embedded research experience to fuel their MD thesis. Ideally, some of these students may wish to continue with EUC on a PhD after graduation. Such a scenario would substantiate the research profile and research output that in turn will enable more staff to obtain extramural research funding.

On a different note, an office soliciting donations, foundations or endowments would diversify income and raise resources for the further growth of EUC as a whole, especially in research.

The EEC could see the need for some of the expert hospital partners to become formal teaching hospitals or university hospitals, for recognition, reputational and stability bnefits. This process can only be successfully accomplished with the support of government.

We would like to thank the EUC for their hospitality and the willingness to openly share and discuss all relevant issues. We strongly believe that the department and its academic and administrative staff are doing a great job of securing optimal conditions for the faculty and its students to thrive.

D. Signatures of the EEC

Name	*Signature*
Mr Michaelis Andreou	
Professor Anne Herrmann-Werner	
Professor J.-Matthias Löhr	
Professor Nicki Cohen	

Date: 1st November 2024

5 Lemesou Avenue, 2112, Nicosia
T: + 357 22 504 340
F: + 357 22 504 392
e -mail: info@dipae.ac.cy