



Doc. 300.2.1

**Date:** 01-NOV-2024

# External Evaluation Report (Institutional)

- **Higher Education Institution:**  
European University of Cyprus
- **Town:** Nicosia
- **Institution Status:** University

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

## A. Introduction

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

The European University Cyprus (EUC) 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 assessment 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.

## B. External Evaluation Committee (EEC)

Name	Position	University
Marilena Georgiadou	Infrastructure specialist	
Mr Michaelis Andreou	Medical Student	University of Cyprus
Katerina Evangelou	Student Welfare expert	University of Cyprus
Professor Anne Herrmann-Werner	Professor of Medical Education	University of Tübingen, Germany
Professor J.-Matthias Löhner	Professor of Gastroenterology	Karolinska Institutet, Sweden
Professor Nicki Cohen	Dean of Medical Education	King's College London

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

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

## 1. Building facilities

### 1.1 Plans and licenses

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

1. Building facilities			
1.1 Plans and licenses			Yes / No
1.1.1	The following should be copies from the original building permit. On the copies, there should be a visible official stamp of approval from the respective authorities.		
	1.1.1.1	A topographical plan, which displays in a clear manner the extent of the development.	Yes
	1.1.1.2	A general site plan, which marks the building facilities, allocated parking spaces (for students, academic and teaching personnel, visitors and disabled individuals), sports premises and outdoor areas.	Yes

1.1.2	An operating license issued by the Local Authorities		Yes
1.1.3	The following operating license certificates, duly completed:		
	1.1.3.1	Visual Inspection Form E.O.E. 102	Yes
	1.1.3.2	Visual Inspection for the Building's Seismic Sufficiency Form E.O.E.Σ.E.K 103	Yes
	1.1.3.3	Inspection Certificate Form 104	Yes
	1.1.3.4	Fire Safety Certificate, issued by the Fire Department	yes
	1.1.3.5	Certificate for Adequate Electrical and Mechanical Installations, issued by the Electromechanical Department	yes

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

The school's representatives have submitted the required documentation to the satisfaction of the evaluators.

More specifically:

1.1.2. An operating license issued by the Local Authorities

- Payments in Local Authorities of all operating licenses of 2024 were submitted.

1.1.3. The following operating license certificates, duly completed:

- Visual Inspection Form E.O.E 102 was submitted for the north building Block A of the facilities except for the newly constructed building Block B that was completed in 2024.
- Visual Inspection for the Building's Seismic Sufficiency Form E.O.E.Σ.E.K 103 was submitted for the north building Block A of the facilities except for the newly constructed building Block B that was completed in 2024.
- Inspection Certificate Form 104 was submitted for the north building Block A of the facilities except for the newly constructed building Block B that was completed in 2024.

The building was designed by reputable architects/engineers and constructed by a reputable construction company and therefore due to this specific situation the civil engineer evaluator could accept not receiving the Visual Inspection Form as long as CYQAA agrees. The Visual Inspection Form could be submitted at a later stage.

- Fire Safety Certificate, issued by the Fire Department was submitted and is valid until 2027
- Certificate for the electrical installations was duly submitted.

- A valid certificate for the lift has been submitted only for the existing building. We have asked the valid certificate for the new building.
- Certificate for the gas equipment and gas storage tanks has been submitted and is valid until 2028.
- Άδεια περιορισμένης χρήσης γενετικά τροποποιημένων μικροοργανισμών (Limited use permit for genetically modified microorganisms category 1 and 2) κατηγορίας 1 και 2 was submitted and is valid until 2027.

The civil engineer evaluator has also inspected the following buildings:

1. New building Block B 2<sup>nd</sup> floor will host the following functions:
  - a. Biochemistry labs
  - b. Cell biology lab
  - c. Multidisciplinary research lab
  - d. Classrooms/Student's study rooms
  - e. Lockers rooms
2. New building Block B 3<sup>rd</sup> floor will host the following functions:
  - a. Clinical skills rooms
  - b. Pathology room
  - c. Histology/Pathology Lab
  - d. PC Labs
  - e. Moulage
  - f. Lockers rooms
  - g. Conference room
  - h. Simulation rooms with small control room and amphitheatres (20 students)
  - i. Outpatient rooms with tutor control room
3. Old building Block A 3<sup>rd</sup> floor will host the following functions:
  - a. Anatomy Lab
  - b. PC Labs
  - c. Conference room
  - d. Simulation rooms with small control room and amphitheatres (20 students)
  - e. Classrooms/Student's study rooms
  - f. Teaching staff offices

Also, the operations of the School of Medicine currently use the following University's facilities:

4. Phileleftheros building (Block B) 2<sup>nd</sup> floor

- a. Scientific collaborators offices (part time faculty).
- 5. Block 1 – West Block (old building)
  - a. Cafeteria
- 6. Block 2 – North Building
  - a. Ground floor – pc labs and lecture rooms
  - b. 1<sup>st</sup> floor – lecture rooms and amphitheatres
  - c. 2<sup>nd</sup> floor – library and study room
- 7. East Block
  - a. Ground floor – Copy centre
  - b. 1<sup>st</sup> and 2<sup>nd</sup> floor – Classrooms and lecture halls.
- 8. Sports centre
  - a. Indoor sports centre
- 9. Student parking areas
  - a. Existing building basement
  - b. New building (extension) basement
  - c. Parking spaces around old building

The following issues are to be noted:

- 1.1. We could not obtain the lift certificate for the new lift due to the fact that the mirror has a minor problem and the school's representative will send it to us in a few days when it is issued from the Certification agency. However, those lifts were passed by AHK electrical installation inspection.
- 1.2. The provided drawings of the new building do not bear a stamp by the Local Authorities. We have obtained the Building Permit for the new six floor building. However, no Final Approval Certificate has been issued yet as the construction has recently been completed. It should be expected to be issued within the coming months.

## 1.2 Other Facilities

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

1. Building Facilities	
1.2 Other Facilities	Satisfactory - Poor - Unsatisfactory

1.2.1	Number of teaching rooms and their respective areas, capacity and the percentage of daily occupancy for all units	satisfactory
1.2.2	Number of offices for teaching staff and their respective areas and capacity	satisfactory
1.2.3	Number of laboratories and their respective areas and capacity	satisfactory
1.2.4	Number of rooms/offices for directors/administrators and their respective areas and capacity	satisfactory
1.2.5	Number of rooms/offices for administrative services and their respective areas and capacity	satisfactory
1.2.6	Number of parking spaces designated for students	satisfactory
1.2.7	Number of parking spaces designated for teaching staff	satisfactory
1.2.8	Number of parking spaces designated for people with disabilities	satisfactory

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

Two of the classrooms on the second floor of the new building are empty without any furniture. These two classrooms based on the drawings have total capacity of 86 seats.

The parking areas have clear signage with illuminated signs, sprinklers and ventilation fans. Also, the University provides parking spaces for electrical vehicles.

Worth noting that all the designated areas for people with disabilities are kept empty and available for use by the people in need.

#### Conclusion

It is noted that the Civil Engineer Evaluator is satisfied with the documentation submitted and with the evidence presented by the school's representatives.

## 2. Student Welfare Services

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

2. Student Welfare Services		Satisfactory - Poor - Unsatisfactory
2.1	Special access for students with disabilities (PWD)	satisfactory

2.2	Recreation areas	satisfactory
2.3	Policy and statutes for academic student support	satisfactory
2.4	Policy and statutes for financial student support	poor
2.5	Counselling services	satisfactory
2.6	Career office	satisfactory
2.7	Service linking the institution with business	satisfactory
2.8	Mobility office	satisfactory
2.9	Student clubs/organisations/associations	satisfactory
2.10	Other services	satisfactory

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

Students and graduates are very satisfied with the welfare services and spoke highly of the professional administrative staff that is accessible and supportive. Students and graduates are very satisfied with the welfare services and spoke highly of the professional administrative staff that is accessible and supportive.

The student welfare staff appears to be adequate for the number of students enrolled in the Medical School. Although the majority of the administration staff of the student welfare service supports centrally all the students of the European University of Cyprus (EUC), Medical School has its own professional administrative staff that is keen to support the School.

#### 1. Special access for students with disabilities:

The admission process is accessible to those with a disability and transition into the Medical School is supported through a specifically designed procedure for admission.

The procedures are thoroughly communicated to students from the beginning of their studies, ensuring equal access to academic studies. In addition, if professional services are required, such as psychological services, the student will be advised to arrange a confidential meeting with a qualified professional. A counsellor is available on campus for consultation by appointment throughout the academic year.

#### 2. Recreation areas:

Medical School has high quality estate and facilities. The recreation areas of EUC include indoor athletic centre, health centre multi-venue, indoor pool and a gym. Students can use these facilities for free, using their student identity card.



The EUC operates a high-quality restaurant and cafeterias on campus serving the University Community. In the Medical School building there is also a Cultural Center that consists of an indoor amphitheatre and a modern exhibition hall.

### **3. Policy and statutes for academic student support:**

There is a strong network of academic counselling providing guidance and support to the students. Each student is assigned an Academic Advisor for support, but if needed can also contact Student Advisor from the Student Welfare Services, Course Advisor, Clinical Advisor or Year Advisor. Student performance and academic progress is closely monitored by the Academic Advisors.

Regular office hours (six hours per week) are available for students and they may contact their instructor on a one-to-one or group face-to-face or online briefing.

From our interviews with students everyone appeared to be satisfied by the positive learning environment and the effective academic advisory system.

### **4. Policy and statutes for financial student support:**

Students of Medical School complaint that the EUC offers numerous scholarships to students from all other programmes except from medical students.

However, the administrative staff stated that if students have difficulties in paying off their tuitions, EUC will offer them more flexible payment methods.

### **5. Counselling services:**

The Center of Applied Psychology and Personal Development is offering psychological and counselling services to the members of EUC. The Center was established to promote Prevention, Assessment and Therapy and provide these services to the members of EUC (staff and students) free of charge.

Moreover, the Centre organises seminars and workshops for personal development and prevention of mental health problems. Every Monday there are workshops specifically for Medical Students.

### **6. Career office:**

The EUC Career Centre provides effective career guidance to students for self-development and job placement.

The Career Advisor consults interested students in matters such as employment sectors, CV preparation, Job Search Methods, interview preparation, decision-making matters, and information on labour market trends.

### **7. Service linking the institution with business**

The Medical School has numerous services and partnerships linking with employment market.

### **8. Mobility office:**

All students and full time staff can participate in all schemes of the Erasmus+ program.

However, Medical Students are advised to go abroad for a 3 week internship in summer time. The Erasmus Academic Coordinator advises students on suitable destinations and approves destination choices.

In addition, the Welfare Service in collaboration with the Erasmus Office, organizes various intercultural activities to foster a sense of belonging among inbound participants within the University community. The Erasmus Office monitors all mobility activities.

#### 9. Student clubs/organisations/associations:

The EUC offers a variety of clubs and student Associations, interuniversity teams, sports, and student government. There is also a club for Medical Students. Extra-curricular activities ranging from Legal Rhetoric Speech Competition, Seminars, various Informational Days, BBQs, Parties, Excursions and Festivals, complement an active campus life and offer ample opportunity for fun and memories. Moreover, the Welfare Service develops a Calendar of Activities on a yearly basis and is published online at the beginning of each academic year. There are also numerous International Student Associations and a Student Union.

#### 10. Other services:

##### Student Identity Card

The Student Identity Card is issued for all EUC students and offers several benefits.

##### Visa for international students

The Student Affairs Department guides the prospective international students in relation with all necessary documents that need to be filled out and the procedures to be followed through the government authorities.

##### Medical Student Induction/Orientation Program

All new Medical students will be introduced to the Medical School curriculum, policy and activities during the Medical Student Orientation Program which will take place the week before classes start.

##### Housing Office

The EUC Housing Office works very closely with independent contractors to satisfy different student needs. Multiple housing options are available in very close proximity to the University and offer elegant apartments and studio flats.

All of the 1055 housing dormitories are situated within 500 meters from campus. Students enjoy a variety of monthly cost options ranging from €500 – €800. All housing units offer furniture, utilities, Internet, gym rooms, common areas and coffee shops.

### 3. Infrastructure

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

3. Infrastructure		Satisfactory - Poor - Unsatisfactory
3.1	Library	satisfactory
3.2	Computers available for use by the students	satisfactory
3.3	Technological support	satisfactory
3.4	Technical support	satisfactory
<p>Justify the answers provided for the infrastructure services by specifying (if any) the deficiencies.</p> <p>No concerns about infrastructure.</p>		

#### D. Guidelines on content and structure of the report

- The external evaluation report follows the structure of assessment areas and sub-areas.*
- For 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, 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 Institution based on evidence from the Institution'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. Institution's Academic Profile and Orientation

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

### Sub-areas

**1.1 Mission and strategic planning**

**1.2 Connecting with society**

**1.3 Development processes**

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

1 or 2: Non-compliant

3: Partially compliant

4 or 5: Compliant

Quality indicators/criteria		
1. Institution's academic profile and orientation		
1.1 Mission and strategic planning		1 - 5
1.1.1	The Institution has formally adopted a mission statement, which is available to the public and easily accessible.	5
1.1.2	The Institution has developed its strategic planning aiming at fulfilling its mission.	5
1.1.3	The Institution's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted.	5
1.1.4	The offered programmes of study align with the aims and objectives of the Institution's development.	5
1.1.5	The academic community is involved in shaping and monitoring the implementation of the Institution's development strategies.	5

1.1.6	In the Institution's development strategy, interested parties such as academics, students, graduates and other professional and scientific associations participate in the Institution's development strategy.	5
1.1.7	The mechanism for collecting and analysing data and indicators needed to effectively design the Institution's academic development is adequate and effective.	5

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

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

## 1.2 Connecting with society

1 - 5

1.2.1	The Institution has effective mechanisms to assess the needs and demands of society and takes them into account in its various activities.	4
1.2.2	The Institution provides sufficient information to the public about its activities and offered programmes of study.	4
1.2.3	The Institution ensures that its operation and activities have a positive impact on society.	5
1.2.4	The Institution has an effective communication mechanism with its graduates.	5

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

While internal communications with active and prospective students are good, we are yet to see full evidence of how effective EUC are in dissemination with patients and public, and how the demands of society are assessed more broadly. This may be challenging given the international outlook of the institution.

## 1.3 Development processes

1 - 5

1.3.1	Effective procedures and measures are in place to attract and select teaching staff to ensure that they possess the formal and substantive skills to teach research and effectively carry out their work.	5
1.3.2	The Institution has a two-year growth budget that is consistent with its strategic planning.	3

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

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

We have heard that student MD fees provide sufficient income for growth of the faculty and that PhDs are funded. A review of the institutional balance information supports this. We would anticipate that additional finances would be required for the growth and acceleration in scientific impact that the institution has aims and plans for. National support and research grant income would be valuable in establishing a number of biomedical projects that would further signal the pre-eminence of the European University of Cyprus on the national and international stage.

Additionally, write:

- Expected number of Cypriot and international students

Given the known past figures, we anticipate that as in previous years, Cypriot students will number around 30 to 35, and those with Greek nationality around 75-80. Looking at past figures, we understand that students from other nationalities comprise 20-30%

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

Based on the information given to us (which was only in percentages and regions rather than numbers and countries), the distribution looks 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%

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

We have heard great detail about the institution, school, and PhD and MD programmes. The institution is growing rapidly and strategically, and evolving from an education-focussed institution into one that is also developing research impact. As the institution navigates these challenges it is also improving at the school and departmental level, which students readily acknowledge.

### Strengths

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

EUC embraces the attitude “to understand, but not necessarily agree” which is a marker of the value placed on diversity and inclusion.

Despite having a lot of committees, it is felt that these feed into the strategic development and operations of EUC. There is a sense of strong collegiality and shared contributions. Despite the fast growth, both staff and students still feel to be part of a family. This is mirrored by the fact that many of the administrative staff have served the EUC for decades.

### Areas of improvement and recommendations

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

EUC would benefit greatly from identification of teaching hospitals or university hospitals with which to place its students (or development of such hospitals). The significance of this move places it as an area of improvement for the institution as a whole.

The ability to offer transparent career paths for potential clinical teachers has some strengths but could benefit from a more explicit and formalised pathway.

**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 Ensuring quality for the programmes of study**

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

1 or 2: Non-compliant

3: Partially compliant

4 or 5: Compliant

Quality Indicators/Criteria		
<b>2. Quality Assurance</b>		
<b>2.1 System and Quality Assurance Strategy</b>		<b>1 - 5</b>
2.1.1	The Institution has a policy for quality assurance that is made public and forms part of its strategic management.	5
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	4
2.1.3	The Institution'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 Institution's activities:	
2.1.4.1	The 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	The Institution consistently applies pre-defined and published regulations covering all phases of student 'life cycle', e.g. student admission, progression, recognition and certification.	5



2.1.7	Institutional practice for recognition being in line with the principles of the Lisbon Recognition Convention, cooperation with other institutions and quality assurance agencies and the national ENIC/NARIC centre.	5
2.1.8	Graduates receive documentation explaining the qualification gained.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the		
We have heard that there is currently little external stakeholder input into the QA mechanism, and would suggest that this could be more thoroughly addressed.		
<b>2. Quality assurance</b>		
<b>2.2 Ensuring quality for the programmes of study</b>		<b>1 - 5</b>
2.2.1	The responsibility for decision-making and monitoring the implementation of the programmes of study offered by the Institution 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 Institution are clear, sufficient and known to the students.	3
2.2.3	The quality control system refers to specific indicators and is effective.	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 institutionalised procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective.	5
2.2.7	The Institution provides information about its activities, including the programmes of study it offers and the selection criteria for them, the intended learning outcomes of these programmes, the qualifications awarded, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to the students as well as graduate employment information.	5
2.2.8	The Institution ensures that effective methodology is applied in the learning process.	5
2.2.9	The Institution systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place.	5
2.2.10	The Institution ensures adequate and appropriate learning resources in line with European and international standards and / or international practices, particularly:	

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

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

Regarding MD assessment: the semester-based OSCE system would seem to generate insufficient examination contact time per student, certainly <1 hour, and therefore we anticipate that its reliability / reproducibility is unlikely to be sufficiently robust for high-stakes decisions. We would suggest that this was addressed, in the context of other tools for clinical assessment urgently, learning lessons from the international medical assessment community. We will highlight this issue in the MD report.

### Findings

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

We have heard of robust and thorough quality assurance mechanisms in place within the Institution, related to the work of the department.

### Strengths

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

Adequate internationally accepted instruments are applied.

### Areas of improvement and recommendations

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

Ensure the reliability of the OSCE is sufficient for High-Stakes assessment, please see the MD report for further details.

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

Sub-Area	Non-compliant/ Partially Compliant/Compliant
----------	---

2.1 System and quality assurance strategy	compliant
2.2 Ensuring quality for the programmes of study	partially compliant

### 3. Administration (ESG 1.1)

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

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

Quality indicators/criteria		
3. Administration		1 - 5
3.1	The administrative structure is in line with the legislation in force and the Institution's declared 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 based on specified procedures, in the management of the Institution.	4
3.3	Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Institution's Council competently exercises legal control over such decisions.	5
3.4	The Institution applies effective procedures to ensure transparency in the decision-making process.	5
3.5	The Boards of Departments and Schools, as well as the institutionalised committees of the Institution, operate systematically and exercise fully the responsibilities provided by legislation and / or the constitution and / or the internal regulations of the Institution.	5
3.6	The Council, the Senate as well as the administrative and academic committees, operate systematically and autonomously and exercise the full powers provided for by the statute and / or the constitution of the Institution without the intervention or involvement of a body or person outside the law provisions.	5
3.6	The manner in which the Council, the Senate and/or and the administrative and academic committees operate and the procedures for disseminating and implementing their decisions are clearly formulated and implemented precisely and effectively.	4

3.7	The Institution applies procedures for the prevention and disciplinary control of academic misconduct of students, academic and administrative staff, including plagiarism.	5
3.8	The administrative structure is in line with the legislation in force and the Institution's declared mission.	5
<p>Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.</p> <p>We saw no significant deficiencies.</p>		

### Findings

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

The administrative body for the institution appears long-standing, committed and professional. They are rightly proud of the achievements of their institution. There are clear descriptions of responsibilities and processes.

### Strengths

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

We have heard of the passion of administrative staff and their student-centred approach, with concern of student welfare paramount.

### Areas of improvement and recommendations

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

We have heard that administrators are involved in appointment panels for academics, but are reportedly not involved in appointment panels for other administrators. The institution may want to review whether this is the most transparent approach moving forward.

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

Assessment Area	<i>Non-compliant/ Partially Compliant/Compliant</i>
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		
<b>4. Learning and Teaching</b>		
<b>4.1 Planning the programmes of study</b>		<b>1 - 5</b>
4.1.1	The Institution provides an effective system for designing, approving, monitoring and periodically reviewing programmes of study.	5
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	4
4.1.3	The programmes of study are in compliance with the ESG and the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable.	5
4.1.4	The Institution ensures that its programmes of study integrate effectively theory and practice.	5
4.1.5	The assessment and evaluation procedures and content are in compliance with the level of the programme of study (in reference to EQF).	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
EUC appears to be compliant with pertinent European regulations.		
<b>4.2 Organisation of teaching</b>		<b>1 - 5</b>
4.2.1	The Institution 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 Institution have regular and effective communication with their students.	5
4.2.5	The teaching staff of the Institution provides timely and effective feedback to their students.	5

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

Teaching in small groups, student/academic supervisors and mandatory feed-back sessions, especially with those students in danger of failure (GPA drop).

### Findings

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

The system for admission and communication with the students was demonstrated in depth.

### Strengths

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

The use of small groups for tutorials and lab-based learning is to be commended. The open-door policy of faculty within the School of Medicine is tremendous. It was highlighted by students and may mean that the use of the supervisor meeting for GPA drop is less effective.

### Areas of improvement and recommendations

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

While learning and teaching is sound regarding the medical curriculum as such, the EEC suggests that the students might profit from a more structured leadership training throughout the entire program. This could tailor well into the already existing non-technical skills training of medical students. Considering the international reach of EUS, joining and engaging in the Medical branch of AIESEC could represent a valuable option.

**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		
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 Institution have the relevant formal and substantive qualifications for teaching the individual subjects as described in the relevant legislation.	5
5.3	The Visiting Professors' subject areas adequately support the Institution's programmes of study.	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	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	5
5.9	The visiting Professors' subject areas adequately support the Institution's programmes of study.	5

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

On an institutional level these parameters are satisfactory; however we had only in-depth insight into these issues on the MD programme level (please see there for further details).

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.*

We heard a presentation of the general guidelines for recruiting etc. and tenure track plans/progression of faculty.

### Strengths

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

The efforts undertaken to train and induct new clinical faculty into education, alongside their clinical activity (MD).

### Areas of improvement and recommendations

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



We heard how academic promotion is linked, in reality, to research output. This may be limiting for academic clinicians who are delivering quality education, largely motivated by enthusiasm, alongside clinical care. In the long term, this strategy may be limiting.

**Please select 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, 1.5, 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 Institution has a research policy formulated in line with its mission.	5
6.2	The Institution consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes.	5
6.3	The Institution provides adequate facilities and equipment to cover the staff and students' research activities.	5
6.4	Through its policy and practices, the Institution encourages research collaboration within and outside the Institution, as well as participation in collaborative research funding programmes.	5
6.5	The Institution uses a policy for the protection and exploitation of intellectual property, which is applied consistently.	5
6.6	The results of the teaching staff research activity are published to a satisfactory extent in international journals which work with critics, international conferences, conference proceedings, publications, etc. The	5

	Institution also uses an open access policy for publications, which is consistent with the corresponding national and European policy.	
6.7	The Institution ensures that research results are integrated into teaching and, to the extent applicable, promotes and implements a policy of transferring know-how to society and the production sector.	5
6.8	The Institution provides mechanisms which ensure compliance with international rules of research ethics, both in relation to research activity and the rights of researchers.	5
6.9	The external, non-governmental, funding of research activities of academic staff is similar to other Institutions in Cyprus and abroad.	5
6.10	The policy, indirect or direct of internal funding of the research activities of the academic staff is satisfactory, based on European and international practices.	4
6.11	The programmes of study implement the Institution's recorded research policy.	5

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

The institutional budget shared confirms the reliance on student fees and demonstrates the significant expense of the new building. There is not a significant profit remaining - the institute should consider how this is sufficient to support the desired research expansion described.

### Findings

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

The general strategy on how to foster research and encourage faculty to engage in (international) projects was demonstrated.

### Strengths

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

Research is encouraged and can lead to teaching hour reductions (THR). Research is an integral part of tenure track promotion.

### Areas of improvement and recommendations

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

Driving research alongside educational quality is a challenge for many institutions, especially as grant income grows and stabilises. We would advise that grant income is more explicitly described in future accreditation visits.

Rewarding research output by offering a reduction in teaching hours (THR) is a double-edged sword. It risks an implicit message that educational activity is less valuable than research and also reduces the opportunities to provide research-linked education. It also potentially may lead to discrepancies in areas of research strength where delivery of education may be sacrificed.

**Please select 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 institution has sufficient financial resources to support its functions, managed by the Council/Senate.	5
7.2	The Institution follows sound and efficient management of the available financial resources in order to develop academically and research wise.	4
7.3	The Institution's profits and donations are used for its development and for the benefit of the university community.	3
7.4	The Institution's budget is appropriate for its mission and adequate for the implementation of strategic planning.	4
7.5	The Institution carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.	5
7.6	The Institution's external audit and the transparent management of its finances are ensured.	4

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.

While we have been provided with the annual budget and expenditure for 2023/4 and 2024/5, we have not seen further institutional detail such as savings or other resources which may impact on capacity for research development.

### Findings

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

The financial information we have been provided with demonstrates balance in income and expenditure, despite large expenditures in recent years on the provision of modern innovative buildings that will enhance the experience of both students and staff and provides suitable facilities for research growth.

### Strengths

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

The investment in new buildings is impressive, and those that we have seen are modern and adaptable and place the institution in a good position for the future.

### Areas of improvement and recommendations

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

In an area of rapid growth, the institution may wish to ensure it has sustainable resources for growth across research and education. It has been difficult to evaluate this area so far.

We understand that a strategic decision was taken to admit MD students solely on the basis of merit, and to not cloud this with the offer of scholarships. While this is logical, it would be prudent to evaluate how resources may be made available for established students in financial difficulty. Students highlighted this sole area as one of discrepancy.

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

Assessment Area	<i>Non-Compliant/ Partially Compliant/Compliant</i>
7. Resources	Compliant

## Conclusions and Final Remarks

*Please provide constructive conclusions and final remarks which may form the basis upon which improvements of the quality of the Institution under review may be achieved.*

The 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 MD students, learning materials, especially the skills lab is state-of-the-art with all kinds of mannequins and low and high-fidelity simulation. Learning outcomes 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 suggests that a short period, perhaps as a summer school, to interlink the MD and PhD education would be broadly beneficial. Such research activities could lead to MD thesis (Y6) from an embedded research experience and may encourage students to continue with EUC on a PhD after graduation. Such a scenario would substantiate the research profile and research output of EUC as a whole that in turn will enable more staff to obtain extramural research funding.

A philanthropy office soliciting donations, foundations or endowments may, as EUC grows, diversify income and raise resources for the further growth of EUC as a whole, especially in research.


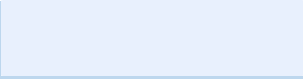
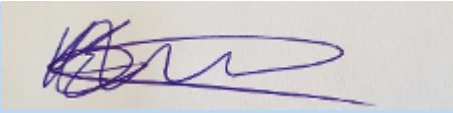

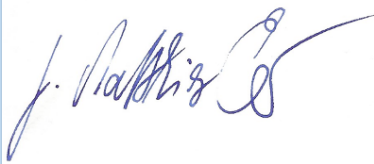
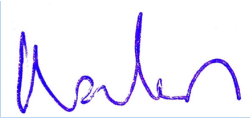
The EEC heard how there were senior-level discussions within the country to consider starting awarding Teaching Hospital or University Hospital status to some of the Island's private hospitals,



and feel that this is essential for the future standing of such hospitals and their ability to recruit and retain dedicated clinical teachers.

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 institution is doing a great job of securing optimal conditions for the medical faculty to thrive.

## D. Signatures of the EEC

Name	Signature
Marilena Georgiadou	
Mr Michaelis Andreou	
Katerina Evangelou	
Professor Anne Herrmann-Werner	
Professor J.-Matthias Löhr	
Professor Nicki Cohen	

Date: 1st November 2024

