



Doc. 300.2.1

Date: 9th June 2025

**External  
Evaluation  
Report (Institutional)**

- **Higher Education Institution:**  
University of Nicosia, Athens
- **Town:** Nicosia
- **Institution Status:** Active

**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 onsite visit for the institutional evaluation of the University of Nicosia Medical School (Nicosia Campus) took place on the 26th and 27th of May 2025. The External Evaluation Committee (EEC), appointed by the Cyprus Agency of Quality Assurance and Accreditation in Higher Education (CYQAA), conducted the evaluation based on the national legal framework [Law 136(I)/2015 – Law 132(I)/2021] and the World Federation for Medical Education (WFME) Global Standards.

The EEC comprised academics and experts in medical education, student affairs, infrastructure, and quality assurance. The committee was chaired by Professor Nicki Cohen (King’s College London) and included international academic representatives, a student member, and a CYQAA officer. The visit included structured meetings with university leadership (including the Rector and Executive Vice-President for Health), the Dean and Heads of Departments, programme coordinators, academic and administrative staff, and a representative group of students. External stakeholders and affiliated clinical partners also participated. The agenda featured presentations on the programme’s mission and strategic planning, curriculum design, learning and assessment methods, staff recruitment and development policies, quality assurance systems, student support services, and infrastructure.

The Medical School of the University of Nicosia (UNIC) was founded in 2011 and hence is the eldest of the three Medical Schools in Cyprus. The School has 97 core faculty of approximately 300 within the university. There are also approximately 700 contributing faculty and 86 support staff, facilitating six programmes running within the two departments of the school.

In 2022, the 6-year MD programme almost doubled in student number to approximately 220 per cohort, from 88 countries, and the school is rightly proud of its efforts to support and celebrate the achievements of its alumni who in turn contribute to the future workings of the school. The school is therefore the largest on the Island, delivering an English based curriculum in a private university setting, working alongside both NHS and private hospitals.

Two of the visit team have previously undertaken a quality assurance visit of the school, and we are impressed by the growth and maturation of the school, which has worked to create the new integrated six-year curriculum which we have evaluated.

During our visit, we were delighted to meet with the Vice President for Health, Dean of the School, several associate Deans together with colleagues from UNIC Health and the faculty at large. We visited both Apollonium and Aretaeion Hospitals which are ideally placed to provide early hospital exposure manage the transitional years of the programme.

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 (logbooks, exams, 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
<b>Professor Nicki Cohen</b>	Dean of Medical Education	King's College London, UK
<b>Prof. J.-Matthias Löhr</b>	Professor of Gastroenterology	Karolinska Institutet, Sweden
<b>Prof. Anne Herrmann-Werner</b>	Professor of Medical Education	University of Tübingen, Germany
<b>Ms Stella Sergiou</b>	Medical Student Representative	University of Cyprus
<b>Mr Alexis Valiantis</b>	Buildings Expert	Civil Engineer
<b>Ms Katerina Evaggelou</b>	Student Welfare Expert	University of Cyprus

## 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.

**PLEASE NOTE THIS SECTION WILL FOLLOW FROM MR ALEXIS VALIANTIS**

### 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.	Choose answer
	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.	Choose answer
1.1.2	An operating license issued by the Local Authorities		Choose answer
1.1.3	The following operating license certificates, duly completed:		
	1.1.3.1	Visual Inspection Form E.O.E. 102	Choose answer
	1.1.3.2	Visual Inspection for the Building's Seismic Sufficiency Form E.O.E.Σ.E.K 103	Choose answer

1.1.3.3	Inspection Certificate Form 104	Choose answer
1.1.3.4	Fire Safety Certificate, issued by the Fire Department	Choose answer
1.1.3.5	Certificate for Adequate Electrical and Mechanical Installations, issued by the Electromechanical Department	Choose answer

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

Click to add text

## 1.2 Other Facilities

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

*THE REMAINDER OF THE EEC PROVIDE THEIR OPINION TO THIS SECTION BELOW:*

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.

Click to add text

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

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

Grading of student welfare issues:

The student welfare staff appears to be adequate for the number of students enrolled in the University of Nicosia (UNIC) Medical School.

UNIC Medical School has its own dedicated student welfare officers who understand the specific pressures of medical education and provide support and guidance only for its students, due to the unique and complex nature of the school.

However, there are some welfare services that are supported centrally from the UNIC Student Welfare Department such as accommodation, visa, recreational areas, student clubs, events.

1. Special access for students with disabilities:

The admission process is accessible to students with disabilities provided that they are capable of carrying out and completing the programme.

The procedures are thoroughly communicated to students from the beginning of their studies, ensuring equal access to academic studies.

2. Recreation areas:

UNIC Medical School has high quality recreational facilities. The recreation areas include restaurants, cafeterias, fitness centre, gyms, TV Rooms and games areas, study rooms and lounges.

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 from the first day of their studies who assist them with academic planning, course selection and addressing any problems or concerns. There is also a Student Success Centre that provides tutorial services and programs aimed at helping students.

4. Policy and statutes for financial student support:

UNIC offers some scholarships to Medical students based on excellence or socio-economic criteria.

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

5. Counseling services:

The Centre for Therapy, Training and Research (KESY) is offering mental health services to the members of UNIC. The Centre was established to promote Prevention, Assessment and Therapy and provide these services to the members of UNIC (staff and students) free of charge.

Moreover, the Centre services include training seminars, psychometric and psychoeducational assessments, development and implementation of preventive programmes.

6. Career office:

The Career Success Centre supports students and alumni in their career development and job placement.

The Career Advisor consults students in matters such as employment sectors, CV preparation, Job and Internship Opportunities, interview preparation and decision-making matters..

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.

Moreover, Doctoral Students and Postdoctoral Researchers may receive funding for international mobility enhancing their academic pathways.

9. Student clubs/organisations/associations:

UNIC offers a variety of leisure clubs that cater to diverse interests. 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 UNIC students and offers several benefits.

Visa for international students



The International office 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

UNIC student residences comprise three distinct complexes offering 858 luxury studio apartments. Each residence is equipped with a range of facilities and services.

### 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	<b>satisfactory</b>
3.2	Computers available for use by the students	<b>satisfactory</b>
3.3	Technological support	<b>satisfactory</b>
3.4	Technical support	<b>satisfactory</b>

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

Click to add text

## 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.*

The infrastructure was presented with all relevant physical elements and otherwise. The library is large and open after hours/during the weekends for students. Besides many working places, there is an area to relax.

### **Strengths**

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

All technological and physical prerequisites appear to be in place and working.

### **Areas of improvement and recommendations**

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

None identified.

- **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		
<b>1.1 Mission and strategic planning</b>		<b>1 - 5</b>
1.1.1	The Institution has formally adopted a mission statement, which is available to the public and easily accessible.	<b>5</b>
1.1.2	The Institution has developed its strategic planning aiming at fulfilling its mission.	<b>5</b>
1.1.3	The Institution's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted.	<b>5</b>
1.1.4	The offered programmes of study align with the aims and objectives of the Institution's development.	<b>5</b>
1.1.5	The academic community is involved in shaping and monitoring the implementation of the Institution's development strategies.	<b>5</b>
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.	<b>5</b>
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.	<b>5</b>
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
There is a well articulated mission, values, and strategic plan both for the Nicosia parent and branch campus which is in the later stages of development.		

<b>1.2 Connecting with society</b>		<b>1 - 5</b>
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.	<b>5</b>
1.2.2	The Institution provides sufficient information to the public about its activities and offered programmes of study.	<b>5</b>
1.2.3	The Institution ensures that its operation and activities have a positive impact on society.	<b>5</b>
1.2.4	The Institution has an effective communication mechanism with its graduates.	<b>4</b>
<p>Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.</p> <p>UNIC captures rich information relating to its alumni on an annual cycle. We have heard how information is less forthcoming as careers develop. To truly maximise on this resource, a more active approach may be needed, moving to “alumni engagement” and elements such as planned in-person visits, as part of international travel, are certainly to be applauded. We feel that more data - for example relating to research activity, would provide a useful additional stream to alumni data.</p>		
<b>1.3 Development processes</b>		<b>1 - 5</b>
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.	<b>4</b>
1.3.2	The Institution has a two-year growth budget that is consistent with its strategic planning.	<b>5</b>
1.3.3	Planning academic staff recruitment and their professional development is in line with the Institution's academic development plan.	<b>5</b>
1.3.4	The Institution applies an effective strategy of attracting students/ high-level students from Cyprus.	<b>5</b>
1.3.5	The Institution applies an effective strategy to attract high-level students from abroad.	<b>5</b>

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

As we have highlighted elsewhere as part of the visit, there are additional benefits to be realised through the creation of university hospitals. Recruiting high-achieving clinical academic is likely to rely on creating joint positions across clinical specialties in (primary or) secondary care, alongside the university role (e.g Head of Hospital Department alongside University Department).

Additionally, write:

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

There are approximately 240 students across the 6 and 5-year MD programmes each year, from nearly 100 countries. The figures provided are not quite complete, but in 2022/3, 14 students were admitted onto the 6-year MD from Cyprus and seemingly 2 onto the 5-year MD from Cyprus (compared to 36 from Greece onto the 6-year programme, 5-year entries not given). There were a further handful of students from Cyprus admitted onto the PhD programme and MSc programmes (combined).

Aside from Cyprus and Greece, significant numbers of students originate in Canada, Norway, Jordan and the UK.

### Findings

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

We are satisfied that UNIC Medical School has a diverse and established mix of faculty and administrative staff alongside a tailored schedule of programmes related to the MD programmes. PhD programmes (outside the remit of this visit) support the growth of the faculty, both through opportunities for educators and for research-active staff. As a maturing school, we feel that its strategic direction will require significant investment in research, which should be crafted through a more explicit research strategy, supported by strong input from both external and internal stakeholders.

### Strengths

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

The school has an engaged and secure staff base who work collaboratively to support innovative practice, as evidenced by the development of the new 6-year MD programme.

A re-alignment with local hospitals for early and mid-years clinical training provides opportunities to re-explore joint appointments, to benefit the university and local health provision.

### Areas of improvement and recommendations

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

None identified

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	<b>Partially Compliant</b>
1.2 Connecting with society	<b>Compliant</b>
1.3 Development processes	<b>Compliant</b>

## 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		
2. Quality Assurance		
2.1 System and Quality Assurance Strategy		1 - 5
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.	5
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	5
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 deficiencies.		
No deficiencies noted		
<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.	5
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	4
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.

While we feel that all areas are compliant, support for students with special needs and/or neurodiversity has not as yet been discussed in detail.

## Findings



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

The quality assurance process with respect to the MD programmes and faculty performance and development are exemplary. UNIC-Health provides a health-oriented autonomous structure for many purposes of the university, which has supported a nimble approach to development and improvement

### Strengths

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

The QA process as a whole, with annual reports feeding into periodic programme review and CYAA processes is a strength.

### Areas of improvement and recommendations

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

The quality assurance process and collaborative approach to curriculum development has provided for a modern future-focussed 6-year programme, which has harnessed the enthusiasm and collaborative approach of current faculty. Maintaining this enthusiasm and engagement is important but it needs to be balanced by manageable workloads for sustainability.

We have heard how student feedback is captured, considered, acted upon and outcomes communicated to students on a regular basis. While this is a highlight, it is a shame that staff reward, for example through student-nominated awards, is a little limited by student engagement. We encourage the institution to consider how this might be improved for the future.

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

Sub-Area	<b><i>Non-compliant/ Partially Compliant/Compliant</i></b>
2.1 System and quality assurance strategy	<b>compliant</b>
2.2 Ensuring quality for the programmes of study	<b>compliant</b>

### 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.	5
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.	5
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

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

No deficiencies noted

### Findings

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

The UNIC Medical School has a strong administrative team that allows for all necessary procedures to run smoothly according to process. Staff were very supportive of each other and of working practices during our conversation during the visit. This is further evidenced by the nature of staff - with the newest administrator present having been recruited in 2019!

Many of the processes were established to support a modest student cohort. We have heard how these have evolved with student expansion - but some of the personal touch will have been lost through this change (for example with the move to plenary induction sessions and providing more information for students to digest rather than using more active means for sharing at induction).

This needs to be monitored and actively supported to prevent impacting student experience.

### Strengths

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

The external advisory board described how all members of the administrative (and academic) staff are encouraged to contribute - that the relatively flat structure does not stifle innovation in more junior team members.

Student representatives form part of all appropriate governance committees and these representatives actively disseminate appropriate information with the broad student body.

We note that the current scheduling system is based on an XLS spreadsheet, but a recently procured system - timetable - is about to be implemented through a rapid process of procurement and implementation.

### Areas of improvement and recommendations

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

None identified

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

Assessment Area	<i>Non-compliant/ Partially Compliant/Compliant</i>
3. Administration	<b>Compliant</b>

#### 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.	<b>5</b>
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	<b>5</b>
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.	<b>5</b>
4.1.4	The Institution ensures that its programmes of study integrate effectively theory and practice.	<b>5</b>
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).	<b>5</b>
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

N/a.		
<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.	<b>5</b>
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.	<b>5</b>
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	<b>5</b>
4.2.4	The teaching staff of the Institution have regular and effective communication with their students.	<b>5</b>
4.2.5	The teaching staff of the Institution provides timely and effective feedback to their students.	<b>5</b>
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
N/a.		

### Findings

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

The entire process for planning of the MD program and the organisation of the teaching was explained during the site visit. A five-year program gives credit to those with prior formal education in the life sciences. A process for receiving students from other medical schools is in place.

### Strengths

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

The system of yearly feedback and review of the program allows the Medical School to adapt to changes in the subjects (e.g. climate change, AI/digital health) and teaching content/methods (e.g. more learning, less teaching) in a preset, formal and transparent way.

### Areas of improvement and recommendations

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

No obvious deficits could be identified.

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	<b>compliant</b>
4.2 Organisation of teaching	<b>compliant</b>

## 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.	4
5.4	The special teaching staff and special scientists have the required qualifications, sufficient professional experience and expertise to teach a limited number of programmes of study.	4
5.5	The ratio of special teaching staff to the total number of teaching staff is satisfactory.	5
5.6	The ratio of the number of subjects of the programme of study taught by teaching staff working fulltime and exclusively to the number of subjects taught by part-time teaching staff ensures the quality of the programme of study.	5
5.7	The ratio of the number of students to the total number of teaching staff is sufficient to support and ensure the quality of the Programme of Study.	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.	4

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

We feel UNIC could benefit more from a broader, larger visiting professor base. Similarly, we note that some of the clinical teaching staff, while compensated for their time, are not part of the university structure and do not have a formal appointment. This requires careful oversight in the long-term.

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

Total of 97 faculty. Percentages were not disclosed.

### Findings

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

Those faculty who are UNIC employees appear highly motivated and receive effective induction. They receive yearly feedback and are involved in the content of the MD program (process run by UNIC Health QA). For the clinical teaching, physicians at the hospitals are involved and compensated for their time. This is overseen by site representatives and year coordinators. Translators on site are provided to help with the non-English speaking Greek patients, we comment further on this process within the associated MD report.

### Strengths

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

The entire process of onboarding, providing support/continuous education and feedback is best practice.

### Areas of improvement and recommendations

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

Students describe variations in clinical teacher engagement between the teaching sites, particularly in the later years of the current MD programme. This needs a process of continuous evaluation and improvement, possibly through a more explicit mechanism of faculty development.



We have raised student-voiced concerns around the use of translators in the accompanying MD report.

Please select what is appropriate for the following assessment area:

Assessment Area	<i>Non-Compliant/ Partially Compliant/Compliant</i>
5. Teaching staff	<b>compliant</b>

## 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.	4
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 Institution also uses an open access policy for publications, which is consistent with the corresponding national and European policy.	5



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.	4
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
<p>Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.</p> <p>Beside being the #1 in research quality in Cyprus, research output should be a focus for growth given the maturity of UNIC, especially compared to the other two medical schools.</p>		

### Findings

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

UNIC takes pride in being the leading Academic Institution in Cyprus with a Medical School. They are partners and leads in several EU Horizon projects. Support is provided by UNIC central and the Ministry of Health.

### Strengths

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

Research is a part of the MD program as it is part of the proceedings of the faculty. A dedicated wet lab is available plus teaching laboratories next door to it. The basic equipment is good. The recent acquisition is a Zebrafish facility which will be useful for the future, both in teaching and in research. A PhD program is in place (not reviewed by this EEC).

Research is strong in epidemiology, especially in infectious diseases, also stem cells (induceable pluripotent renal models) and environmental health.

UNIC is joining UCY in making use of the Cyprus Biobank and working together with a Harvard Medical School program in Environmental Health.

Furthermore, both funding and permits for a completely new building on the main campus are in place that will provide even more space for research (e.g. wet lab).

### Areas of improvement and recommendations

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

For a faculty of almost 100, the scientific output should grow. Since students request research activities (for their later appointments as a distinction), more (formal) room should be given earlier during the program, when students do not have the heavy clinical duties, which may allow them to allocate more time developing key research skills.

A University Hospital and joint appointments of clinicians (e.g. Professor of Neurology and Head of the Department) would lay the ground for even more (clinical) research. A clinical trial unit would provide the infrastructure to better partake in (large international) trials and investigator-initiated Cypriot trials.

Reinvigorating priorities to recruit high-impact researchers, supporting recruitment by facilities, PhD studentships etc. would further increase the research at UNIC. This, in turn, would address ranking ambitions. The Medical school could take advantage of the other Schools at UNIC creating attractive cross-disciplinary graduate schools.

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

Assessment Area	<i>Non-Compliant/ Partially Compliant/Compliant</i>
6. Research	<b>compliant</b>

## 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.	5
7.3	The Institution's profits and donations are used for its development and for the benefit of the university community.	5
7.4	The Institution's budget is appropriate for its mission and adequate for the implementation of strategic planning.	5

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.	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. N/a		

### Findings

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

UNIC-Health has significant autonomy from the rest of the university regarding budget which helps to operate in line with its mission and goals. They have an elaborate process which is managed by the Director of Finance and the EVP Health.

The budget comprises distinct sub-budgets e.g. for assessment, mobile clinics, infrastructure or faculty training. There is a distinctive scheme in place with budget planning in February/March of each year, and the whole process is audited externally on an annual basis. Additionally, they have enough latitude for innovative and/or overarching investments. Huger investments like the new building rely mainly on external fundings/investments.

### Strengths

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

Clear processes and ownership of the budget for the medical school. UNIC Health has separate structures from the rest of UNIC programs/schools. Funding (and permits) are secured for a new building for the Medical School on main campus.

### Areas of improvement and recommendations

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

Nothing applicable in this section.

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

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

## E. Conclusions and Final Remarks

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

The Medical school of UNIC is the oldest and most mature of three Medical Schools in Cyprus, all located in Nicosia. As a consequence, there is little room for major or fundamental criticism. At institutional level, the faculty, quality assurance, governance and processes of the school are mature and provide for innovation such as the new six-year MD programme, and work towards the establishment of the Athens Branch Campus.

We would like to commend:

1. The flourishing UNIC-health approach, the synergies that this has created across your health schools and the way that you have used this to leverage changes and systems improvements within the school.
2. The adaptive and streamlined approach you have taken to innovation, and the way in which you have shaped faculty to expand community health, population sciences and primary care since our last visit – to address the future needs of the populations you serve. Environmental Health is particularly notable and recognised as an area of research strength.
3. The dedication and drive of the UNIC community, across professional services and academic staff who work so well together.

In terms of recommendations for improvement:

1. We would urge you not to hide from the weaknesses and threats that exist with regard to the programme. Although some may not yet be in your control, as the most established medical school on the island, you are best placed probably to influence stakeholders.
2. We would encourage you to work with the other 2 schools, through all means possible, to encourage the creation of university hospitals, for the benefit of the Cypriot people and for enhanced synergies with research including clinical trials.
3. Explore the possibility of developing an accredited educator programme –for the benefit of your alumni whom you track magnificently, education fellows and growing population of educators.
4. Ensure that you maximise on opportunities to more formally develop the research strategy as a plinth of your future success. We would advise growing Cyprus expertise on the External Advisory Board in big pharma, biotechnology, and incorporating the influence of an internationally standing research academic to guide the faculty in its future growth and success.
5. Lastly, given the excellent medical school building we have visited in Elliniko, it will be important to ensure that the future Nicosia Medical School Building being planned is of a similar standing, so that the international market of applicants are equally drawn to both institutions, for future sustainability of both campuses. It goes without saying that this will require considerable investment, but equally provides excellent opportunities for the future.

The EEC thanks the entire faculty of UNIC for a warm welcome and transparent approach to discussions. The CYQAA committee is convinced that UNIC is spearheading excellent training of medical students in Cyprus and will continue to do so.

## F. Signatures of the EEC

Name	Signature
Professor Nicki Cohen	
Prof. J.-Matthias Löhr	
Prof. Anne Herrmann-Werner	
Ms Stella Sergiou	
Mr Alexis Valiantis	
Ms Katerina Evaggelou	

Date: 9th June 2025

