

Doc. 300.1.2

Date: 18/06/2025

Higher Education Institution's Response

- **Higher Education Institution:**
UNIC Athens (Campus of the University of Nicosia)
- **Town:** ATHENS
- **Programme of study**
Name (Duration, ECTS, Cycle)

In Greek:

Φαρμακευτική (5 έτη, 300 ECTS, Ενιαίο και Αδιάσπαστο Μεταπτυχιακό Πρόγραμμα)

In English:

Pharmacy (5 years, 300 ECTS, Integrated Master)

- **Language(s) of instruction:** ENGLISH/GREEK
- **Programme's status:** Choose Status
- **Concentrations (if any):**

In Greek: Concentrations

In English: Concentrations



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

We extend our heartfelt gratitude to the External Evaluation Committee (EEC) for their comprehensive evaluation and insightful feedback. Their detailed report has been immensely valuable in guiding us to refine and enhance the programme, ensuring that it remains aligned with both current educational standards and the professional demands of the pharmacy field.

The EEC's dedication and diligence in assessing our programme has provided us with a clear understanding of areas for improvement. Their constructive feedback has not only been vital for our curriculum but also in strengthening our commitment to delivering a high-quality, innovative educational experience. We sincerely appreciate the time and effort invested in this thorough evaluation process, which has been pivotal in helping us to achieve our strategic objectives.

As we move forward, the insights and recommendations presented by the EEC will continue to serve as a cornerstone for future developments and enhancements in our programme. This collaboration underscores our shared commitment to academic excellence and the continuous improvement of educational offerings in the healthcare sector.



1. Study programme and study programme's design and development (ESG 1.1, 1.2, 1.7, 1.8, 1.9)

We are grateful to the EEC for highlighting both the strengths and areas for enhancement within our programme. We thank the Committee for their constructive suggestions regarding programme design, approval, and stakeholder involvement. We are pleased that our Policy for Quality Assurance, Design, approval, on-going monitoring and review, were deemed fully compliant and well-structured. Your recognition of our clear course-programme mapping and strong external engagement affirms our strategic approach and motivates further refinement.

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
The committee suggest the inclusion of sustainability/eco-directed medicine use to be covered in more study units. Might for instance be on green pharmacy practices, pharmaceutical waste management, eco-directed drug design, life cycle assessment of pharmaceuticals, sustainable prescribing and alternative medicine and plant-based treatments.	<p>We thank the EEC for highlighting the importance of sustainability and eco-directed medicine use in our curriculum. We fully endorse this recommendation and have taken the following actions to embed environmental responsibility across our MPharm programme:</p> <p>1. Curriculum- Integration</p> <p>a. Pharmacy Practice (IMPH 200, 400 & 401): Introduction of green pharmacy principles, sustainable prescribing strategies, and pharmaceutical waste-management case studies.</p> <p>b. Pharmaceutical Analysis and Quality Control I and II (IMPH-320 and IMPH-321) form an integrated sequence that trains students in life-cycle assessment of analytical procedures and real-time process monitoring, promoting sustainable laboratory practice without compromising analytical rigour. IMPH-320 covers life-cycle assessment, reagent-saving micro-titrations, and process analytical technology (PAT) with in-line NIR, Raman, and FT-IR measurements supported by chemometrics, preparing students for real-time release testing while reducing environmental impact. IMPH-321 extends these skills to solvent selection, substitution, and</p>	Choose level of compliance:

	<p>recovery; chromatographic method optimisation and miniaturisation; the application of green-chemistry principles to analytical work; and the adoption of more sustainable sample-preparation and extraction techniques. Collectively, these courses enable students to lower the ecological footprint of pharmaceutical analysis while maintaining high standards of data quality.</p> <p>c. Medicinal Chemistry (IMPH 240, 241 & 340): Introduction to the Principles and Approaches of Green Medicinal Chemistry: overview of the fundamental principles and methodologies underpinning green medicinal chemistry. Emphasis is placed on the application of these principles to conventional chemical reactions, including the use of environmentally benign solvents, biocatalytic processes, and sustainable starting materials. Furthermore, five laboratory exercises were developed to illustrate practical implementations of green medicinal chemistry concepts (see syllabi of courses IMPH-240, 241, 340).</p> <p>d. Rules of Good Practice (GxPs) (IMPH-465) and Quality Control (IMPH-475) jointly address environmental risk assessment, waste management, and resource conservation within pharmaceutical quality systems: IMPH-465 introduces the regulatory foundations for environmental protection, risk-assessment methodologies appropriate for GxP facilities, and procedures for environmental monitoring, auditing, and corrective-and-preventive action, linking statutory requirements with practical tools for risk management, while IMPH-475 applies these principles in analytical and QC laboratories by detailing waste-reduction and disposal protocols, sustainable procurement and inventory strategies, and continuous-improvement metrics that embed sustainability in routine quality-control activities, equipping students to integrate environmentally responsible practices across daily operations.</p>	
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	<p>e. Synthetic Approaches in Medicinal Chemistry (IMPH 420): Emphasis on biocatalysis, microwave-assisted synthesis, and other sustainable synthetic methodologies.</p> <p>f. Pharmacognosy and Chemistry of Natural Products (IMPH 360 & 361): Comprehensive treatment of plant-based therapies, conservation of medicinal plant resources, and discussion of agro-sourcing versus wild-harvested materials.</p> <p>g. Organic Chemistry (IMPH-151): two green chemistry lab exercises were introduced.</p> <p>2. Alignment with International Frameworks</p> <p>a. All additions align with FIP Development Goal 21 (Sustainability in Pharmacy) and relevant WHO guidelines on environmental stewardship in healthcare.</p> <p>These enhancements ensure our graduates acquire the knowledge, skills, and professional attitudes necessary to champion sustainability in pharmaceutical practice. Please refer to Annex 1: Amended Syllabi for detailed course descriptions, learning outcomes and content.</p>	
<p>The committee also agrees that there is an increased demand for pharmacists in both primary and secondary care as written also in the application from the University. Still, the committee would like the University to elaborate a bit more on these different tasks for pharmacists in primary and secondary care. It might be</p>	<p>We acknowledge the committee's valuable observation regarding the expanding professional roles of pharmacists in both primary and secondary care settings. We are pleased to elaborate on the current regulatory framework governing pharmacy practice in Greece and Cyprus, while also highlighting how the programme prepares graduates for emerging professional responsibilities, consistent with developments observed in European healthcare systems.</p> <p>In Greece, pharmacy practice is regulated through a comprehensive legal framework, including Law 5607/1932 (as amended), which constitutes the foundation of pharmacy practice and the operation of community pharmacies. Further legal provisions, such as Law 1316/1983, govern the National Organization for Medicines (EOF) and various aspects related to the supply of medicines and pharmaceutical services. Hospital pharmacy services are defined under Law 3204/2003 and Law 3601/2007, while Laws</p>	<p>Choose level of compliance:</p>

<p>pharmacists working in the patient's home (hospital in the home), pharmacists re-prescribing medicines, pharmacists teaching school children about appropriate medicine use and disposal, pharmacists working in prisons improving medication for the inmates, improving medicine use in nursing homes/elderly homes, pharmacists working in GP practices etc. This will make the study programme consistent with developments in society in similar parts of the world comparable to Greece.</p>	<p>4052/2012 and 4172/2013 address additional public health and reimbursement structures impacting pharmacy practice. More recently, Presidential Decree 64/2018 has clarified and defined the specialization framework for hospital pharmacists in Greece. Supplementary ministerial decisions have authorized pharmacists to provide specific public health services, including selected vaccination programmes and patient counseling activities.</p> <p>Within the boundaries of this legal framework, pharmacists in Greece currently hold responsibilities for dispensing medicines and providing professional counseling to patients regarding the safe and effective use of medicinal products. They conduct medication reviews, offer pharmaceutical care within the community, administer specific vaccinations following certification, provide self-care guidance for minor ailments, contribute to public health promotion activities, and participate in chronic disease management and preventive care interventions within designated national programmes. In hospital settings, pharmacists play a crucial role in the management of pharmaceutical supply chains, contribute to clinical pharmacy services, and collaborate with multidisciplinary healthcare teams to promote the rational use of medicines.</p> <p>The committee's reference to expanded professional roles, including activities such as re-prescribing, hospital-at-home services, pharmacists providing care in prisons, or pharmacists collaborating directly within general medical practices, reflects an ongoing international evolution of pharmacy practice which is currently under discussion in Greece and Cyprus but not yet fully implemented within the national healthcare system. These developments, however, remain highly relevant to ongoing healthcare reforms and to the broader European dialogue concerning pharmacy's evolving contribution to integrated and patient-centered care.</p> <p>In Cyprus, the legal framework regulating pharmacy practice remains more limited in scope compared to other European jurisdictions. Pharmacists' primary role is focused on the dispensing of medicines and the provision of professional counseling within community pharmacy settings. At present, there is no formal legal provision regulating</p>	
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pharmacists' involvement in public health services, such as vaccination programmes or other primary healthcare services. As a result, pharmacists in Cyprus are not yet authorized to deliver vaccinations or other structured public health interventions within the primary care sector.

Furthermore, in both Greece and Cyprus, the discipline of clinical pharmacy has not yet been formally established as a recognized specialization or regulated profession. While certain clinical pharmacy activities may be performed within hospital settings or on an individual professional basis, there is currently no official clinical pharmacy specialization pathway or accredited professional framework specifically dedicated to clinical pharmacy practice in either country.

In recognition of these emerging trends, the MPHarm programme at the University of Nicosia has been designed with a forward-looking approach that not only equips graduates to competently fulfil current professional requirements within Greece and Cyprus, but also prepares them for the progressive expansion of pharmacy practice roles as observed in advanced European healthcare models. The curriculum offers advanced education in social pharmacy, clinical pharmacy and pharmaceutical care, encompassing both community and hospital settings, while fostering interprofessional education to ensure pharmacists can collaborate effectively within multidisciplinary healthcare teams. Moreover, students receive training in public health, and health promotion strategies, including services such as antimicrobial stewardship, and chronic disease management. Particular emphasis is placed on the development of patient-centered communication skills, enabling graduates to address the diverse needs of vulnerable patient groups, including the elderly, institutionalized patients, and individuals receiving care at home.

Despite the current limitations in the national regulatory frameworks of Greece and Cyprus, the programme deliberately educates students based on European/international standards and anticipated future developments. This ensures that graduates are prepared not only for existing roles but also for forthcoming professional opportunities as national

	<p>healthcare systems progressively incorporate expanded pharmacy services in line with European best practices.</p> <p>In addition, the programme is fully aligned with international frameworks such as the FIP Development Goals, the WHO Global Patient Safety Challenge, and the recommendations of the European Association of Faculties of Pharmacy (EAFP), ensuring that graduates are equipped with contemporary competencies that are recognized and valued throughout the European Union. The Institution remains committed to continuous curriculum enhancement to ensure that its graduates are well-positioned to contribute to the evolving landscape of healthcare, both within the national context of Greece and across the wider European healthcare environment.</p>	
<p>This study program is designed to meet modern healthcare demands, aligning with European educational and professional standards as well as Directives 2005/36/EC and 2013/55/EU. In addition, we suggest that when developing and running the program, the university also takes the new Commission delegated directive (EU) 2024/782 of 4 March 2024 amending Directive 2005/36/EC of the European Parliament and of the Council as</p>	<p>We thank the EEC for their suggestion to consider the newly adopted Commission Delegated Directive (EU) 2024/782 of 4 March 2024, which amends Directive 2005/36/EC by introducing additional minimum training requirements for.</p> <p>UNIC MPharm programme is fully compatible with all current European and national legislative provisions, including Directives 2005/36/EC and 2013/55/EU. Although Directive 2024/782 has not yet transposed into National Law, its new requirements have already been anticipated in our curriculum design and we are already prepared for the harmonisation. The contribution of the Head of Department of Health Sciences to the EU Commission's amendment report "Mapping and assessment of developments for sectoral professions under Directive 2005/36/EC – The profession of pharmacist, Publications Office of the European Union, 2022, https://data.europa.eu/doi/10.2873/077373, assured the early alignment with the emerging standards.</p> <p>Besides the early alignment, further amendments have been incorporated to our programme, taking into consideration the EEC's suggestions in Response to the New Executive Directive:</p> <ol style="list-style-type: none"> Curricular Enhancements <ul style="list-style-type: none"> Pharmaceutical Biotechnology & Pharmacogenomics (IMPH-451) course has been renamed to: "Biopharmaceutical Technology & Pharmacogenomics": The course title has been updated to reflect expanded 	<p>Choose level of compliance:</p>

<p>regards the minimum training requirement for pharmacists and other health care practitioners into account. For instance, interdisciplinary cooperation and pharmacoeconomics are mentioned in the new directive.</p>	<p>coverage of the production and regulatory considerations for biological medicines and advanced therapies (e.g., cell and gene therapies).</p> <ul style="list-style-type: none"> • Business Management and Pharmacoeconomics (IMPH-480): This standalone elective course already addresses cost–benefit analysis, health-technology assessment, and budget-impact modeling, equipping students with the economic evaluation skills mandated by the new directive. <p>2. Interdisciplinary Cooperation & Interprofessional Practice: In line with Directive (EU) 2024/782’s emphasis on “proficient knowledge and skills in interdisciplinary and multidisciplinary collaboration, as well as interprofessional practice and communication,” we have enriched several core syllabi to strengthen regular, structured interaction with peers from nursing, physiotherapy, public health, and related fields:</p> <ul style="list-style-type: none"> • Pharmacy Practice (IMPH-400/401) Team-Based Case Studies: Pharmacist, Medicine, nursing, and physiotherapy students jointly manage simulated patient scenarios in our simulation lab, rotating through roles in medication reconciliation, nursing care planning, and rehabilitative exercises. Interprofessional Reflection Sessions: After each simulation, mixed-discipline groups debrief on communication strategies, scope-of-practice boundaries, and co-management of complex cases (e.g., post-operative pain management). Interprofessional Grand Rounds: Pharmacy and nursing students jointly review case studies on personalized biologic therapies, biosimilars, discussing implications for dosing algorithms, patient counseling, and nursing care plans. • Public Health (IMPH-280) Community Health Campaign Project: Pharmacy and public-health cohorts co-design and deliver a “Healthy Ageing” outreach event, incorporating pharmacist-led medication reviews, physiotherapy-led mobility workshops, and nursing-led blood-pressure screenings. Policy Analysis Workshops: Small groups comprising pharmacy, 	
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	<p>epidemiology, and health-management students analyze real-world public-health policies (e.g., vaccination mandates), present joint policy briefs, and debate ethical considerations in front of a multi-disciplinary panel.</p> <ul style="list-style-type: none"> • Biopharmaceutical Technology & Pharmacogenomics (IMPH-451) Interprofessional Grand Rounds: Pharmacy, Medicine and Nursing students jointly review case studies on personalized biologic therapies, discussing implications for dosing algorithms, patient counseling, and nursing care plans. These enhancements ensure our graduates routinely practice collaboration, shared decision-making, and clear communication with allied health professionals—preparing them to lead and integrate within interprofessional healthcare teams from day one. <p>3. Digital Technologies & AI</p> <p>The directive’s requirement for “proficient knowledge of information and digital technologies, and skills in their practical application” is already met through integration of AI and digital health tools across multiple courses. More specifically, tools applied include (but not limited):</p> <ul style="list-style-type: none"> • ChemSketch • PubChem, • RCSB, • PDB Protein Data Bank, • Reaxys • Boltz 2 • AlphaFold • Chimera • Sheffield Biosciences Simulation laboratory • Swiss ADME, • Certara software • Strathclyde Pharmacology Simulations • Labster simulations 	
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	<ul style="list-style-type: none"> • BBBPred and B3Pred. <p>Details available in Annex 1: Amended Syllabi.</p> <p>These targeted enhancements ensure that our MPharm programme not only satisfies existing EU and national standards but is also fully prepared to implement the new training requirements of Directive 2024/782 before this is transposed into national law.</p>	
The University might also consider turning the elective course "Business Management and Pharmacoeconomics" into a mandatory course, assuming that the majority of the students will probably, in their future careers, function as leaders, where they will need knowledge about business management, leadership, and various types of financial calculations.	<p>We thank the EEC for highlighting the importance of business management and pharmacoeconomics for future pharmacy leaders. "Business Management and Pharmacoeconomics" (IMPH-480) is offered as an elective in both the fall and spring semesters. This scheduling ensures that every student has ample opportunity to enroll. Prior to our 2022 curriculum reform—which emphasised the clinical character of the MPharm programme—this course was a compulsory component. In order to deepen clinical training, we reclassified it as an elective, without reducing overall credit requirements.</p> <p>We acknowledge the committee's comment that most graduates will assume leadership roles requiring business and financial acumen. Accordingly, in our next extensive programme review, we will evaluate reinstating "Business Management and Pharmacoeconomics" as a compulsory course.</p> <p>This approach balances current clinical priorities with the strategic need to prepare pharmacists for managerial and economic decision-making in their professional careers.</p>	Choose level of compliance:
The University should ensure that there are clear lines of reporting and responsibility, avoiding duplication as far as is possible with respect to the CIQAC and its interactions with the CY-based QA	<p>We thank the Committee for this important recommendation.</p> <p>At UNIC, quality assurance is structured to ensure clear lines of responsibility and avoid duplication:</p> <ul style="list-style-type: none"> • DIQAC (Department Internal QA Committee): Oversees curriculum delivery, student feedback, and QA issues at the departmental level (both Nicosia and Athens). 	Choose level of compliance:

<p>committees and particularly the DIQAC.</p>	<ul style="list-style-type: none"> • SIQAC (School Internal QA Committee): Synthesises inputs from both DIQAC and CIQAC, identifies school-level trends, and recommends actions to UIQAC. • UIQAC (University Internal QA Committee): Provides overall governance, aligning departmental and campus QA with institutional strategy and statutory requirements. <p>The CIQAC (Campus Internal QA Committee – Athens): Monitors and implements QA tasks specific to the Athens campus, liaises with DIQAC, SIQAC, and UIQAC, and reports directly to the Vice Rector of Academic Affairs.</p> <p>By having CIQAC report straight to the Vice Rector of Academic Affairs—while maintaining structured communication with DIQAC, SIQAC, and UIQAC—we ensure that QA responsibilities are distinct yet fully coordinated across all levels. This framework upholds transparency, prevents overlap, and supports consistent quality standards across both campuses.</p>	
<p>It is neither clear from the written material nor the site visit how and when the University relations with regulatory bodies are to be strengthened (a specific wish otherwise set forward in the SWOT-analysis). The committee would also encourage the University to prioritize and plan for how to turn the listed weaknesses mentioned in the SWOT-analysis into a tolerable situation.</p>	<p>We thank the Committee for underscoring the importance of transparent, sustained collaboration with regulatory bodies and professional organisations—partnerships that are already well established and form key Performance Indicators for the Department in UNIC Athens. Building on our existing ties with PFS, OSFE, and IDEAF, we have formalized and extended a programme-wide approach that guarantees continual interaction with these stakeholders.</p> <p>1. School-Level Industry Advisory Body</p> <p>UNIC’s School of Life and Health Sciences convenes an Industry & Professional Advisory Board, chaired by the Dean, with a dedicated Pharmacy sub-committee. Members from PFS, OSFE, IDEAF, and other sector stakeholders:</p> <ul style="list-style-type: none"> • Review emerging regulatory requirements • Advise on strategic priorities • Validate new course proposals and ensure alignment with professional standards • Recommend market and policy perspectives 	<p>Choose level of compliance:</p>

2. Ongoing Monitoring, Evaluation & Revision

All MPharm programmes—including the Athens extension—are subject to two complementary QA cycles:

- **Annual Programme Evaluation Process (APEP):** Departmental and campus-level committees collect feedback, analyse performance, and propose timely updates.
- **Internal Programme Evaluation Process (IPEP):** A quinquennial self-study reviewed by internal and external experts, including invited industry/regulatory representatives, to recommend deeper revisions.

During both APEP and IPEP, selected stakeholders actively participate, ensuring their expertise directly informs curriculum updates, competency frameworks, and emerging practice trends.

3. Formalisation via MoUs

By the end of next academic year, UNIC will sign **Memoranda of Understanding** with PFS and OSFE, defining areas of joint activity: educational events, workshops, continuing-education programmes, student placements, research projects, public-health initiatives, and the sharing of regulatory updates.

4. Integration into the Athens Campus Extension

All components of our QA framework—Advisory Board input, APEP/IPEP cycles, and stakeholder invitations—apply identically to the Athens MPharm programme. This ensures both campuses maintain consistent regulatory engagement, curricular responsiveness, and continuous improvement.

Transforming SWOT-Identified Weaknesses

To address the SWOT-identified “unclear regulatory engagement,” we conducted a TOWS analysis that translates our strengths and weaknesses into actionable strategies, leveraging opportunities and mitigating threats. This structured, transparent process will continuously align our MPharm programme with national and European standards.

TOWS Analysis (Summary)

- **SO Strategies:** Leverage our global reputation to attract top faculty; use state-of-the-art infrastructure to host high-impact industry events.
- **ST Strategies:** Capitalize on industry collaborations to co-develop policy briefs; differentiate our programme via interprofessional education.
- **WO Strategies:** Enhance international diversity through Erasmus+; strengthen alumni engagement for mentorship.
- **WT Strategies:** Streamline online advising to counter administrative constraints; expand virtual labs for experiential learning during emergencies.

This TOWS matrix ensures strategic alignment with emerging opportunities and fortifies our programme against external threats, fulfilling the Committee's call for a clear, sustainable regulatory partnership framework.

TOWS Analysis		
	Opportunities (O)	Threats (T)
Strengths (S)	SO Strategies 1. Leverage international reputation (S1–S3) to attract high-calibre faculty (O17) via targeted global recruitment campaigns. 2. Use state-of-the-art infrastructure (S8) to host high-impact community & industry events (O7), strengthening external partnerships.	ST Strategies 1. Capitalize on industry collaborations (S12) to navigate regulatory changes (T3–T4) by co-developing white papers and policy briefs with authorities. 2. Deploy interprofessional education (S13) to differentiate the programme in a crowded market (T1) by emphasizing team-based, integrated training.
Weaknesses (W)	WO Strategies 1. Address limited student diversity (W2) by attracting international students (O12) through Erasmus+ and	WT Strategies 1. Counter administrative support constraints (W3) and geopolitical uncertainties (T5) by streamlining online advising services (O11) and

	<p>NEOLAIa Alliance networks. 2. Mitigate alumni-relations gap (W4) by engaging alumni (O13) in mentorship and career-support initiatives, leveraging UNIC's global ranking (S1).</p> <p>decentralizing departmental functions. 2. Tackle practicum regulation challenges (W5) and public-health emergencies (T6) by expanding virtual simulation labs (O10) for remote experiential learning.</p> <p>This TOWS matrix translates our key strengths and weaknesses into actionable strategies that leverage emerging opportunities and guard against external threats.</p>	
<p>A course entitled <i>"English for Pharmacy"</i> is mentioned in the application. A very interesting and relevant course. A few comments though. Why is the course named the way it is? The course is taught in Greek, but presumably also exclusively in English, will non-Greek speaking students be admitted to the course? How does the teaching material support patient dialogue elements? What communication models are taught on the course? And how frequently do the students meet real customers/patients during the course?</p>	<p>We thank the committee for its valuable and constructive comments regarding the course entitled "English for Pharmacy", and for the opportunity to clarify the purpose, content, and structure of the module.</p> <p>The course previously titled "English for Pharmacy" will be formally renamed "Professional English for Pharmacists" to more accurately reflect its purpose, scope, and content. This updated title better communicates that the course is not a general language course, but a professionally oriented course focused on developing applied communication skills and pharmacy terminology in English, equipping students to use the precise vocabulary of pharmaceutical practice.</p> <p>We deliver the course entirely in English, and it has been specifically designed to support the development of advanced communication skills required for modern pharmacy practice in increasingly multicultural healthcare environments. Although the majority of students enrolled in the programme are Greek-speaking, the exclusive use of English ensures that all graduates are fully equipped to counsel, advise, and interact professionally with non-Greek speaking patients, tourists, expatriates, and healthcare professionals, which reflects the realities of pharmacy practice in Greece and in many parts of Europe.</p> <p>The course is structured with a strong experiential and practice-based component. In addition to classroom instruction, students participate in experiential workshops embedded within the course. As part of these workshops, students undertake assigned</p>	<p>Choose level of compliance:</p>

	<p>tasks requiring them to visit a community pharmacy, where they engage in real-life communication scenarios with patients or pharmacy staff in English. This allows students to apply the skills acquired in class to authentic situations. Following these activities, structured reflective sessions are conducted in the classroom, where students critically analyze their interactions, identify communication challenges, and discuss areas for further development,</p> <p>We also systematically incorporate role-playing exercises into the course, which are conducted both in English and Greek. This bilingual instructional approach allows students to develop flexible and transferable communication skills applicable to both Greek-speaking and international patient populations. Role-play scenarios simulate real-world counseling situations and provide opportunities to practice structured communication models, patient-centered counseling techniques, and shared decision-making strategies.</p> <p>Throughout the course, we introduce and apply internationally recognized communication frameworks, including the Calgary-Cambridge consultation model, shared decision-making models, and motivational interviewing techniques. These models are practiced during both simulated and real patient interactions, ensuring students develop effective, empathetic, and professionally appropriate communication competencies.</p> <p>By combining classroom instruction, experiential learning, reflective practice, and internationally recognized communication models, we ensure that students acquire the professional communication skills required for contemporary pharmacy practice in both national and international healthcare settings.</p> <p>“Professional English for Pharmacists” course syllabus available in Annex 1.</p>	
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<p>The committee also suggests that the elective course "Communication for Healthcare Professionals" is renamed to "Advanced Communication for Healthcare Professionals", because communication is taught earlier at other mandatory courses in the programme.</p>	<p>We thank the committee for this constructive suggestion regarding the elective course <i>Communication for Healthcare Professionals</i>. We fully agree that this elective builds upon the communication skills already introduced and developed in earlier mandatory courses within the programme. Its focus is indeed on more advanced aspects of professional communication, including complex patient consultations, interprofessional collaboration, communication with vulnerable patient populations, shared decision-making, conflict resolution, and leadership communication in healthcare settings.</p> <p>To better reflect the level, purpose, and content of the course, we adopt the committee's suggestion and rename the course to "Advanced Communication for Healthcare Professionals." This revised title accurately communicates both the progression within the curriculum and the advanced communication competencies that students are expected to acquire through this elective module.</p>	<p>Choose level of compliance:</p>
<p>As part of the Preregistration Practice course (IMPH-520), the application states that a diary maintained by the student will be assessed by the relevant authorities or the educational body. The visits will take place at random. A diary might contain very personal information about the</p>	<p>We thank the Committee for its valuable comments regarding the use and content of the "student diary" in the Preregistration Practice (IMPH-520) course.</p> <p>We would like to clarify that the diary is part of a structured workbook used throughout the internship. This workbook includes weekly reflective entries focused on critical descriptions of pharmacy services provided, as well as monthly assignments where students apply clinical and therapeutic knowledge to analyze and document the case of a selected patient, using a structured medication review and care plan format.</p> <p>The content of the diary is strictly related to professional practice and educational objectives. It is not a personal diary in the conventional sense, and students are explicitly instructed not to include any personal information unrelated to their placement. While reflections on course-related experiences and feelings are accepted</p>	<p>Choose level of compliance:</p>

<p>student's relationships, experiences, feelings etc. It is thus very important that the student is assured that such information is treated with the utmost degree of confidentiality by the visiting parties. If the scrutinizing of the diary could be done with the student staying anonymous, this would represent best practice. Similarly, safeguards must be put in place to ensure that no identifiable patient information is included in student work that is submitted for review in this way.</p>	<p>and encouraged for pedagogical purposes, the content is reviewed within the scope of course evaluation and professional growth only.</p> <p>To ensure confidentiality and ethical use, all student workbooks are handled in full compliance with the General Data Protection Regulation (GDPR). As part of this framework, students are clearly instructed not to include any identifiable patient data; only weight, height and age or generalized case descriptions are permitted.</p> <p>In terms of data security, the workbooks are stored in password-protected digital platforms with access strictly limited to designated academic assessors. Furthermore, records are retained solely for the period necessary for academic assessment and internal quality assurance, in accordance with DIPAE guidelines, after which they are securely destroyed. To support transparency and consistency in practice site evaluation, random academic visits to placement sites may be conducted. During these visits, any review of workbook content is carried out with the utmost respect for confidentiality and in accordance with professional and ethical standards.</p> <p>This structured and safeguarded process ensures that student learning is effectively supported while maintaining full compliance with privacy and ethical standards.</p>	
<p>The quality and effectiveness of external pharmacy placements, as well as the competencies of designated supervisors, constitute fundamental prerequisites for fostering a conducive and enriching educational environment for students. Consequently, a well-defined framework must be established to ensure</p>	<p>We thank the Committee for its thoughtful and forward-looking recommendations concerning the quality and effectiveness of external pharmacy placements and the qualifications and training of designated supervisors.</p> <p>1. Quality Assurance Framework</p> <ul style="list-style-type: none"> The Academic Clinical Placement Committee (ACPC) of the School of Life and Health Sciences oversees all aspects of external placements. ACPC ensures standardized monitoring, resolves any practicum issues, and forges future collaborations with clinical centres and community pharmacies. <p>2. Preceptor Selection & Competence</p> <ul style="list-style-type: none"> Regulatory Criteria: Preceptor pharmacists must have ≥ 3 years' professional experience, no conflicts of interest (e.g., family or financial ties), and formal approval by the Pharmacy Board. They may train only one student at a time. 	<p>Choose level of compliance:</p>

<p>rigorous quality assurance of external placement sites and to ascertain the suitability and professional qualifications of supervisors in these settings. To facilitate the evaluation of external placement sites, the overseeing committee proposes specific assessment criteria, including the degree of collaboration with pharmacy partners, the successful completion of prior projects, and the feasibility of planned initiatives. Likewise, the assessment of supervisors should take into account factors such as their tenure within the pharmacy sector, professional credentials in patient counseling, and other relevant qualifications. Moreover, it is advisable to implement annual training programs for pharmacy-based supervisors. These training sessions should encompass key topics</p>	<ul style="list-style-type: none"> • Defined Responsibilities & Competences: Both preceptors and trainees receive a clear description of their roles, tasks, and required competencies in the official Practicum Guide (exerts of Practicum Guide in Annex 2a). <p>3. Site Visits & Ongoing Support</p> <ul style="list-style-type: none"> • ACPC-appointed academic and dedicated staff conduct site visits throughout each placement cycle to support mentors and students and verify the quality of the learning environment. <p>4. Supervisor Evaluation</p> <ul style="list-style-type: none"> • Workbook Feedback: Two reflective questions are embedded in the student's Practicum Guide (Form 9.1.C) to assess mentor guidance and suitability: <ol style="list-style-type: none"> 1. <i>"Did your mentor pharmacist understand and follow the guidance provided in the official Practicum Guide in a way that supported the achievement of the intended learning outcomes and the development of the expected professional skills?"</i> 2. <i>"Would you recommend this mentor pharmacist for future internship placements?"</i> • Anonymized Online Survey: Complementing the workbook, an online rubric-based tool (Pharmacist Supervisor Assessment Form Annex 2b) gathers anonymous feedback on clarity of guidance, mentor availability, supportiveness, and overall satisfaction. Aggregate results inform mentor development. <p>5. Quarterly Training for Preceptors</p> <ul style="list-style-type: none"> • We provide online training sessions every three months, covering: <ul style="list-style-type: none"> ▪ Roles & responsibilities of preceptors and trainees ▪ Theoretical models of supervision and counseling ▪ Retrospective review of past placement outcomes ▪ Strategic planning for forthcoming cycles ▪ Joint research and practice-enhancement initiatives • We will also explore best practices from the Danish internship model led by Professor Lotte Stig Nørgaard. 	
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<p>such as the roles and responsibilities of supervisors, theoretical models and approaches to supervision and counseling, a retrospective evaluation of the previous year's placement outcomes, strategic planning for forthcoming placements, and the facilitation of joint research endeavors aimed at enhancing pharmacy education and practice. Further information on this subject can be achieved through Lotte Stig Nørgaard, who has been heading the pharmacy internship in Denmark for more than 20 years, for instance by setting up quality criteria for both external pharmacy placement sites and supervisors.</p>	<p>These measures together demonstrate our structured, evidence-based commitment to maintaining and continually enhancing the quality and educational impact of external pharmacy placements.</p>	
<p>The study program is pharmacy clinically oriented. To gain a deeper understanding of modern drug actions and adverse drug effects, the students</p>	<p>We value the Committee's suggestion to deepen our students' grounding in molecular biology, physiology, and pathophysiology, especially as they relate to geriatric pharmacology and major organ-system diseases. The Physiology and Pathophysiology course is well balanced in this respect and fully meets the objectives of the program</p>	<p>Choose level of compliance:</p>

<p>would need more training in molecular biology physiology and pathophysiology. These could be elective courses. A key strategic plan of the program is to meet the needs of the aging population in health care, especially geriatric pharmacology. This, and knowledge on diseases of major organ systems such as cardiovascular, musculoskeletal, gastrointestinal, brain as well as cancer should be emphasized in the course pharmacology and clinical pharmacology.</p>	<p>including geriatric conditions. We have, however, implemented the following enhancements in other courses:</p> <ol style="list-style-type: none"> 1. Core Course Revision (Molecular Biology IMPH-123,) <ul style="list-style-type: none"> • Geriatric-Focused Outcomes: The syllabi now explicitly addresses ageing-related molecular and cellular changes and their implications for drug efficacy and safety. • Epigenetics: Added content on epigenetic mechanisms of ageing links these processes to emerging pharmacotherapeutic targets. 2. Pathophysiology-Anchored Pharmacology <ul style="list-style-type: none"> • In Pharmacology and Therapeutics and Therapeutics-Clinical Pharmacy courses every organ-system module (cardiovascular, musculoskeletal, gastrointestinal, neurological, oncology) begins with a focused review of disease mechanisms, including age-related alterations in presentation and pharmacodynamics. For Clarity, the syllabi now explicitly address ageing-related changes and their implications for drug efficacy and safety. • Pharmacokinetic Models in Ageing: Population-based PK modeling in older adults is already integrated into our Pharmacokinetics (IMPH-445) course, ensuring students understand how ADME parameters shift with age. 3. New Elective on Longevity—Advanced Geriatric Pharmacotherapy & Practice (IMPH-499) <ul style="list-style-type: none"> • We have added Longevity—Advanced Geriatric Pharmacotherapy & Practice (4 ECTS), which explores healthy-ageing frameworks, polypharmacy management, and AI-supported optimization of geriatric drug regimens. • Future Planning: In our next accreditation review (2027), we will consider converting this elective into a compulsory core module to further reinforce our strategic focus on the ageing population. <p>These targeted revisions ensure that our MPharm graduates possess a robust, integrated understanding of modern drug actions, disease pathophysiology, and geriatric-specific</p>	
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	considerations—equipping them to deliver safe, effective pharmacotherapy across the lifespan. Details available in Annex 1: Amended Syllabi .	
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2. Student – centred learning, teaching and assessment (ESG 1.3)

We appreciate the Committee’s constructive feedback on our teaching and assessment methods. We are delighted that our student-centred pedagogy, practical training framework, and transparent assessment rubrics were judged compliant and effective. Their encouragement to expand interprofessional and technology-enhanced learning will guide our next steps in enriching the student experience.

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
Interprofessional education is listed as a strength in the SWOT analysis, but the establishment of interprofessional education is also listed as an opportunity within the same analysis. Presumably, the strength currently lies in the potential to build such content with medicine and potentially other disciplines as the programme develops. It was mentioned during the site visit that structured interprofessional education modules are to be created with medicine. The opportunity should be taken to develop these modules in alignment with the CAIPE definition of interprofessional learning, to ensure that full benefit is derived from these modules and from the great potential that the new	<p>We thank the Committee for its insightful comment regarding IPE, which we previously highlighted both as an existing strength and a growth opportunity. While standalone IPE modules are not feasible within the current MPharm structure, we have adopted an embedded, longitudinal model—aligned with the CAIPE definition—to ensure pharmacy students learn with, from, and about their peers in medicine, nursing, physiotherapy, and public health.</p> <ol style="list-style-type: none"> 1. Integrated IPE Across Core Modules (see examples above) 2. Collaboration with the School of Medicine: Co-designing shared workshops, clinical simulations, and patient-case discussions that progress from role awareness and communication skills in early years to collaborative decision-making and shared care planning in advanced stages. 3. Facilities as an Enabler: The new Athens campus—with its state-of-the-art simulation and clinical-skills environments—will provide dedicated spaces for these interprofessional activities, fostering authentic teamwork in settings that mirror real-world healthcare. <p>By embedding CAIPE-aligned IPE throughout the curriculum, and extending the same approach to the Athens programme, ensure our graduates are fully prepared to collaborate across disciplines and deliver integrated, patient-centered care from day one.</p>	Choose level of compliance:

campus building will present for such activities.		
<p>The range of elective course options on offer should be refreshed and updated regularly, to reflect developments in the profession, the surrounding society and the pharmaceutical sciences. Transparent and fair processes should be in place to manage student expectations, should it not be possible for all students to be allocated their first choices of elective courses due to oversubscription, and it should be considered whether minimum student numbers should be put in place below which it would not be viable to offer an elective course. This may be especially important while the programme numbers reach expected steady state.</p>	<p>We appreciate the committee's constructive comments regarding the management and ongoing development of elective course offerings. We fully recognize that electives play an important role in allowing students to personalize and broaden their learning experience, and we are committed to ensuring that the range of elective courses remains dynamic, current, and reflective of advances in pharmacy practice, pharmaceutical sciences, public health, and evolving societal needs.</p> <p>To ensure that the elective offerings remain relevant, we have established an internal review process whereby the elective curriculum will be evaluated and refreshed on a regular basis, taking into account emerging trends in the profession, national healthcare priorities, scientific developments, and feedback from students, faculty, and external stakeholders, including representatives from the Panhellenic Pharmaceutical Association, the Federation of Cooperative Pharmacists of Greece, and the wider healthcare sector.</p> <p>This underscores our responsive, needs-based curriculum design and the outcomes of the discussions with stakeholders: after extensive stakeholder consultation, we developed a <i>"Communication for Healthcare Professionals"</i> course, and—with formal Agency approval now secured—it will be offered to students beginning next semester.</p> <p>In parallel, we are establishing clear and transparent policies to manage elective course allocation in a fair and equitable manner. Where elective courses are oversubscribed, a structured and documented selection process will be applied, ensuring that students are informed in advance about course availability and selection procedures. Additionally, minimum enrollment thresholds are established for each elective course, below which it may not be viable to offer the course in a given academic year. These measures are being put in place to ensure responsible resource management, operational sustainability, and to manage student</p>	<p>Choose level of compliance:</p>

	<p>expectations in a transparent and consistent way, particularly during the early years of the programme as student numbers gradually reach steady state.</p> <p>Through these ongoing quality assurance processes, we aim to ensure that the elective programme remains academically robust, professionally relevant, and responsive to the evolving needs of the pharmacy profession and healthcare system.</p>	
<p>A clear framework should be in place for the quality assurance of external placement sites and to ensure the suitability and qualifications of supervisors at these sites.</p>	<p>Please see previous comment/answer</p>	<p>Choose level of compliance:</p>

3. Teaching staff (ESG 1.5)

We appreciate the EEC's feedback, which has prompted us to further strengthen our academic team. We are pleased that our teaching staff recruitment and development practices and the synergy between teaching and research are fully compliant, ensuring we continue to attract high-calibre faculty and integrate cutting-edge scholarship into the classroom. To address the current partial compliance in staff numbers and status, we have implemented a phased, four-year recruitment strategy—covering comprehensive field coverage, core faculty hiring, adjunct management, and ratio-based reviews—that remains flexible to enrolment fluctuations while safeguarding instructional quality. Coupled with our Research Time-Release and Sabbatical policies and capped teaching loads, this approach guarantees a realistic balance between teaching, service, and research. Research remains a top priority, and these measures ensure our faculty enjoy the support and dedicated time they need to excel in every aspect of their roles.

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
A Faculty Selection Committee oversees evaluating candidates for faculty positions. The evaluation is internal with no external (either domestic or foreign) expert review of the candidates. At least three external well qualified experts should rank the applicants for their research, teaching and administrative achievements. Pedagogical training and production of teaching materials by the candidates should be evaluated in detail.	<p>We value the Committee's comments. Under our approved university regulations, two distinct bodies operate:</p> <ul style="list-style-type: none"> • Faculty Selection Committee —composed of the Dean, Campus Director of the School, Heads of Department, Programme Coordinators, and senior faculty — is solely responsible for reviewing applications, short-listing candidates, and hiring the best candidates in strict accordance with regulations. • Ranking and Promotion Committee—chaired (non-voting) by the Vice-Rector for Faculty and Research and comprising five senior academics, including at least two external university representatives, evaluates all initial ranking and promotion cases. Regulations require the participation of a minimum of two external examiners per committee to ensure an expert and objective assessment that is in line with international standards. 	Choose level of compliance:

	This regulated separation of duties and the mandated external input safeguard fairness and upholds our academic standards.	
The number of faculty members recruited (n=7 in current application for 5 years) may need to be increased. Based on the application the student-faculty ratio may be insufficient. A significant part of teaching is given by adjunct faculty members, i.e. part time teachers. Their qualifications should be secured not to cause confusion among students if they find variable pedagogical skills or motivation among the adjunct personnel. The adjunct faculty holds a PhD which is good prerequisite for research-based teaching.	<p>We appreciate the Committee's feedback on faculty staffing and the student-faculty ratio.</p> <p>Our phased, four-year recruitment strategy—comprising comprehensive field coverage, core faculty hiring, adjunct faculty management, and ratio-based reviews—that remains both flexible to enrolment changes and ensures instructional quality. Through this four-step approach, we can adapt hiring to actual student numbers while maintaining a satisfactory student-faculty balance.</p> <p>Recruitment Strategy</p> <ol style="list-style-type: none"> 1. Comprehensive Field Coverage <ul style="list-style-type: none"> Over the next four years, we will recruit experts across all core domains—pharmacology, pharmaceuticals, clinical pharmacy, pharmaceutical analysis, pharmacognosy, medicinal chemistry, and biopharmaceutical technology—aligning our teaching and research capacity with departmental priorities. 2. Core Faculty Hiring <ul style="list-style-type: none"> Recruit at least seven full-time faculty members with international credentials, active research portfolios, and clinical expertise. All candidates will follow Nicosia's rigorous selection process—peer teaching demonstrations, research presentations, and panel interviews—to ensure consistent pedagogical excellence. 3. Adjunct Faculty Management <ul style="list-style-type: none"> Adjunct faculty must hold a PhD and demonstrate teaching excellence. They will complete an initial pedagogical workshop and receive ongoing mentorship from full-time staff. They will support introductory and specialized modules under standardized materials and close supervision. 4. Flexible Review & Ratio Monitoring 	Choose level of compliance:

	<ul style="list-style-type: none"> • Annual Reviews by Department and School QA Committees will track recruitment progress, student enrolment, and staffing ratios, enabling timely adjustments. • Our plan's flexibility is explicitly tied to the student–faculty ratio: as enrolment grows, hiring can accelerate; if numbers stabilize, recruitment can pause accordingly. <p>With a minimum of seven new permanent faculty, two lab/prep assistants, and a calibrated adjunct cohort, we project a student–faculty ratio that meets best-practice benchmarks and supports personalized learning.</p> <p>The number of staff will increase to more appropriate levels in the future; therefore, the ratio of students to total teaching staff is expected to be satisfactory based on these projected recruitment plans. Through this structured yet adaptive approach, we will strengthen our permanent faculty roster, maintain high standards among adjuncts, and ensure a consistently excellent educational experience for all students.</p>	
Efforts should be made to protect the research time of full-time members of faculty, to ensure that the expected balance of activities remains realistic (Table 11 of the Department of Health Sciences application indicates that 50% of time is to be allocated to research), especially should it not prove possible to recruit permanent and/or adjunct faculty members strictly in line with the expected schedule.	<p>We thank the Committee for underscoring the importance of safeguarding research time for our full-time faculty. Research is of utmost importance and remains our top priority. The following measures are already in place and have proven effective in securing the 50 % research allocation outlined in Table 11:</p> <ol style="list-style-type: none"> 1. Research Time-Release Policy (RTR) & Sabbaticals <ul style="list-style-type: none"> • Guaranteed Release: All full-time academic staff receive a contractual reduction in teaching and administrative duties to secure at least 50 % protected research time. • Teaching Load Caps: After full RTR approval, Professors teach a maximum of 6 hours per week, while Associate and Assistant Professors teach no more than 9 hours per week. • Sabbaticals: Faculty demonstrating strong research activity (peer-reviewed publications, grant awards) are eligible for paid sabbatical leave or further teaching reductions, fostering sustained scholarly engagement. 2. Publications Incentive Policy 	Choose level of compliance:

	<ul style="list-style-type: none"> • Scopus-Indexed Publication Rewards • Workload Credits: High-impact publications also earn additional RTR credits in subsequent semesters. <p>3. Monitoring & Back-Up Teaching</p> <ul style="list-style-type: none"> • Workload Review: The Department's Internal Quality Assurance Committee (DIQAC) reviews workloads each term to confirm balance. • Adjunct Support: If recruitment delays occur, protected research allocations are preserved, and teaching gaps are covered by adjunct appointments or teaching assistants. <p>These combined policies ensure that our faculty maintain a realistic balance between teaching, service, and research—even if hiring schedules shift—thereby fulfilling our commitment to excellence in scholarship and education.</p>	
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4. Student admission, progression, recognition and certification (ESG 1.4)

We thank the Committee for its constructive feedback. We are delighted that all sub-areas are fully compliant. Our strengths include transparent, merit-based admissions; clearly defined progression pathways with tailored academic support, equitable and consistent credit recognition; and rigorous, timely certification processes. These elements work together to ensure a fair, coherent, and high-quality experience for every student

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
While transfer of students between the UNIC Athens and the UNIC programmes will in principle be possible in the future, some complications exist around the differing admissions requirements in Greece and Cyprus. This matter will need to be addressed and fully resolved by the University in advance of student transfer becoming a real possibility, as the UNIC Athens programme is rolled out, and in reference to the Admissions policies governing Transfer Students (UNIC Athens Internal Regulation 1.2.2) and Transfer Credits (UNIC Athens Internal Regulation 2.6.3), to ensure both regulatory compliance and fairness.	<p>We thank the Committee for this observation.</p> <p>We would like to clarify that “<i>transfers between UNIC Athens and UNIC Nicosia programmes</i>” are not transfers between separate universities but between campuses of the same institution. While we fully agree that students should be able to move sequentially or concurrently across campuses, current Greek and Cypriot legal and regulatory frameworks do not yet permit such movements.</p> <p>All transfers will strictly adhere to Greek and Cyprus admissions laws and our own Internal Regulations (1.2.2 and 2.6.3). Before any transfer pathway is opened, we will resolve these legal differences and provide students with clear, step-by-step guidance on their options.</p> <p>As always, transfers from other universities will continue to follow the existing admissions and credit-recognition regulations which ensure both regulatory compliance and fairness.</p>	Choose level of compliance:

5. Learning resources and student support (ESG 1.6)

We thank the Committee for its constructive feedback on our learning resources and student support. We are pleased to confirm full compliance with ESG 1.6 and to highlight our extensive physical and digital infrastructure: state-of-the-art research and teaching laboratories that enable hands-on training and advanced student projects; a comprehensive library with around-the-clock access to e-journals, databases, and e-books; and dedicated break zones, simulation suites, and student lounges that foster informal collaboration and interprofessional learning. These facilities are complemented by a robust academic advising system—anchored by clear advisor-to-student ratios—comprehensive career services, and personal counselling, all supported by reliable IT infrastructure for both on-campus and remote learning. Our active encouragement of student societies further enhances social engagement and inclusion, ensuring that every learner has the holistic support needed to thrive academically, professionally, and personally.

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
It will be essential to ensure that the excellent student support mechanisms in place can be maintained through an adequate number of appropriate staff being available to act as academic advisors to students.	We thank the Committee for highlighting the importance of sustaining our excellent student support mechanisms. These practices—central to our programme’s success—will be maintained as an ongoing priority. Their continuity is directly tied to our student–faculty ratio and the phased faculty recruitment plan detailed above, ensuring we always have a sufficient number of dedicated academic advisors to guide and support every student.	Choose level of compliance:
<i>A note to Student Clubs and Inclusivity:</i> Student-centred learning emphasizes responsibility of students by them self to acquire knowledge, which is a good pedagogical strategy. It is possible, however, that students work hard alone and don’t have social interaction on	We thank the Committee for its thoughtful suggestion regarding student social interaction and inclusivity. UNIC Athens provides dedicated break zones and a student lounge within the campus building, available free of charge for informal gatherings, study groups, and leisure activities. Moreover, the establishment and governance of student societies is fully supported under UNIC Athens regulations. These regulations clearly outline the process by which students form independent organisations, hold democratic elections for their	Choose level of compliance:

<p>free time. The panel thus suggests the establishment of a student organisation which is independent of the School or Department but operate under the auspices of them. The organisation should be granted a club room in the Campus building (free of charge) as a break room and free time room.</p>	<p>leadership, and appoint official representatives to participate in relevant University and School bodies. This framework ensures that student voices are heard, that clubs operate autonomously yet collaboratively, and that all students have both the physical spaces and institutional structures needed to balance academic responsibilities with meaningful social engagement.</p>	
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6. Additional for doctoral programmes (ALL ESG)

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
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7. Eligibility (Joint programme) (ALL ESG)

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	For Official Use ONLY
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A. Conclusions and final remarks

Conclusions and final remarks by EEC	Actions Taken by the Institution	For Official Use ONLY
<p>The AI is a powerful method for learning and realization of student-centred teaching (and learning). The academic staff needs to guide the students efficiently to make critical decisions how to interpret the information they find via the AI. Assessment of exams may be renewed under these circumstances.</p>	<p>We thank the EEC for highlighting the potential of AI to enhance student-centred teaching and learning. We fully embrace AI tools across our MPharm programme to empower students' self-directed learning and to provide timely, personalized feedback:</p> <ul style="list-style-type: none"> • AI-Driven Learning Analytics: Our LMS uses AI to monitor individual progress, flagging areas for improvement so that students can self-regulate and advance at their own pace, without constant lecturer intervention. • Immediate Formative Feedback: Weekly online quizzes leverage AI to deliver instant, targeted feedback—helping students identify misunderstandings and adjust their study strategies in real time. <p>Recognizing that raw AI output requires critical appraisal, we guide students to develop their 21st-Century Skills—critical thinking, digital literacy, and metacognition—so they can interpret, evaluate, and responsibly integrate AI-generated information into their work. In practice, this means:</p> <ul style="list-style-type: none"> • Embedding AI-based assignments into coursework, followed by group discussions and critical analyses of AI-produced material to sharpen source-evaluation skills. • Facilitating class debates on the ethical use of AI, including proper citation, potential biases, and data privacy considerations. <p>To preserve assessment integrity and focus on higher-order competencies, we are renewing our exam formats:</p>	<p>Choose level of compliance:</p>

	<ul style="list-style-type: none"> • Authentic Assessments: Project-based tasks, case analyses, reflective writing, and oral examinations that prioritize reasoning, creativity, and application over rote recall. • Higher-Order Skill Emphasis: Assessments designed to test critical interpretation, complex problem-solving, and innovation—capabilities that AI cannot replicate. • Process-Based Evaluation: Students document each step of their AI-supported workflow, enabling educators to assess both the final product and the underlying cognitive processes. • Interactive Components: Incorporating viva-voce elements, presentations, and in-person defenses to ensure meaningful dialogue and verify individual understanding. <p>By integrating AI thoughtfully and reforming our assessment practices, we reinforce student autonomy, foster deep learning, and uphold the rigor and integrity of our programme.</p>	
The needs of an ageing population are a key focus in the programme's strategy. The graduates are expected to take responsibility for health care of their patients and customers in collaboration with other health professionals, especially medical professionals. Therefore, the common professional language is essential for pharmacists working in community or hospital pharmacies. Knowledge on ageing related diseases and changes in physiology	See Section 1	Choose level of compliance:

are very important topics to be studied. In order to work as a clinical pharmacist, the students need good knowledge of physiology and how drugs change the aberrant physiology towards normal situation. Drug adverse effects and interactions is a huge area of knowledge, where AI can give useful answers. In any case, lifelong learning must be emphasized to the students.		
The programme is well-aligned with the institutional strategy, featuring clear learning outcomes, assessment rubrics, and course-to-programme mapping. It involves stakeholders in its design, incorporates external expertise, and ensures smooth student progression with appropriate workload (ECTS), exam alignment, and structured placements. The UNIC Athens MPharm mirrors the accredited UNIC MPharm in both structure and content.	We thank the Committee for recognizing our MPharm's strong alignment with institutional strategy. Our clear learning outcomes, assessment rubrics, and course-programme mapping—developed with stakeholder and external expert input—ensure balanced workloads, coherent progression, and structured placements. As noted, the Athens programme faithfully mirrors the accredited Nicosia MPharm in both structure and content.	Choose level of compliance:
The committee acknowledges the growing demand for pharmacists in both primary and secondary care, as noted in the application. However, it encourages the University to further elaborate on the evolving roles of pharmacists in these settings—such as in-home care, medicine re-prescribing, education, correctional facilities, elderly	See Section 1	Choose level of compliance:

care, and GP practices—to better align the programme with international developments relevant to Greece.		
To ensure confidentiality, student diaries kept during the Preregistration Practice course (IMPH-520) must be handled with care, as they may contain personal reflections. Ideally, diaries should be reviewed anonymously. Similarly, submitted work must not include identifiable patient information.	See Section 1	Choose level of compliance:
High-quality external pharmacy placements and competent supervisors are essential for meaningful learning. A clear quality assurance framework should be established, with criteria such as collaboration with pharmacy partners and supervisor qualifications. Annual supervisor training is recommended, covering supervision roles, counselling methods, placement evaluations, planning, and research collaboration. Lotte Stig Nørgaard's expertise in Danish pharmacy internships may serve as a valuable resource.	See Section 1	Choose level of compliance:
The programme has a clinical pharmacy focus. To enhance understanding of drug actions and adverse effects, students would benefit from additional training in molecular biology, physiology, and pathophysiology—	See Section 1	Choose level of compliance:

possibly as electives. Emphasis should also be placed on geriatric pharmacology and diseases of major organ systems in relevant courses.		
Interprofessional education is identified both as a current strength and a future opportunity in the SWOT analysis. The current strength lies in the potential for collaboration, particularly with medicine. Structured interprofessional modules are planned, and their development should align with the CAIPE definition to fully leverage the opportunities offered by the new campus.	See Section 2	Choose level of compliance:
Elective courses should be regularly updated to reflect professional and scientific developments. Transparent processes are needed to manage course selection and ensure fairness, especially when demand exceeds capacity. Minimum enrolment thresholds should be considered to ensure course viability.	See Section 2	Choose level of compliance:
A clear quality assurance framework is needed for external placements, including criteria for site suitability and supervisor qualifications.	See Section 2	Choose level of compliance:
Faculty selection is conducted internally, without external expert review. At least three qualified external reviewers should assess	See Section 3	Choose level of compliance:

candidates' research, teaching, and administrative merits, including pedagogical training and teaching material development.		
The planned number of new faculty (n=7 over 5 years) may be insufficient given the high student–faculty ratio. A large share of teaching is delivered by adjunct faculty, whose qualifications and teaching consistency should be ensured. Holding a PhD supports research-based teaching but does not guarantee pedagogical quality.	See Section 3	Choose level of compliance:
Protecting research time for full-time faculty is essential to maintain the intended balance of duties, especially if recruitment targets are not met.	See Section 3	Choose level of compliance:
Student admissions follow Greek legislation and are detailed in the UNIC Athens Internal Regulations, with consideration for EDI principles. Academic responsibility, including awarding degrees, lies in Nicosia. Transfers between UNIC Athens and the main UNIC programme will be possible once the Athens programme is fully implemented, though differences in national admission criteria must be resolved to ensure fairness and compliance.	See Section 4	Choose level of compliance:
Administrative coordination across campuses is well planned, including staff relocation, clear responsibilities, and interim	See Section 5	Choose level of compliance:

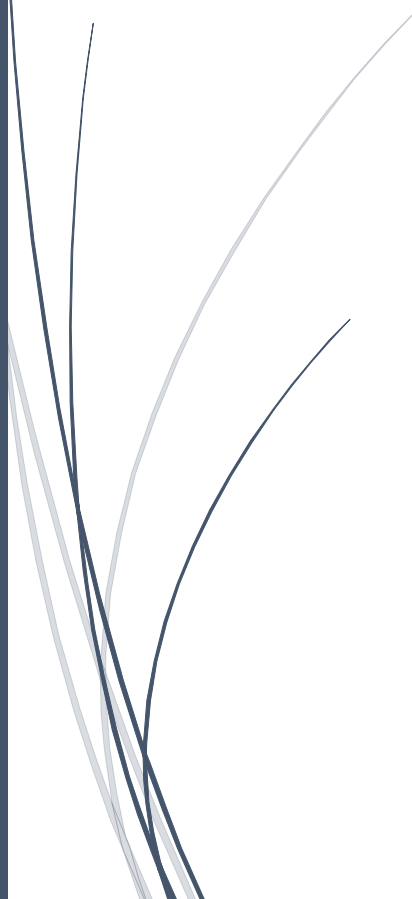
solutions. Library services will include 24/7 online access. Student attendance and progress are closely monitored, with advisor follow-up in cases of repeated absences.		
Teaching resources for the first year are in place, and each student will be assigned a personal academic advisor which is a strong support measure. The new Faculty of Life and Health Sciences building, opening in Fall 2025, will host both medical and pharmacy students, fostering interdisciplinary interaction.	See Section 5	Choose level of compliance:
To maintain high-quality student support, enough qualified staff must be available as academic advisors.	See Section 1	Choose level of compliance:
To support student wellbeing and interaction, the panel recommends the establishment of an independent student organisation with access to a dedicated campus room for social use.	See Section 5	Choose level of compliance:



Closing Remarks


We sincerely thank the External Evaluation Committee (EEC) for its thorough and constructive report. Your insights have sharpened our reflections and action plans, and we greatly value your contribution to upholding the highest standards for our programme. Overall, the evaluation confirms our full compliance with European Standards and Guidelines, highlights our key strengths—such as robust industry partnerships, a student-centred learning approach, and alignment with international benchmarks—and offers targeted recommendations and suggestions.

We remain committed to implementing these suggestions and to continuous improvement as we advance our shared mission of excellence in pharmacy education.





B. Higher Education Institution academic representatives

<i>Name</i>	<i>Position</i>	<i>Signature</i>
Prof. Kyriacos Felekkis	Dean	
Prof. Christos Petrou	Head of Department	
Click to enter Name	Click to enter Position	

Date: 18/06/2025

