Doc. 300.1.3

Feedback Report from EEC Experts

Date: Date

- **Higher Education Institution:**
  European University Cyprus
- **Town: Nicosia**
- **School/Faculty:** School of Medicine
- **Department:** Department of Medicine
- **Programme of study under evaluation Name (Duration, ECTS, Cycle)**

In Greek:
Καρδιακή Ανεπάρκεια και Καρδιομυοπάθειες (18 Μήνες/90 ECTS, M.Sc.)

In English:
Heart Failure and Cardiomyopathies (18 Months/90 ECTS, M.Sc.)

- **Language(s) of instruction: English**
- **Programme's status: New**
- **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. External Evaluation Committee (EEC)

Name	*Position*	*University*
Mariann Pavone Gyongyosi	Cardiologist	Vienna
Theodora Benedek	Cardiologist	Tirgu Mures
Maria Phiniotou	Student	University of Cyprus
Pieter A. Doevendans	Cardiologist	Utrecht The Netherlands
Name	Position	University
Name	Position	University

B. Guidelines on content and structure of the report

The EEC based on the external evaluation report (Doc.300.1.1 or 300.1.1/2 or 300.1.1/3 or 300.1.1/4) and the Higher Education Institution's response (Doc.300.1.2), must justify whether actions have been taken in improving the quality of the programme of study in each assessment area.

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

EEC's final recommendations and comments on the HEI's response

Areas of improvement and recommendations **by EEC**	Actions Taken by the Institution	EEC's final recommendations and comments on the HEI's response
The students are not very much aware on the career path from graduating to PhD. It is not clear for the students and for the administrative staff whether graduates of the medical school may enter a PhD programme even in the absence of a MSc degree. This information should be better disseminated in the academic community and made public. Otherwise, there may be a risk that some students withdraw from a MSc program when they realize that they can enter a PhD program directly after medical school.	While many of our MD graduates have successfully entered PhD programs directly after graduation, we acknowledge that some MD students present at the site visit may not have been fully aware of this pathway. This information is included in our comprehensive student orientation at the start of the MD program. However, to ensure broader awareness, we will further highlight this option during the annual CAMESM scientific meeting, specifically in the career path workshops where students are informed about residency pathways. Additionally, the admission criteria for all programs, including MSc and PhD, are clearly outlined on the EUC website. As per the concern of students leaving the MSc program to join a PhD program, please note that the MSc program is designed to provide an in-depth understanding of heart failure and cardiomyopathies, focusing on enhancing clinical practice through improved diagnosis and management. In contrast, the PhD program is research-oriented, equipping graduates with the skills needed to conduct	accept

	independent research. While we recognize the possibility that some students may reconsider their enrollment in the MSc program upon learning they can directly pursue a PhD, we believe that each program serves distinct educational and professional goals, and as such, the risk is minimal. None-the-less, as noted above we will ensure that students are well-informed about their options so they can make the best decision based on their career aspirations.	
There is some contradictory information regarding the content of some courses. For instance, device-based therapy for valvular heart diseases appears once in the course dedicated to chronic heart failure and in another place in the course of advanced heart failure. Keeping this in the chronic heart failure chapter would be more accurate, in line with the current definition of these two entities (chronic and advanced heart failure)	In agreement with the EEC's recommendation, we have removed content related to device-based therapy for valvular heart diseases from the course on "Advanced Heart Failure" (HFC610). This content remains only in the course "Chronic Heart Failure" (HFC600) as suggested. Please find attached in Appendix I the revised Syllabus of the course. We have highlighted with yellow the changes made for the convenience of the EEC.	accept
Some students may need additional courses or support, given their different background.	While we anticipate that the initial cohorts of students will primarily consist of cardiologists, we recognize the importance of accommodating diverse academic backgrounds. By considering the varying abilities, needs, and opportunities of students, we strive to create an inclusive and adaptive learning environment that fosters	accept

	success for all. To achieve this, we employ differentiated instruction, personalized learning paths, and technological support to ensure that educational activities remain accessible, engaging, and appropriately challenging. Discussions with course instructors will provide additional academic support, reinforcing key concepts. Additionally, our curriculum emphasizes peer-to-peer learning through case studies, where students from different backgrounds collaborate to analyze and present cases. This approach allows for knowledge-sharing across disciplines and fosters a supportive learning environment. For example, to further enrich students' understanding, experts from foundational sciences—such as geneticists discussing genetics and cardiomyopathies, and biochemists covering laboratory methods used in cardiomyopathy diagnosis—will deliver specialized lectures. These measures collectively ensure that students, regardless of their background, receive the necessary support to excel in the program.	

2. Student - centred learning, teaching and assessment
(*ESG 1.3*)

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The digital or e-learning programs should be defined more clearly and in more detail.	The Heart Failure and Cardiomyopathies MSc program is a conventional, face-to-face program. However, we recognize the importance of integrating digital skills into the curriculum to enhance students' overall competencies. These skills are embedded throughout various educational activities to ensure students are well-equipped for academic, professional, and personal success. To achieve this, we incorporate technology into learning experiences, encourage collaborative projects, and utilize real-world digital tools. Our approach focuses on four key areas: • **Digital Literacy**: Instructors integrate digital tools, helping students develop essential technology skills. Activities include document creation, online research, and collaborative work on digital platforms. • **Learning Management Systems (LMS)**: Platforms like Blackboard allow students to access course materials,	accept

	submit assignments, participate in discussions, and receive feedback online, further strengthening their digital competencies. • **Online Research Skills**: Students are trained to locate, evaluate, and synthesize information from credible online sources, fostering digital literacy, critical thinking, and effective information management. • **Innovative Teaching Methods**: The curriculum incorporates case studies, simulations, and problem-solving exercises that encourage critical thinking. Additionally, all MSc students will have full access to EUC's support services and resources as presented during the site-visit, ensuring they receive the necessary guidance to develop their digital skills effectively.	
The University promotes studying abroad and student exchange programs, but the necessary ECT can only be achieved during the MSC courses. Similar courses are not accepted, and their achievements expressed in learning programs are not accepted as a learning	We thank the EEC for the remark that exchange programs, such as ERASMUS, are not feasible for this MSc program. However, the faculty has an extensive international network that students can leverage to enrich their academic experience and research opportunities abroad.	accept

achievement in the MSC program.	While direct credit transfer from similar courses is not currently accepted within the MSc program, students interested in gaining international exposure can explore collaborative research projects, short-term academic visits, and networking opportunities through our faculty's global partnerships. These avenues provide valuable learning experiences beyond the formal curriculum, further enhancing students' professional and academic development.	
MSC per definition is Master of Science. The MSC course applicants may choose whether they write a dissertation or just participate in MSC courses in the 3rd Semester. However, in the latter case, it should at least be required to a) present a scientific proposal, or 2) a written or personal exam to prove the acquired knowledge, if they do not write a dissertation, to prove the scientific skill.	We agree with the EEC on the importance of ensuring that MSc graduates demonstrate the scientific skills associated with completing a Master's thesis. To achieve this, the program includes various assignments designed to assess students' scientific reasoning, writing, and presentation abilities. Students who do not opt for a thesis will be required to complete assignments that test their ability to critically engage with scientific literature. Specifically, they will: • **Conduct Literature Reviews**: Students will identify course-related topics, perform literature searches, synthesize information, properly cite sources, and critically evaluate existing research. • **Oral Presentations**: In addition to written literature reviews,	accept

	students will present their findings in class, demonstrating their ability to articulate scientific concepts and engage in scholarly discussion. • **Case Study Analysis**: Students will also complete case studies in both written and oral formats, further reinforcing their analytical and scientific communication skills. While these assignments are more concise than a full thesis, they provide sufficient opportunities for students to develop and showcase their scientific competencies, ensuring they meet the academic standards of the MSc program.	
The student assessment should be adjusted to the to the European Qualifications Framework (EQF)	The student assessments in the Cardiomyopathies MSc program are designed to align with the European Qualifications Framework (EQF), ensuring that they appropriately evaluate knowledge, skills, and competencies at the required level. • **Knowledge Acquisition**: Written assessments are carefully structured to align with the learning outcomes of each course, ensuring students demonstrate a solid understanding of key concepts.	The institution's approach is reflected in the course outlines.

	• **Skills and Competency Development**: Assignments are designed to assess students' ability to apply their knowledge, critically analyze scientific information, and develop relevant professional competencies. • **Constructive Feedback**: Expert faculty provide timely and structured feedback, guiding students in refining their scientific skills, deepening their understanding, and improving their academic performance. This structured approach ensures that students meet the intended learning outcomes in accordance with EQF requirements, equipping them with the necessary expertise to advance in their academic and professional careers.	

3. Teaching staff

(ESG 1.5)

EEC's final recommendations and comments on the HEI's response

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Future programme needs an active fulltime professor in the HF field.	The MSc program is currently supported by four full-time faculty members who are active clinicians in the field: three cardiologists—Dr. K. Lampropoulos, Dr. N. Karpettas, and Dr. V. Polydorou—and one cardiothoracic surgeon, Dr. G. Georgiou. Among them, three faculty members—Dr. Lampropoulos, Dr. Karpettas, and Dr. Georgiou—are actively involved in heart failure. Notably, Dr. Lampropoulos, an Associate Professor eligible for promotion to the rank of Professor, has significant expertise in heart failure. He is a member of the European Society of Cardiology (ESC) Working Group on Heart Failure, the President-Elect of the Valvular Heart Disease section of the Hellenic Cardiology Society (HSC), and a member of the Working Group on European Valvular Heart Disease of both the ESC and HSC.	When will dr Lampropoulos be promoted to a full professorship?
The faculty (Visiting experts) could be chosen from all over Europe to support the international character of the course. With the current	We fully agree with the EEC's recommendation, and as discussed during the site visit, visiting experts will be included from across Europe to further	Accept

teachers and anticipated post grad students there is hardly a reason to provide the education in English.	trengthen the program's international character. The core faculty and coordination team are actively engaged in the European Society of Cardiology (ESC) and its Heart Failure Working Group, fostering strong collaborations across Europe. Additionally, faculty from our School of Medicine - Frankfurt Branch will be invited to contribute to the MSc program, further enriching its academic offerings. To expand research collaborations and enhance international engagement, we will also explore opportunities to involve experts through networks such as the EU-CARDIOPROTECTION COST Action (CA16225). Lastly, we would like to emphasize that all programs within the School of Medicine, including this MSc program, are conducted in English.	

4. Student admission, progression, recognition and certification *(ESG 1.4)*

EEC's final recommendations and comments on the HEI's response

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During the EEC visit, the course presentation involved patient case reports. However, non-medical students without previous clinical practice will be unable to present cases. In such cases virtual patients may be reported, or specific additional explanations might be required, eg. basic molecular mechanisms on cardiomyopathies, required from the biochemistry student, or mechanisms of artificial valves for improvement of valve-disorder related heart insufficiency may be required from the biotechnology student.	We acknowledge the EEC's concern that non-medical students may face challenges in presenting patient case reports. However, as discussed during the site visit and mentioned above, we view this as an opportunity for these students to explore disease mechanisms relevant to their specific academic backgrounds. For example, biochemistry students may focus on the molecular basis of cardiomyopathies, while biotechnology students could examine the mechanisms of artificial valves and their role in managing valve-related heart insufficiency. The Medical School follows a student-centered approach, and instructors will provide guidance tailored to non-medical students to ensure they can effectively engage with case-based assignments. Additionally, we will encourage interdisciplinary group presentations, allowing students from diverse fields to collaborate. This approach will foster peer-to-peer learning, improve communication and teamwork skills, and promote interdisciplinary dialogue.	The institution responds that its structured curriculum can mitigate this issue. No specific measures to mitigate this are presented. Request clarification on what exactly is meant with mechanisms of artificial valves.

	Lastly, we anticipate that the initial cohorts of students will primarily consist of cardiologists, further supporting a balanced and integrative learning environment.	

5. Learning resources and student support
(*ESG 1.6)*

EEC's final recommendations and comments on the HEI's response

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The diverse background of students, even though highly appreciated regarding trends for the need of trained non-physician healthcare personnel, has the drawback of creating misbalanced learning outcomes for students with the only provision towards its resolution being the different types of case-reports assigned to different students and the assurance that final examinations are the same for all.	We acknowledge the EEC's concern that the diverse backgrounds of students may pose challenges in aligning learning outcomes and assessments. However, as previously discussed, we have implemented structured approaches to address these differences, including facilitated case discussions and graded assignments tailored to students' backgrounds. We would like to reassure the committee that all final examinations will be identical for all students, ensuring a standardized assessment process. The exams will be carefully designed to evaluate the specific learning outcomes of each course, ensuring fairness and academic integrity across the program.	accept
Recommendations for this aspect are for a student feedback methodology to be set in place throughout the semester to address areas of discrepancy that may arise followed by the appropriate support through guidance in terms of extra literature resources and opportunities to have open	The School of Medicine, including this program, actively implements student feedback methodologies throughout the semester. Faculty members are encouraged to conduct midterm surveys within their courses to identify any gaps in student learning, allowing for timely intervention.	accept

conversations with the teaching staff in terms of course requirements and the curriculum.	Furthermore, courses are designed with multiple assessment points, enabling faculty to closely monitor student performance and address any emerging issues. Based on this feedback, faculty can provide additional resources, such as extra literature, and offer opportunities for open discussions with students regarding course requirements and the curriculum.	
Implement peer-to-peer teaching especially for practical aspects of the course so that students with no prior knowledge of clinical practices that are interested in exploring the field can be encouraged. Similarly, students that are not well versed in laboratory techniques can be guided by their peers with the potential of future interdisciplinary collaborations in the clinical, academic or research field.	We agree with the EEC that peer-to-peer teaching can be a highly effective tool for fostering cross-learning among students. As previously mentioned, the course will engage students in peer-group case studies, where students from different backgrounds (when applicable) will collaborate to address various aspects of a case. For instance, a medical school graduate may provide insights into the pathophysiology and treatment of myocarditis, while a biology graduate could explain the biological assays used for diagnosis and the role of genetic mutations in disease etiology. Each case study will be tackled as a team, with each member responsible for teaching their peers about areas they are less familiar with (e.g., clinical, laboratory, genetics). This approach will ensure that all students gain a comprehensive understanding of the case from different perspectives, promoting	accept

	interdisciplinary learning and collaboration.	
Provide insight in research opportunities throughout the programme	Throughout the program, students will gain valuable insight into available research opportunities through various ongoing activities. To promote interdisciplinary dialogue, the School regularly hosts ***Insight Lectures***—seminars featuring external experts. These lectures provide both graduate and medical students, as well as the wider scientific community, with the opportunity to learn from and engage in discussions with world-leading experts on a range of topics. The goal is to create a rich, transdisciplinary forum that inspires and engages participants in the ever-evolving scientific landscape. In addition to these lectures, the School organizes regular ***Research Meetings***, where both students and faculty present their ongoing research, alongside ***Journal Club*** meetings. These gatherings aim to foster communities of practice that enhance critical thinking, analysis, reasoning, evaluation, communication, and teamwork—all essential skills for scientific inquiry. Given that the School offers three PhD programs in Medical Sciences, Cancer Biology and Clinical Oncology, and Public Health, MSc students in the Heart Failure and Cardiomyopathies program will	accept

	have ample opportunities to interact with PhD candidates, as well as faculty, further broadening their research exposure. For example, one current PhD project focuses on *Transcatheter Aortic Valve Implantation in Heart Failure Patients*, providing a direct research link to the MSc program. We believe that encouraging MSc students to actively participate in these research activities will significantly enhance their understanding of the research opportunities available throughout their program.	

6. Additional for doctoral programmes

(ALL ESG)

EEC's final recommendations and comments on the HEI's response

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7. Eligibility (Joint programmes)

(ALL ESG)

EEC's final recommendations and comments on the HEI's response

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	EEC's final recommendations and comments on the HEI's response

C. Conclusions and final remarks

The EEC must provide final conclusions and remarks, with emphasis on the correspondence with the EQF.

EEC's final conclusions and remarks

Areas of improvement and recommendations by EEC	Actions Taken by the Institution	EEC's final recommendations and comments on the HEI's response

We have two remaining questions:
related to statement op page 13:
'For example, biochemistry students may focus on the molecular basis of cardiomyopathies, while biotechnology students could examine the mechanisms of artificial valves and their role in managing valve-related heart insufficiency.'
It is not clear what is meant by the mechanisms of artificial valves. Please clarify.
The EEC members had no other comments, remarks or recommendations, and accepts the HEI's responses provided.
The doc (pg 12) mentions that dr Lampropoulos is eligible for a nomination to full prof. What is the expected time frame?

D. Signatures of the EEC

Name	*Signature*
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Theodora Benedek	
Pieter Doevendans	
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Date: 25 april 2025

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