ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ   HELLENIC REPUBLIC

Α Δ Ι Π   **Η Q A**

ΑΡΧΗ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ   HELLENIC QUALITY ASSURANCE

ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΣΤΗΝ ΑΝΩΤΑΤΗ ΕΚΠΑΙΔΕΥΣΗ   AND ACCREDITATION AGENCY

Accreditation Report

for the Internal Quality Assurance System

(IQAS)

Institution Name: **University of Peloponnese**

Date: **04 November, 2018**

Report of the Panel appointed by the HQA to undertake the review of the
Internal Quality Assurance System (IQAS) of the
UNIVERSITY of PELOPONNESE
for the purposes of granting accreditation

PART A: BACKGROUND AND CONTEXT OF THE REVIEW

I. The Accreditation Panel

The Panel responsible for the Accreditation Review of the Internal Quality Assurance System (IQAS) of the Higher Education Institution named: **University of Peloponnese** comprised the following five (5) members, drawn from the HQA Register, in accordance with the Law 4009/2011:

1. Prof. emeritus Pandelis Ipsilandis (Chair)
   University of Applied Sciences of Thessaly, Larissa, Greece

2. Prof. emeritus Christos Christopoulos
   University of Nottingham, Nottingham, United Kingdom

3. Prof. George Frantziskonis
   University of Arizona, Tuscon, Arizona, USA

4. Prof. Constantine Passaris
   University of New Brunswick, Fredericton, New Brunswick, Canada

5. Dr. Thomas Skouteris, Associate Professor
   The American University in Cairo, Cairo, Egypt

II.   Review Procedure and Documentation

The Accreditation Panel (hereinafter "the Panel") visited the University of Peloponnese (UoP) on two consecutive days from October 31st to November 1st, and worked on preparing its Accreditation Report (Report hereinafter) through Saturday, 3 November 2018. The Panel visited the UoP campus in Tripolis where the Rectorate of the University and the Central Administration is located. UoP has additional campuses in Corinth, Kalamata, Nafplion and Sparti. Deans of Schools Members of the Internal Evaluation Groups (IEGs), faculty, students and administrative staff from the other campuses, attended the meetings and interacted with the Panel.

Specifically, the Panel had the opportunity to meet, visit and interact with the Rector and the Deputy Rectors, the Deans of Schools (Faculties), the Heads of Departments, the Chair and Members of the Quality Assurance Unit (QAU - MODIP), Members of the Internal Evaluation Groups (IEG) and faculty members. The meetings included extensive discussions, and question and answer sessions. In addition, the Accreditation Panel also had the opportunity to meet and talk with undergraduate, graduate, doctoral students, postdoctoral fellows, alumni, heads of administrative units, and external partners and stakeholders.

The Panel received the Self Evaluation Report (SER), along with supplementary documentation from the University, as well as other relevant information from the HQA Information System well before the visit. Requests from the Panel regarding the provision of additional information during the visit, were handled professionally and efficiently by the concerned parties at the University.

All participants during the site-visit were very cooperative and willing to participate in discussion in an open and frank way. The Panel was impressed by the positive welcome and overall environment at UoP, the organization of the visit, and the commitment and dedication of the UoP community to continuous quality enhancement. The Panel would like to express sincere thanks for the cooperation of all participants and their participation in productive discussions during the visit.

The Accreditation Report of the Internal Quality Assurance System (IQAS) is based on information shared during the on-site visit, discussions with UoP representatives, as well as information contained in the SER and other documents submitted during the visit.

III.   Institution Profile

The University of Peloponnese is a relatively new university established in 2000. It started accepting students in 2002. UoP operates as a regional university in the five Capitals of Prefectures of the Peloponnese Region (Tripolis, Corinth, Nafplion, Sparti, Kalamata). Academically, UoP is organized in 5 Schools, 9 academic departments, comprising 141 members of academic staff, 47 members of technical and teaching support staff, and 81 administrative staff. The University offers 9 undergraduate programmes to 5,800 students, 22 master-level programmes to 4,900 students, and Ph.D. studies to 470 doctoral students.

Being in the second decade of its life, development of the University was slowed down by the economic crisis and reprioritization of national policies. Overall, the university is understaffed in both academic (≈16 academics/department compared to a national average of 26) and administrative staff, particularly considering its geographical dispersion. Despite being understaffed, student satisfaction across all study levels seemed to be high.

UoP is characterized by high diversion of scientific fields among a small number of departments, which has resulted in formation of Schools based mainly on co-location of departments rather than strong academic synergies. Nonetheless, the distinct academic profile of the departments, especially those that are closer linked with the cultural heritage of the region is an asset for the University. The University is well accepted by the local communities, which supported its development providing space and buildings to house its operations. Thus, the University has developed links with the regional communities, which see the university as playing a significant role in "exploitation" of the rich cultural heritage and other unique features of the Peloponnese region, contributing to economic development, and are willing to keep supporting and cooperating with the University.

The geographical dispersion of UoP leads to indigenous weaknesses in both the efficiency and effectiveness of its operations (lack of economies of scale, no-standardization of student services, etc.) and the growth of academic synergies among faculty. The development and implementation of the Internal Quality Assurance System (IQAS) is viewed by all internal stakeholders as a tool that will help the University to improve its operations.

Principle 1: Institution Policy for Quality Assurance

INSTITUTIONS SHOULD APPLY A QUALITY ASSURANCE POLICY AS PART OF THEIR STRATEGIC MANAGEMENT. THIS POLICY SHOULD BE DEVELOPED AND ADJUSTED ACCORDING TO THE INSTITUTIONS' AREAS OF ACTIVITY. IT SHOULD ALSO BE MADE PUBLIC AND IMPLEMENTED BY ALL PARTIES INVOLVED.

The quality assurance policy is the guiding document which sets the operating principles of the Internal Quality Assurance System (IQAS), the principles for the continuous improvement of the Institution, as well as the Institution's obligation for public accountability. It supports the development of quality culture, according to which, all internal stakeholders assume responsibility for quality and engage in quality assurance. This policy has a formal status and is publicly available.

The policy for quality is implemented through:
- *the commitment for compliance with the laws and regulations that govern the Institution;*
- *the establishment, review, redesign and redefinition of quality assurance objectives, that are fully in line with the institutional strategy.*

This policy mainly supports:
- *the organisation of the internal quality assurance system;*
- *the Institution's leadership, departments and other organisational units, individual staff members and students to take on their responsibilities in quality assurance;*
- *the integrity of academic principles and ethics, guarding against discriminations, and encouragement of external stakeholders to be involved in quality assurance;*
- *the continuous improvement of learning and teaching, research and innovation;*
- *the quality assurance of the programmes and their alignment with the relevant HQA Standards;*
- *the effective organisation of services and the development and maintenance of infrastructure;*
- *the allocation and effective management of the necessary resources for the operation of the Institution;*
- *the development and rational allocation of human resources.*

The way in which this policy is designed, approved, implemented, monitored and revised constitutes one of the processes of the internal quality assurance system.

Institution compliance

UoP has established a Quality Assurance policy at the university level, which has been publicized within the academic community and is publicly available at the University's website. The QA policy of UoP was developed by the rectorate in cooperation with the Strategic Planning committee, Faculty Deans and Department Heads and it was formally approved by the University's Senate.

The University QA policy is very clear showing:
- Strong commitment to continuous improvement of the quality in teaching and research through periodic evaluations and continuous adaptations following relevant developments at EU and international level.

- Emphasis on information sharing, interaction and active involvement with internal and external stakeholders.
- Development of a system that improves the quality of its operations and services and the development of a quality culture within the University.

The Panel observed certain disparities between the goals of the QA policy and the "Plan of Actions and Goals". The latter is geared towards administrative improvements (7 actions) that also marginally affect quality in teaching and research, but actions directly relating to improvements in teaching (1 action) and research (3 actions) are limited.

Actions related to other areas of the QA policy (e.g. publicity of information, active involvement of stakeholders, etc.) have not received sufficient attention at least with respect to being included in the action plan.

Discussions with the senior management, QAU members, Deans, Department heads and faculty revealed that during this first stage of implementation, attention and efforts were focused on other areas of the IQAS, mainly in the restructuring of study programmes, which required a massive effort. The Panel expects that these shortcomings will be rectified as part of the Plan-Do-Check-Act cycle of the development of the IQAS.

Panel judgement

Principle 1: Institution policy for Quality Assurance	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

Panel Recommendations

- Review the "Plan of Actions and Goals" to reflect the core priorities of the University Quality Policy

Principle 2: Provision and Management of the Necessary Resources

INSTITUTIONS SHOULD ENSURE APPROPRIATE FUNDING FOR LEARNING AND TEACHING ACTIVITIES, RESEARCH, AND ACADEMIC ACTIVITIES IN GENERAL. RELEVANT REGULATIONS SHOULD BE IN PLACE TO ASSURE THAT ADEQUATE INFRASTRUCTURE AND SERVICES FOR TEACHING AND RESEARCH ARE AVAILABLE AND READILY ACCESSIBLE (E.G. CLASSROOMS, LABORATORIES, LIBRAIRIES, IT INFRASRTUCTURE, PROVISION OF FREE MEALS, DORMITORIES, CAREER GUIDANCE AND SOCIAL WELFARE SERVICES, ETC.).

Funding
The Institution ensures adequate funding to cover not only the overhead and operational costs (regular budget and public investment budget) but also costs related to research, innovation and development (Special Account for Research Funds, Property Development and Management Company). The financial planning and the operation of an effective financial management system constitute necessary tools for the full exploitation of the resources.

Infrastructure
Based on the requirements and needs arising during its operation, the Institution has determined ways to define, allocate and maintain all the necessary resources to ensure its smooth and proper functioning, i.e. teaching, research and auxiliary facilities, equipment and software, support facilities (cleaning, transportation, communication) etc. The scope of the IQAS should include a suitable managing and monitoring system to safeguard the infrastructure. Compliance to the internal regulations is also necessary.

Working environment
The Institution ensures -as far as possible- that the working environment has a positive effect on the performance of all members of the academic community (students and staff). Factors that are taken into consideration towards the creation of such a favorable environment are, among others, the sanitary facilities, the lighting/heating/ventilation system, the cleanliness and the overall appearance of the premises, etc. The scope of the IQAS should include an appropriate managing and monitoring system to promote a favorable working environment and to ensure compliance with the existing provisions.

Human resources
The Institution and the academic units are responsible for the human resources development.
The subject areas, as well as the competences and tasks of the staff members are defined by the corresponding job descriptions that are established within the operation scope of each academic or administrative unit. These posts are filled following the requirements set by the law, on the basis of transparent, fair and published processes. The continuous training and evaluation of the staff is considered necessary for the enhancement of the performance, which is recorded and monitored as provided in the context of the IQAS.
The Institution should acknowledge and provide the necessary resources for the implementation of the IQAS, its enhancement and the provision of services that assist the satisfaction of the quality assurance requirements. Moreover, the Institution (Quality Assurance Unit-QAU) should properly organise the administrative structure and staffing of the IQAS, with a clear allocation of competences and tasks to its staff members.

Institution compliance

Funding

University funds come largely from State funding for HEIs, and are primarily used to cover operating expenses. Other funds, mainly postgraduate student fees, and funding derived from research and development projects cover the operating budget for each postgraduate program or research projects but a certain percentage is withheld as overhead and is used by the university as a complement to state

funding. Currently, 10% of the income from research programs is being withheld as overhead and added to the University budget. Additional state funding for infrastructure is provided from the Public Investment Program (PDE).

The University has established a transparent process to allocate the total available funds to different activities. After accounting for inelastic expenses, funds are allocated to departments based on the number of students and faculty. The departments allocate those funds according to their needs. The whole process is monitored and controlled through bi-monthly budget reviews by the administration finance and accounting department and reallocation of budget takes place when needed in order to increase the overall utilization of funds.

Funds from other sources are used to support administrative personnel needs (mainly via the Special Account of Research Funds) and other activities including support of research activities. Funds for research support are allocated along three main actions: a) support of untenured faculty (first 2 years), b) support of tenured faculty and c) support of post-doctoral researchers. A clear framework for the allocation of funds has been established by means of a Senate decision.

During the meetings with the University Rectorate, the QA unit, the Internal Evaluation Groups, Deans and Department Heads and the Supervisors of the Finance and Accounting Department (F&A) and the Special Account for Research Funds (ELKE), the Panel confirmed that all internal stakeholders are aware of the relevant processes and no complaints or other concerns were raised.

The Panel notes the lack of financial support of doctoral students not assigned to specific research projects and the limited funding for supporting faculty and post-doctoral researchers, and suggests that the effectiveness of the current allocation of funds is continuously monitored and assessed.

Infrastructure

The Panel finds that IQAS has clear provisions for managing and monitoring the quality of the infrastructure and for their use in an efficient manner. It allocates responsibilities at different sites and all involved parties are aware of the relevant provisions. However, since the operation of the IQAS is still at its initial stages, it has not been possible for the Panel to collect any specific evidence on its efficiency and impact. For example, no data were readily available on the status of University premises in all cities regarding access by persons with special needs.

Working Conditions

University premises are spread out in five cities mostly in premises that were not initially designed to host university activities. Consequently, a large part of the operating budget is consumed in maintaining and improving the facilities. During the interviews with internal stakeholders, no complaints were raised regarding the conditions of premises and equipment. However, several issues that affect student life and learning environment should be addressed:

- Students from the Nursing Department in Sparti conduct part of their clinical training at the Tripoli hospital. It appears, as reported to the Panel, that students often travel at their own cost between the two cities, sometimes in uncomfortable conditions. There are plans to move the department to Tripoli, but until this takes place, the University should address these issues.
- Provision of meals to entitled students (limited number – according to family income) has raised concerns among students due to the fact that some of those entitled to the service appear to use it sporadically thus depriving the benefit from other students. Although, the University is aware of the problem and has established criteria to exclude those students who do not use the service, a review and evaluation of the whole process is needed to ensure maximization of benefits to students.
- The University is also aware of the difficulties in finding accommodation for students. Obviously, the dispersion of the student community limits certain options (e.g. building dormitories) and efforts were made in the past to explore alternatives, but student housing remains inadequate.

Perhaps the only option is state subsidies to low-income students, but this should come as a result of analysis of relevant data, including students' needs and preferences.

- The service of Ombudsperson (Synigoros foititi) exists but it is not widely known to students and is not sufficiently publicized.

The Panel commends the University for providing services such as free psychological support to students, a Liaison Office, and an International Office, despite the difficulties arising from the geographical dispersion.

<u>Human resources</u>

UoP is a relatively new university and staff numbers are rather low compared to other Universities in the country. The overall ratio of undergraduate students to Faculty is approximately 33/1, but the ratio becomes substantially higher (approximately 50/1) once postgraduate student numbers are added. The relative young median age of the Faculty, along with their international experience, provides a positive dynamic for the University's future. The number of permanent administrative staff is low. Funds from externally funded research and development overhead are currently used to hire administrative staff. Restructuring of administrative services is a Strategic Plan priority, yet the process of ensuring a more efficient administration (one that better utilizes the limited resources) is not sharply focused. The Panel emphasizes the importance of restructuring based on workload data (e.g., identification of labor-intensive tasks) and needs for contracted staff with specialized skills in certain areas (e.g., in IT).

Professional development of academic and administrative staff is mainly supported by European Funds (e.g., Erasmus+) and to a lesser extent from the operational budget.

Panel judgement

Principle 2: Provision & Management of the Necessary Resources	
2.1 Funding	
Fully compliant	
Substantially compliant	X
Partially compliant	
Non-compliant	
2.2 Infrastructure	
Fully compliant	
Substantially compliant	X
Partially compliant	
Non-compliant	
2.3 Working Environment	
Fully compliant	
Substantially compliant	
Partially compliant	X
Non-compliant	
2.4 Human Resources	
Fully compliant	
Substantially compliant	
Partially compliant	X
Non-compliant	

Principle 2: Provision & Management of the Necessary Resources (overall)	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

Panel Recommendations

- The effectiveness of the current allocation of funds is continuously monitored and assessed.
- The University reviews its allocation of human resources in administration, based on workload data.
- While the Panel recognizes the budget restrictions regarding student support services (such as housing, provision of meals, and transport), the current situation is unsatisfactory and the University should explore alternatives.

Principle 3: Establishing Goals for Quality Assurance

INSTITUTIONS SHOULD HAVE CLEAR AND EXPLICIT GOALS REGARDING THE ASSURANCE AND CONTINUOUS UPGRADE OF THE QUALITY OF THE OFFERED PROGRAMMES, THE RESEARCH AND INNOVATION ACTIVITIES, AS WELL AS THE SCIENTIFIC AND ADMINISTRATIVE SERVICES. THESE GOALS MAY BE QUALITATIVE OR QUANTITATIVE AND REFLECT THE INSTITUTIONAL STRATEGY.

The Institution's strategy on quality assurance should be translated into time-specific, qualitative and quantitative goals which are regularly monitored, measured and reviewed in the context of the IQAS operation, and following an appropriate procedure.

Examples of quality goals:
- *rise of the average annual graduation rate of the Institution's Undergraduate Programmes to x%;*
- *upgrade of the learning environment through the introduction of digital applications on ……….;*
- *improvement of the ratio of scientific publications to teaching staff members to …….;*
- *rise of the total research funding to y%*

The goals are accompanied by a specific action plan for their achievement, and entail the participation of all stakeholders.

Institution compliance

In the context of Principle 3, the Panel considered a range of documents at its disposal, including the Strategic Plan, the Accreditation Proposal, the Progress Report of QAU, and the summary of the Institutional Presentation to the Accreditation Committee. The Panel requested additional documentation, such as the Strategic Plans of the Departments. The Panel was able to discuss and evaluate the information contained in the above documents with University authorities and, in particular, the members of QAU and the senior administration. The Panel found that these conversations were productive, candid, informative, and conducted in a spirit of good faith and cooperation.

On the basis of the above, the Panel finds that:

- The 2016 institutional evaluation was an important catalyst for the intensification and integration of goal-setting processes on various levels of the University.

- A culture of goal-setting and strategic planning is becoming (slowly yet steadily) part of everyday institutional life.

- The directionality of goal-setting processes is both upwards (from the Departments to the senior management) and downwards (from the senior management to the Departments), with emphasis on downwards processes.

- QAU performs a crucial role as a conduit for the transmission and communication of goal-setting.

- Policy documents stipulate goals on all three areas of evaluation (i.e., education and study programs; research and innovation; administration and resources). Primary emphasis appears to be placed on the third area (administration). The second area (research and innovation) appears to be the least represented in terms of strategic goals.

- Goals are generally in line with institutional strategy, as expressed in the Strategic Plan.

- Departmental Strategic Plans do contain some (and in some cases extensive) quantitative and qualitative goals that are paired well with KPIs.

- By contrast, the University Strategic Plan and other University-wide policy documents that were at the Panel's disposal during the site visit, do not manifest an equally strong commitment to quantitative goals, to linkages with KPIs, and clear timelines for their achievement.
- Similarly, the University Strategic Plan could better pair quantitative goals with KPIs. Emphasis is currently being placed on aspirational expressions such as 'improving', 'developing', 'ascertaining', and so on, that sometimes lack the specificity required for measurement.
- The Panel has observed some discrepancy between Departmental goals and University goals. For example, goals articulated by several Departments are not represented in the University Strategic Plan.
- The above render the pairing, monitoring, and review of progress harder (and in some cases impossible) to measure at the University level. At the Department level, conversely, progress is easier to measure and assess.
- The Panel was informed that an update of the University Strategic Plan had been in progress but because of other priorities in the implementation of IQAS (e.g. preparing new programmes for accreditation), could not be completed on time for the site visit. The panel regrets that the ex post updated version of the Strategic Plan cannot be formally considered for the current accreditation, but as a live document which is often updated should form a base point for the next accreditation review of UoP.

Panel judgement

Principle 3: Establishing Goals for Quality Assurance	
3.1 Study Programmes/ education activities	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	
3.2 Research & Innovation	
Fully compliant	
Substantially compliant	
Partially compliant	**X**
Non-compliant	
3.3 Administration (funding, human resources, infrastructure management)	
Fully compliant	
Substantially compliant	
Partially compliant	**X**
Non-compliant	
3.4 Resources (funding, human resources, infrastructure)	
Fully compliant	
Substantially compliant	
Partially compliant	**X**
Non-compliant	

Principle 3: Establishing Goals for Quality Assurance

(overall)	
Fully compliant	
Substantially compliant	
Partially compliant	**X**
Non-compliant	

Panel Recommendations

- A significant amount of progress has been made in the quantitative and qualitative goal-setting culture of the University, especially at the Department level. The Panel applauds this effort and encourages the continuation and intensification of the process.

- The Panel recommends that a process is developed by means of which Departmental and University goals are better paired and integrated, thus leading, to the extent possible, to a consolidated set of institution-wide goals and priorities.

- The Panel recommends that quantitative goals acquire a more central position in the goal-setting culture and practices of the University, especially at the level of the University Strategic Plan.

- It is further recommended that quantitative and qualitative goals are better paired with KPIs and linked with clear and specific timelines, especially at the level of the University Strategic Plan. This applies especially to research and innovation, and administration/resources.

- Finally, it is suggested that bottom-up goal-setting (from Departments to the University leadership) is encouraged, strengthened, and better reflected in the University Strategic Plan.

Principle 4: Structure, Organisation and Operation of the IQAS

INSTITUTIONS SET UP AND ESTABLISH AN INTERNAL QUALITY ASSURANCE SYSTEM, WHICH INCLUDES PROCESSES AND PROCEDURES COVERING ALL AREAS OF ACADEMIC ACTIVITIES AND FUNCTIONS. SPECIAL FOCUS IS GIVEN ON THE QUALITY OF TEACHING AND LEARNING, INCLUDING THE LEARNING ENVIRONMENT, RESEARCH, INNOVATION AND GOVERNANCE.

The key goal of the internal quality assurance system (IQAS) is the development, effective operation and continuous improvement of the whole range of the Institution's activities, and particularly, of teaching, research, innovation, governance and relevant services, according to the international practices - especially those of the European Higher Education Area - and the HQA principles and guidelines described in these Standards.

Structure and organisation

In each Institution, the Quality Assurance Unit (QAU) holds the responsibility for the administration and management of the IQAS. The QAU is set up according to the existing legislative framework and is responsible for:

- *the development of specialised policy, strategy and relevant processes towards the continuous improvement of the quality of the Institution's work and provisions;*
- *the organisation, operation and continuous improvement of the Institution's internal quality assurance system;*
- *the coordination and support of the evaluation process of the Institution's academic units and other services, and;*
- *the support of the external evaluation and accreditation process of the Institution's programmes and internal quality assurance system in the context of the HQA principles and guidelines.*

The Institution's IQAS and its implementation processes are determined by the decisions of the competent bodies, as provided by the law, and are published in the Government Gazette, as well as on the Institution's website. The above are reviewed every six years, at the latest.

To achieve the above goals, the QAU collaborates with HQA, develops and maintains a management information system to store the evaluation data, which are periodically submitted to HQA, according to the latter's instructions. The QAU is responsible for the systematic monitoring of the evaluation process and for the publication of evaluation-related procedures and their results on the Institution's website.

The QAU structure has been approved by the Institution's competent bodies, as provided by the law, while all competences and tasks accruing from this structure are clearly defined.

Operation

The Institution takes action for the design, establishment, implementation, audit and maintenance of the Internal Quality Assurance System (IQAS), taking into account the Standards' requirements, while making any necessary amendments to ensure fitness to achieve its aims.

The above actions include:

- o *provision of all necessary processes and procedures for the successful operation of the IQAS, as well as implementation of the above processes and procedures on all of the Institution's parties involved ;the Institution's areas of activity can constitute the IQAS processes, e.g. teaching, research and innovation, governance, services etc. An IQAS process is an area of activity including data input, data processing and outputs. A procedure defines the way an action is implemented and includes a course of stages or steps, e.g. the curriculum design procedure;*
- o *determination of how the IQAS procedures / processes are audited, measured and assessed, and how they interact;*
- o *provision of all necessary resources to enable the IQAS function.*

Institution compliance

The Panel was very impressed with the internal QAU. Their enthusiasm and zeal for accomplishing their internal quality assurance task was clearly evident. The Panel commends and applauds their efforts and hopes that they will continue at that high level.

The process of internal quality assurance is new to the Greek higher education landscape and in consequence there is a steep learning curve in the process of creating an environment that is positive, beneficial, and constructive.

QAU serves as a depository of best practices collected from different departments. The true value of these best practices is in sharing them with all Departments, and QAU is instrumental in this process. In this manner, everyone has the opportunity to benefit from successful initiatives that have been accomplished in other departments.

Panel is cognizant of the extensive task required to meet the objectives and high standards of the IQAS. Panel acknowledges that the allocation of 1.5 employees to this task is insufficient. Panel recommends an increase in personnel.

The Panel believes that the true essence of the operational dimension of QAU is to embrace a dynamic and proactive form. In consequence, QAU has an ongoing task to monitor and make recommendations for the structural organization, the machinery, operation, and continuous improvement of the university's IQAS. One of the visible successes of the IQAS to date is the rationalization of programs (i.e., learning outcomes (LOs)), the reduction in the number of courses, in this manner effectively implementing an internal mechanism for academic housekeeping.

The Panel is concerned with the extremely low returns of course evaluation questionnaires, to the extent that they are statistically insignificant. We recommend that this is a matter that requires urgent attention at the institutional and departmental level. Furthermore, that the revision of the instruments for student evaluations as well as the electronic format for the distribution and the collection of this information be implemented by a working group that includes administration, faculty, and students.

The University should undertake a complete review of its institutional and departmental websites with a view of making them more user-friendly as well as of updating the information they contain on a regular basis in both languages, Greek and English.

UoP has a policy and a set of goals regarding quality assurance and improvement. The policy is outlined and the goals are listed in the Institutional Internal Evaluation Report (IIER). The policy procedures are posted on the QAU website. An enduring quality of a higher education institution is its ability to self-correct its internal quality assurance for educational, research, organizational governance and innovation on an ongoing basis. Doing so in a proactive manner is highly desirable.

The Institution's QA procedures follow the guidelines provided by HQA. More specifically, each academic unit is responsible through its Internal Evaluation Group (IEG – OMEA) for the compilation of data and submission of annual reports to QAU. For its part, QAU responds to these reports by providing feedback and suggestions for improvement. In general, the academic departments participate in the processes of the IQAS.

The representatives of the QAU provided the Panel with copies of the most recent academic unit reports, the QAU follow-ups on the reports, and the external evaluation reports on these units. It became evident from reviewing these documents that the Institution has in place an efficient system for recording and analyzing data relevant to quality indicators.

The Panel met with numerous members of the teaching and administrative staff, current undergraduate and postgraduate students, alumni and stakeholders. Discussions revealed that stakeholders have contributed to the program development and have since maintained a close cooperation with certain academic departments, in line with best practices. It is recommended that this practice is extended across the University.

Panel judgement

Principle 4: Structure, Organization and Operation of the IQAS	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- QAU should be pro-active and serve as a repository and catalyst for the dissemination of best practices.
- QAU staff is increased beyond the current 1.5 employees.
- UoP urgently addresses and improves the return of course evaluation questionnaires.
- UoP undertakes a complete review of its institutional and departmental websites.
- Further, Panel believes that QAU should recommend incentives for promoting and enhancing the scope and substance of faculty research.
- Finally, the IQAS should be organized so that all internal and external stakeholders are involved.

Principle 5: Self-Assessment

THE INTERNAL QUALITY ASSURANCE SYSTEM COMPRISES PROCEDURES PROVIDING THE IMPLEMENTATION OF THE ANNUAL SELF-ASSESSMENT OF THE INSTITUTION'S ACADEMIC AND ADMINISTRATIVE UNITS, ADDRESSING AREAS OF OVERSIGHTS OR SHORTCOMINGS, AND DEFINING REMEDIAL ACTIONS TOWARDS THE ACHIEVEMENT OF THE SET GOALS, AND EVENTUAL IMPROVEMENT.

The QAU conducts, on an annual basis, a self-assessment of the IQAS, following the written procedure provided for each area of activity, which is implemented by a certain academic or administrative unit, as appropriate. The procedure determines the timing, the participants, the data under consideration, and the expected outcomes. The self-assessment aims at a final estimation of the suitability of the IQAS in force, as well as at basing decisions concerning the necessary remedial or precautionary actions for improvement.

The data considered in the context of the self-assessment of a programme may, for example, include:

- *students performance;*
- *feedback from students / teaching staff;*
- *assessment of learning outcomes;*
- *graduation rates;*
- *feedback from the evaluation of the facilities / learning environment;*
- *report of any remedial or precautionary actions undertaken;*
- *suggestions for improvement.*

The outcomes of the self-assessment are recorded in internal reports drawn up by the QAU. The reports identify any areas of deviation or non-compliance with the Standards, and are communicated to the interested parties (if appropriate). The Institution's resolutions concerning any modification, compliance, or enhancement of the IQAS operation might include actions related to:

- *the upgrade of the IQAS and the pertinent processes;*
- *the upgrade of the services offered to the students;*
- *the reallocation of resources;*
- *the introduction of new quality goals, etc.*

The outcomes of the self-assessment are recorded and, along with the source data, are archived as quality files.

A special procedure is followed for the compliance check of newly launched programmes (of all three cycles), or programmes that are to be reviewed shortly, prior to the institutional approval of the programme.

Institution compliance

The Panel had the opportunity to study and evaluate the Self Evaluation Reports (SERs) provided, which is established according to relevant regulations and consists of 5 members plus representatives (from administration, student bodies, secretariat). Relevant SERs from QAU were provided for AY 2013-14, 2014-15, and 2015-16 but not for the recent AYs, i.e., 2016-17 and 2017-18. QAU reported that its personnel was busy with other duties, thus unable to prepare the recent SERs, yet the relevant material was described adequately during the site visit of Panel to the university. The Panel also obtained additional useful SER material during the site visit, which was comprehensive and relevant.

In general, QAU reviews the schools and departments regularly and consistently, and the outcomes of the review are recorded and shared with the administration. The reviews also result in documented action plans that are, in general, implemented or attempts are made to implement them. Particular details are provided below:

- In terms of student feedback (for courses/course material), course evaluations are performed electronically since 2014 (the same year that QAU started submitting SERs to HQA), and results are distributed to teaching faculty. However, the student participation rate in the evaluations is extremely low, thus, in many cases, statistically insignificant. QAU is currently trying to identify the reasons for the low participation rate, and is examining ways to improve it. It is not certain whether making the course evaluation mandatory to students is permitted by the existing regulatory framework, nor whether it would be effective to do so. In that regard, no specific action plans have been set. In general, the course evaluation process is top-down and it seems faculty and QAU were not aware that course evaluation questionnaires may be modified to accommodate the needs of specific courses.
- In terms of graduation rates (on-time, +1 yr, +2 yrs, etc.), data is recorded regularly, and a goal to increase the on-time graduation rate by 1% each year has been set. For achieving this goal, a close collaboration between QAU and departments has been established, seeking to inform students, encourage students to use the available liaison office for practical training, introducing faculty advisors, and encourage effective ERASMUS exchanges. Students informed the Panel that the introduction of student advisors was a well-received improvement to their learning experience.
- In terms of curriculum, there is constant assessment and improvement actions with input from student bodies, and in some cases with input from alumni and industry. As a result, the programs are driven by Learning Outcomes (LOs), curriculum is consolidated and rationalized. Consequently, the number of courses has been reduced by as much as 20% (e.g., from about an estimated average of 52 courses to 42). There was a 20% increase over the previous year in offered ERASMUS courses.
- Development of interdepartmental and interuniversity programs is a continuous process, e.g., in the area of "Higher Education policy: theory and praxis", which was accredited by HQA and currently in operation.

Overall, UoP has enthusiastically embraced the task of self-assessment as a tool for improvement.

Panel judgement

Principle 5: Self-Assessment	
Fully compliant	**X**
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- To an extent, the objectives of the self-assessment process are met. Yet, there is still some room for improvement. For example, QAU should facilitate the sharing of good practices and serve as a catalyst for transformation.
- Panel underlines the importance of continuity and perseverance in self-assessment in periods between external assessment visits.

Principle 6: Collection of Quality Data: Measuring, Analysis and Improvement

INSTITUTIONS ARE FULLY RESPONSIBLE FOR THE COLLECTION, ANALYSIS AND USE OF INFORMATION IN AN INTEGRATED, FUNCTIONAL AND READILY ACCESSIBLE MANNER, AIMING AT THE EFFECTIVE MANAGEMENT OF THE QUALITY DATA RELATED TO TEACHING, RESEARCH AND OTHER ACADEMIC ACTIVITIES, AS WELL AS OF THOSE RELATED TO THE ADMINISTRATION.

> *The QAU should establish and operate an information system to manage the data required for the implementation of the Internal Quality Assurance System.*
>
> *The QAU measures and monitors the performance of the various activities of the Institution, through appropriate procedures established in the context of the IQAS structure, and assesses their level of effectiveness. The measuring and monitoring is conducted on a basis of indices and data provided by HQA in the pertinent guidelines and forms, which are part of the National Information System for Quality Assurance in Higher Education (NISQA). These measurements may concern: the size of the student body, the size of the teaching and administrative staff, the infrastructure, the structural components of the curricula, students' performance, research activity performance, financial data, feedback on student and faculty satisfaction surveys, data related to the teaching and research activity, services, infrastructure, etc.*
>
> *The QAU makes use of the figures and presents the results for consideration using statistical analysis. Outcomes are displayed through histograms and charts. This sort of information is used by the Institution for decision making, at all levels, pursuing improvement, as well as for setting, monitoring, assessing and reviewing the Institution's strategic and operational goals.*

Institution compliance

The Panel reviewed the material submitted by the University and HQA. There was an onsite visit lasting two days and had the opportunity to discuss with members primarily concerned with data collection, analysis and evaluation.

From a low start, the University has put in a major effort to establish mechanisms for data collection in compliance with HQA norms. In this respect, the Panel praises the efforts of QAU in collecting and compiling data and of the Departments for their cooperation. One out of the nine Departments has not fully cooperated with the process. Special mention should also be made of the persons concerned with the technical IT problems especially in an environment where there is a range of software not always fully interfaced with each other.

The following observations are intended to reflect the current situation and areas for further improvements:

Study programs/education activities

A satisfaction questionnaire per course is made available for completion online by students. This covers aspects of the course material, learning resources and the competence of the teacher. The number of students participating in the process is low to very low such as to make the statistical significance of the results doubtful. It is not clear whether results and/or actions resulting from the questionnaire are fed back to the students in all cases.

Research and Innovation

Information in the form of averages on research income per academic member and number of PhD candidates per member was given. As an indication, there are three doctoral students per Faculty member on average, but it is impossible to ascertain maxima and minima. Since research and innovation is one of the UoP objectives, the Panel would have liked to see a more fine-grained data presentation to assist the University to identify areas of research strength and weakness and take appropriate support

and remedial actions. In addition, the involvement of external players in the research process should be more clearly represented in data.

<u>Activities related to administration</u>

Administrative staff play a supportive role to the activities of all members of the University but also need to be themselves supported in the form of training etc. It is important that in a University located in five cities they have opportunities for team building and liaison across the geographical spread and technical areas. There is a multitude of information systems in use by administrative departments with limited interface capabilities, which leads to significant human and other IT related costs.

<u>Human resources</u>

UoP has competing needs in terms of human resources in all areas of its activities. A lot of data was made available to the Panel mainly in the form of averages thus it is not easy to assess the situation in each particular area. More fine-grained information in the form of charts/graphs should be made available to show in an easily accessible manner the situation in each activity area. This will assist the University to match resources to its strategic aims in a more transparent manner.

Panel judgement

Principle 6: Collection of Data: Measuring, Analysis & Improvement	
6.1 Study Programmes / education activities	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	
6.2 Research & Innovation	
Fully compliant	
Substantially compliant	
Partially compliant	**X**
Non-compliant	
6.3 Activities related to the administration (funding, human resources, infrastructure management)	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	
6.4 Human Resources	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

Principle 6: Collection of Data: Measuring, Analysis & Improvement (overall)	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

Panel Recommendations

- A concerted effort should be made to substantially increase student participation in questionnaires.
  Students need to realize that this process in not just a piece of bureaucracy but also a meaningful consultation which leads to tangible visible results (closing the loop!). Although this happens in some cases, it is not universal and it is not effectively communicated to students. The University should decide whether individual teachers offer feedback to students and/or this is done by Chairs and/or Deans.
  The University should offer re-assurance that this process is confidential and that inputs by individual students cannot be identified.
  Students informed Panel that in some cases questionnaires did not reflect the nature of each module (e.g. Laboratory evaluation in theoretical courses) and recommends that each questionnaire is checked before distribution to the students.
- The range of data collection should be widened beyond the satisfaction questionnaire. Panel suggests additional data collection such as: how many of those entitled collect their books from EUDOXOS and how near the exam deadline; e-class usage; data collected on graduation; data from alumni on labour market conditions and response to graduates of the UoP; data from stakeholders on labour market needs and graduate skills.
- IT system interfaces should be established. The data systems used by ELKE should be interfaced as a matter of urgency with other data systems used by QAU to facilitate data collection analysis and interpretation.
- Data should be shown in the form of charts/graphs of staff workload with teaching, research and admin activities for each department individually.
  Research activities should in addition be presented in a graphical form to get a global picture of research activities. As an example, charts should be presented showing similar information by category of staff e.g. full professors, associate professors etc.
- More data should be presented in the form of charts/graphs, which depict the needs of individual sections, maintenance, expansion, so that priorities are better correlated with pressing needs. Reporting of research output should follow HQA standards in term of classification and year of publication.
- The activities of the Administrative staff should be captured and presented in a form that supports the strategic planning of the University, e.g. quantitative workload data, identifying 'bottleneck' areas or tasks.
  As above, data should be given for all other non-academic units e.g. administration, ELKE, ERASMUS , QAU, IT, Liaison Office, etc.
- UoP should examine the staffing of the IT department. At present, it appears that a heavy workload falls on one faculty member, who also has other duties.
  UoP should also look at the staffing of QAU as its activities develop in the future.

Principle 7: Public Information

INSTITUTIONS SHOULD PUBLISH INFORMATION ABOUT THEIR TEACHING AND ACADEMIC ACTIVITIES IN A DIRECT AND ACCESSIBLE MANNER. ALL PERTINENT INFORMATION SHOULD BE UP-TO-DATE, CLEAR AND OBJECTIVE.

> *The QAU publishes data related to IQAS structure, organisation and operation. Furthermore, the QAU publishes data pertinent to the institutional quality policy and objectives, as well as information and data relevant to the Institution's internal and external evaluation. In the context of the self-assessment process, the QAU verifies that adequate information regarding the teaching activities and, particularly, the programmes' profile and the overall institutional activity is publicly available. QAU makes recommendations for improvement, where appropriate.*

Institution compliance

The IQAS of UoP includes relevant provisions regarding the publication of data on university activities and specific performance indicators to measure the efficiency of the process. Discussions with the QAU members revealed that this area is still under development. Nevertheless, QAU has described in detail the process they intend to follow regarding publicity of information.

Currently information is publicized mainly in electronic form (university website, departmental websites, QAU website, etc.) and in printed form by the Public Relations office. Upon review of the University website, Panel has observed that, whilst important information is present on the university website, certain variability and unevenness in the amount and content of the information provided across units is evident. The Panel was orally informed by QAU that specific processes for the harmonization and quality control of the published information are under way (e.g. checklists of compulsory v. optional data). Also, QAU has flagged the necessity of accommodating users with special needs.

UoP employs, to some extent, social media presence for the dissemination of university activities. The Panel has, however, not received sufficient documentation in this regard and is therefore unable to assess the extent to which the said activities are effective and/or sufficient.

UoP regards internationalization as an important objective and the expansion of its engagement in the ERASMUS program. Such aspirational objectives require translating University documentation into English.

Panel judgement

Principle 7: Public Information	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

Panel Recommendations

- UoP establishes and implements a university-wide website template with minimum standards across departments and administrative units.
- UoP monitors and implements regular updates of published materials, including information regarding dates of last update.
- UoP monitors and implements the availability of important material in English.

- Essential web-use metrics are regularly collected and utilized for assessing the effectiveness of the website of the University.

Principle 8: External Evaluation and Accreditation of the IQAS

INSTITUTIONS SHOULD BE PERIODICALLY EVALUATED BY COMMITTEES OF EXTERNAL EXPERTS SET BY HQA, FOR THE PURPOSE OF ACCREDITATION OF THEIR INTERNAL QUALITY ASSURANCE SYSTEMS (IQAS). THE PERIODICITY OF THE EXTERNAL EVALUATION IS DETERMINED BY HQA.

> *External quality assurance, in the case in point external evaluation aiming at accreditation, may act as a means of verification of the effectiveness of the Institution's internal quality assurance, and as a catalyst for improvement, while opening new perspectives. Additionally, it can provide information with a view to public acknowledgement of the positive course of the Institution's activities.*
>
> *The Higher Education Institutions engage in periodic external quality assurance which is conducted taking into consideration any special requirements set by the legislation governing the operation of the Institutions and their academic units.*
>
> *Quality assurance, in this case accreditation, is an on-going process that does not end with the external feedback, or report or its follow-up process within the Institution. Therefore, Institutions ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.*

Institution compliance

UoP IQAS includes a well-defined procedure for the external evaluation and/or accreditation of the IQAS. The current accreditation is taking place under the framework of this procedure. A set of performance indicators is provided including: Number of recommendations, Number of actions resulted from the external review or accreditation, Number of revisions in University Quality policy.

The results of the external evaluations will be presented to the academic community and will be used in the revaluation of the UOP's strategic plan and resulting actions.

The Accreditation Panel, based on the evidence that feedback from all previous Institutional and Departmental external evaluations was treated in a way that steered appropriate actions for improvement, is confident that the results of this accreditation process will have the same effect.

Panel judgement

Principle 8: External Evaluation & Accreditation of the IQAS	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- Accreditation Report should be made public and discussed by all stakeholders

I.   Features of Good Practice

- QAU consists of a strong team of highly enthusiastic, committed, and team-spirited staff
- University senior administration strongly supports IQAS
- Regular interaction between the QAU and the internal stakeholders has been established
- IQAS resulted in effective Departmental goal-setting
- Mechanisms have been put in place for data collection
- Wide acceptance of IQAS by internal stakeholders
- IQAS implementation is producing visible results
- Growing engagement with external partners

II.   Areas of Weakness

- Insufficient linkage of the University Strategic Plan with quantitative and qualitative goals and Departmental Strategic Plans
- Very low response rates by students to the course evaluation questionnaires and insufficient input by external stakeholders in IQAS
- Existing processes have not resulted in significant improvement in housing, meal provision, and transport for students
- Existing processes have not yet resulted in improving publicity of information in certain areas
- Insufficient number of QAU and IT staff for the effective implementation of IQAS

III.   Recommendations for Follow-up Actions

While IQAS has become a significant part of UoP culture; and while significant steps have been made in the direction and intensification of its implementation, certain areas require considerable effort to reach the required level. For this reason, Panel recommends that in order to maintain momentum and continuity, a formal IQAS review takes place in two years.

IV.   Summary & Overall Assessment

The Principles where full compliance has been achieved are:

- Principle 4
- Principle 5
- Principle 8

The Principles where substantial compliance has been achieved are:

- Principle 1
- Principle 2
- Principle 6

- Principle 7

The Principles where partial compliance has been achieved are:

- Principle 3

The Principles where failure of compliance was identified are: N/A

Overall Judgement	
Fully compliant	
Substantially compliant	**X**
Partially compliant	
Non-compliant	

The members of the Accreditation Panel

Name and Surname   Signature

Prof Emeritus Pantelis Ipsilandis, (Chair) University of Applied
Sciences of Thessaly, Larissa, Greece

Prof. Emeritus Christos Christopoulos, University of Nottingham,
Nottingham, United Kingdom

Prof. George Frantziskonis, University of Arizona, Tuscon, Arizona,
USA

Prof. Constantine Passaris, University of New Brunswick, Fredericton,
New Brunswick, Canada

Dr. Thomas Skouteris, The American University in Cairo, Cairo, Egypt