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Date: 6.8.2021

# External Evaluation Report (Departmental)

- **Higher Education Institution:**  
Philips University
- **Town:** Nicosia
- **School/Faculty:** Health Sciences
- **Department:** Department of Nursing
- **Department's Status:** New
  
- **Programme(s) of study under evaluation:**  
Name (Duration, ECTS, Cycle)

## Programme 1

**In Greek:**

Programme Name

**In English:**

BSc in Nursing

## Programme 2

**In Greek:**

Programme Name

**In English:**

Programme Name

## Programme 3

**In Greek:**

Programme Name

**In English:**

Programme Name



**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 2019” [N. 136 (I)/2015 to N. 35(I)/2019].**



Department's programmes (to be filled by the CYQAA officer and verified by the EEC):

DEPARTMENT	PROGRAMMES OF STUDY

## A. Introduction

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

The onsite visit was performed from 02/8/2021 to 03/8/2021 in the premises of the Philips University in Nicosia, Cyprus and in the Nicosia General Public Hospital. Due to the current pandemic situation of Coronavirus (COVID-19) only one international member of the EEC, Prof. Margarita Giannakopoulou could participate in the onsite visit. Moreover, 2 local EEC members were also present; Mr Andreas Andreou (representative of the Nursing and Midwifery Council of Cyprus) and Miss Ioanna Papaioannou (representative of Cyprus Nursing students). The onsite visit was supported by Mrs Emily Mouskou, from the CYQAA. The EEC members had the opportunity to meet Mr Philippos Constantinou (President of the University), Prof. Andreas Pavlakis (Dean of the School of Health Sciences), Prof. Shiakallis Constantina (Vice Rector of Academic Affairs), Prof. Andreas Orphanides and Prof. Nikolaos Iriotis (Members of the Internal Quality Committee), and 2 of the Academic Tutors which will be involved in the under evaluation new program of BSc in Nursing (Dr. Karageorgou Konstantina and Dr. Georgiou-Kyriakou Mary). On 02/08/2021 the agenda included a variety of power point presentations concerning the History and scope of the University, the clinical placement policy in Cyprus, logistics of screen-based virtual reality simulation (presented remotely from the UK by Mr. Baz David, educational specialist of Oxford Medical Simulation-company in the UK), Management Information Systems used by the University, as well as visits to classrooms, the Nursing Lab and the Microbiology Lab. According to the information provided to EEC members, Philips University has been operating since 2019 from 3 private buildings located in Nicosia. Before 2019, it functioned as a college with a history and experience in private education in Cyprus, mainly in Business Studies, Accounting and Finance, Management, Information Technology, and Public Relations. The BSc in Nursing program under evaluation is the first in Health science subject to be offered by Philips University. It is an English-language conventional undergraduate program, structured on the basis of the European Credit Transfer System (ECTS). The duration of the program is 8 semesters of study (4 academic years) equivalent to a total of 240 ECTS. Philips University's buildings include several spaces with undetermined number of individuals, and the classrooms are large and adequate for educational purposes. There is a library, a cafeteria as well as welfare and sport facilities for the students. However, the EEC noted that the Nursing lab is very limited in terms of space. It is equipped at present with only one whole body mannequin, and two mannequin hands, hospital beds and examination beds, and a variety of devices for training in nursing interventions. According to a rough estimation the lab has room for no more than 10-15 students to be trained simultaneously, and comfortably, in this space. Therefore, based on existing facilities, the number of nursing students enrolled should be estimated with caution (we suggest that probably 50 students in total, trained in small groups, could be accommodated in the lab). In the case that a more spacious lab, with additional mannequins and training equipment, is provided in the future, then a higher number of students could be considered. On 03/08/2021 the EEC members present on site also had a meeting with the responsible stakeholders for the nursing students' clinical placement experience. In Cyprus the procedure for these placements is determined by law and it is arranged for the HEI through the sector of nursing services and education of the Ministry of Health in Cyprus. The HEI makes application for the number of students requiring clinical placements, and with reference to the objectives of the training program, a list of accredited clinical mentors is provided per hospital. No more than 5 students per mentor can be assigned. During the placements there are on-going evaluations of the student's clinical development from the tutors, and from the University. Based on the above, it seems that the clinical placement component of the BSc Nursing program under evaluation is well planned and organized.

## B. External Evaluation Committee (EEC)

<i>Name</i>	<i>Position</i>	<i>University</i>
<b>Sanna Salanterä</b>	Professor of Clinical Nursing Science	University of Turku, Finland
<b>Daniel Kelly</b>	Royal College of Nursing, Professor of Nursing Research	Cardiff University, UK
<b>Margarita Giannakopoulou</b>	Professor of Fundamentals of Nursing	National and Kapodistrian University of Athens, Greece
<b>Ioanna Papaioannou</b>	Student	Cyprus University of Technology
<b>Name</b>	Position	University

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

- *The external evaluation report refers to the Department as a whole (programmes offered, teaching staff, administrative staff, infrastructure, resources, etc.).*
- *The external evaluation report follows the structure of assessment areas and sub-areas.*
- *Under each assessment area there are quality indicators (criteria) to be scored by the EEC on a scale from one (1) to five (5), based on the degree of compliance for the above mentioned quality indicators (criteria). The scale used is explained below:*

1 or 2:	<i>Non-compliant</i>
3:	<i>Partially compliant</i>
4 or 5:	<i>Compliant</i>

- *The EEC must justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.*
- *It is pointed out that, in the case of indicators (criteria) that cannot be applied due to the status of the Department, N/A (= Not Applicable) should be noted and a detailed explanation should be provided on the Department's corresponding policy regarding the specific quality indicator.*
- *In addition, for each assessment area, it is important to provide information regarding the compliance with the requirements. In particular, the following must be included:*

### **Findings**

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

### **Strengths**

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

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

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

- *The EEC should state the compliance for each sub-area (Non-compliant, Partially compliant, Compliant), **which must be in agreement with everything stated in the report.***
- **The report may also address other issues which the EEC finds relevant.**

## 1. Department's academic profile and orientation (ESG 1.1, 1.2, 1.4, 1.5, 1.6, 1.7, 1.8, 1.9)

### Sub-areas

- 1.1 Mission and strategic planning (including SWOT analysis)
- 1.2 Connecting with society
- 1.3 Development processes

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

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

Quality indicators/criteria		
<b>1. Department's academic profile and orientation</b>		
<b>1.1 Mission and strategic planning (including SWOT analysis)</b>		<b>1 - 5</b>
1.1.1	The Department has formally adopted a mission statement, which is available to the public and easily accessible.	5
1.1.2	The Department has developed its strategic planning aiming at fulfilling its mission.	5
1.1.3	The Department's strategic planning includes short, medium-term and long-term goals and objectives, which are periodically revised and adapted.	3
1.1.4	The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice.	5
1.1.5	The academic community is involved in shaping and monitoring the implementation of the Department's development strategies.	5
1.1.6	Stakeholders such as academics, students, graduates and other professional and scientific associations participate in the Department's development strategy.	4
1.1.7	The mechanism for collecting and analysing data and indicators needed to effectively design the Department's academic development is adequate and effective.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		

The department has produced a mission statement and strategic plan. They appear relevant and cover the relevant issues. The strategy includes short-term, medium-term and long-term goals but could be clearer about the long-term development aims of the nursing program. A clear operationalization plan for the future would be beneficial, including expansion ambitions. The program overall appears relevant and provides the main components for nursing education.

The academic staff appear to have been actively involved in the development of the program. The program consists of some elements outside of traditional nursing education. It was agreed that the curriculum benefit from a more coherent structure (especially in the terms of what a Philips nursing graduate would offer) and some reorganizing and identification of core content as discussed during the remote meeting with the University faculty.

Additionally, provide information on the following:

1. Coherence and compatibility among programmes of study offered by the Department.
2. Coherence and compatibility among Departments within the School/Faculty (to which the Department under evaluation belongs).

The school seems to be committed to the development of the nursing program and other departments appear to be involved enthusiastically in the planned teaching. We recommend that a Nursing professor should lead this department as this would enhance the profile of the nursing program at Philips University.

Provide suggestions for changes in case of incompatibility.

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## 1. Department's academic profile and orientation

1.2 Connecting with society		1 - 5
1.2.1	The Department has effective mechanisms to assess the needs and demands of society and takes them into account in its various activities.	5
1.2.2	The Department provides sufficient information to the public about its activities and offered programmes of study.	3
1.2.3	The Department ensures that its operation and activities have a positive impact on society.	5
1.2.4	The Department has an effective communication mechanism with its graduates.	N/A

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

The profile of the department could be strengthened and this will help to bring its work to the attention of the public and the international market. We can not comment on the communication with the graduates because the program is still new.



## 1. Department's academic profile and orientation

### 1.3 Development processes

1 - 5

1.3.1	Effective procedures and measures are in place to attract and select teaching staff to ensure that they possess the formal and substantive skills to teach, carry out research and effectively carry out their work.	5
1.3.2	Planning teaching staff recruitment and their professional development is in line with the Department's academic development plan.	3
1.3.3	The Department applies an effective strategy of attracting high-level students from Cyprus and abroad.	5
1.3.4	The funding processes for the operation of the Department and the continuous improvement of the quality of its programmes of study are adequate and transparent.	3

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

The recruitment process appears to follow a clear structure. However, there is some concern at present about Philipps having enough Nursing faculty. We recommend that careful evaluation of the adequacy of provision is calculated, and this should be evaluated regularly using feedback both from the students and faculty members themselves. The planned funding investment as a proportion of income for the future development of the department needs to be made clear.

Additionally, write:

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

The program expects to recruit students mainly from the South-East of Europe, Asia and Africa. There will be a strong cultural mix of Nursing students and we advise placing special emphasis on student wellbeing and acquisition of social communication skills, especially in terms of clinical skills and placements. Multiculturalism could be a unique strength of this program but it will also be challenging given these students' different cultural backgrounds and variation in competence in terms of written and spoken English skills.

### Findings

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

Based on the application and presentations, the department has a formally adopted a mission statement, and uses strategic planning to achieve this. There are both short, medium and long-term goals mentioned, and it is claimed that are revised periodically. The academic community appears to be involved in the development of the program and the department strategy. Philips University claims to be committed to providing high quality teaching, scholarships and research.

Collegiality is mentioned as important, and Philips University has written principles to emphasize this.

The University communicates with the surrounding area and wants to make a positive impact on Cypriot society. It is too early to say much about the new Department, but they claim that they will follow the standards of the University. Part of this BSc Nursing program is taught by faculty members from existing departments and programs at Philips. The challenge will be to ensure that the content of their teaching has relevance for Nursing students.

The faculty recruitment is of high quality and many of the faculty members are research-oriented with respected careers in both science and pedagogy. The University already appears to be attractive to international students especially to the target group of South-East Europe, Asia and Africa. We note the challenges as well as the opportunities from accessing this market.

**Strengths**

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

The department has a good recruitment process and the school has attracted respected academics with good research track. The University seems to have good connections with the surrounding Cypriot society. This program, however, relies on Cypriot hospitals educating Nurses for other countries.

**Areas of improvement and recommendations**

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

The long-term strategy for this department needs operationalization and a clear action plan. Especially from the perspective of expanding the student intake. There has to be a clear plan on how the quality of this program can be assured in line with growth in numbers of students. Furthermore, it will be very important to ensure high quality practice placements. Cultural issues will have to be taken into consideration when choosing clinical placements for international students, some of whom may have limited English or Greek language skills.

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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
1.1 Mission and strategic planning	Compliant
1.2 Connecting with society	Partially Compliant
1.3 Development processes	Partially Compliant

## 2. Quality Assurance

(ESG 1.1, 1.2, 1.3, 1.4, 1.6, 1.7, 1.8)

### Sub-areas

- 2.1 System and quality assurance strategy
- 2.2 Quality assurance for the programmes of study

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

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

Quality indicators/criteria		
<b>2. Quality Assurance</b>		
<b>2.1 System and quality assurance strategy</b>		<b>1 - 5</b>
2.1.1	The Department has a policy for quality assurance that is made public and forms part of the Institution's strategic management.	5
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	5
2.1.3	The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.	5
2.1.4	The quality assurance system adequately covers all the functions and sectors of the Department's activities:	
2.1.4.1	Teaching and learning	5
2.1.4.2	Research	5
2.1.4.3	The connection with society	5
2.1.4.4	Management and support services	5
2.1.5	The quality assurance system promotes a culture of quality.	5
2.1.6	Students' evaluation and feedback	3

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

The student evaluation and feedback process was not clear in terms of how the program will be developed in line with their feedback. This was made explicit in the session with the students who could not articulate the process of students providing objective feedback to the university. We recommend a clear structure is instigated with regular opportunities for action based on student feedback.

## 2. Quality Assurance

### 2.2 Quality assurance for the programmes of study

1 - 5

2.2.1	The responsibility for decision-making and monitoring the implementation of the programmes of study offered by the Department lies with the teaching staff.	5
2.2.2	The system and criteria for assessing students' performance in the subjects of the programmes of studies offered by the Department are clear, sufficient and known to the students.	5
2.2.3	The quality control system refers to specific indicators and is effective, which have been presented and discussed.	5
2.2.4	The results from student assessments are used to improve the programmes of study.	3
2.2.5	The policy dealing with plagiarism committed by students as well as mechanisms for identifying and preventing it are effective.	5
2.2.6	The established procedures for examining students' objections/ disagreements on issues of student evaluation or academic ethics are effective.	5
2.2.7	The Department publishes information related to the programmes of study, credit units, learning outcomes, methodology, student admission criteria, completion of studies, facilities, number of teaching staff and the expertise of teaching staff.	5
2.2.8	Names and position of the teaching staff of each programme are published and easily accessible.	N/A
2.2.9	The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered.	5
2.2.10	The Department flexibly uses a variety of teaching methods.	5

2.2.11	The Department systematically collects data in relation to the academic performance of students, implements procedures for evaluating such data and has a relevant policy in place.	4
2.2.12	The Department analyses and publishes graduate employment information.	N/A
2.2.13	The Department ensures adequate and appropriate learning resources in line with European and international standards and/or international practices, particularly:	
2.2.12.1	Building facilities	5
2.2.12.2	Library	5
2.2.12.3	Rooms for theoretical, practical and laboratory lessons	3
2.2.12.4	Technological infrastructure	5
2.2.12.5	Academic support	5
2.2.14	There is a student welfare service that supports students in regard to academic, personal problems and difficulties.	5
2.2.15	The Department's mechanisms, processes and infrastructure consider the needs of a diverse student population such as mature, part-time, employed and international students as well as students with disabilities.	5
2.2.16	Mentoring of each student is provided and the number of students per each permanent teaching member is adequate.	5
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.	N/A
2.2.18	The number of doctoral students, under the supervision of a member of the teaching staff, enables continuous and effective feedback to the students and it complies with the European and international standards.	N/A
2.2.19	The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates.	N/A
2.2.20	There is a clear policy on authorship and intellectual property.	5

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

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### Findings

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

The University mentions rigorous quality assurance as one of their strengths in their SWOT analysis. The quality emphasis is explicit and links its targets with educational innovation and flexibility. Philips University provides statements that meet the requirements and the scope of the European Standards and Guidelines on Quality Assurance (ESG) utilizing a method of sustainable and Integrated Quality Management (IQM). It focuses both on institutional quality assurance and program quality management.

**Strengths**

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

The quality assurance processes appear adequate and up to date.

**Areas of improvement and recommendations**

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

The nursing laboratory facilities as well as simulation equipment are very limited in size. They will have to be adjusted according to the number of students to ensure educational quality.

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

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

### 3. Administration (ESG 1.1, 1.3, 1.6)

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

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

Quality indicators/criteria		
<b>3. Administration</b>		<b>1 - 5</b>
3.1	The administrative structure is in line with the legislation and the Department's mission.	5
3.2	The members of the teaching and administrative staff and the students participate, at a satisfactory degree and on the basis of specified procedures, in the management of the Department.	5
3.3	The administrative staff adequately supports the operation of the Department.	5
3.4	Adequate allocation of competences and responsibilities is ensured so that in academic matters, decisions are made by academics and the Department's council competently exercises legal control over such decisions.	5
3.5	The Department applies effective procedures to ensure transparency in the decision-making process.	5
3.6	Statutory sessions of the Department are held and minutes are kept.	5
3.7	The Department's council operates systematically and autonomously and exercise the full powers provided for by the law and / or the constitution of the Department without the intervention or involvement of a body or person outside the law provisions.	5
3.8	The manner in which the Department's council operates and the procedures for disseminating and implementing their decisions are clearly formulated and implemented precisely and effectively.	5
3.9	The Department applies procedures for the prevention and disciplinary control of academic misconduct of students, teaching and administrative staff, including plagiarism.	5
3.10	The Department has appropriate procedures for dealing with students' complaints.	3



3.11	Internalization of the Department and external collaborations.	5
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Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.

We have raised the issue of student feedback on several previous occasions. It is important that there is systematic feedback as well as responses to student feedback. How things develop should be based on student feedback and it should be clear who will provide feedback about any required improvements.

Findings

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

Administrative faculty is adequate and administrative facilities are appropriate. There are risk management procedures available. The administrative staff appear to provide sufficient services that are essential for the School and Department.

Strengths

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

Administration of the University appears well organized and has sufficient resources.

Areas of improvement and recommendations

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

There is a need for clear and systematic way to collect student feedback and also a process how the program's development needs are addressed.

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

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



#### 4. Learning and Teaching (ESG 1.2, 1.3, 1.4, 1.9)

**Sub-areas**

- 4.1 Planning the programmes of study
- 4.2 Organisation of teaching

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

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

Quality indicators/criteria		
<b>4. Learning and Teaching</b>		
<b>4.1 Planning the programmes of study</b>		<b>1 - 5</b>
4.1.1	The Department provides an effective system for designing, approving, monitoring and periodically reviewing the programmes of study.	4
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	4
4.1.3	Intended learning outcomes, the content of the programmes of study, the assignments and the final exams correspond to the appropriate level as indicated by the European Qualifications Framework (EQF).	5
4.1.4	The programmes of study are in compliance with the existing legislation and meet the professional qualifications requirements in the professional courses, where applicable.	5
4.1.5	The Department ensures that its programmes of study integrate effectively theory and practice.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
<b>The student voice in feedback needs to be strengthened</b>		
<b>4. Learning and Teaching</b>		
<b>4.2 Organisation of teaching</b>		<b>1 - 5</b>

4.2.1	The Department establishes student admission criteria for each programme, which are adhered to consistently.	5
4.2.2	Recognition of prior studies and credit transfer is regulated by procedures and regulations that are in line with European standards and/or international practices.	5
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	3
4.2.4	The teaching staff of the Department has regular and effective communication with their students, promoting mutual respect within the learner-teacher relationship.	5
4.2.5	Student-centred learning and teaching plays an important role in stimulating students' motivation, self-reflection and engagement in the learning process.	5
4.2.6	The teaching staff of the Department provides timely and effective feedback to their students.	5
4.2.7	The criteria and the method of assessment as well as the criteria for marking are published in advance.	5
4.2.8	The assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved.	5

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

The nursing laboratories and simulation facilities are clearly limited and depending on the student intake each year they will not be sufficient for quality education experience.

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

Some of these scores are difficult to judge as there are no students on the program as yet. We have based our evaluations on the oral evidence and written documents provided.

### **Strengths**

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

The intended strategies appear very suitable for this new program and attention has been given to student assessment in line with their development of their competences as a nurse.

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

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

Assessments could be tailored in terms of students' development of competencies from novice to skilled practitioner.



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

Sub-area	<i>Non-compliant / Partially Compliant / Compliant</i>
4.1 Planning the programmes of study	Compliant
4.2 Organisation of teaching	Compliant

## 5. Teaching Staff (ESG 1.5)

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

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

Quality indicators/criteria		
<b>5. Teaching Staff</b>		<b>1 - 5</b>
5.1	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	4
5.2	The teaching staff of the Department has the relevant formal and substantive qualifications for teaching the individual subjects as described in the relevant legislation.	5
5.3	The visiting Professors' subject areas adequately support the Department's programmes of study.	5
5.4	The special teaching staff and special scientists have the required qualifications, sufficient professional experience and expertise to teach a limited number of programmes of study.	5
5.5	The ratio of special teaching staff to the total number of teaching staff is satisfactory.	4
5.6	The ratio of the number of subjects of the programme of study taught by teaching staff working fulltime and exclusively to the number of subjects taught by part-time teaching staff ensures the quality of the programme of study.	4
5.7	The ratio of the number of students to the total number of teaching staff is sufficient to support and ensure the quality of the programme of study.	4
5.8	Feedback processes for teaching staff in regard to the evaluation of their teaching work, by the students, are satisfactory.	4

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

The scores are based on the challenges of not knowing the final number of students recruited each year. If student numbers increase, then faculty numbers should also increase to maintain educational quality. Otherwise, this is an area of risk.

Also, write the following:

- Number of teaching staff working full-time and having exclusive work
- Number of special teaching staff working full-time and having exclusive work
- Number of visiting Professors

- Number of special scientists on lease services

Click to enter text.

### Findings

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

There appears to be an adequate balance between permanent and visiting faculty.

### Strengths

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

A large number of the faculty is research oriented. This should be encouraged in the future and especially if master and doctoral programs are envisaged.

### Areas of improvement and recommendations

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

It is important to have enough faculty that has nursing as a professional background. Nurse led research should be encouraged.

Please ✓ what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
Teaching staff number, adequacy and suitability	Partially Compliant
Teaching staff recruitment and development	Compliant
Synergies of teaching and research	Compliant

## 6. Research

(ESG 1.1, 1.3, 1.5, 1.6)

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

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

Quality indicators/criteria		
<b>6. Research</b>		<b>1 - 5</b>
6.1	The Department has a research policy formulated in line with its mission.	5
6.2	The Department consistently applies internal regulations and procedures of research activity, which promote the set out research policy and ensure compliance with the regulations of research projects financing programmes.	5
6.3	The Department provides adequate facilities and equipment to cover the staff and students' research activities.	N/A
6.4	The Department has the appropriate mechanisms for the development of students' research skills.	5
6.5	The results of the teaching staff research activity are published to a satisfactory extent in international journals which work with critics, international conferences, conference proceedings, publications, etc. The Department also uses an open access policy for publications, which is consistent with the corresponding national and European policy.	5
6.6	The Department ensures that research results are integrated into teaching and, to the extent applicable, promotes and implements a policy of transferring know-how to society and the production sector.	5
6.7	The Department provides mechanisms which ensure compliance with international rules of research ethics, both in relation to research activity and the rights of researchers.	5
6.8	The external, non-governmental, funding of research activities of teaching staff is similar to other Departments in Cyprus and abroad.	N/A
6.9	The policy, indirect or direct of internal funding of the research activities of the teaching staff is satisfactory, based on European and international practices.	N/A

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

It is not possible to judge this at the present time

Findings

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

There is clear research orientation in the University and good potential in the future if it is encouraged.

Strengths

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

Research orientation

Areas of improvement and recommendations

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

It is relevant to invest on research time for faculty and encourage research collaboration beyond Philips University.

Please ✓ what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
Research mechanisms and regulations	Compliant
External and internal funding	Compliant
Motives for research	Compliant
Publications	Compliant

## 7. Resources (ESG 1.6)

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

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

Quality indicators/criteria		
<b>7. Resources</b>		<b>1 - 5</b>
7.1	The Department has sufficient financial resources to support its functions, managed by the Institutional and Departmental bodies.	5
7.2	The Department follows sound and efficient management of the available financial resources in order to develop academically and research wise.	3
7.3	The Department's profits and donations are used for its development and for the benefit of the university community.	3
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	3
7.5	The Department carries out an assessment of the risks and sustainability of the programmes of study and adequately provides feedback on their operation.	5
7.6	The Department's external audit and the transparent management of its finances are ensured.	3
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	3
<p>Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.</p> <p>These scores are lower since details are not provided. Based on the discussions about financial issues, such as future investments in the program, were not provided in sufficient detail. However, the senior managers of the University confirmed that the investments in this program are substantial and will continue in the future.</p>		

### Findings

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

Click to enter text.

### Strengths





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

Click to enter text.

*Areas of improvement and recommendations*

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

Click to enter text.

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

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

## D. Conclusions and final remarks

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


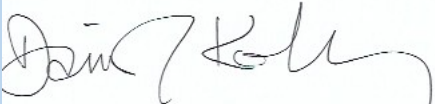
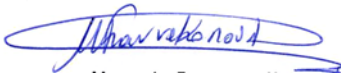


This department is at an important point in its development. We have found much to be optimistic about, but we also have some concerns to ensure a high-quality student experience. Philips University could have a unique opportunity to become a center for international Nursing education for the region. However, investments in teaching facilities, such as the clinical laboratory facilities will be needed.

The needs of multicultural students must be taken into consideration and enough support provided, especially in terms of language education to support their clinical experience. This will also ensure the safety of patients in Cypriot hospitals that they encounter.

We found that both the faculty and administration staff were very enthusiastic about this new program which is definitely a strength to build upon.

Overall our considered opinion is that we recommend the accreditation but our concerns should be addressed. It would also be beneficial if the program is re-evaluated after a suitable time period to ensure that the quality remains high.

**E. Signatures of the EEC**

<i>Name</i>	<i>Signature</i>
<b>Sanna Salanterä</b>	
<b>Daniel Kelly</b>	
<b>Margarita Giannakopoulou</b>	
<b>Ioanna Papaioannou</b>	
<b>Andreas Andreou</b>	
<b>FullName</b>	

**Date:** 6.8.2021

