

Doc. 300.3.1
Date: 17 September 2021

External Evaluation Report (Departmental)

- Higher Education Institution:
Phillips University
- Town: Nicosia
- School/Faculty: School of Education and Sciences
- Department: Social and Behavioural Sciences
- Department's Status: New

- Programme(s) of study under evaluation:
Name (Duration, ECTS, Cycle)

Programme 1

In Greek:

Not provided on document

In English: MSc Addiction Counselling with specialist pathway
in Prevention or Interventions

Programme 2

In Greek:

Συμβουλευτική στον Τομέα των Εξαρτήσεων

In English:

Addiction Counselling with specialist pathway in Prevention
or Interventions

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 External Evaluation Committee held a ‘virtual onsite visit’ facilitated by CYQAA on the 3rd September 2021. For full list of committee members see section B. The committee were offered the opportunity to meet with key stakeholders (including students, a community representative) and Faculty and Administrative staff of the University, and specifically the leadership of the Department Social and Behavioural Sciences, and the teaching team. The day was spent hearing presentations from each of the groups and whilst the committee found this very helpful, the committee noted that the agenda format did not leave sufficient time to engage in question and answers with the various teams. That said, the committee were grateful for all of the follow up requests that were granted to assist in the overall process, including access to a sample course on their Moodle Platform.

B. External Evaluation Committee (EEC)

<i>Name</i>	<i>Position</i>	<i>University</i>
Carmel Clancy	Professor	Middlesex University
Johan Franck	Professor	Karolinska Institutet
Stephanos P. Vassilopoulos	Professor	University of Patras
Santi Caballé	Professor	Open University of Catalonia
Maria Christoforou	Student representative	University

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		
1. Department's academic profile and orientation		
1.1 Mission and strategic planning (including SWOT analysis)		1 - 5
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.	5
1.1.4	The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice.	3
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.	5
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.

Overall the evidence presented both in the application document and the site visit reassured the committee that these quality indicators were sufficiently supported by their internal quality assurance processes – hence the overall scores of 5 for each domain with the exception of domain ‘*The programmes of study offered by the Department reflect its academic profile and are aligned with the European and international practice*’, which has been scored 3 – this does not imply a deficit as such but takes into consideration the overall profiles for the entire team, some of whom are less experienced than others, it also flags that the ECC were unable (other than to hear reassurances that agreements were in place with appropriate clinical settings’ that the staff within these settings were suitably ‘trained’ as supervisors for the internship component of the course. It would be helpful to have a more comprehensive understanding of how the ‘internship’ teams are qualified particularly in relation to pedagogic training and evaluation.

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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).

No major concerns with respect to this area was noted by the ECC members

Provide suggestions for changes in case of incompatibility.

Not applicable

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.	4
1.2.2	The Department provides sufficient information to the public about its activities and offered programmes of study.	4
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.	5

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

It was challenging to fully assess 'community engagement' particularly as only one business stakeholder was present at the onsite visit. However, based on the overall evidence provided and presentations given by the respective teams, it would appear that Phillip's University has a longstanding relationship – at least 40 years as an educational provider within the community in its previous form as a 'college' and has an understanding of its market – certainly with respect to Cyprus, and Greece.

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.	4
1.3.2	Planning teaching staff recruitment and their professional development is in line with the Department's academic development plan.	5
1.3.3	The Department applies an effective strategy of attracting high-level students from Cyprus and abroad.	N/A
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.

1.3.3 as this is a new Dept and the programme has not run before – we have given NA

Additionally, write:

- Expected number of Cypriot and international students – the ECC was advised that the Department were seeking to recruit a minimum of 20 students (max 25) in its first cohort
- Countries of origin of international students and number from each country – the ECC was advised that whilst the DL programme was and can be offered to international students, as the programme is delivered in the Greek language this will by its very nature, curtail the recruitment of a broader international student body. There is also the added challenge of internships which will largely be supported in Cyprus and Greece.

Click to enter text.

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

Philips University received its university status only recently (in 2020) but springs from an academic institution that has been in existence for several years (Philips College; since 1978). Programmes are evaluated yearly by independent, external experts.

Strengths

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

The University expresses an ambition to reach high academic standards and be competitive on a national and international level in the relevant educational programmes, as outlined by the President's statement.

Areas of improvement and recommendations

A list of problem areas followed by or linked to the recommendations of how to improve the situation. A greater focus on the continuous monitoring and quality assurance of on-site instructors involved in supervising interns would strengthen the pedagogical process of the investigated programmes.

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	Compliant
1.3 Development processes	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		
2. Quality Assurance		
2.1 System and quality assurance strategy		1 - 5
2.1.1	The Department has a policy for quality assurance that is made public and forms part of the Institution's strategic management.	4
2.1.2	Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.	4
2.1.3	The Department's policy for quality assurance supports guarding against intolerance of any kind or discrimination against students or staff.	4
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	4
2.1.4.2	Research	5
2.1.4.3	The connection with society	4
2.1.4.4	Management and support services	4
2.1.5	The quality assurance system promotes a culture of quality.	4
2.1.6	Students' evaluation and feedback	4

2.1.2 Internal stakeholders develop and implement a policy for quality assurance through appropriate structures and processes, while involving external stakeholders.

It was unclear if external stakeholders include 'clinical members of the internship supervision teams' it would be good to have this clearly articulated. This is above and beyond Senior Leadership Roles (there was evidence of their input at the Site Visit) this comment by the ECC is specifically related to input of staff who will run the day to day operational aspects of the internships and whether and how they influence QA processes.

2.1.4.1 – Teaching and Learning - Whilst recognising the QA system that the module/course leader determines both the assessment process and examinations – and that this is reviewed extensively via the Dept Chair and upwards, it is recommended that a procedure for involving a peer 'external examiner' may offer further independence and scrutiny to the process, and offer an opportunity for benchmarking with other Universities who offer similar programmes of study

2.1.4.2 – Research – there was a clear area of strength

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.	5
2.2.5	The policy dealing with plagiarism committed by students as well as mechanisms for identifying and preventing it are effective.	5
2.2.6	The 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.		5
2.2.9	The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered.		3
2.2.10	The Department flexibly uses a variety of teaching methods.		4
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.		5
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	4
	2.2.12.3	Rooms for theoretical, practical and laboratory lessons	4
	2.2.12.4	Technological infrastructure	4
	2.2.12.5	Academic support	4
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.		3
2.2.16	Mentoring of each student is provided and the number of students per each permanent teaching member is adequate.		4
2.2.17	The provision of quality doctoral studies is ensured through doctoral studies regulations, which are publicly available.		5
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.		5

2.2.19	The Department has mechanisms and funds to support writing and attending conferences of doctoral candidates.	4
2.2.20	There is a clear policy on authorship and intellectual property.	1

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

2.2.9 & 2.2.15 The Department has a clear and consistent policy on the admission criteria for students in the various programmes of studies offered. The ECC note that whilst this is clear there was some debate over how International Students may access the course, particularly in relation to the Interns

2.2.14 The ECC Student Representative commented specifically on her observations with respect to the meeting with students "I personally saw the students very happy with the university, they found it very helpful in terms of distance education and for their daily program (work, obligations) they found it suitable. I also believe that their tuition pushed them to choose it, it may be cheaper than other universities.

2.2.20 This was not clear from the evidence submitted, it does not mean that the ECC believe it does not exist we just didn't have the opportunity to review such a policy.

Findings

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

The University has a quality assurance system in accordance with the European Standards and Guidelines (ESG) for quality assurance in the European area, and the Researcher Development Framework (RDF), a professional framework developed for researchers. It is further certified by The Cyprus Agency of Quality Assurance and Accreditation of Higher Education (CYQAA). The University has internal quality assurance procedures for all its operations (based on self-evaluation, under the supervision by an Internal Evaluation Committee. There is also accreditation by professional bodies (Chartered Associations, Institutes) where relevant.

Strengths

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

There is a scheduled and systematic quality assurance of educational programmes based on defined standard-operating procedures.

Areas of improvement and recommendations

A list of problem areas followed by or linked to the recommendations of how to improve the situation. The continuous and recurrent monitoring of pedagogical skills and teaching competence of clinical staff (I e, during 'practicum') may represent a challenge due to the high number of clinical teachers/supervisors involved in some programmes.

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	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		
3. Administration		1 - 5
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.	4
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.	4
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	5

	Department without the intervention or involvement of a body or person outside the law provisions.	
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.	4
3.10	The Department has appropriate procedures for dealing with students' complaints.	5
3.11	Internalization of the Department and external collaborations.	5

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

3.3 Overall this appears to be satisfactory – however, it is noted that there is only one librarian and not subject specific. This is not a reflection on the current role holder who more than adequately addressed the ECC's questions but given the size of the University and student numbers this does not feel a sufficient resource and should be reviewed.

3.5 The oral presentation was clear but it could be better clarified in an appropriate written guiding document or standard operating procedure

3.9 The procedure when a student ultimately fails to meet a programme's academic goals merits some clarification

Findings

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

Overall the ECC found evidence that the teaching staff were competent, knowledgeable, and with appropriate qualifications in the generic and specialist subject areas. Their commitment to their students was evident; and supported by the student representatives of the University. There was evidence that selection and recruitment of faculty followed standard approaches taken by other Institutions, and that annual performance reviews were undertaken. There was evidence of the synergy between teaching and research, and that students had access to strong role models in this area. However, it is noted that there is only one librarian and not subject specific. This is not a reflection on the current role holder who more than adequately addressed the ECC's questions but given the size of the University and student numbers this does not feel a sufficient resource and should be reviewed.

Strengths

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

Positive teaching attitudes, and clear commitment to student body.

Areas of improvement and recommendations

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

None of significant note – see above statements

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		
4. Learning and Teaching		
4.1 Planning the programmes of study		1 - 5
4.1.1	The Department provides an effective system for designing, approving, monitoring and periodically reviewing the programmes of study.	5
4.1.2	Students and other stakeholders, including employers, are actively involved on the programmes' review and development.	5
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).	4
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.	4
4.2 Organisation of teaching		1 - 5
4.2.1	The Department establishes student admission criteria for each programme, which are adhered to consistently.	3
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.	N/A
4.2.3	The number of students in the teaching rooms is suitable for theoretical, practical and laboratory lessons.	4
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.	2

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

The ECC notes that whilst overall the Learning and Teaching are satisfactory – there are some areas that would benefit for review and adjustments

4.2.3 Full compliance requires a reference to a relevant policy document.

4.2.8 Assessment Literacy – it appears that the overall approach to assessing students learning and competencies is via 'examination'. Given that students will have different learning styles it may be helpful to provide an array of different forms of assessment which address and permit students to develop assessment literacy and enhance their overall graduate competencies

There are also no clear mapping tables of how each learning outcome is to be tested and how each course learning outcome relates to overall programme outcomes. This would be helpful to include to ensure 'no overlap in content'; and guidance for students so that they can benchmark their progression.

It was not fully clear how the internship assessments formally related to the overall assessment framework for the entire programme. For example; if a student fails their internship (despite best efforts of the supervising team and student) but passes on the theoretical components of the programme, do they still receive the 'award'?. It is recommended that the 'internship' is 'attached' to at least one of the modules as a component part of the assessment process and it is obligatory that the student passes both the clinical (internship) and theoretical components.

Findings

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

An external advisory Board with independent experts meets at least 3-4 times per year to discuss the programme's progress and provides recommendations.

Strengths

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

All participating clinics that receive and train students are accredited by the national competent authority. All teaching material is research (evidence-) based.

Areas of improvement and recommendations

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

The continuous, long-term monitoring and quality assurance of the pedagogic training of clinical tutors/supervisors is a challenge for any university and merits the full attention of the Dean and senior management. This could be enhanced by regular, scheduled inventories or follow-up of all current staff to ascertain highest possible teaching skills of teachers involved in the daily, practical supervision of students in the programme.

The assessment component of the 'practicum' is attached formally to one of the appropriate modules and the assessment methodology is component led – e.g. 50% theoretical and 50% practicum, with both components needing to be 'passed' to gain overall credit for the module. This has the potential to ensure that graduates of the course have met the implicit clinical learning outcomes via the Practicum.

There is an 'issue' of language through the module narratives/descriptions which refer to words such as 'abuse', addict etc. These terms are inadvertently stigmatising and reinforcing negative attitudes. Given this course is specifically addressing 'addictions' the teaching team are encouraged to revisit their use of such terms and follow current recommendations that align with the use of 'first person language'. The following link is offered as starting reference point <https://www.drugabuse.gov/drug-topics/addiction-science/words-matter-preferred-language-talking-about-addiction>

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

Sub-area	Non-compliant / Partially Compliant / Compliant
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4.1 Planning the programmes of study	Compliant
4.2 Organisation of teaching	Partially 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		
5. Teaching Staff		1 - 5
5.1	The number of teaching staff - full-time and exclusive work - and the subject area of the staff sufficiently support the programmes of study.	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.	4
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.	4
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.	N/A

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

5.2 As per Table 12 in the Application (Document 200.3) there was only one visiting professor during the last three year period, and in a subject unrelated to Addiction Counseling. However, the permanent Faculty adequately support the examined programme.

5.4 Professional experience is not listed in Table 13. Academic qualifications are adequate.

Findings

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

As stated above

Strengths

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

There is particular strength in the research profiles, and international profiles in the addiction field

Areas of improvement and recommendations

A list of problem areas followed by or linked to the recommendations of how to improve the situation.
The areas addressed in section 4 apply here also.

Please ✓ what is appropriate for the following assessment area:

Assessment area	<i>Non-compliant / Partially Compliant / Compliant</i>
Teaching staff number, adequacy and suitability	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		
6. Research		1 - 5
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.	4
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.	4
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.	4
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.	4
6.8	The external, non-governmental, funding of research activities of teaching staff is similar to other Departments in Cyprus and abroad.	5
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.	4

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

This particular area offered no concerns to the ECC, and demonstrated strengths in their overall performance and areas of work

Findings

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

As stated above

Strengths

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

As stated above

Areas of improvement and recommendations

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

As stated above

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		
7. Resources		1 - 5
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.	5
7.3	The Department's profits and donations are used for its development and for the benefit of the university community.	5
7.4	The Department's budget is appropriate for its mission and adequate for the implementation of strategic planning.	5
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.	5
7.7	The fitness-for-purpose of support facilities and services is periodically reviewed.	5
Justify the numerical scores provided for the quality indicators (criteria) by specifying (if any) the deficiencies.		
ECC had nothing of significance to address -		

Findings

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

As stated above

Strengths

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

As stated above

Areas of improvement and recommendations

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

Please ✓ what is appropriate for the following assessment area:

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

C. 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.

Overall this Department and Programmes under review satisfied the ECC in its mission, objectives, processes and general commitment to a worthy area of study, that is certainly needed both locally, regionally and internationally given the burden of disease related to problematic substance use and addictions.

With the exception of the ‘internships’ (see specific comments below) the ECC found the MSc Programmes well conceived and well structured.

The ECC were impressed by the commitment and organisation of the University and the Department and clearly have a team of academics (teachers and researchers), and administrators capable of delivering the programmes under review, who were competent and enthusiastic.




There are clearly two broad areas that the ECC identified that would benefit from review and strengthening

1. The Internship Aspect of the Programme – whilst this is an exceptionally important and innovative aspect of the programme, and is highly commended, the team do need to consider a number of issues that were not clear or transparent in either the site visit or paperwork e.g.
 - What occurs if a non Greek Speaking student applies – if that is not possible this needs to be reflected in the international advertising campaign
 - What occurs if an international student (on the DL) wishes to undertake their Internship in their local country – what are the quality assurance arrangements in selecting, and determining if the host site can facilitate and meet the needs of the student and comply with the programme regulations
 - How are internships overall managed – explicitly – operationally, and how can students, stakeholders be reassured of the qualifications of the clinical tutors/supervisors
2. Assessment Literacy – there is a clear and consistent approach to the assessment process which would benefit from considering ‘other forms’ of assessment other than examination that reflect different learning styles. Furthermore, each courses’ learning outcomes should be mapped to the assessment framework so that the student can clearly understand how their learning is to be assessed.

In addition, the lack of ‘formal connection’ within the overall assessment process and credit bearing part of the course for the ‘internship’ should be revisited, so that a student who may be exceptionally strong academically, but fails to meet the necessary competencies clinically will not be able to gain an award that implies masters preparedness as a counsellor. Furthermore it is noted that the credit bearing aspect of the program and the fact the practicum does not appear to correspond to specific ECTS (15 ECTS are the standard for other MSc counselling programs in Greece) is problematic. Albeit that there might be a “pass/fail” evaluation process it is always advantageous (for the prospective students) to have their internship hours matched with specific ECTS credits (if they want their degree to be comparable with other similar MSc degrees in Greece and elsewhere).

The ECC strongly recommend that these two broad issues need to be reviewed and addressed (particularly for International Student admissions) before moving forward.

D. Signatures of the EEC

Name	Signature
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Date: 17 September 2021