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ΑΡΧΗ ΔΙΑΣΦΑΛΙΣΗΣ ΚΑΙ ΠΙΣΤΟΠΟΙΗΣΗΣ  
ΤΗΣ ΠΟΙΟΤΗΤΑΣ ΣΤΗΝ ΑΝΩΤΑΤΗ ΕΚΠΑΙΔΕΥΣΗ

HELLENIC REPUBLIC

HQA

HELLENIC QUALITY ASSURANCE  
AND ACCREDITATION AGENCY

**Accreditation Report**  
**for the Internal Quality Assurance System**  
**(IQAS)**

**Institution Name: University of Ioannina**

**Dates: Nov. 4-10, 2018**

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

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## **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 Ioannina comprised the following five (5) members, drawn from the HQA Register, in accordance with the Law 4009/2011:

1. Prof. Constantine Passaris (Chair)  
University of New Brunswick
  
2. Dr. Christos-Savvas Bouganis  
Imperial College London
  
3. Dr. Vasileios Fotopoulos  
Cyprus University of Technology
  
4. Prof. George Frantziskonis  
University of Arizona
  
5. Prof. Emeritus Ioannis Vlahos  
TEI of Crete

## II. Review Procedure and Documentation

The Accreditation Panel (the Panel) met at the Headquarters of ADIP in Athens on November 4 and was briefed about the procedures to be followed during the site visit and was also provided with additional documents regarding the HQA mission and guidelines of the accreditation process.

In the afternoon of the same day the Panel met privately and discussed details of the University of Ioannina (UoI) report and the chairman allocated the tasks and issues to be undertaken during the site visit.

The Panel members arrived at Ioannina the following day, November 5, and met with the Rector, Prof. T. Albanis, and Vice Rectors S. Nikolopoulos and M. Pashopoulos (Vice Rector S. Georgatos was not present) for a brief discussion and an overview of the UoI history and current status. The discussion was focused on the University's vision and mission and the new challenges the Institution faces in view of the recent merging with the TEI of Epirus. The discussion proved very useful as the Panel gained a good understanding of the University's current status and future plans.

The following meeting was with the 7 members of MODIP (QAU) and the discussions were centered on the activities carried out by the QAU and their compliance with the Internal Quality Assurance System.

The next day, according to the site visit program, the Panel met with the Deans of Faculties, the Heads of Departments, members of the Internal Evaluation Group (OMEA/IEG) and faculty members. During these meetings, which were held punctually according to the program, the Panel held extensive and informative discussions and gained useful insights on the application of the Quality Policy of the University.

The day meetings continued with undergraduate, graduate, doctoral students as well as postdoctoral fellows, alumni, heads of administration services and external stakeholders and partners.

The Panel was given a tour of the campus during a break and held a short visit at the University's library and was impressed by its size and organization. Furthermore, members of the Panel had the chance to have discussions with students randomly met on campus.

The Panel concluded the program of the second day by holding a brief discussion with QAU members as well as the Rector and Vice rectors reflecting on the key findings from the site visit.

The panel recognized a genuine cooperative spirit by all parties involved in the meetings and willingness to cooperate and support the University's quality policy at all levels. In general, all participants proved very cooperative and committed in supporting the University's policy towards upgrading the quality standards of the University.

The Panel received several documents provided by the UoI QUA, for study and evaluation prior to the visit. These documents included a Progress Report, an Accreditation proposal of the Internal Quality Assurance System, the QUA quality manual, the Strategic Plan and related documentation. Furthermore, additional documents were provided efficiently during the visit upon request of the Panel.

The Panel was received with a positive attitude by all members involved and would like to thank the Administration and all faculty members for their cooperation and fruitful discussions we had during the site visit.

The Panel members returned to Athens on November 7 and started work on drafting the Accreditation report, based on the documentation received and the information gathered during the site visit.

## **I. Institution Profile**

The University of Ioannina (UoI) was founded in 1964 and it comprised originally the Departments of Philosophy and Mathematics. Nowadays, the UoI features (7) Schools and (15) Departments. The University Campus is one of the biggest in the country located 6 kilometers from the center of the city of Ioannina in an area of 3.500.000 sq.meters and includes teaching and research facilities, administration buildings, central library, student dormitories, student and staff restaurants, sport centers, etc. totaling 230.000 sq.meters of building space.

The number of students is close to 19.000 of which 3500 are graduate and PhD students. The University staff and other teaching personnel numbers more than 600 whilst the administrative staff numbers 250 persons.

The University of Ioannina provides high quality knowledge and supports research in a wide range of fields since its foundation. It actively disseminates its achievements and manages to integrate students and staff in the local social activities and plays an active role cooperating with local, national and international counterparts.

## PART B: COMPLIANCE WITH THE PRINCIPLES

### 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

The UoI has established a Quality Assurance Policy, as directed by the HQA that has been endorsed by the University administration and the whole academic community and has been made available at the University's website.

The QA policy of the University has been developed by MODIP (QAU) in cooperation with the Vice Rector, Department heads and Faculty Deans and was approved by the University Senate.

The University QA policy aims to develop a quality culture in the academic community and to establishing a HEI committed towards improvement in both quality of teaching and research appropriate for the strategic goals of the University.

The main targets of the IQAS is the development of systems to improve the quality of services offered by the University in accordance with the directives provided by the HQA in the framework of the EHEA so that the University will be able to compete at the same level with other Universities in Greece and abroad.

The quality assurance policy (IQAS) and the required procedures are well-defined and communicated to all relevant parties of the University.

The student questionnaire is implemented in all departments and the results are channeled through OMEA to QAU and then made known to all interested parties. This procedure is indicative of a structured process towards improvement in quality assurance.

The UoI and its IQAS face new challenges due to the merging of the TEI of Epirus as this can lead to further documentation and adjustments. This will lead to the formulation of a new and well-documented Strategic plan which is missing now, as the last one was drawn in 2008.

Considering the existing financial constraints, faced by most HEIs in Greece, the UoI is keen to make every effort possible to support the QAU and other services and related infrastructures to achieve the goals of a successful IQAS.

### Panel judgement

*Please tick one of the following:*

| <b>Principle 1: Institution policy for Quality Assurance</b> |          |
|--|----------|
| Fully compliant  | <b>X</b> |
| Substantially compliant                                      |          |
| Partially compliant  |          |
| Non-compliant  |          |

### Panel Recommendations

- The UoI strategic plan should be updated.



## 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, LIBRARIES, IT INFRASTRUCTURE, 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 mainly from State funding for HEIs, the Public Investment Program (ΠΔΕ), and Special Accounts for Research Funds.

The University acknowledges the importance of funding transparency and its efficient allocation. This has been reflected in its Quality Manual and the processes that it has put in place in order to enable the various departments to form their funding requirements in a consistent way, through their submission to the University Administration for the decision of the allocation of funding. The Quality Manual provides detailed information on the various criteria that are considered by the University Administration on the allocation of the available funding alongside with their importance. The final decision on the allocation of funding is performed by considering the information submitted by the various departments and the strategic plan (SP) of the University.

The current submitted SP document is rather outdated, as it has not been updated since 2008 (10 years ago). According to the University, the underlying reasons are due to the constant flux of the academic system in Greece, and the uncertainty that this has created for the operation and the future planning of the university, making long-term plans meaningless. Furthermore, the recent planned merging with the Epirus TEI led the University to further postpone the updating of its SP. Nevertheless, through discussions with QAU it became evident that the University is aware of this issue, and are discussing the strategy of the University in their yearly meetings considering the new developments, providing as such a refinement on their strategic planning, but this has not been captured in a single coherent document.

During the meetings with the University Administration, the QAU, the Internal Evaluation Groups, 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 IQAS processes and no complaints or other concerns were raised.

During the meeting with postgraduate students, the Panel became aware that the salaries for PhD students are not fixed and determined by the University, but are set through negotiations between the individual PhD candidate and the supervisor according to the availability of funds. The Panel recommends that QAU should at first instance monitor the salaries offered to the PhD candidates, and in the future consider homogenizing the salaries across the various departments.

### Infrastructure

The Panel finds that the QAU has put in place clear processes for the allocation of resources (infrastructure) to the various departments as well as a set of criteria for the prioritization, the upgrading, and the maintenance of the various resources. QAU has provisioned appropriate systems to be in place for the monitoring of the infrastructure (central heating, lightning, electronic facility), but the Panel did not have the chance to verify this. Through a brief tour of the campus and Panel's visit of the library, the Panel felt that the provided infrastructure is appropriate for the size of the University (library, sports center) and maintained to a good degree even though a slight degradation on the appearance of the buildings (not painted) was observed.

Through the Panel's discussion with Chief administration officers, it was noted that the introduction of the process for collecting data for IQAS purposes has increased the workload of the various administrative staff, but there was a general feeling that the administration staff appreciated the importance of the process and its significance.

The Panel had the opportunity to meet with a number of undergraduate students from various departments and a number of points regarding the availability and the state of the provided infrastructure were raised (inadequate availability of some of the labs, sub-standard state of halls of residence, etc.). The Panel confirmed that QAU was aware for a some of those issues, which however were not clearly captured/ monitored through its processes, thus there is a need for improvement in this area.

## Working environment

Through the Panel's meeting with the students/staff/administration, a small number of complaints were raised. The complaints were focused on a problem with the existence of a number of stray dogs in the premises of the university (and even inside the buildings), as well as that the halls of residence are not as tidy as expected. The Panel confirmed the former, but was not in position to confirm the latter. In general, the visited places (Senate building, restaurant for faculty, library) looked tidy and within the Panel's expectations. However, several buildings were of obvious need of renovation and maintenance. The Panel applauds the policy of free meals to all on-campus students.

## Human Resources

QAU has put in place a number of actions for monitoring the allocation and progression of academic and administrative staff across the University. The number and nature of the key indicators that are in place for monitoring the above process is considered to be suitable and shows a clear picture of the university and its evolution.

Through the Panel's discussion with the Chief Administrative Officers, it was verified that appropriate processes for monitoring the opportunities, and participation in various training workshops for staff development are in place, and this information is well-documented by QAU.

Nevertheless, UoI is currently undergoing a major change, i.e., it is merging with TEI of Epirus. The Panel believes that this will lead to major changes in the way the various offices run their operations and redistribute the expected workloads. Since, by law, the movement of administrative staff cannot be enforced, a two-campus university framework is foreseen, with the possibility of splitting the administrative services between the two campuses. The Panel believes that this will create challenges for the current QAU, but also opportunities, and an appropriate strategic plan for QAU's refinement needs to be in place.

## **Panel judgement**

| <b>Principle 2: Provision &amp; Management of the Necessary Resources</b> |          |
|---|----------|
| <b>2.1 Funding</b>  |          |
| Fully compliant   |          |
| Substantially compliant   | <b>X</b> |
| Partially compliant   |          |
| Non-compliant   |          |
| <b>2.2 Infrastructure</b>   |          |
| Fully compliant   |          |
| Substantially compliant   |          |
| Partially compliant   | <b>X</b> |
| Non-compliant   |          |
| <b>2.3 Working Environment</b>  |          |
| Fully compliant   |          |
| Substantially compliant   | <b>X</b> |
| Partially compliant   |          |

|                            |          |
|----------------------------|----------|
| Non-compliant              |          |
| <b>2.4 Human Resources</b> |          |
| Fully compliant            | <b>X</b> |
| Substantially compliant    |          |
| Partially compliant        |          |
| Non-compliant              |          |

|   |          |
|---|----------|
| <b>Principle 2: Provision &amp; Management of the Necessary Resources (overall)</b> |          |
| Fully compliant   |          |
| Substantially compliant   | <b>X</b> |
| Partially compliant   |          |
| Non-compliant   |          |

### **Panel Recommendations**

- Strategic plan should be redefined and updated so that it mirrors the status and the needs of UoI after the merging with TEI of Epirus.
- Introduce mechanisms that enhance the visibility and purpose of QAU to the student and staff bodies.
- Develop roadmaps for improving the UoI infrastructure wherever needed.

### 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**

The Panel took a series of available documents under consideration, including a 2008 University Strategic plan (SP) and a 2018 progress report of QAU among others. This documentation was scrutinized in unison with constructive conversations with the Senate, members of QAU, OMEA as well as various stakeholders including alumni and industrial liaisons. It should be noted that all parties involved were characterized by keenness to collaborate and assist in the accreditation procedure. Bearing these factors in mind, the Panel finds that:

- The external evaluation of the UoI carried out in 2015 resulted in a number of measures that took place and led to clear improvements.
- It became clear following conversations with University groups that most bodies (academic and administrative) had become fully aware of the mission and tasks of QAU, thus facilitating the procedures undertaken by QAU. This was less notable in downstream bodies such as alumni and other stakeholders such as industrial partners, who were more directly acquainted with DASTA.
- A downfall in the specific field of evaluation is the lack of an updated University SP plan, as the latest version dates back to 2008, with clear consequences and problems arising as a result in the goal-setting procedure of the University. It should be noted however that this discrepancy is the result of the pending restructuring of the University through the merging of TEI Epirus, which will undoubtedly result to a fundamental restructuring of the SP.
- It became clear that most involved parties were fully aware of the fact that QAU performs a crucial role as a conduit for the transmission and communication of goal-setting. However, emphasis so far has practically been given to data collection rather than downstream actions such as correctional approaches, while goal-setting does not appear

to be substantiated or justified in detail. Indexes appear to be vague and it did not become clear how these metric approaches were set.

- Some Departments have set goals of improvement that are aligned with quality assurance standards, while others are lacking in this regard. Thus, it seems there is no alignment of such practices at the University level. It is recommended to do so as progress will then be easier to assess at a University level rather than a Departmental one (macro-management rather than micro-management).
- 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.

### Panel judgement

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

| <b>Principle 3: Establishing Goals for Quality Assurance (overall)</b> |          |
|--|----------|
| Fully compliant  |          |
| Substantially compliant  | <b>X</b> |
| Partially compliant  |          |
| Non-compliant  |          |

## **Panel Recommendations**

The Panel:

- recommends that goal-setting targets (defined through qualitative indexes, KPIs) become well-justified in forthcoming QAU reports.
- strongly recommends that University processes are integrated and follow a top-down approach, in which Departments will follow uniform approaches, as this can lead to a consolidated set of institution-wide goals and priorities.
- recommends that the University SP is updated, considering the forthcoming restructuring, and therefore clearly sets a well-defined plan of quantitative and qualitative goals.
- recommends that goals linked to industry and other stakeholders are better defined by QAU and communication with DASTA is intensified to ensure this.

## 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:

- 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;



- determination of how the IQAS procedures / processes are audited, measured and assessed, and how they interact;
- provision of all necessary resources to enable the IQAS function.

#### Documentation

The IQAS documentation includes, among other things, a series of key documents demonstrating its structure and organisation, such as the Quality Manual, which describes how the Standards' requirements are met.

The Annexes of the Quality Manual include:

- the Quality Policy and the Quality Assurance Objectives;
- the necessary written Procedures, along with the entailed forms;
- the necessary Guides, External Documents (e.g. pertinent legislation), as well as any other supporting data;
- the standing organisational structure of the QAU, with a detailed description of the competences, the required qualifications and the goals for each post. The organisational chart is structured in a manner that ensures that the IQAS organisational requirements are fully and properly met.

### **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.

The Panel is cognizant of the structural and organizational transitional challenges that will be faced in the process of the merger of UoI with the TEI of Epirus. The merger implies that there will be a period of transformational change resulting into an extended academic reach for UoI.

Like most Greek universities, UoI is facing staffing and financial challenges.

The Panel recommends that the current institutional strategic plan, which was developed in 2008 and was subjected to minor revisions in 2013, should be updated in the near future in a collaborative manner with the participation of all the academic constituencies.

The Panel met with a large number of the UoI academic community including the teaching and administrative staff, current undergraduate and post-graduate students, graduates, alumni and stakeholders. Our discussions revealed that stakeholders are very interested in supporting the mission of the university and in providing graduating students with employment opportunities. The Panel recommends that UoI build bridges with these stakeholders and intensify its outreach efforts with all of those important partners.

Members of the alumni that met the Panel expressed an interest in supporting the academic mission of UoI and its academic units. The Panel recommends that UoI embraces this input and collaboration of its alumni base.

The Panel believes that the role of QAU is not confined to identifying problems but also in promoting innovative practices that will advance and sustain the UoI and its academic

departments at a high level. Furthermore, the QAU is encouraged to engage the academic community in promoting its mission of quality assurance in a proactive manner.

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 some departments.

The Panel also recommends that the internal QAU take advantage of its central coordinating strategic position for the purpose of disseminating best practices among all academic units and across UoI.

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 the ongoing task of monitoring and making recommendations for the structural organization, the machinery, operation, and for the 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.

Regarding student course evaluations, there is room for improving the scope of the questions. The Panel recommends that questionnaires contain at least two sections, i.e., the first being a uniform set of questions and the second being a set of questions that are directly related to specific courses, academic units and laboratories. This has been successfully accomplished by some departments.

UoI 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 the 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 the QAU. For its part, QAU responds to these reports by providing feedback and suggestions for improvement, and maintains an overall alignment of the departments with the academic mission of UoI.

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 data and comparing them to relevant quality indicators. Furthermore, the quality manual describes the processes clearly.

The Panel was impressed with the role and initiatives of the Lifelong Learning Centre and the Centre for the Study of the Hellenic Language and Culture. The Panel recommends that consideration be given to establishing a program for providing the faculty with opportunities to finetune their teaching skills, adopt innovative teaching methods, and enhance their pedagogical aptitudes.

The Panel acknowledged that the UoI QAU is in compliance with the spirit and guidelines of ADIP.

### Panel judgement

| <b>Principle 4: Structure, Organization and Operation of the IQAS</b> |          |
|---|----------|
| Fully compliant   | <b>X</b> |
| Substantially compliant   |          |
| Partially compliant   |          |
| Non-compliant   |          |

### Panel Recommendations

- QAU should be proactive and serve as a repository and catalyst for the dissemination of best practices.
- QAU to be adequately staffed.
- QAU develop processes for promoting and monitoring the quality of UoI engagement with internal and external stakeholders.
- QAU develop a process to monitor and facilitate the feedback received from Departments stemming from applying the quality manual for improving it and the IQAS in general.

## 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**

QAU ensures that the internal reviewing processes of the schools and departments takes place regularly and consistently, monitors their processes and collects the outcomes of the review. It also shares the outcomes with the University Administration. QAU ensures the reviews result in documented action plans that are 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 traditionally (i.e., not electronically) using paper forms of the questionnaire. However, some department uses electronic forms of a questionnaire tailored to the courses it offers. Student participation rates are not tracked, thus there is no official data in that regard. According to QAU, however, participation rates vary, and can be high for some and low for other courses. Each department may modify the questionnaire to accommodate its needs. Results from the questionnaire are compiled by QAU, communicated with the University Administration, and results are distributed to teaching faculty. Currently, the check marks in each questionnaire are captured with optical recognition technology and processed electronically, yet, written comments by the students are processed manually. A QAU goal is to make the course evaluations fully electronic, though specific milestones in that regard are uncertain. QAU feels that the change to electronic forms will not change the participation rate much. There are no goals to make the course evaluation mandatory to students nor whether it would be effective to do so. QAU personnel expressed a view that faster processing of the course evaluations would benefit all stakeholders to the process, i.e., students, teaching faculty, administration and the QAU. In that regard, switching to electronic course evaluation would help, and is recommended by the Panel. Finally, it is worth noting that some of the interviewed students mentioned the positive impact of the course evaluation in teaching quality.
- An example of a strategy based on effective self-assessment is the adoption of measure to promote timely graduation.
- In terms of curriculum, it seems as if there is no regular self-assessment and improvement actions and little input (with the exception of a few departments) is provided from student bodies, and from alumni and industry. As a result, there is no overall consensus in reducing the number of courses required for graduation (as is known, overall the number of courses required for graduation is high in most Greek higher education programs). It is noted, however, that for some departments, interaction of the department with QAU and OMEA resulted in the reduction of number of courses required for graduation by as much as 15%, recently. Exceptions, however, do exist. For example, in the department of medicine, students asked for certain changes in the curriculum and the department delivered.
- There is no alumni council, at least not a formal one across the institution. There is no formal interaction with industry stakeholders. Some units ask for industrial input in their overall program sporadically but there is no formal mechanism to identify the results from such interaction. Interaction with the local Mayor's office is not significant, even though the office of the mayor thinks it can contribute to the curriculum, e.g., in the context of smart cities, an area of current activity. The great interaction with regional government is commended and so is the career days that take place once a year, attract significant parts of the local and non-local industry. The Panel feels it would help if the above were made part of the self-assessment process.

The Panel recognizes that a number of appropriate processes are in place to ensure a proper self-assessment, and relevant indicators are taken into consideration. Nevertheless, QAU acknowledges a number of obstacles in applying the proposed self-assessment procedures, yet at the same time has highlighted a number of possible solutions to overcome those problems.

## Panel judgement

| <b>Principle 5: Self-Assessment</b> |          |
|-------------------------------------|----------|
| Fully compliant                     |          |
| Substantially compliant             | <b>X</b> |
| Partially compliant                 |          |
| Non-compliant                       |          |

## Panel Recommendations

- Switching to electronic course evaluation is recommended to accommodate a faster processing of data and feedback to students, teaching faculty, and administration.
- QAU should include data on student participation rate in course evaluations for each and every class as part of the self-assessment of the UoI.
- QAU should include in the self-assessment process indicators of strong input from students, alumni, and industry in the evaluation and modification of the curriculum process.

## 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**

It became evident that University bodies are fully aware of ADIP/QAU procedures, and data collection appears to be standardized and functional. In that sense, the Panel commends the efforts of QAU, as well as the Departments for their cooperation in the process. Concerns were raised in regard from the University with the upcoming merging with TEIs Departments and how such procedures will take place smoothly, however this is not in the scope of the present accreditation.

Overall, data collection and analysis procedures appear to be of a satisfactory level, with QAU obtaining such information by a variety of sources such as students, Research Council, ERASMUS Office etc. A drawback is the 'improvement' section, as it is not evident how analysis leads to improvements or modifications.

Specific observations regarding sub-sections under scrutiny:

#### Study programs/education activities

A hard copy of a detailed questionnaire per course is completed by students. This covers aspects of the course material, learning resources and the competence of the lecturer. The Panel was unable to ascertain meaningful student participation rates (e.g., averages over departments, etc.) for student course questionnaires. It is noted that both attendance in class and participation in the completion of the questionnaire are not compulsory. It should be commended that Departments were given creative freedom to adopt their questionnaires according to their specific needs (e.g., laboratory/clinical sections, etc.). Improvements in curriculum did not result only from analysis of questionnaires but also from direct contact of students with faculty.

## Research and Innovation

Information was given in terms of research-related indices. However, such quantifiable indices could become more user friendly, as they are presently hard to follow through the University website in a lucid fashion, particularly for interested members of the public.

## Activities related to Administration and Human Resources

Administrative services are evaluated through questionnaire at a collective level. The Panel feels that would be useful if it also took place at the individual level.

The Panel applauds that QAU has identified that the current information system for data collection and processing needs improvement to make it more compatible with HQA's systems, and has planned its implementation for 2018-19.

## **Panel judgement**

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

| <b>Principle 6: Collection of Data: Measuring, Analysis &amp; Improvement (overall)</b> |          |
|---|----------|
| Fully compliant   |          |
| Substantially compliant   | <b>X</b> |
| Partially compliant   |          |
| Non-compliant   |          |



## **Panel Recommendations**

- Curriculum quality data collection should be done electronically, as this will likely ensure increased participation while promoting confidentiality for students.
- It is also recommended to extend electronic evaluation forms to Administrative services, etc., to further facilitate data collection and processing.
- Additional data collection such as those linked to alumni and stakeholders should be performed. This is particularly important, as the link with the Industry through the involvement of DASTA is dynamic, rendering these indexes even more important for collecting and analyzing.
- Consideration be given to quality assurance practices through individual evaluation of all members of UoI.

## 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 UoI includes provisions for publication of data that concern university activities and the performance indicators that measure the process efficiency. UoI has improved and re-designed its main website in order to provide easier access through mobile devices, and enhance its capabilities for the timely advertising of information through allowing distributed access.

By reviewing the University website, the Panel observed that while important information is present on the University website, certain variability and unevenness in the amount and content of the information provided across departments is evident. The websites of the individual departments do not follow the same format, which does not create a coherent view of the university to external visitors. Also, the Panel has noted that some of the information provided within the departmental websites is not updated, referring to the previous academic year, and a number of courses websites have not moved to the new platform (e-course).

After discussion with the students, the Panel concluded that the information is advertised in a timely manner on the website, and through the utilization of the new platform (e-course), any updates are efficiently communicated to the students.

Nevertheless, the panel noticed that the website of QAU (modip.uoi.gr) is not regularly updated (latest entry in the "News" section was 6/6/2014) and only a very few External Evaluation Reports of the Institutions and the Departments are available. Furthermore, it became apparent that the system that is in place for the evaluation of the various offices and courses does not provide any provision to ensure the integrity of information (i.e., it is open to the public for submitting a view). Upon discussion with QAU, it became apparent that the on-line evaluation system is not currently utilized by all departments.

Finally, the Panel noticed that the Greek version of the University's website is regularly updated, while the one in English is not (e.g., latest entry was July 2017).

## Panel judgement

| <b>Principle 7: Public Information</b> |          |
|--|----------|
| Fully compliant                        |          |
| Substantially compliant                |          |
| Partially compliant                    | <b>X</b> |
| Non-compliant                          |          |

## Panel Recommendations

- Make publicly available, in the QAU website, appropriate information (e.g., Internal Evaluation of Departments, Evaluation of courses, etc.) as has been outlined in IQAS.
- Implement the necessary actions to ensure the integrity of the on-line evaluation process.
- More uniform presentation of web-based information across departments
- UoI monitors and implements regular updates of published materials, including information regarding dates of last update.
- Utilization of social media (e.g., Facebook, Twitter) for real-time information dissemination.
- Update the English version at the same time as the Greek one.
- Data analysis and presentation of indexes should be done in graphical format, preferably in the UoI website for clarity purposes and ease of interpretation.

## 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

The University has acted on the recommendations from its external evaluation (External Evaluation Report, Dec. 2015) and produced a Progress Report (July 2018) and a Quality Target Report (July 2018) document. The Progress Report illustrates that some progress has been observed in the implementation of the recommendations provided in the External Evaluation Report but at the same time highlights the difficulties in adopting the majority of the recommendations. The Panel feels that the university makes genuine effort to improve on the aspects that have been raised during the recent external evaluation (2015), an appropriate action plan with well-defined targets has been developed in the Progress Report, alongside with the immediate goals of QAU.

Furthermore, QAU has developed a quality goal setting document (July 2018) with a detailed action plan on the strategic targets (KPI) that the university has set with the help of ADIP. However, QAU set these targets with little to no justification about their feasibility, but as an inspiration for improvement. Moreover, the extra workload that these targets will introduce has not been considered during the development of the quality goal setting document. However, the Panel recognizes the efforts of QAU but recommends a refinement in the quality goal setting document with more realistic approach.

### Panel judgement

| Principle 8: External Evaluation & Accreditation of the IQAS |          |
|--|----------|
| Fully compliant  |          |
| Substantially compliant                                      |          |
| Partially compliant  | <b>X</b> |
| Non-compliant  |          |

## **Panel Recommendations**

- A refinement of the quality goalsetting document should be considered, prioritizing the significance of the targets for the university, considering at the same time the increased workload required by the academic and administrative staff for achieving the targets.

## PART C: CONCLUSIONS

### I. Features of Good Practice

- QAU consists of a strong team, committed and team-spirited members.
- University administration strongly supports IQAS.
- Regular interaction exists between the internal stakeholders and QAU.
- There is an established mechanism (questionnaire) for data collection.

### II. Areas of Weakness

- Lack of a current strategic plan.
- Existing processes have not yet resulted in improving publicity of information at a satisfactory level in certain areas.
- Potential for use of automated/electronic platforms is not fully exploited.
- IQAS has not yet resulted in S.M.A.R.T. (specific, measurable, achievable, relevant, time-bound) goal setting in some cases.

### III. Recommendations for Follow-up Actions

- Development of a current and dynamic strategic plan with the engagement of all stakeholders.
- There is room for improvement in automated/electronic data collection and processing.
- Develop a process for analysis of the collected information that will evaluate the progress towards goal-settings.

### IV. Summary & Overall Assessment

The Principles where full compliance has been achieved are:

Principle 1, Principle 4

The Principles where substantial compliance has been achieved are:

Principle 2, Principle 3, Principle 5, Principle 6

The Principles where partial compliance has been achieved are:

Principle 7, Principle 8

The Principles where failure of compliance was identified are:

None

| Overall Judgement       |          |
|-------------------------|----------|
| Fully compliant         |          |
| Substantially compliant | <b>X</b> |
| Partially compliant     |          |
| Non-compliant           |          |

## The members of the Accreditation Panel

Name and Surname

Signature

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