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HELLENIC REPUBLIC

H Q A

HELLENIC QUALITY ASSURANCE
AND ACCREDITATION AGENCY

Accreditation Report for the Internal Quality Assurance System (IQAS)

Institution Name: Democritus University of Thrace

Date: 18 November 2018

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**Επιχειρησιακό Πρόγραμμα
Ανάπτυξη Ανθρώπινου Δυναμικού,
Εκπαίδευση και Διά Βίου Μάθηση**
Με τη συγχρηματοδότηση της Ελλάδας και της Ευρωπαϊκής Ένωσης



Report of the Panel appointed by the HQA to undertake the review of the
Internal Quality Assurance System (IQAS) of the Democritus University of
Thrace 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: **Democritus University of Thrace** comprised the following five (4) members, drawn from the HQA Register, in accordance with the Law 4009/2011:

1. Prof. Spyridon Agathos (Chair)
Yachay Tech University, Ecuador & Catholic University of Louvain, Belgium
2. Dr. Teodoro Georgiadis
National Research Council - CNR Institute of Biometeorology, Italy
3. Prof. Theodoros Ntaflos
Vienna University, Austria
4. Prof. Emmanuel Paschos
Technische Universität Dortmund, Germany

II. Review Procedure and Documentation

Please refer briefly to the Panel preparation for the IQAS review, as well as to the documentation provided and considered by the Panel. State the dates and of the site visit and describe the visit schedule and the meetings held. Feel free to mention any additional information regarding the procedure, as appropriate.

The Accreditation Panel (AP) convened on Tuesday 13 November 2018 at the Royal Olympic Hotel in Athens. We began with a briefing by the HQA on the guidelines and standards of the Quality Assurance (QA) accreditation. During the briefing the panel also received the folder including documentation on the Democritus University of Thrace (DUTH) plus the Proposal for Accreditation of the Internal Quality Assurance System as well as documentation on quality indicators from 2015, 2016 and the External Evaluation Report on the university. After that, the AP had a meeting on the strategy and issues to be considered during the on-site visit. During this initial briefing the panel member Professor Emmanuel Paschos participated via teleconference.

On the same day, the AP flew to Alexandroupolis and was transferred to Komotini, the main site of the DUTH.

On Wednesday 14 November 2018 the AP met with the Rector, the Vice Rectors and the Quality Assurance Unit (MODIP) of the University. They gave us an overview of the University, its history, academic profile, current status, strengths and potential areas for improvement, supported by additional documents complementing their on-screen presentations.

During lunch the AP had an opportunity to discuss and reflect on the previous presentations.

The AP next met with Faculty members and Department Heads as well as representatives of Internal Evaluation Groups. Following this, the AP met with chief administration officers of the University as a group, and after that with a group of representatives of undergraduate students.

At the end, the AP had the opportunity to discuss among themselves the outcomes of the meetings of the first day.

On Thursday 15 November 2018, the AP had a series of meetings with groups of post-graduate students, with graduates and alumni and with external stakeholders. Following a debriefing among the AP members, the panel met once again with the Quality Assurance Unit focusing on a number of initial findings. A summary of key findings was informally presented to the Rector and the Vice Rectors, including the members of the MODIP. After lunch a site visit at the Alexandroupolis campus took place including the laboratories of the Medical School and the Department of Molecular Biology. At the end of the day, the AP flew back to Athens.

On Friday 16 November the AP worked on the draft Accreditation Report.

On Saturday 17 November the AP completed the draft Accreditation Report.

III. Institution Profile

Please provide a brief overview of the Institution, with reference to the following: history, academic remit, student population, campus, orientation challenges or any other key background information.

Democritus University of Thrace (DUTH) was founded in 1973 and it started operating in 1974 with the first Departments including the Department of Law and the Department of Civil Engineering. It is spread in 4 cities (Komotini, Xanthi, Alexandroupolis and Orestiada), includes 7 campuses and 18 Departments distributed in 8 Faculties covering a large spectrum of fields from the Exact Sciences and Engineering to Health Sciences, Social Sciences and Humanities.

It has approximately 24000 undergraduate students, 3432 postgraduate students, 1898 doctoral candidates, 562 professors and lecturers and the ratio of students to instructors is 47.4/1, i.e. it exceeds the Greek national average ratio of 44.5/1 which is excessive by EU standards (around 20/1). This constitutes a challenge and reflects the lack of new faculty member appointments over the last several years, with average age between 50 and 60 years old. The funding per student has fallen from €662 in 2006 down to €215 in 2017, which represents a dramatic decrease and reflects the economic crisis.

The spread of the University in 4 cities is positive for the local economy, society and culture however it can be a drawback for communication and synergies between faculties and departments. The presence of stagnating students is less severe than in the rest of Greek Universities (e.g. students exceeding the required time for graduation n by 2 years ($n+2$) is 21% of the student population (Greek national average is 26%)).

The Unit of Accreditation (MODIP) of the University has been working diligently and effectively in order to establish internal standards of quality and compliance to these by the different departments and operational units of the university. By now all faculty members from the different departments have been very cooperative with MODIP's procedures and have been contributing the required information.

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

Please comment on the compliance with the Principle.

The university has established an appropriate Quality Assurance policy clearly defining review processes and KPIs. The continuous improvement is assured by a large committee which involves members from several departments. The commitments of the MODIP committee are clear and the manpower resources are appropriate. Furthermore, the committee's work has been evaluated positively through the external institutional evaluation documented in the report of January 2016. All relevant information is available to the faculty members.

The role for students, staff, faculties, departments and administrative personnel is defined.

The ways in which the continuous improvement will be promoted is sufficiently communicated and it is well defined in the Quality Manual (pages 15-18) where they provide detailed description and a chart.

Panel judgement

Please tick one of the following:

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

The active participation of the students towards improving the educational processes must be more precisely defined.

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

Please comment on the compliance with the Principle.

The funding foreseeing operational costs and newly arising needs is carried out effectively, by using a fully adequate approach to planning and by implementing a suitable management system for the use of the available resources (budget execution exceeds 90%). This is true while

recognizing that the operational budget has been cut considerably in comparison with pre-crisis times.

The infrastructure is monitored throughout the different sites and campuses either with fully automated systems (in two cases) or with regular periodic checks by the university's technical services.

The consideration of the working environment in terms of cleanliness, transportation, heating/cooling/ventilation, building appearance and work-friendliness by the IQAS is considered adequate. In some cases, the monitoring and control of these systems is carried out automatically and the MODIP recognizes the need for constant improvement. Clearly the introduction of e-governance (reduction of paper-based communication and more extensive automation) will contribute to an even more favorable working environment.

In the area of human resource development, the description of specific steps was provided by the MODIP during the site visit, showing a number of existing and periodically upgraded mechanisms for personal and professional development of staff members.

Panel judgement

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

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

We indicate ‘substantially compliant’ in point 2.3 because it is not well structured and covers partly the requirements of that point in the IQAS. They only describe the managing and monitoring system. The mechanism, which should ensure communication and transparency are not given.

As a general recommendation in Principle 2, the bureaucratic barriers should be further reduced.

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

Please comment on the compliance with the Principle.

A credible QA plan of targets to be achieved was presented and it has resulted in a plan of institutional strategy strictly linked to KPIs. The QA staff (MODIP) clearly demonstrated the existence of processes and effectiveness of communication activities. The IQAS includes concrete, measurable, feasible and relevant goals that are planned in relation to the educational and research activities of the institution. The KPIs are given in Annex IVb and the algorithm used for their quantification is provided. In addition to the numerical values targeted, clear timetables are given for their accomplishment. These goals reflect the strategy of the university towards high achievements and there is continuous feedback from the faculty and students. An additional step towards improving the quality is also the implementation of the external evaluation recommendations with specific actions. In addition, a regularly scheduled and fully streamlined process of internal evaluations is in place, contributing further to the establishment and achievement of quality.

Panel judgement

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

Principle 3: Establishing Goals for Quality Assurance (overall)	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

The AP is aware of the desire for updating and expanding the academic offer (=new study programs or even departments) in order to keep up with new developments in other universities and disciplines, however this should not be at the expense of the quality and (limited) resources of existing study programs / departments.

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

Please comment on the compliance with the Principle.

The structure and mode of function of MODIP, and the Internal Quality Assurance System (IQAS) which this unit manages, are based on the Quality Manual (QM) which is thorough and comprehensive. The strategic flow (input, output, follow-up) is clearly reported in the QM where flags are present to assure the control of processes which are fully identified. It is possible to note the Institution performed a SWOT analysis identifying strengths/weaknesses/opportunities/threats and to report them in the specific processes. The MODIP is adequately staffed to manage both overall structure and specificities. MODIP is working closely with the Rector Council to review and update the IQAS.

Panel judgement

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

Although properly staffed at the present time, it is advisable that at least one more permanent staff position (not on soft money) should be created for support of MODIP in its multiple tasks.

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

Please comment on the compliance with the Principle.

The academic and administrative units of DUTH are evaluated internally and their performance assessed on a regular basis by the MODIP in the framework of the annual report and census data. These inputs are evaluated on the basis of the terms defined within the QM. The results of this annual internal evaluation (self-assessment) are disseminated among all services and

departments and they constitute a basis upon which institutional action plans are decided within the existing budgetary and logistic constraints. Clearly more institutional support and resources (including specific budgetary allocations) should be foreseen for this important recurring exercise. The MODIP, to its credit, provides very detailed guidance for the collection of these primary data.

Panel judgement

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

Clearly more institutional support and resources (including specific budgetary allocations) should be foreseen for this important recurring exercise.

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

Please comment on the compliance with the Principle.

DUTH has in place a specific infrastructure for collecting and managing data. It is based on an up-to-date set of information systems where the methodologies of data collection as well as periodic surveys are clearly reported in the documentation provided. The system takes into account the specificities of the MODIP requirements and allows to depict the institute's frame of performances and specific outcomes to be utilized for the internal quality assurance processes. Data collection is efficient and comprehensive, surveying numbers and status of students at their different levels (undergraduates, postgraduates), numbers and activities of faculty members and administrative staff, teaching and learning activities, research and innovation (including publication and patent output), infrastructures, and funding. The Information Systems used for data collection are, in addition to MODIP's own system, the electronic systems of each Department, the system 'Rescom' for management of the Special Research Account (ELKE) and the system of the Financial Services, among others. The data gathered allow to establish quantitative indicators to be managed by the Quality Assurance Unit (MODIP). These data are potentially very useful as they provide the basis for policy decisions in curriculum and other improvements. A number of pilot checks have been carried out to ensure data reliability and avoidance of duplication or diffusion of erroneous data. There is a start in collecting data from international databases (e.g. publications in Scopus or Thomson-Reuters), and more work in this direction is desired. The electronic formats of questionnaires (especially regarding teaching evaluations by students) have been gathering acceptance and initial concerns about personal data mishandling are now largely resolved.

Panel judgement

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

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

Efforts must be made to collect data that provide quantitative parameters that reveal the research performance of scientific and teaching personnel.

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

Please comment on the compliance with the Principle.

The DUTH and MODIP are using the web in order to disseminate all available information to the faculties, department, students, administrative services and to the public when appropriate.

Panel judgement

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

It is important to have an easily accessible English version of the central web page of the university itself and of some faculties where information is mainly in Greek.

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

Please comment on the compliance with the Principle.

In response to the external evaluation findings and recommendations, the MODIP prepared a detailed schedule as to how to address the issues raised. The AP on its site visit and upon studying all the written documentation has concluded that the institution is fully aware of the need and ready for continuous efforts at improvement. Staff members as well as teaching and research personnel have already been invited to information sessions and recognize the importance of the external review of the IQAS as well as its contribution to the improvement of the institutional services provided.

Panel judgement

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

Panel Recommendations

Please provide your recommendations with regard to issues that need to be addressed, as appropriate.

PART C: CONCLUSIONS

I. Features of Good Practice

Please state aspects of good practice identified, with regard to the IQAS.

The MODIP developed a guide for evaluating results from teaching together with the guidance to translate them into ECTS units.

The DUTH has now a comprehensive and standardized electronic system, which provides the students information about teachers and how to communicate with them, the contents of their courses, as well as their scientific activities and CV.

The MODIP introduced electronic questionnaires about the evaluation of teaching. The questionnaires are distributed to the students that are present in the classes.

The QA is well accepted by the members of all faculties and students, which now is considered a vehicle for the improvement of the quality of the university in all sectors.

II. Areas of Weakness

Please state weak areas identified, with regard to the IQAS.

The MODIP should better define and enlarge the role of the students and the external stakeholders along the entire quality assurance process.

There are limited resources for buying computer operating systems and licenses for specific software such as MATLAB, which are necessary for many MSc and PhD theses. The same also holds for laboratories supplies and equipment maintenance.

III. Recommendations for Follow-up Actions

Please make any specific recommendations for development.

1. The use of the English language in the teaching as well as in research seminars.
2. The synergy among the different departments should be established. Especially, when we consider the spread of the institution in 4 different campuses.
3. Establishing better relations between MODIP and stakeholders.

IV. Summary & Overall Assessment

The Principles where full compliance has been achieved are: Principles 1,2,3,4,5,6,7 and 8.

The Principles where substantial compliance has been achieved are: none

The Principles where partial compliance has been achieved are: none

The Principles where failure of compliance was identified are: none

Overall Judgement	
Fully compliant	x
Substantially compliant	
Partially compliant	
Non-compliant	

The members of the Accreditation Panel

Name and Surname

Signature

Prof. Spyridon Agathos (Chair), Yachay Tech University, Equador &
Prof. Emeritus, Catholic University of Louvain, Belgium

Dr. Teodoro Georgiadis, National Research Council –CNR Institute of
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