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Accreditation Report for the School of Medicine Undergraduate Programme

Institution: University of Patras
Date: 6 April 2024



Με τη συγχρηματοδότηση
της Ευρωπαϊκής Ένωσης



Πρόγραμμα
Ανθρώπινο Δυναμικό και
Κοινωνική Συνοχή





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Report of the Panel appointed by the HAHE to undertake the review of
the **School of Medicine Undergraduate Programme** of the
University of Patras for the purposes of granting accreditation.

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Part A: Background and Context of the Review

I. The External Evaluation & Accreditation Panel

The Panel responsible for the Accreditation Review of the **School of Medicine Undergraduate Programme of the University of Patras** comprised the following five (5) members, drawn from the HAHE Register, in accordance with Laws 4009/2011 & 4653/2020:

- 1. Professor Aristidis Veves (Chair)**
Harvard Medical School, Boston, Massachusetts, United States of America
- 2. Professor Dimitris Grammatopoulos**
Warwick Medical School, Coventry, United Kingdom
- 3. Professor Agapios Sachinidis**
Universität zu Köln, Köln, Germany
- 4. Dr. Panagiotis Georgakopoulos**
Member of the Panhellenic Medical Association, Patras, Greece
- 5. Mr. Ioannis Moysis Skianis**
Undergraduate student, School of Medicine, University of Crete, Heraklion, Greece

II. Review Procedure and Documentation

The External Evaluation and Accreditation Panel (EEAP) received relevant documentation from HAHE approximately 15 days prior to the date of the on-site visit. The Panel received a plethora of documents related to the organization of the School of Medicine of the University of Patras, the structure of the study guide and the internal quality assurance policies. The below detailed list shows all documents supplied to the Panel through HAHE:

- 0.1 new_Medical School Self – Assessment Report
 - 1.1 _new Quality Assurance Policy of the academic unit
 - 1.2 _new Quality target setting of the academic unit
 - 1.3 Code of Ethics and Good Practice
 - 2.1 _new Student Guide of the current academic year
 - 2.2 _new Courses outlines for all courses
 - 2.3 Clinical Training Manual
 - 2.4 Clinical site monitoring
 - 3.1 Evaluation by the students
 - 3.2 Regulation for students' complaints and appeals
 - 3.3 Regulation for academic advisors
 - 4.1 Internal Regulation of the programme
 - 4.2 Regulation of studies etc
 - 4.3 Diploma supplement template
 - 4.4 Table of the admission grades
 - 5.1 _new Summary report of teaching staff performance
 - 5.2 Name list of the teaching staff
 - 5.3 Policies for the support, development and evaluation of the teaching staff
 - 6.1 Detailed description of the infrastructure and services
 - 6.2 List of affiliated public-university Hospitals
 - 7.1 Quality data report
 - 7.2 Information system for the collection of data
 - 8.1 Procedure of the update of the programme's webpage
 - 9.1 Results of the annual internal evaluation of the programme by the QAU
 - 9.2 Procedure for the review of the curriculum
 - 10.1 Progress report to the recommendations of the last Accreditation
 - 10.2 Two-year Follow up Report

HAHE also provided copies of the previous external evaluation report from 2019 and quality indicators of the Department and the Undergraduate Programme from 2015 to 2022. Also, a summary of the European Qualifications Framework and the Accreditation guidelines were provided.

The Director General of HAHE scheduled an online meeting with the members of the EEAP on March 26th to inform the Panel of the guidelines and key points for the external evaluation process. In addition, members of the EEAP were informed that a recognition panel from the World Federation for Medical Education would be present during the evaluation of the School

of Medicine's Undergraduate Programme at the University of Patras. Observing the rules and procedures followed by the members of the EEAP during the process was the sole role of the WFME team. Members of the WFME team did not interfere with the meetings held.

The EEAP was transported to Patras on April 1, 2024. In the afternoon, the EEAP met with the Rector, Vice Rector/President of MODIP, and the Head of the School of Medicine. The Panel participated in a series of meetings on Tuesday, April 2nd, 2024. They met with the Internal Evaluation Team of the School (OMEA), the Quality Assurance Unit (MODIP) of the University, teaching staff, students, alumni, and employers-social partners (Patras Medical Association, private sector, and the Director of the University Hospital of Patras). The Panel visited the lecture halls, the library, and some laboratories used for undergraduate education. Also, a visit to the University Hospital of Patras was organized so that the members of the Panel could obtain a firsthand experience of the clinical skills training provided. On the last day, Wednesday 3rd of April 2024, the Panel discussed with OMEA and MODIP representatives, the President of the School of Medicine, and the Vice-Rector / MODIP President the Panel's initial observations and ideas to address some problems identified.

The EEAP expresses its gratitude for the hospitality and willingness of the faculty and students to engage in the external evaluation process. All documents, data, and presentations that the EEAP requested during the visit were provided promptly.

III. School of Medicine Undergraduate Study Programme Profile

The University of Patras was established in 1964 and comprises 7 Schools: the School of Natural Sciences, the School of Economics and Business, the School of Engineering, the School of Agricultural Sciences, the School of Health Sciences, the School of Health Rehabilitation Sciences and the School of Humanities and Social Sciences.

The School of Medicine was founded in 1977 and is organized as a department under the School of Health Sciences. The School of Medicine is located at the Rio University campus in close proximity to the city of Patras. The School of Medicine is internally organized in preclinical and clinical departments (Τομείς): Basic Sciences I and II, Clinical Laboratory, Internal Medicine I and II, Pediatrics, Gynecology and Obstetrics.

At the time of the visit, the School employed 119 faculty members, 9 members of Specialized Laboratory Teaching Staff (ETEP) and 14 members of Special Teaching Staff (EDIP). The Department also had approximately 1250 undergraduate.

Currently, the Department delivers a revised “new” curriculum, which was established in 2003-2004. The undergraduate curriculum follows a traditional set-up of 6-year studies split into 12 semesters; each semester includes a certain number of “teaching units” (t.u.), as well as ECTS units (European Credit Transfer System Units). There is an early introduction into the clinical environments and a progressive shift from the basic to clinical subjects.

The General Assembly of the Faculty is responsible for the design of the curriculum, which is revised every year. The Chairman of the Faculty convenes a committee that will supervise the curriculum. The committee consists of members of the General Assembly with an annual term and submits recommendations to the General Assembly, which follow the recording of the Sectors’ suggestions. Every process is done under the close supervision of the Internal Evaluation Team of the School (OMEA). OMEA also issues recommendations for changes of the curriculum based on quality indicators that are taken into consideration, as well as student evaluations of previous years.

The educational objectives of the Undergraduate Programme in Medicine are: First, to provide excellent education to future medical doctors and to help students develop the skills necessary for the effective treatment of patients. In addition, an equally important objective is to install to the students the values and the ethical principles, which are necessary for the practice of medical profession.

Part B: Compliance with the Principles

Principle 1. Quality Assurance policy

INSTITUTIONS SHOULD APPLY A QUALITY ASSURANCE POLICY AS PART OF THEIR STRATEGIC MANAGEMENT. THIS POLICY SHOULD EXPAND AND BE AIMED (WITH THE COLLABORATION OF EXTERNAL STAKEHOLDERS) AT ALL INSTITUTION'S AREAS OF ACTIVITY, AND PARTICULARLY AT THE FULFILMENT OF QUALITY REQUIREMENTS OF UNDERGRADUATE PROGRAMMES. THIS POLICY SHOULD BE PUBLISHED AND IMPLEMENTED BY ALL STAKEHOLDERS.

The quality assurance policy of the academic unit is in line with the Institutional policy on quality and is included in a published statement that is implemented by all stakeholders. It focuses on the achievement of special objectives related to the quality assurance of study programmes offered by the academic unit.

The quality policy statement of the academic unit includes its commitment to implement a quality policy that will promote the academic profile and orientation of the programme, its purpose and field of study; it will realise the programme's strategic goals and it will determine the means and ways for attaining them; it will implement the appropriate quality procedures, aiming at the programme's continuous improvement.

In particular, in order to carry out this policy, the academic unit commits itself to put into practice quality procedures that will demonstrate:

- a) the suitability of the structure and organisation of the curriculum;*
- b) the pursuit of learning outcomes and qualifications in accordance with the European and the National Qualifications Framework for Higher Education;*
- c) the promotion of the quality and effectiveness of teaching;*
- d) the appropriateness of the qualifications of the teaching staff;*
- e) the enhancement of the quality and quantity of the research output among faculty members of the academic unit;*
- f) ways for linking teaching and research;*
- g) the level of demand for qualifications acquired by graduates, in the labour market;*
- h) the quality of support services such as the administrative services, the Library, and the student welfare office;*
- i) the conduct of an annual review and an internal audit of the quality assurance system of the undergraduate programme(s) offered, as well as the collaboration of the Internal Evaluation Group (IEG) with the Institution's Quality Assurance Unit (QAU).*

ANNEXES

1.1 Quality Assurance Policy of the academic unit

1.2 Quality target setting of the academic unit

1.3 Code of Ethics and Good Practice (Law 4957/2022, article 217)

Study Programme Compliance

Findings

The School of Medicine of the University of Patras has established an Internal Evaluation Team (OMEA) that is responsible for overseeing quality assurance policies at a departmental level. As part of its responsibilities, the University's Quality Assurance Unit (MODIP) supervises the work of OMEA and ensures that the best quality assurance practices are in place at the institution.

Each year the OMEA and MODIP complete an internal evaluation of the undergraduate programme (provided documentation does not include the 2023 OMEA Yearly Internal Evaluation). The programme is evaluated every five years by a Panel of external experts appointed by HAHE.

Data for internal and external evaluations are collected in multiple ways. The evaluation of the quality of the teaching process is primarily done through questionnaires that students voluntarily fill out. The quality of the research work of the faculty is measured with internationally established key performance indicators such as citations, H-index, and IF.

Analysis

The quality assurance policy of the School is in line with the University's quality assurance policy and the guidelines of the Hellenic Authority for Higher Education (HAHE). The Quality Assurance policy of the School is available through a dedicated website (<https://www.med.upatras.gr/index.php?r=pages/index&id=qos&lang=en>). The School has made efforts to communicate the approved quality assurance policy adequately, but the Panel finds that minor discrepancies do exist that hinder the effective implementation of the policy.

The School is committed to continuous improvement by setting achievable targets and specifying deadlines for their implementation. The set targets are based on the strategic objectives of the School. As stated in documents 1.1 & 1.2, the School's overarching goals are to provide high-level education and quality research, to promote excellence, and to improve the undergraduate programme's external orientation. The goals are paired with suitable KPIs and are monitored every year by OMEA and MODIP.

The Panel agreed that future revisions of the programme should include a mechanism to quantitatively monitor the effectiveness and impact on the quality of the changes.

Conclusions

Although efforts have been made to honour the deadlines set, the Panel finds that specific objectives have not yet been fully implemented. From the minutes of the Undergraduate Programme Committee, it is clear that there is an appropriate mechanism that identifies issues around curriculum quality, actions are agreed in relevant committees for the improvement of the Undergraduate Programme. However, on occasions the decisions of the General

Assembly, have not yet been fully implemented (for example the universal use of a logbook during clinical rotations).

The Panel is pleased that all facilities and administrative services provided are adequate for the undergraduate education, as stated in Principle 6.

During the visit, the Panel had the opportunity to hear real-life examples of student feedback. An issue raised by the students was that questionnaires were very time-consuming to fill out and as a result, student participation was very low. The Panel also had the chance to discuss with OMEA representatives how feedback from students is evaluated and actioned.

Panel Judgement

PRINCIPLE 1. QUALITY ASSURANCE POLICY	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- Future revisions of the programme should include a mechanism to quantitatively monitor the effectiveness and impact on the quality of the changes.
- The School should put additional effort into monitoring effective implementation of improvements against strict deadlines on the Undergraduate Study Programme.

Principle 2. Design and approval of programmes

INSTITUTIONS SHOULD DEVELOP THEIR UNDERGRADUATE PROGRAMMES FOLLOWING A DEFINED WRITTEN PROCESS WHICH WILL INVOLVE THE PARTICIPANTS, INFORMATION SOURCES AND THE PROGRAMME'S APPROVAL COMMITTEES FOR THE PROGRAMME. THE OBJECTIVES, EXPECTED LEARNING OUTCOMES, INTENDED PROFESSIONAL QUALIFICATIONS AND THE WAYS TO ACHIEVE THEM ARE SET OUT IN THE PROGRAMME DESIGN. THE ABOVE DATA AS WELL AS INFORMATION ON THE PROGRAMME'S STRUCTURE ARE PUBLISHED IN THE STUDENT GUIDE.

Academic units develop their programmes using a well-defined procedure. The academic profile and orientation of the programme, the objectives, the subject areas, the structure and organisation, the expected learning outcomes and the intended professional qualifications according to the National Qualifications Framework for Higher Education are described at this stage. The approval or revision process for programmes includes a check of compliance with the basic requirements described in the Standards, on behalf of the Institution's Quality Assurance Unit (QAU).

Furthermore, programme design should take into consideration the following:

- *the Institutional strategy;*
- *the active participation of students;*
- *the experience of external stakeholders from the labour market;*
- *the smooth progression of students throughout the stages of the programme;*
- *the anticipated student workload according to the European Credit Transfer and Accumulation System;*
- *the option to provide work experience to the students;*
- *the linking of teaching and research;*
- *the relevant regulatory framework and the official procedure for the approval of the programme by the Institution.*

ANNEXES

2.1 Student Guide of the current academic year (including the Programme's total ECTS and learning outcomes)

2.2 Course outlines (according to the HAHE template) for all courses (in one single pdf file with table of contents, organised per semester)

2.3 Clinical Training Manual

2.4 Clinical site monitoring and oversight to ensure comparability

Study Programme Compliance

Findings

Consistently with the previous report, the goal of the School of Medicine of the University of Patras is to provide the best scientific knowledge and ethical training to medical doctors who will be mainly involved in clinical practice. A significant percentage of them are expected to follow an academic career (some of them abroad) that will involve development and application of research and teaching skills and activities.

The strategy the School was developed especially after the introduction of the new undergraduate curriculum that operates since 2003-2004 and its main aim is to provide a student-centred teaching combining basic, preclinical, and clinical knowledge. Integrating systems sciences has been a major focus of the programme. Theoretical courses are offered in the first four years and involve the basic (preclinical) teaching complemented by laboratory practice enriched by clinical skills that are supplemented by hospital clinical training in the fifth and sixth years of study, a model of studies that is deeply rooted and is generally standard across all medical schools in Greece. The core curriculum comprises special study modules, 360 European Credit Transfer and Accumulation System (ECTS) (30 per semester (68 compulsory and 38 optional courses). Thus, student workload is fully compliant with European guidelines for medical schools.

Analysis

The student guide is detailed, informative and appropriate. The Panel's view is that the present form of integrated educational curriculum is adequate and successfully delivered over the years. The overall programme is compatible with EU standards and responds to European directives. Evidence of the competence of the current curriculum is provided by the fact that a considerable percentage of the graduates of the School each year continue their residency training in highly competitive programmes in Europe and United States.

EEAP also emphasized that, as modern Medicine evolves rapidly, there is scope to revise the 20-year-old current content; this is required to deliver some of the recommendations of the 2019 evaluation around implementation of modern examination methods such as objective structured clinical examination (OSCE). The process will offer the opportunity to add new cutting -edge subjects such as AI, bioinformatics and precision medicine and role of STEM subjects in modern medicine delivery. In parallel it could swift emphasis from the disease-focus teaching model towards a wider more patient oriented holistic healthcare framework that starts with population screening, access to primary care and also includes rehabilitation and social care. This is it now the direction of modern medical teaching across most Western developed countries. This could be delivered through introduction of new modules replacing redundant ones or alternatively could be incorporated in existing modules.

The above is in agreement with the established commitment of the School to have a mechanism of quality policy and assurance to continuously and systematically ensure, improve, and enhance the quality of the medical training provided. No deviation in the design

of this process has been identified; The Undergraduate Programme Committee and the OMEA of the School of Medicine are responsible for maintaining high standards of the study programme and play a major advisory role in curriculum issues for both teachers and students. These involve discussions in incorporating new proposals and recommendations for improving the programme and annual evaluation of reports and statistics related to the curriculum as well as the participation of students through regular questionnaires. The Panel received evidence that such mechanisms do exist and operate effectively although not always follow strict deadlines of task allocation and completion. The quality policy is planned by the School on a yearly basis and is approved by the General Assembly of the faculty members and the appropriate University authorities. However, the Panel were unable to evaluate the effectiveness of the process and fully appreciate the dynamic nature of the path over time that translates a proposal and recommendation into a substantial curriculum modification and also, assessment of (a) the impact of this and (b) quality standards established and monitored.

Additionally, the previously mentioned input from the Medical Association of Patras and retired faculty members who are currently in private practice in the curriculum were not so evident in the current visit.

The curriculum is built around didactic lectures and training in clinical skills from the first year into small groups, group tutorials, problem-based learning (PBL) and task-based learning (TBL) facilitates and encourages more active participation of the students. Both students and faculty reported that attendance in the majority courses is high.

As previously identified, the School is also committed to enrich student experience and involvement in research through established exchange programmes with international research centres and institutions abroad and a catalogue of other activities such as student workshops and national meetings. Several students seem to take advantage of these opportunities. During the previous visit in 2019, the Evaluation Panel identified this extensive list of interaction as a major strength of the programme.

Conclusions

The Panel's overarching view is that the curriculum delivers current medical practices enriched, when needed, by addition of optional courses to respond to particular needs. An example previously identified was the addition of an optional course in emerging infectious disease and threats in response to the immigration-related health problems in the region during the last few years. This can now form the foundation for expanding to include lessons learnt from COVID pandemic, especially as faculty staff were involved in the national response to the pandemic. However, a mechanism to compare the effectiveness or the revision of the curriculum remains outstanding, and this is an important quality criterion that requires particular attention. Likewise we would re-emphasize benefits from interaction with other Schools of Medicine within Greece or elsewhere and initiate regular evaluation by external members from other faculties both in Greece and abroad.

Satisfaction levels around quality of teaching suggest upwards trends, which is reassuring. However, concerns remain that in some courses attendance remains low and according to

students this is because of the inconsistent quality of teaching. As previously recommended student attendance to courses should be a quality criterion and emphasis and further support should be given to improve courses that fail to attract high number of students. A potential way forward might include introduction of modern methods of monitoring and if necessary, improving, quality standards of teaching such as peer-assessment and ‘train the trainer’, programmes that are introduced in other Medical Schools in Greece and elsewhere.

The Panel remains confident by the previous findings that *‘The students successfully progress throughout the stages of the programme as translated by the high percentage (around 80%) of student graduation on time while the vast majority of the students graduate within one year after the compulsory six years of studies. It is also very encouraging that the drop-out rate is extremely low. This is a major accolade for the School. Students have multiple opportunities to acquire experience in the hospital in addition to their clinical training.’* On the other hand it is concerning that feedback from students still identifies issues around definition of clinical skills required is rather vague. Therefore, the School needs to prioritize development of rigid standards of student-exposure to a variety of clinical cases and also pre-define the minimum clinical skills students need to develop during their clinical rotation. The Panel previously advised the School to establish communication with students to strengthen student understanding of the clinical skill matrix required and have an appropriate monitoring pathway. Feedback received indicates sporadic examples of such practices however, the effectiveness of this is not currently assessed.

The Panel remains confident that the School of Medicine of the University of Patras still has a strong research component and retains its high departmental ranking in the University in attracting competitive external research funds. Opportunities for the students to get exposure and to participate in research projects do exist and the students are aware, interested and willing to get involved, which is reassuring. Faculty and the curriculum through several optional courses, are willing to support students to learn how to perform a bibliographic search on PubMed and critically analyse scientific articles on specific topics. The Panel believes that this offers a solid foundation but needs to expand and offer opportunities for interested students in development of skills in systematic and/or scoping reviews, audits and other forms of data gathering and critical evaluation of available evidence and most importantly start collecting evidence about the successful implementation of the above.

We appreciate that challenges associated with the global pandemic over the last 3-4 years do not allow a complete assessment of the success of this international exchange programme or its maturity and further development. Nevertheless, successful movement of alumni interviewed to world renowned programmes offer some evidence of success. This needs to be highlighted and promoted to current and future students. However, students feedback expressing concerns around accessibility to research training within the School suggest that this engagement is not yet optimized. The Panel recommends that the School need to implement a formal process around faculty members use more structured mechanisms to advertise training possibilities for research for the undergraduate students.

Supplementary material the Panel received during the latter stages of the review process suggest that many of the points identified above have been discussed in the General Assembly and potential improvements have been proposed and agreed but not actioned. The commitment to address this by curriculum revision and other monitoring measures of quality improvement is reassuring, however the School now needs to demonstrate that this commitment can generate noticeable improvements.

Panel Judgement

PRINCIPLE 2. DESIGN AND APPROVAL OF PROGRAMMES	
Fully compliant	
Substantially compliant	X
Partially compliant	
Non-compliant	

Panel Recommendations

- The 20-year-old current curriculum should be revised in order to keep up with modern medicine and to deliver some of the recommendations of the 2019 evaluation around implementation of modern examination methods such as objective structured clinical examination (OSCE).
- Effectiveness of the revision of the curriculum remains outstanding, and the School needs to introduce modern methods of monitoring.
- Similarly, introduction of methods to monitor and improve quality standards of teaching such as peer-assessment and ‘train the trainer’, programmes.
- Communication with students requires further strengthening to ensure students are fully aware of course deliverables and requirements and have an appropriate monitoring pathway.
- The School needs to demonstrate that commitment to address quality issues can generate noticeable improvements.

The Panel would like to re-iterate the recommendations made during the 2019 review around

- (a) attendance to courses that should be a quality criterion and emphasis and further support should be given to improve courses that fail to attract high number of students.
- (b) more structured way to systematically encourage research training opportunities and to involve a higher number of undergraduate students in research projects. This scheme could be supported through meaningful engagement of the Dept alumni.

Principle 3. Student-centred learning, teaching, and assessment

INSTITUTIONS SHOULD ENSURE THAT THE UNDERGRADUATE PROGRAMMES ARE DELIVERED IN A WAY THAT ENCOURAGES STUDENTS TO TAKE AN ACTIVE ROLE IN CREATING THE LEARNING PROCESS. THE ASSESSMENT METHODS SHOULD REFLECT THIS APPROACH.

Student-centred learning and teaching play an important role in stimulating students' motivation, self-reflection and engagement in the learning process. The above entail continuous consideration of the programme's delivery and the assessment of the related outcomes.

The student-centred learning and teaching process:

- *respects and attends to the diversity of students and their needs, enabling flexible learning paths;*
- *considers and uses different modes of delivery, where appropriate;*
- *flexibly uses a variety of pedagogical methods;*
- *regularly evaluates and adjusts the modes of delivery and pedagogical methods aiming at improvement;*
- *regularly evaluates the quality and effectiveness of teaching, as documented especially through student surveys;*
- *reinforces the student's sense of autonomy, while ensuring adequate guidance and support from the teaching staff;*
- *promotes mutual respect in the student – teacher relationship;*
- *applies appropriate procedures for dealing with students' complaints*

In addition:

- *the academic staff are familiar with the existing examination system and methods and are supported in developing their own skills in this field;*
- *the assessment criteria and methods are published in advance;*
- *the assessment allows students to demonstrate the extent to which the intended learning outcomes have been achieved. Students are given feedback, which, if necessary, is linked to advice on the learning process;*
- *student assessment is conducted by more than one examiner, where possible;*
- *the regulations for assessment take into account mitigating circumstances;*
- *assessment is consistent, fairly applied to all students and carried out in accordance with the stated procedures;*
- *a formal procedure for student appeals is in place.*

ANNEXES

3.1 Evaluation by the students: a) sample of fully completed questionnaire for the evaluation of the courses / teaching staff by the students b) statistical results of all the questionnaires, per question, for two academic semesters. Commenting on results and proposals on how to address weaknesses

3.2 Regulation for students' complaints and appeals

3.3 Regulation for academic advisors

Study Programme Compliance

Findings

Compared to the previous evaluation visit, the undergraduate curriculum remained largely unchanged, and it is based on the programme established and implemented in 2003-2004. The stated focus is on student-centred learning. The School's approach to teaching is based on an integrated approach combining theoretical courses with early contact of students with clinical practice and adopts modern approaches and principles in the medical curriculum like bioethics, PBL methods and more recently TBL methods for preclinical and clinical training. The integrated sciences approach is considered as the flagship programme and an important differentiating point compared to other Medical Schools in Greece. Students familiarize early in their training on the principles of how to approach patients, take history and later perform clinical examination. Teaching involves a variety of learning methods such as lectures, seminars, tutorials, preclinical and clinical training with emphasis on small groups learning.

The School provides training to the academic staff in order to better fulfil their teaching activities, but this could be done in a more structured way and also introduce modern techniques of teaching performance monitoring and improvements such as peer observation and train the trainer. Many faculty members have broad academic experience and research activity and are internationally recognized. An important point of strength but one that requires particular attention is the substantial number of clinicians (staff of the national health system) with documented knowledge and skills supervise and help students in their day-to-day clinical practice.

Analysis

In agreement with the previous visit the overall impression is this is generally appreciated by the students and provides a more integrated knowledge both at the theoretical, practical, and clinical training. However, evidence provided by the Head of the School during the current visit and further during review of minutes of formal communications between student representatives and the Undergraduate Programme Committee raises some concerns about the optimal delivery and effectiveness of certain aspects of the curriculum; especially around the integrated science part and clinical skills development as well as choice of elective modules. It is reassuring that the Undergraduate Programme Committee (ΕΠΠΣ) recognises reported issues and are willing to implement changes and approve plans to address this. Unfortunately, we were unable to identify whether proposed changes have been implemented and how effective these are or how effectiveness and quality improvement is monitored and quantified.

Moreover, during the 2019 visit the Panel recommended implementation the objective structured clinical examination (OSCE) method that is widely used by modern curricula in Europe, USA and worldwide. Although this has been accepted by the School of Medicine it has

not yet been established. Although the Panel appreciates certain difficulties associated with the major disruption in education and healthcare activities due to the recent pandemic, we believe this is now the time to step up efforts and complete OSCE implementation and establish a pathway of delivery with firm deadlines. The Panel strongly recommends this type of final examination, which will clearly test students' knowledge in skill performance and competence and improve the curriculum in reaching even higher international standards. This type of examination fits well with the modern style of teaching the School is aiming to achieve.

The School has an established framework of activities aiming at regular evaluation of the quality and effectiveness of teaching, as documented especially through student surveys, which helps improving learning methods at all levels. During relevant data presented to the Panel, the School feels satisfied that there is an upward trend in quality of teaching as captured by student satisfaction. Results of the surveys, although limited, are generally satisfactory and plans were presented for further improvement, although the limited participation is an issue that remains unresolved. Student feedback also identifies issues around the length and complexity of the surveys issued that might be a contributing factor in the limited participation. There are well-documented and appropriate assessment criteria and methods in place to ensure that the undergraduate programme is delivered in a way that encourages students to actively participate in the learning process; however, it is now the time to start exploring what works well and what does not and how to optimise use of available tools. This appears feasible as students (especially those interviewed) are willing to engage and contribute. Active participation of all students in their study programme is a major quality criterion therefore more concrete efforts should be made to increase this but also to introduce measurables of how this works in practice and how the programme addresses any outliers in quality.

The Panel identified various opportunities for additional training; for example, several students also participate in exchange programmes for basic and clinical research of HELMSIC, ERASMUS, MoU. Students are also encouraged to apply to internal competitive fellowships for their training abroad. Excellence awards are given each year for highly performing students to promote excellence. Overall, the students showed maturity and self-confidence and expressed optimism regarding their future potential, greatly highlighted by the alumni interviewed. It is unfortunate however, that several of the best-qualified students choose to immigrate, although there are some signs that the situation is slowly reversing.

Students have access to designated personal tutor/mentor from the first year of their degree. This was deemed by both students and faculty members to be successful that improves communication and minimizes conflicts. Overall, the Panel did not notice any tension between faculty and students and other issues related to pastoral care or student needs was identified. Relationships between teachers and students seem to be mutually cordial and respectful. Finally, appropriate procedures are in place to address students' complaints such as the possibility to discuss issues related to performance or examination procedures and grades.

No major criticisms or complaints were noticed by the Panel around the quality of teaching, although it is imperative for the School to be vigilant and monitor closely the performance and quality of teaching of NHS (National Health System) non-academic faculty colleagues. Nevertheless, discussion with the hospital management stakeholders did not identify any issues and the joint teaching and training environment seems harmonious.

Conclusions

Overall, the current study programme fulfils most of the current learning needs of the students and in certain areas provides high flexibility of learning, although a revision and refreshing of the course would be beneficial especially to introduce new concepts (cutting edge technologies, and a holistic view of healthcare) and is now required as soon as possible to capture the new developments in medical science and healthcare delivery.

The Panel still considers the teaching and training programme remains suitable as it encourages development of autonomy and the fact through early student exposure to clinical cases at early stages of their training. This was evident during the Panel's discussions with a representative group of both undergraduate students and also alumni who are currently pursuing careers abroad in highly reputable places. Understandably, some issues on teaching content and depth were reported during the COVID pandemic although the overall impression was that the School managed to adapt and deliver the pre-clinical teaching curriculum quite effectively. Interviewed students demonstrated important attributes such as self-reflection and self-confidence. In general, students have opportunities to participate in external educational workshops and in the co-ordination of round tables or banquets at scientific colleges of medicine, which helps them develop leadership, experience, and communication skills. One point of consideration for the School and possible further improvement is that most of these activities are student-led; although they can promote maturity and leadership skills this can be improved by formal involvement of the School and the faculty. For example, the School can organise annual symposia with prizes for best presentation in various categories (clinical scientific etc).

The stagnating number of academic staff in combination with the disproportionate and continuous increased number of admitted students in the School has resulted in an unfavourable student-to-teacher ratio. In principle this is unacceptable and should be addressed by relevant authorities as soon as possible, as this can easily compromise and deflate any attempts to implement recommendations around quality improvements. For example, this may adversely affect efforts to maintain small group teaching, one of the major strengths of the curriculum. As previously mentioned, this could also affect the time faculty members invest in their research activities.

Panel Judgement

PRINCIPLE 3. STUDENT-CENTRED LEARNING, TEACHING AND ASSESSMENT	
Fully compliant	
Substantially compliant	X
Partially compliant	
Non-compliant	

Panel Recommendations

- The School should initiate as soon as possible the process of course refreshment to enable introduction of new concepts (cutting edge technologies, and a complete view of healthcare pathways) capture the new developments in medical science and healthcare delivery.
- The School should establish regular activities that promote student participation in research activities and promote this through awards and prizes.

The Panel would like to re-iterate the recommendations made during the 2019 review around

- (a) Implementation of the OSCE system, especially a firm commitment demonstrated by strict timetable and deadlines of delivery
- (b) Devise a plan to improve the student/academic staff ratio to maintain effectiveness and quality of teaching; possibly through innovative thinking and utilization of all available clinical staff resources in the region, outside the traditional clinical teaching hubs. Exposure of students to non -academic clinical depts would be beneficial as they will experience the full spectrum of healthcare settings and appreciate individual differences and limitations.

Principle 4. Student admission, progression, recognition, and certification

INSTITUTIONS SHOULD DEVELOP AND APPLY PUBLISHED REGULATIONS COVERING ALL ASPECTS AND PHASES OF STUDIES (ADMISSION, PROGRESSION, RECOGNITION AND CERTIFICATION).

Institutions and academic units need to put in place both processes and tools to collect, manage and act on information on student progression.

Procedures concerning the award and recognition of higher education degrees, the duration of studies, rules ensuring students progression, terms and conditions for student mobility should be based on institutional study regulations. Appropriate recognition procedures rely on institutional practice for recognition of credits among various European academic Schools and institutions in line with the principles of the Lisbon Recognition Convention.

Graduation marks the completion of studies. Students need to receive documentation explaining the qualification gained, including achieved learning outcomes and the context, level, content and status of the studies that were pursued and successfully completed (Diploma Supplement).

ANNEXES

4.1 Internal Regulation of the programme

4.2 Regulation of studies, internship, mobility, and students' assignments

4.3 Diploma supplement template

4.4 Table with the minimum overall average for admission through the Panhellenic entrance examinations (normalised on a 20-point scale) for the last 6 years

Study Programme Compliance

Findings

The Student selection and enrolment in the School of Medicine is based on the Panhellenic Examinations. The whole process of admissions is organised by the Ministry of Education. For students already holding a BSc there is also the option to take a special examination called “Katataktiries Exetaseis”. Students admitted through this route are only a small pre-determined percentage according to Greek Law. Successful candidates in national exams can transfer from another University's School of Medicine to the University of Patras under specific conditions such as health, social and financial reasons.

The number of admitted students is decided by the Ministry of Education. It is concerning that although the School of Medicine of the University of Patras proposes only 80 students to be enrolled per annum (presumably the number based on their internal assessment of how many students are able to train effectively), the Ministry dismisses this and decides that the number of admitted students should be 2x times more. The excessively high number of students leads to staff being overworked and compromises quality of educational efforts.

The academic year runs from September 1st to August 31st, divided into two semesters, each lasting at least 13 weeks. Exam dates are set by the Senate of the University. Students can take exams in September for both winter and spring semester courses. Grades are determined by instructors based on exams, assignments, and/or lab work. The grading scale is from 0 to 10 and the passing grade is 5.

Undergraduate degree completion requires a minimum of 360 credit units, determined by presidential decree considering European Higher Education Area standards. Each academic year involves 60 credit units, overseen by the School's Assembly. The Study Programme is reviewed annually in May, with a Monitoring Committee proposed by the School President to update the curriculum.

Analysis

Most of the students exhibited considerable enthusiasm and pride in being enrolled in the School of Medicine at the University of Patras. They affirmed their active engagement in educational lectures, seminars, and practical courses. In addition to traditional written and oral examinations, the programme's approach includes small-group examinations across various preclinical and clinical disciplines. There are some minor differences between clinics to the use of a logbook. Students receive comprehensive documentation and have access to abundant e-course materials systematically archived on the School's website.

Upon completion of the requisite classes and clinical training, all graduates receive their Diploma “Ptychio” and a Diploma Supplement.

The Panel also noticed establishment and continuous development of student mobility programmes (ERASMUS, MoUs). Student associations such as HELMSIC, help by organising student mobility programmes and by providing out-of-School learning opportunities.

Additionally, the academic staff have strong connections with various internationally renowned universities creating ample training opportunities for students.

Conclusions

The -Student admission, progression, recognition, and certification- principle is fully compliant with the criteria of principle 4.

Panel Judgement

PRINCIPLE 4. STUDENT ADMISSION, PROGRESSION, RECOGNITION AND CERTIFICATION	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- Implementation of more objective assessment methods such as OSCE or similar and the universal monitoring of basic clinical skills obtained by the students is strongly encouraged.
- Following standards of modern education, the School should consider inclusion in the curriculum additional modules focusing on primary care, interaction with patients and their families and rehabilitation medicine.
- Enhancing teaching-research integration through systematic applications of scientific writing and critical thinking skills, especially during the latter years of the course.

Principle 5. Teaching staff

INSTITUTIONS SHOULD ASSURE THEMSELVES OF THE QUALIFICATIONS AND COMPETENCE OF THE TEACHING STAFF. THEY SHOULD APPLY FAIR AND TRANSPARENT PROCESSES FOR THE RECRUITMENT AND DEVELOPMENT OF THE TEACHING STAFF.

The Institutions and their academic units have a major responsibility as to the standard of their teaching staff providing them with a supportive environment that promotes the advancement of their scientific work.

In particular, the academic unit should:

- *set up and follow clear, transparent and fair processes for the recruitment of properly qualified staff and provide them conditions of employment that recognise the importance of teaching and research;*
- *offer opportunities and promote the professional development of the teaching staff;*
- *encourage scholarly activity to strengthen the link between education and research;*
- *encourage innovation in teaching methods and the use of new technologies;*
- *promote the increase of the volume and quality of the research output within the academic unit;*
- *follow quality assurance processes for all staff members (with respect to attendance requirements, performance, self-assessment, training etc.);*
- *develop policies to attract highly qualified academic staff*

ANNEXES

5.1 Summary report of teaching staff performance in scientific-research and teaching work, based on internationally recognized research databases and research metrics (e.g. Google Scholar, Scopus etc.)

5.2 Name list of the teaching staff (including subject matter, employment relationship and courses taught)

5.3 Policies of the academic unit for the support, development and evaluation of the teaching staff

Study Programme Compliance

Findings

Since the foundation of the School, its major strength was around faculty recruitment strategy, emphasizing in recruitment of highly skilled faculty members with successful careers both in clinical medicine and research in internationally renowned foreign institutions. This resulted in an envious outward looking attitude.

Unfortunately, during the recent economic crisis as well as during the COVID-19 pandemic a significant number of faculty members retired, without any replacement. Over the years faculty numbers actively involved in teaching reduced from 154 in 2011 to only 119 at present. The preclinical part of the course is mostly affected as, the relevant faculty to Student ratio is 1:14, a number well below international standards that compromises student's education.

EEAP met with ten faculty members from all ranks, three from the preclinical and seven from the clinical program. Specific questions were made regarding the fairness of appointments and promotion process, protection of harassment, possible harassment cases since the last evaluation. Specific emphasis was given on possible sex discrimination and the ability of the faculty, especially women, to balance successfully professional and personal life.

Panel's discussions with faculty members were very constructive. No issues identified around recruitment and promotion. Promotion criteria are well documented and publicly available. Interactions between teaching faculty and students appear to be satisfactory. The Panel experienced a highly collegiate environment; faculty take pride of the academic role/duties despite insufficient resources and adverse working conditions. Following recommendations during the 2019 site inspection, to establish mechanisms to manage conflict among faculty members and/or between faculty and students, potential conflict of interest issues are now addressed by the Internal Regulation and via the Head of the School.

The School promotes a culture of collaborative research and junior staff are encouraged to participate in ongoing research projects. Externally funded projects are supported as researchers maintain autonomy around publication policies. The School generates a significant amount of high-quality research outputs. In addition, collaboration between University and Hospital teams enables clinical teams to access well characterized patients and biological samples. This an extremely solid basis for further expansion.

EEAP also inquired the procedures to recognize faculty excelling in teaching and was informed that procedures for selection of faculty members for teaching awards are in place. However, such awards are limited in number.

Analysis

It is obvious that the majority of faculty staff are high quality scientists, and it is also encouraging that the strategic thinking of the School and the University favours the

recruitment of candidates with established track record abroad that will be able to enrich the School with new expertise and ideas.

Overall, the reduced faculty numbers available to teach an overinflated cohort of students is an issue of significant concern. We appreciate this is outside the hands of the School as positions are exclusively controlled and authorized by the Government; we hope this report will highlight the magnitude of the problem and serve as a warning that urgent action is required to rectify this as soon as possible, if there is interest in offering medical education on par with international standards.

The concept of the “continuous development of the academic staff” is an important instrument for assuring a high quality of teaching. Following recommendation by the 2019 visit the School has established the “Office of education” to support improvement of teaching skills of the faculty. Junior faculty members are supported by more experienced colleagues. During the site visit it was mentioned that the new appointments receive introductory training for teaching. However, no details of this were presented to the EEAP.

Conclusions

The Panel strongly agrees and advocates this policy as it will continue the outward looking mentality of the School, modern ways of teaching and research, and a better international visibility and networking.

Attention should be given to gender balance. The Panel noticed that the vast majority of faculty members were men, and the ratio of men/women is 3/1; plans for reversing this in the future are strongly encouraged.

It is encouraging that the School tried to remedy the reduction in the faculty number by exploring other possibilities such as “named chairs”, supported by industry and philanthropy funding. This “out of the box” thinking and initiative should be commented and should guide similar approaches, although it only serves as a temporary remedy.

We recommend that the School develops and implements measures to encourage a closer collaboration between clinical and preclinical groups, if possible, to ensure there is wider participation in high quality research across the School that potentially involve undergraduate students. As much high-quality medical research is now interdisciplinary, development of such efforts can support the education and research aims of the School. Indeed, as the Panel pointed out, collaboration with other NHS ‘units such as the ‘St Andrew’ General Hospital, might offer opportunities for expansion of students teaching base, and might decongest the pressure of clinical training of students at the University Hospital.

EEAP also concluded that increasing the number of teaching awards, e.g., junior and senior faculty awards for clinical and preclinical teaching can improve the morale and motivate faculty to achieve higher level of performance.

Panel Judgement

PRINCIPLE 5. TEACHING STAFF	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- The School should engage with the State to address the unsustainable faculty deficit.
- The Panel recommends introduction of recognition awards for teaching, clinical service, and research.

Principle 6. Learning resources and student support

INSTITUTIONS SHOULD HAVE ADEQUATE FUNDING TO COVER TEACHING AND LEARNING NEEDS. THEY SHOULD - ON THE ONE HAND- PROVIDE SATISFACTORY INFRASTRUCTURE AND SERVICES FOR LEARNING AND STUDENT SUPPORT AND -ON THE OTHER HAND- FACILITATE DIRECT ACCESS TO THEM BY ESTABLISHING INTERNAL RULES TO THIS END (E.G. LECTURE ROOMS, LABORATORIES, LIBRARIES, NETWORKS, BOARDING, CAREER AND SOCIAL POLICY SERVICES ETC.).

Institutions and their academic units must have sufficient funding and means, on a planned and long-term basis, to support learning and academic activity in general, so that they can offer to students the best possible level of studies. The above means could include facilities such as the necessary general and specific libraries and possibilities for access to electronic databases, study rooms, educational and scientific equipment, information and communications services, support or counselling services.

When allocating the available resources, the needs of all students must be taken into consideration (e.g. whether they are full-time or part-time students, employed or international students, students with disabilities) and the shift towards student-centred learning and the adoption of flexible modes of learning and teaching. Support activities and facilities may be organised in various ways, depending on the institutional context. However, the internal quality assurance ensures that all resources are appropriate, adequate, and accessible, and that students are informed about the services available to them.

In delivering support services the role of support and administrative staff is crucial and therefore they need to be qualified and have opportunities to develop their competences.

ANNEXES

6.1 Detailed description of the infrastructure and services made available by the Institution and the School to the programme, for the support of the academic and research activity (human resources, laboratories, special equipment, central infrastructure and digital systems, services, etc.)

6.2 List of affiliated public/ university Hospitals for the clinical training of the students.

Study Programme Compliance

Findings

Lecture halls and seminar rooms have been renovated and are well-equipped with modern audiovisual equipment, one of the recommendations of the 2019 inspection. Student educational activities are supported by a dedicated medical library, located near the Preclinical Laboratories Building, supplementing the resources available on the University campus. It offers a wide range of medical textbooks and other support materials.

The University of Patras also houses the Library and Information Centre (BIC), established in 1964, which is a member of the Association of Greek Academic Libraries and LIBER (Association of European Research Libraries). The BIC catalogue is accessible online at <https://nereus.library.upatras.gr> and offers 400 study seats across its reading rooms, along with four individual study rooms. Additionally, the BIC provides access to a wide array of electronic journals, books, and databases, including subscriptions exclusively available to the University of Patras community and those accessible through the Association of Greek Academic Libraries. Furthermore, the BIC offers services related to citation search and retrieval, bibliographic reference management, plagiarism prevention, and access to the online version of EndNote.

Several Support Services for Students are available:

1) Academic Advisor: Each student is assigned a faculty member as an advisor for academic guidance. 2) A Social Welfare Officer is available, to support students, with vulnerable social backgrounds, by addressing their needs and providing assistance. It aims to improve students' quality of life and their inclusion in the university community. 3) The university offers tailored programmes for students with special educational needs or psychosocial difficulties. This includes modified examination formats and conversion of educational material into accessible formats. 4) The university offers transportation Services, especially to students with disabilities 5) Psychological and medical support: The office provides support for students facing personal difficulties, academic stress, interpersonal issues, anxiety, loneliness, depression. Also, the offices support students with disabilities or temporary musculoskeletal problems, including mobility issues and sports injuries. 6) Career's Office: This office serves as a bridge between education and the job market, offering career planning services, networking opportunities, and specialized information to ensure smooth integration into the workforce for all students and graduates, with particular attention to those from socially vulnerable backgrounds.

Analysis

The School of Medicine offers well-equipped laboratories aimed at facilitating both education and scientific research endeavours. The infrastructure for preclinical training within the School is of good quality. The Panel observed well-equipped laboratories, including the microscopic anatomy/pathology lab, with an abundance of teaching microscopes for examining histological organ sections. Furthermore, from our previous evaluation in 2019, the Panel noticed that some research laboratories are outfitted with state-of-the-art research instruments.

The clinical training for students occurs at the University General Hospital of Patras, which is a tertiary referral medical centre with appropriately qualified staff. According to School's regulations, students have the opportunity to get clinical training at other university hospitals in the country if necessary. Additionally, students are motivated by teaching staff to participate in a plethora of mobility programmes and internships at various institutions, businesses, hospitals, and research centres in other European countries.

It is worth emphasizing that the School of Medicine has managed to continuously upgrade its infrastructure and equipment, despite scarce funding; this enables the School to maintain an appropriate level of education, research, and activity.

Conclusions

The -Learning resources and student supports- principal is fully compliant with the criteria of Principle 6. However, the panel have some recommendations (below) for improvement.

Panel Judgement

PRINCIPLE 6. LEARNING RESOURCES AND STUDENT SUPPORT	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- Availability of a library of Video recordings of the lectures will be beneficial, as it will provide an opportunity for students unable to attend in person to engage in learning.
- Efforts to strengthen infrastructure to enable students to develop clinical skills outside the routine 'live' hospital environment.

Principle 7. Information management

INSTITUTIONS BEAR FULL RESPONSIBILITY FOR COLLECTING, ANALYSING AND USING INFORMATION AIMED AT THE EFFICIENT MANAGEMENT OF UNDERGRADUATE PROGRAMMES AND RELATED ACTIVITIES IN AN INTEGRATED, EFFECTIVE AND EASILY ACCESSIBLE WAY.

Institutions are expected to establish and operate an information system for the management and monitoring of data concerning students, teaching staff, course structure and organisation, teaching and provision of services to students as well as to the academic community.

Reliable data is essential for accurate information and for decision making, as well as for identifying areas of smooth operation and areas for improvement. Effective procedures for collecting and analysing information on study programmes and other activities feed data into the internal system of quality assurance.

The information gathered depends, to some extent, on the type and mission of the Institution. The following are of interest:

- *key performance indicators;*
- *student population profile;*
- *student progression, success and drop-out rates;*
- *student satisfaction with their programme(s);*
- *availability of learning resources and student support;*
- *career paths of graduates.*

A number of methods may be used for collecting information. It is important that students and staff are involved in providing and analysing information and planning follow-up activities.

ANNEXES

7.1 Quality data report from the National Information System for Quality Assurance in Higher Education (NISQA) and Quality Indicators report for the last academic year (Section: USP).

7.2 Operation of information system for the collection of administrative data of the programme delivery (student records), and other tools and procedures designed for the collection of data related to the academic and administrative operation of the School and the programme.

Study Programme Compliance

Findings

The School presented a plan that adequately described the data collection system. More specifically, students can access University services and can electronically evaluate courses and express concerns. Quality control of the collected data is being performed by MODIP and OMEA. The general faculty assembly is kept aware of this process and discuss possible problems. The Panel was also provided with a plan describing the progress of the students and their potential for employment after graduation and methods to follow graduates and keep in touch with them. Most of the information regarding alumni is obtained by the faculty members who are in contact with them, but the University also collects information regarding its alumni. Finally, adequate plans are in place for students with special needs.

The majority of the students is selected through highly competitive national exams. However, additional students are accepted as transfers from other Greek Universities for reasons that include disability, having an older sibling studying at Patras University and/or Greek students whose family lives outside Greece and have complete elementary and High School education abroad. The Medical School does not participate in the making of decision regarding the final number of accepted students each year and, as a result, the School is obliged to train more than 200 hundred students per year. This is a much higher number that the School can objectively train and is requesting every year, which is about 80 students per year. Of note, Schools with considerably larger faculty, such as Athens Medical School, accept slightly larger classes every year.

The School provides adequate facilities for preclinical and clinical training. The Panel visited Lab spaces, clinical wards, and the library. The overall impression is that the existing facilities are more than adequate. Furthermore, the students have access to medical books, both in Greek and English language at the library and electronic access to all necessary medical textbooks and journals.

The progression of students is very satisfactory and the graduation rate very high with very low numbers of students who do not complete their studies.

Overall, there is satisfactory representation of men and women in the School of Medicine.

During the scheduled meeting with the undergraduate students of the School, EEAP posed a number of questions focusing on the satisfaction of the students with their studies in general, the opportunities to get engaged in research activities, the availability of the faculty for the programmed meetings with the mentored students and their view of their program. Finally, EEAP was interested to identify reasons associated with the limited percentage of students who submit evaluation of the various courses.

EEAP also met with graduates of the School who practice Medicine in USA, Europe, and Greece. The main enquiry focused on how adequate the graduates were to compete at the Greek and international level with their peers. Additional questions included possible deficiencies they had noticed and would like to be rectified, their ongoing connection with the

School and their engagement in the Alumni that could allow them to be engaged in the School's activities and provide their support.

Analysis

Overall, there was considerable satisfaction in the current students with the School. Senior students were more satisfied with the programme and were confident that they accumulate adequate knowledge and experience that is needed for the next step of their career as graduates. In addition, they emphasized that they did not find and obstacles in communication with the various Labs of the School and be involved in research activities, both at a theoretical and practical level that allowed them to learn new techniques. Students who had completed about half of their studies expressed concerns regarding the program of the School, which are described in more detail in Principle 9.

In discussing the low rate of student's assessment of the quality of the teaching, the students emphasized that their impression was that their opinion did not reach the appropriate faculty and School leadership was not interested in listening to their opinion and suggestions. Of note, there was no fear that there may be loss of anonymity that could have an effect on the relationship of the student and the evaluated faculty member.

During the discussion with the alumni, it appears that a considerable number of graduates opt to complete their residency training and/or provide their services as trained specialists in other countries abroad, mainly in the EU. Of note, this rate reached 50% of graduates who completed their training during the most difficult years of the economic crisis, about ten years ago. This is very unfortunate for the Greek medical system. As graduates did not exclude the possibility of returning to Greece, the hope is that a considerable percentage of graduates who live abroad will return and transfer their knowledge, expertise, and networking to the Greek system.

Another positive finding was that graduates of the School are emotionally close to it, respect their teachers and expressed their desire to help it as much as they can.

Conclusions

The increased number of accepted medical students per year and limited faculty is one of the most pressing problems the School is facing.

The student progression is satisfactory.

Graduates are adequately prepared to choose their career path and do not have any major deficiencies that affect their ability to compete with their peers from Greek or international Schools.

Innovative ways are needed to impress on the students the need and value of their course evaluations. Furthermore, the option that the submission of their evaluation is obligatory for receiving the relevant course credits should also be considered.

Panel Judgement

PRINCIPLE 7. INFORMATION MANAGEMENT	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- The School should develop additional ways to communicate with students and listen to their opinion. More often communications with the student's representatives, either in person or via email or other electronic options, may alleviate this problem.
- The School, in association with the University, should improve their connection and communications with the alumni. This can be very helpful not only in recruiting new faculty but also in future efforts to raise funds.
- It is strongly recommended that there is a considerable reduction in the number of accepted students per year.

Principle 8. Public information

INSTITUTIONS SHOULD PUBLISH INFORMATION ABOUT THEIR TEACHING AND ACADEMIC ACTIVITIES WHICH IS CLEAR, ACCURATE, OBJECTIVE, UP-TO-DATE AND READILY ACCESSIBLE.

Information on Institution's activities is useful for prospective and current students, graduates, other stakeholders and the public.

Therefore, Institutions and their academic units provide information about their activities, including the programmes they offer, the intended learning outcomes, the qualifications awarded, the teaching, learning and assessment procedures used, the pass rates and the learning opportunities available to their students, as well as graduate employment information.

ANNEXES

8.1 Procedure for the maintenance and update of the programme's webpage

Study Programme Compliance

Findings

There have not been any substantial changes since the last accreditation visit in 2019.

Analysis

More specifically, the University of Patras has an outstanding IT facility, which greatly facilitates the information dissemination, accessibility, and visibility from outside. The School continues to take great advantage of these high IT standards. The webpage site of the School continues to be well structured and up to date. All possible information including study programme, e-courses, structure, mode of attendance, criteria for curriculum assessment, degree awarded, and the CVs of faculty members are available online. Since 2018-2019, all courses and lectures of the School are evaluated electronically. The Academic Unit policy for quality assurance (MODIP) is also available online.

Conclusions

During the 2019 accreditation process, the Principle was deemed fully compliant, and the Panel found that the same applies for this cycle.

Panel Judgement

PRINCIPLE 8. PUBLIC INFORMATION	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- The Schools website needs to be updated regularly. Some discrepancies between the Greek and English language content were identified.
- The success of graduates should be emphasized and promoted widely.

Principle 9. On-going monitoring and periodic internal review of programmes

INSTITUTIONS SHOULD HAVE IN PLACE AN INTERNAL QUALITY ASSURANCE SYSTEM FOR THE AUDIT AND ANNUAL INTERNAL REVIEW OF THEIR PROGRAMMES, SO AS TO ACHIEVE THE OBJECTIVES SET FOR THEM, THROUGH MONITORING AND AMENDMENTS, WITH A VIEW TO CONTINUOUS IMPROVEMENT. ANY ACTIONS TAKEN IN THE ABOVE CONTEXT SHOULD BE COMMUNICATED TO ALL PARTIES CONCERNED.

Regular monitoring, review and revision of study programmes aim to maintain the level of educational provision and to create a supportive and effective learning environment for students.

The above comprise the evaluation of:

- *the content of the programme in the light of the latest research in the given discipline, thus ensuring that the programme is up to date;*
- *the changing needs of society;*
- *the students' workload, progression and completion;*
- *the effectiveness of the procedures for the assessment of students;*
- *the students' expectations, needs and satisfaction in relation to the programme;*
- *the learning environment, support services and their fitness for purpose for the programme.*

Programmes are reviewed and revised regularly involving students and other stakeholders. The information collected is analysed and the programme is adapted to ensure that it is up to date. Revised programme specifications are published.

ANNEXES

9.1 Results of the annual internal evaluation of the programme by the Quality Assurance Unit (QAU) (QAU minutes with findings and proposed preventive / corrective actions).

9.2 Procedure for the review, adjustment, and update of the curriculum and for the determination of the extent of achievement of the intended learning outcomes.

Study Programme Compliance

Findings

The Medical School has established a satisfactory internal annual monitoring plan that evaluates the teaching plan and makes adjustments to the curriculum. The main bodies for the internal quality assurance system are the MODIP and OMEA.

The most prominent problem that was realized by EEAP was that the curriculum has not undergone a major review since 2003. As a result, teaching in primary care, one of the main deficiencies in the Greek health care system, is not adequately included in the programme. This was also pointed out by the students who participated in the evaluation.

One of the students' complains was the limited acquirement of practical clinical skills, like bedside manners, communication with patients and families, blood drawing, and shuttering. It is not clear whether the Covid 19 crisis has contributed to this, but it should be urgently corrected.

Research activities are involved in the teaching programme. These activities mainly take place in preclinical labs and are very satisfactory in introducing the students in the research process.

Analysis

The Panel was impressed by the maturity, attitude, intellect, enthusiasm and drive of the students and alumni who participated in the evaluation. As with all other Greek Medical Schools, the School recruits exceptional students, who have all the required abilities to develop to excellent doctors.

The large number of admitted students does not allow all of them to have substantial involvement in research activities. Given the fact that a large portion of students, as estimated by their expressed interests during the meeting with Panel, are interested in General practice, the lack of such extensive involvement cannot be characterized as a major problem.

There is a considerable number of residents and specialists who are employed by the Greek National Health System (NHS) and work at the Patras Teaching Hospital, in most cases alongside with the School's faculty. It was pointed out that a considerable portion of them are qualified to participate in the teaching activities of the School. Furthermore, there are additional local Hospitals and Health Care Canters who employ doctors with similar qualifications. It was also mentioned that the NHS doctors have in the past scientifically contributed to the teaching of medical students.

Conclusions

The MODIP and OMEA representatives and the School leadership were very responsive to this need and committed themselves to complete the curriculum revision in the near future. EEAP understands that the Covid 19 situation considerably affected the function of the committees involved in the plan evaluation and expects that the return to normal academic life will be helpful in addressing these problems.

Although introduction to research is in the curriculum during the early phases of preclinical teaching, this is probably not enough so the students can fully comprehend the amount and process of clinical research that is required for the development of new drugs. A short course during the clinical years will help the students to fully understand the process and how licensing of various drugs affects current clinical process.

Allocation of students in NHS facilities in the Patras area can be very helpful. Exploring innovative ways to involve the NHS staff to teaching, e.g. offering honorary academic position, has the potential to greatly increase the teaching staff and reduce the faculty to student ratio.

Panel Judgement

PRINCIPLE 9. ON-GOING MONITORING AND PERIODIC INTERNAL REVIEW OF PROGRAMMES	
Fully compliant	X
Substantially compliant	
Partially compliant	
Non-compliant	

Panel Recommendations

- Curriculum needs a major revision, which will also include more emphasis on topics such as primary care, rehabilitation medicine and acquisition of practical skills by the students.
- Small introductory course in clinical research during the clinical years.
- Collaboration with local NHS facilities that can accept and train students, with main emphasis on acquiring practical clinical skills.

Principle 10. Regular external evaluation of undergraduate programmes

PROGRAMMES SHOULD REGULARLY UNDERGO EVALUATION BY COMMITTEES OF EXTERNAL EXPERTS SET BY THE HAHE AIMING AT ACCREDITATION. THE TERM OF VALIDITY OF THE ACCREDITATION IS DETERMINED BY THE HAHE.

The HAHE is responsible for administrating the programme accreditation process, which is realised as an external evaluation procedure, and implemented by a committee of independent experts. The HAHE grants accreditation of programmes with a specific term of validity, following to which revision is required. The accreditation of the quality of the programmes acts as a means of verification of the compliance of the programme with the Standards' requirements, and as a catalyst for improvement, while opening new perspectives towards the international standing of the awarded degrees.

Both academic units and institutions participate in the regular external quality assurance process, while respecting the requirements of the legislative framework within which they operate.

The quality assurance, in this case the 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 and their academic units ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.

ANNEXES

10.1 Progress report of the academic unit on the response to the recommendations included in the last Accreditation Report

10.2 Two- year Follow-up Report

Study Programme Compliance

Findings

The Undergraduate Programme at the School of Medicine completed an accreditation assessment by evaluators in March 2019, achieving full compliance with all principles. The accreditation Panel acknowledged the School's adherence to the HAHE principles.

In the previous external evaluation, the Medical School adhered to the processes outlined in the Internal Quality Assurance System (IQAS) and the requirements set forth by the Hellenic Quality Assurance and Accreditation Agency - HQA across all criteria (Total 10 Principles). The Panel's specific observations were discussed in meetings of the Internal Evaluation Team (OMEA), the Undergraduate Programme Panel, and the General Assembly, with measures taken to ensure alignment with established criteria and following the directives of the Internal Quality Assurance Unit (Q.A.U./MODIP) at the University of Patras.

Analysis

EEAP found that the School's key strengths include its infrastructure and close ties to the university hospital and other Schools, fostering multidisciplinary research. It also benefits from strong support and commitment from the University. Additional strengths include highly qualified staff leading preclinical courses and labs, enabling high-quality research and collaboration with international institutions, especially in Europe and the USA.

Conclusions

The Panel suggested to further increase the faculty quality by avoiding "in-breeding" and by recruiting faculty with significant experience from foreign institutions.

The Panel noticed the existing collaboration between academic and National Health System physicians, facilitating their involvement in various academic activities, especially clinical student teaching. While these strengths were recognized, the Panel also identified weaknesses in involving NHS staff that require attention. Specific recommendations are provided in previous principles.

In conclusion, the Panel viewed the School's response to the 2019 evaluation positively, noting the School's alignment with the Quality framework and the right trajectory. However, the Panel also recognises the COVID situation negative impacted on the efforts of the School to deliver all previous 2019 EEAP recommendations.

Panel Judgement

PRINCIPLE 10. REGULAR EXTERNAL EVALUATION OF UNDERGRADUATE PROGRAMMES	
Fully compliant	
Substantially compliant	X
Partially compliant	
Non-compliant	

Panel Recommendations

With the COVID pandemic well and truly behind us, the School need to re-energise efforts and deliver all recommendations of the Evaluation reports.

Part C: Conclusions

I. Features of Good Practice

The Panel concludes that the School is fully compliant and successfully fulfils its mission to train undergraduate medical students.

Major strengths of the School include:

- Appropriate infrastructure that is mainly composed of relatively new and well-kept buildings. The teaching and lab equipment is also appropriate.
- Close proximity to all other Patras University Schools, which promotes interdisciplinary collaboration in teaching and research.
- Highly qualified faculty. The Panel was impressed by the large number of senior and junior faculty who have been completed at least part of their training in well-respected Institution outside of Greece.
- Moral of the faculty is very good and all faculty members who interacted with Panel were proud and happy regarding their involvement with School.
- The School demonstrates a high level of extroversion, which is best indicated by the large numbers of Erasmus students, either from the School visiting other Schools abroad or foreign students visiting the School.
- Students are being admitted though very competitive national exams, something that results in a highly quality population. The interaction between faculty and students is also very satisfactory.
- The overall quality of the teaching is very satisfactory. The strongest proof of it is that a considerable number of doctors who graduate from the School have very successful careers not only in Greece but other countries with very advanced medical systems either in EU or USA.
- The School successfully adapted in the increased demands during the Covid 19 crisis and managed to provide satisfactory teaching and training of its students.

II. Areas of Weakness

- The most prominent weakness is the number of admitted students, which by far exceeds the capabilities of the School. There is an urgent need to rectify this problem so the School can achieve its full potential of excellence.
- The School does not have enough autonomy in recruiting faculty at different levels and also appointing adjunct or honorary faculty. Such capability would greatly

enhance the involvement of doctors who work for the Greek National Health System (ΕΣΥ) either in the University Hospital or other Medical Facilities.

- There is rather limited collaboration with other local stakeholders. Thus, it is disappointing that students do not have the ability to be trained and gain clinical experience in other local ΕΣΥ hospitals or primary care facilities. Of note, all stakeholders who interacted with the Panel and School representatives were positive for such collaboration.

III. Recommendations for Follow-up Actions

The Panel has already submitted recommendations for the observed weaknesses in each Principle. In addition, the Panel felt the need to emphasize the following general recommendations:

- The most urgent need is the reduction of the number of admitted students and the increase of faculty.
- The curriculum should be revised and appropriately include fields such as primary care, rehabilitation, and introduction of the students to the principles of clinical research.
- Enhance the participation of staff employed by the Greek National Health System (ΕΣΥ) in the students' training.
- More emphasis is needed in the acquisition of the students of clinical skills.

IV. Summary & Overall Assessment

The Principles where full compliance has been achieved are: **1, 4, 5, 6, 7, 8, and 9.**

The Principles where substantial compliance has been achieved are: **2, 3, and 10.**

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 External Evaluation & Accreditation Panel

Name and Surname

Signature

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