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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: University of Patras
Date: 13/10/2018

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

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PART A: BACKGROUND AND CONTEXT OF THE REVIEW

I. The Accreditation Panel

The Panel responsible for the Accreditation Review of the Internal Quality Assurance System (IQAS) of the Higher Education Institution named: **University of Patras** comprised the following five (5) members, drawn from the HQA Register, in accordance with the Law 4009/2011:

1. *Prof Anthimos Georgiadis*, Leuphana Universität Lüneburg, Germany (Chair)

2. *Prof Andreas Efstathiades*, European University Cyprus, Cyprus

3. *Dr Demetrios Kazantzis*, Food and Beverage Consultants, Cranston Rhode Island, USA

4. *Prof Konstantinos Kontis*, University of Glasgow, United Kingdom

5. *Dr Konstantinos Kopsidas*, University of Manchester, United Kingdom

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 Panel reviewed the material provided by ADIP in advance of its arrival and briefing. The briefing by ADIP took place on 08/10/2018. Additional information and further documentation were provided regarding the HQA mission, standards and guidelines of HQA accreditation process, and national framework of HEIs including the Quality Measure Metrics (ΟΠΕΣΠ) for 2015-16 and 2016-17. In the afternoon, the Panel met in private to discuss the accreditation report for IQAS, allocate tasks and list of issues for the site visit. The Panel arrived at the University of Patras (UoP) on 09/10/2018. The first meeting was with the Rector and the Vice-Rectors for a short overview of the institution regarding its history, vision, mission, Key Performance Indicators (KPIs), and academic profile. Further presentations provided usefull information about UoP current status, strengths and possible areas of concern. In the meeting with the Quality Assurance Unit (QUA/MODIP) – Vice-Rector of Academic and International Affairs and MODIP members – the Panel investigated the degree of compliance of the Internal Quality Assurance System to the Standards for Quality Accreditation. The Panel received further documentation and supporting material related to the presentations given by QUA/MODIP to facilitate their decision for UoP Quality Accreditation. In the evening, the Panel met in private to reflect on the discussions and prepare for the second day of the visit.

On 10/10/2018, the program was associated with the following actions stakeholders and bodies associated with UoP QUA:

- Meeting with the Faculty members (Vice-Rector of Academic and International Affairs, Deans of the Schools, Heads of Departments) and Internal Evaluation Groups (IEGs/OMEA) representatives. This facilitated the understanding of the internal evaluation review process, adequacy of resources and possible areas of weaknesses. In addition, discussions took place about the formulation of relationships among the IEGs/OMEA with QUA/MODIP. The Panel received additional supporting material about the Digital Leap working group, Schools, administrative, financial, IT and procurement services, Estate & Buildings, Library, External Relations and Affairs.
- Meeting with the Undergraduate (UGT) and Postgraduate (PGT and PGR) students to gain an insight of their study experience and campus facilities, and their input in quality control and decision making; discuss their priority issues concerning student life, welfare, grants, mobility, research and career opportunities, and their views on recruitment, learning, progression, assessment.
- Meeting with the UoP Chief Administration officers to discuss the role of Institutional strategic documents (strategic plan, QA manual etc.) in the development of Institution, and special issues arising from the internal evaluation process.
- Meeting with the Graduates and Alumni to discuss their learning experiences at UoP and their career paths.
- Meeting with the external stakeholders to better understand their relations with the Institution.

- Meeting with the Quality Assurance Unit (QUA/MODIP) members to review several points and findings. The Panel received further clarifications;

A final meeting with the senior leadership of the UoP took place where the Panel presented their key findings briefly. The Panel returned to Athens to prepare the report of the Internal Quality Assurance System (IQAS) of UoP following the procedures provided by ADIP.

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.

The UoP founded in 1964, and it is the 3rd largest University in Greece. It has 1,245 members of staff, 654/821 engaging with academic/teaching, 66 facilitating laboratory activities and 358 for administrative duties. It has also 21,855 domestic students, 1,055 foreign students, 1,713 postgraduate students and 2,030 PhD candidates. The University occupies 2,656 sq.m. with two campuses (one of them in Agrinio), more than 100 buildings, and 156 teaching classes, computer centres, workshops, construction units. In addition, it has the University Hospital, the Central Library & Information Service, the Conference & Cultural Center, 4 museums, a sports Centre and 6 primary & secondary schools.

The University composed of 5 Schools, 24 Departments, with 3 of them located in Agrinio. The administration comprises of the Rector, 4 Vice-Rectors, the Senate, the Deans of the Schools and the Heads of Departments. It supports knowledge and research, provides highly-qualified education & research activities and facilitates the development of new IT tools. It also strengthens the dialogue with society through the dissemination of achievements and good practices in sciences & funding, strengthens a dynamic EU citizenship and boosts multi-cultural dimensions.

The University offers 24 undergraduate and 46 post-graduate programme of studies, 2 Erasmus Mundus, 13 active collaborations with foreign institutes for Joint Supervision of Doctoral Thesis (Cotutelle). It has 565 bilateral agreements Erasmus+, and 88 MoU and Cooperation Agreements in 36 countries. It is a member of numerous Universities Associations and it is also participating in a wide range of ranking systems.

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 UoP has a well-established quality assurance policy that is reasonable and appropriate for the Institution strategic goals towards transparency of the procedures and communicating those to the different stakeholders. It provides access of the key performance indicators (KPI) to the UoP staff, with procedures that facilitate the review of those and set objectives based on the aim to maintain and improve quality. A commitment to continuous improvement of the existing procedures is included in UoP quality assurance policy and it is based on quality metrics to strengthen the review and update of the existing courses at all levels; undergraduate teaching

(UGT), postgraduate teaching (PGT), and postgraduate research (PGR). The update of the courses is ensured through the internal quality procedural steps that aim to update all existing UoP courses in an annual base, to implement any required modifications at the end of the second semester of every academic year. The required modifications are identified by a quality assurance process engaging the students, local authorities and industry as well as academic research, which considers all timely feasible approaches and constraints on resources (academic, estates, finances, and policy).

The established system complies with the laws and regulations that govern the university. It is remarkable, that the university has formulated some regulations itself, which were adopted as FEKs for the country's universities. The quality assurance objectives are in line with the institutional strategy and aligned with the standards of HQA.

The institution has defined an information system supporting the IQAS processes available for the different status groups and public. The quality assurance policy and the procedures are very well communicated to all parties. The Institution's internal quality assurance system (IQAS) is defined based on internal regulations often published in FEK and indicate the strategic goals of the UoP.

A closed loop of review starts with the students' questionnaire at each individual departmental OMEAs, communicated to MODIP and discussed at the general assembly. This presents a structured way for continuous improvement of quality assurance processes. The UoP has a handbook that describes the IQAS processes. The detailed information on membership for each process is described in MODIP's web pages allowing for their efficient and timely update (when required).

The policy supports, in a remarkable way considering the extreme financial constraints, the organization of UoP services and infrastructure as well as the allocation of necessary resources for the successful operation of the IQAS.

The UoP leadership, schools, departments and organisational units (MODIP, OMEAs, and other QA committees), as well as, individual staff members and students, from all years and courses, have taken on strongly and very successfully their responsibilities in the IQAS to align with the relevant HQA Standards and achieve the continuous improvement of learning and teaching, research and innovation. The established IQAS considers the integration of the students and staff in the local community and industry through social and training activities.

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.

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, LIBRAIRIES, IT INFRASRTUCTURE, 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.

Funding
The planning and operation of an effective financial management system constitute the necessary tools for the full exploitation of the UoP resources. The institution succeeded to

ensure adequate funding to cover not only operational costs but also costs related to research, innovation and development (Special Account for Research Funds, Property Development and Management Company). The Special Account for Research Funds is well structured and functions in an efficient way to support the research and development policy of the University. There is in place an effective financial management system. The institution has managed to safeguard donations that excellently support its financial plans. UoP has established successful rules and procedures for the acquisition of additional resources.

Infrastructure
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, student dormitories, sports facilities and communication).
An appropriate infrastructure plan is in place determining ways to ensure the maintenance, refurbishment and upgrade of the UoP facilities. The recent outputs of this plan, for example, are evident through the renovation of the most amphitheaters, the sports centre, the conference centre, and the main administration buildings.
The institution has developed a mechanism for the energy monitoring of the buildings in an effort to reduce energy consumption. There is an intention to upgrade the buildings towards the goal of minimizing energy consumption.

Working environment
The Institution ensures that the working environment has a positive effect on the performance of the members of the academic community (students and staff) appropriately. The sanitary facilities, the lighting/heating/ventilation system, the cleanliness and the overall appearance of the premises, are in an acceptable condition. UoP plans to replace all lighting elements with LEDs. A managing and monitoring system, established recently, distributes the teaching rooms for the whole institution. Furthermore, an appropriate managing and monitoring system managed by the facility management department (technical services) identify needs and promotes solutions for a favourable working environment.

Human resources
The Institution provides the necessary human resources for the implementation of the IQAS. There is a well-defined an administrative structure in support of the IQAS system (MODIP, OMEAs, Departmental general assemblies, etc.). The available structures and associated personnel are available in the home page of the MODIP. The subject areas, as well as, the competencies and tasks of the staff members are defined by the corresponding job descriptions that are established within the scope of each academic and/or administrative unit. The vacant posts are advertised and filled according to the requirements set by law, based on transparent, fair and published processes. The continuous training and evaluation of the staff is safeguarded through the quality assurance process.

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	
Substantially compliant	**x**
Partially compliant	
Non-compliant	
2.3 Working Environment	
Fully compliant	**x**
Substantially compliant	
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.

The development of a dedicated plan and related procedures for further improvement of the infrastructure involving exterior buildings and grounds.

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.

The university has established specific and measurable goals for its quality assurance within a given period, which is in-line with the strategy of the organization. The institution defines clearly the goals, in the same document, related to the research & innovation, administration and resources.

For example, the increase of number of courses going for accreditation from 10 (presently) to 24 at 31/08/2020; the increase of number of new teaching personnel from 1% (presently) to 1,5% annually; the improvement of the infrastructure by renovating 20 amphitheatres of the science department.

UoP announces this plan as an official roadmap with the specified goals being associated with relevant KPIs, and are accompanied by an action plan that paves the way of their feasible implementation. The IQAS has established proper procedures for the monitoring of the KPIs and goals. The goals are communicated to all the stakeholders.

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	
Substantially compliant	**x**
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 development of procedures for the sustainable and continuous engagement of stakeholders to enable long-term funding, human resources, and infrastructure opportunities.

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:

- o *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;*
- o *determination of how the IQAS procedures / processes are audited, measured and assessed, and how they interact;*
- o *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 Quality Assurance Unit of the University (MODIP) is fully in agreement with the existing legislative framework. The Institution's IQAS and its implementation processes are determined by the decisions of the competent bodies, as provided by the law, and are recently published in the Government Gazette, as well as, on the Institution's website, which provides a clear description on the structure, membership and operation of MODIP. The University has developed and maintained a management information system that facilitates the proper operation of the internal quality assurance system, for example, the results of the internal evaluation are available on the university's website.

The MODIP of the institution collaborates closely with HQA, towards the development and maintainance of the management information system for storing the evaluation data, which is periodically submitted to HQA, according to the latter's instructions. Furthermore, MODIP has successfully fulfilled up to now its responsibilities as follows:

- the development of the 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.

The university has developed a quality manual that includes all the appropriate actions to ensure effective planning, implementation and control of UoP processes. The quality manual provides a clear description of inputs and outputs for each process, as well as, the associated procedures including the stages that should be followed. It also includes the way the procedures/processes are audited, measured and assessed, and how they interact.

The quality manual includes all the methods to achieve the quality objectives set out in the quality policy and describes how the requirements are met. It provides the necessary guides,

pertinent legislation, and other supporting data. The organizational chart as presented to the panel and appears on the website, is structured in a manner that ensures that the IQAS organizational requirements are properly met. Overall, the quality manual is appropriate.

The institution has defined information documenting that the processes are being carried out as planned. The UoP provides adequate human resources and infrastructure to the QAU.

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.

The development of a procedure for collecting information for continuous course development and engaging with internal and external stakeholders.

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 QAU of the UoP is well established to allow strong self-assessment practices, following the procedures that are described in the quality assurance manual for each area of activity, which is implemented and assessed on an annual basis by the specified (in the QAU manual) appropriate academic or administrative unit. The self-assessment practices determine the

timing, the participants, the data under consideration, and the expected outcomes. The self-assessment aims at the suitability of the IQAS in force, as well as, making decisions concerning the necessary remedial or precautionary actions for improvement. Some of these actions for improvements related to teaching quality are obtained from the internal teaching quality assurance process initiated from the students' feedback on comments and recommendations to improve existing units and the methods of delivery. This is evident from the continuous change of the form of the student questionnaires, to improve the student response, as well as, the data collection by the development of the PUnet ID platform and digital leap that allows electronic evaluation forms in all courses from 2017.

The assessment of each course structure and its learning outcomes are also a part of the course annual review which is communicated to MODIP, while any suggestions/recommendations for changes are discussed annually at the general assembly for all courses. This includes the discussions of students' performance and data from student questionnaires, the graduation rates, the condition and management of the teaching facilities and other learning tools.

Efficiency indicators include primarily quantitative but also qualitative indicators to provide valuable and reliable information. Comparatively measurable conclusions are drawn for both control and evaluation. This could be based on corrective and preventive actions stemming from the internal evaluations as well as other recommendations for improvement.

The outcomes of the self-assessment are minuted in internal reports drawn up by the QAU.

Meetings documenting outcomes of non-compliance with the Standards and other observations along with suggestions for further improvement are available. These are communicated to interested parties (academics and other administrative and supporting entities) with the direct assignment of appropriate corrective or preventive actions determined by the involved parties, which then are assessed by QAU in terms of effectiveness and suitability.

The Institution's resolutions concerning any modification, compliance, or enhancement of the IQAS operation are reported on an annual basis where QAU, Rector and Vice-Rectors are present to ensure that the areas of deviation or non-compliance, as well as, implemented (or to be implemented) are reported and communicated to the interested parties.

The UoP QAU engages with all internal parties and allows for the updating of the IQAS and its processes, services offered to students, as well as, the effective use and re-allocation of available resources (as appropriately identified by the IQAS). Feedback on the University's strategy and quality policy of UoP is also obtained through this process that allows the introduction of new quality goals and improved University strategy.

The UoP has a special procedure 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.

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.

The establishment of an approach and procedure of OMEA engaging internal and external stakeholders.

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.

The MODIP has established and operates an information system for collecting and managing the data required for the implementation of the Internal Quality Assurance System within the frame of the successful digital leap of the Institution. The regularly collected data cover the relevant areas (students, administrative staff, teaching, research & innovation, infrastructure and finance). The institution has developed the information system, using internal resources and expertise, according to the requirements of the QAS. The students can answer the questionnaire digitally. Their access to the information system is protected centrally whilst accuracy is verified effectively through existing control mechanisms. 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 are 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). The UoP maintains an adequate amount of data to perform its analysis and evaluation. Through the established IQAS mechanisms, the institution monitors effectively and efficiently the collected data and the performance metrics. The results from the internal and external reviews are diligently considered and implemented in the continuous improvement. The collected data are presented in an informative way, both for public and internal consumption, guiding the formation and review of the strategic and operational goals.

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	x
Substantially compliant	
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.

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 UoP has almost all pertinent important information of teaching and research available online. All information in each programme of study, for both undergraduate and graduate, are available publicly to be viewed. There is a paperless process (through the digital leap platform) that engages from initial steps of student applications, course outlines, degrees awarded, tuition fees. These data are all available to be viewed online in a very efficient and clear structure. All internal and external evaluation reports of UoP are easily accessible through the Institution's website, including published information which is current and clearly stated. Both University's mission statement and its quality assurance policy are available online and stored with all other Greek universities and interested parties in academia. The structure and operation of the IQAS of UoP is readily available online and it can be easily located.

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.

The Biographies for all Faculty members should be described and identified in a uniform format. These should include degrees and institutions attended, areas of research interests, and current research work.

Principle 8: External Evaluation and Accreditation of the IQAS

INSTITUTIONS SHOULD BE PERIODICALLY EVALUATED BY COMMITTEES OF EXTERNAL EXPERTS SET BY HQA, FOR THE PURPOSE OF ACCREDITATION OF THEIR INTERNAL QUALITY ASSURANCE SYSTEMS (IQAS). THE PERIODICITY OF THE EXTERNAL EVALUATION IS DETERMINED BY HQA.

> *External quality assurance, in the case in point external evaluation aiming at accreditation, may act as a means of verification of the effectiveness of the Institution's internal quality assurance, and as a catalyst for improvement, while opening new perspectives. Additionally, it can provide information with a view to public acknowledgement of the positive course of the Institution's activities.*
>
> *The Higher Education Institutions engage in periodic external quality assurance which is conducted taking into consideration any special requirements set by the legislation governing the operation of the Institutions and their academic units.*
>
> *Quality assurance, in this case accreditation, is an on-going process that does not end with the external feedback, or report or its follow-up process within the Institution. Therefore, Institutions ensure that the progress made since the last external quality assurance activity is taken into consideration when preparing for the next one.*

Institution compliance

The UoP has undergone an institutional evaluation in 2016, as well as, all departments passed an external evaluation before. The present quality assurance accreditation is the first one for the UoP. All staff members are well aware of their role and importance of the IQAS external review, its role, and its contribution that has an effective result in improvement and betterment of the quality overall. The stakeholders (industrial and governance) of UoP were actively engaged during the accreditation procedure and they reassured the panel with evidence their active and contniuous engaged with any follow-up actions (if required). This is evidenced by the recently established Strategic Alliance of Entrepreneurship and development in Western Greece (SEADE). This alliance composed of the local government, the Chamber of Achaia, institute of technology and research, Institute of Chemical Engineering, centre for planning and economic research, and the university. The UoP has drafted and submitted effectively a follow-up report in direct response to the last institution evaluation by the HQA. The report mentions that the institution has addressed successfully all the recommendations for improvement.

Please comment on the compliance with the Principle.

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 development of a Survey (questionnaire) for graduating students.
- The establishment of an electronic platform for collection and processing of data at all levels.
- The formulation of a sustainable mechanism for entrepreneurship and development in Western Greece (specifically SEADE, which is an alliance for entrepreneurship and development : www.seade.gr)

II.   Areas of Weakness

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

- There is no procedure of engaging internal and external stakeholders during the process of course development and review.

III.   Recommendations for Follow-up Actions

Please make any specific recommendations for development.

- The development of a dedicated plan and related procedures for the further improvement of the infrastructure involving exterior buildings and grounds.
- The development of procedures for the sustainable and continuous engagement of stakeholders to enable long-term funding, human resources, and infrastructure opportunities.
- The development of a procedure for collecting information for continuous course development and engaging with internal and external stakeholders.
- The establishment of an approach and procedure of OMEA engaging internal and external stakeholders
- The Biographies for all Faculty members should be described and identified in a uniform format. These should include degrees and institutions attended, areas of research interests, and current research work.

IV.   Summary & Overall Assessment

The Principles where full compliance has been achieved are:

1) Institution Policy for Quality Assurance
2) Provision and management of the necessary resources
3) Establishing goals for their Quality Assurance

4) Structure, Organization and Operation of the IQAS
5) Self-assessment
6) Collection of Quality Data: measuring, analysis and improvement
7) Public information
8) External evaluation and accreditation of the IQAS

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**

1. __Prof Anthimos Georgiadis_____

2. __Prof Andreas Efstathiades_____

3. __Dr Demetrios Kazantzis_____

4. __Prof Konstantinos Kontis_____

5. __Dr Konstantinos Kopsidas_____