



ΕΛΛΗΝΙΚΗ ΔΗΜΟΚΡΑΤΙΑ
HELLENIC REPUBLIC



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Accreditation Report for the Internal Quality Assurance System (IQAS)

Institution : University of Ioannina

Date: 29/03/2025



Με τη συγχρηματοδότηση
της Ευρωπαϊκής Ένωσης



Πρόγραμμα
Ανθρώπινο Δυναμικό και
Κοινωνική Συνοχή



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

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PART A: BACKGROUND AND CONTEXT OF THE REVIEW

I. The External Evaluation & Accreditation Panel

The Panel responsible for the Accreditation Review of the **Internal Quality Assurance System** (IQAS) of the University of Ioannina comprised the following five (5) members, drawn from the HAHE Register, in accordance with Laws 4009/2011 & 4653/2020:

1. PAPAKOSTAS APOSTOLIS (Chair)
(Title, Name, Surname)
Södertörn University
(Institution of origin)
2. Antoniou Maria
(Title, Name, Surname)
Pace University
(Institution of origin)
3. ECONOMIDES SPYROS
(Title, Name, Surname)
California State University, East Bay
(Institution of origin)
4. Michiotis Ioannis
(Title, Name, Surname)
CEN (European Committee for Standardization)
(Institution of origin)
5. Πρωτονοταρίου Ελισάβετ
(Title, Name, Surname)
Athens University of Economics and Business
(Institution of origin)

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.

In reviewing the Internal Quality Assurance System (IQAS) of the University of Ioannina the External Evaluation and Accreditation Panel comprised of five (5) members, drawn from the HAHE Register, in accordance with Laws 4009/2011 & 4653/2020.

The content of the Panel, as described in the Guidelines for the Members of EEAP, is:

- to establish whether the data provided from the various resources is consistent among one another and reflect the actual situation.
- identify strengths and areas of weakness.
- engage in a constructive dialogue with the Institution, leading to reflection and continuous enhancement of the quality of the University.

Following a well-prepared schedule provided by HAHE, the Panel held several separate interactive meetings for two days as follows:

On Monday, 17/03/2025, the following meetings took place:

- Meeting with the Vice-Rector of the University
- Meeting with QAC members, MODIP Supervisor,
- Meeting with the Quality Assurance Unit (QAU/MODIP)

On Tuesday, 18/03/2025, the following meetings took place:

- Meeting with Internal Evaluation Groups (IEG/ OMEA) members
- Meeting with faculty members of all academic ranks
- Meeting with students
- Meeting with postgraduate students (MSc, PhD), postdoc researchers
- Meeting with Heads of administrative units
- Meeting with alumni and graduates of all three study cycles
- Meeting external stakeholders (industry / social partners / local authority)
- A meeting with key actors of the institution to present some initial findings.
- A visit to classrooms, lecture halls, libraries, laboratories, etc was included in the program.

During the above meetings, the Panel had the opportunity to meet, talk, and interact with all the participants of all meetings. All the participants were encouraged to express their views and talk freely about their overall experience. They welcomed the opportunity to talk to the Panel and to voice their views. The discussions were very constructive and fruitful and were conducted in a cooperative manner and attitude. All the meetings included presentations, discussions, and question-and-answer sessions. During the last meeting the Panel made an informal presentation of some initial key findings.

The internal evaluation report and other extensive material were made available to the Panel electronically in advance through HAHE. More information and materials were made

available during the meetings.

The University worked diligently in preparing the internal evaluation report and other relevant materials and organizing and hosting the meetings. It is the feeling of the Panel that the University has performed an excellent job throughout the internal evaluation process and that the objectives of the process have been fully met. The efficiency and eagerness of the University to answer questions and provide additional information and clarifications during the meetings are worth noting. The Panel wishes to express its thanks and appreciation to all participants from the University for their co-operation and professionalism.

This Accreditation Report is based on information collected and views expressed during the meetings and on information contained in the internal evaluation report and other documents submitted before and during the virtual meetings.

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 University of Ioannina is one of the largest Universities in Greece. It is located in four cities in the Region of Epirus in North-western Greece. It was established during the 1960s as a department of the Aristotle University. It gained a status as an independent university in 1970. In 2018 four new Schools were established as a result of the incorporation of the previous TEI in the area.

There are 23 academic departments at the University and they are organized in 11 Schools. About 17 to 18 000 students are currently active at the University. The total number of registered students is 34 000. 1300 students are enrolled in Masters Programmes and 1600 in PhD programmes.

In total 95 educational programmes are running equally distributed in the three levels of education.

In 2023 the University participated in 792 research projects.

Approximately 1100 individuals are employed at the University of whom one fourth is administrative staff.

In several quantitative output measures of the Greek university landscape the University of Ioannina is placed above the mean values.

PART B: COMPLIANCE WITH THE PRINCIPLES

Principle 1: STRATEGY, QUALITY POLICY AND TARGET SETTING OF THE INSTITUTION

INSTITUTIONS SHOULD DEVELOP A FOUR-YEAR STRATEGY, WITHIN WHICH THE QUALITY ASSURANCE STRATEGY IS INCLUDED. THE QUALITY ASSURANCE STRATEGY IS SPECIFIED THROUGH THE QUALITY ASSURANCE POLICY, WHICH SETS OUT THE PRINCIPLES OF THE OPERATION OF THE IQAS AND AIMS AT THE CONTINUOUS IMPROVEMENT OF THE SYSTEM. THE QUALITY ASSURANCE POLICY IS SPECIFIED THROUGH THE ANNUAL QUALITY TARGET SETTING WHICH EXTENDS TO ALL ASPECTS AND DIMENSIONS OF THE INSTITUTION'S OPERATION AND ACTIVITIES.

The Institution's strategy provides the general guidelines for the actions to be implemented within the specific forthcoming period. The strategic goals for quality assurance constitute one of the main pillars of the Institution's strategy. These goals are set out and specified following to analysis of relevant parameters and quality indicators. The quality assurance strategy includes the quality assurance policy as a specific document.

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 a 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 quality assurance policy 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 organization of the internal quality assurance system;*
- *the Institution's leadership, departments and other organizational 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 HAHE 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.

For the implementation of the quality assurance policy, an annual quality target-setting (using the SMART methodology) and a specific action plan for the achievement of the targets are drafted. The quality targeting includes all annual goals required for addressing weaknesses and improving the parameters of the Institution's teaching, research, and administrative work, according to the

strategic guidelines set as part of the Institution's strategy.

Documentation/Annexes

E1.1 Strategic planning of the Institution (including the quality assurance strategy)

E1.2 Quality assurance policy of the Institution in liaison with the strategy

E1.3 Quality Targeting of the Institution (SMART), as implementation of the strategy and policy

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

Sources of general information that served for verification and assessment of compliance with the requirements of this ETHAAE Principle included:

- The presentation of Vice Rector Rector Prof. Panagiota Kanti
- E1_new Πρωτοβουλία ΕΣΔΠ_ΠΙ (E1_new Proposal for Accreditation of IQAS) (February 2024)
- The university website

The following documents addressed compliance with the requirements of the STRATEGY PLANNING section of this Principle:

- E1_1_new Στρατηγική Προγ_ΠΙ (E1_1 new Strategic Planning) (2024) including 2025-2028
- Some of the documents listed in the Goal Setting section below provided quantitative information (KPIs) for the assessment of strategic planning issues.

The following documents addressed compliance with the requirements of the QUALITY POLICY section of this Principle:

- E1_2 Πολιτική Ποιότητας_2024 ΠΙ (E1_2 Quality Policy (2024)-ΠΙ)
- E3_3_new Εσωτερικοί Κανόνες-ΜΟΔΙΠ_ΠΙ (E3_3_new Internal Regulations -MODIP)

The following documents addressed compliance with the requirements of the GOAL SETTING section of this Principle:

- E1_3_new_Στοχοθεσία_ΠΙ_τ.pdf (E1_3_new_Goal setting_ΠΙ_τ.pdf)
- Στοχοθεσία_ΠΙ_Final.pdf (Goal Setting_ΠΙ_Final.pdf)
- E2_3 Εσφαλμένη Πορων_ΠΙ (E2_3 Internal Evaluation of Resources_ΠΙ)
- E4_1 Ετήσια Εσωτερική Αξιολόγηση ΕΣΔΠ_ΠΙ (E4_1 Annual Internal Evaluation IQAS_ΠΙ)

II. Analysis

The Strategic Plan

The Strategic Plan of the university was developed based on its current state of affairs, a conducted SWOT analysis to identify the strengths and weaknesses as well as the opportunities and threats associated with the university's profile in the areas of educational issues, research, infrastructure, student support, responsibility to society, transportation and the adoption of a vision and a mission statement. It is based on five strategic axes each one associated with specific, detailed strategic goals.

The five strategic axes that were adopted conform to the European standards and to the strategic axes suggested by ETHAAE: (a) enhancement of the University's educational activities, (b) promotion of excellence in research, (c) connection with society and the labor market, (d) internationalization and extroversion, (e) improvements to the university environment. To achieve the strategic goals associated with each one of these axes within the implementation timeline of the plan, proposed actions are stated, accompanied by verbal descriptions, appropriate monitoring quantitative indicators, and visual graphic displays. The monitored indicators are either ΟΠΕΣΠ related or custom defined specifically for the plan, to ensure the quality assurance of the University's outputs and services. A supplementary Strategic Plan envisioned for the period 2025-2028 was also submitted.

The Quality Policy

The Quality Policy includes specific self adopted quality principles and associated quality assurance mechanisms some of which are also mentioned or implied in the Quality Manual of the IQAS. They aim at the establishment of a regulatory framework within which the academic and administrative units of the Institution are required to operate and they include:

- Improvement of the research work
- Improvement of the educational work
- Procedures related to the study programs
- Improvement of the quality of administrative work and human resource management policies.
- Improvement of infrastructure and equipment
- Promotion, extroversion, and internationalization
- Procedures for protecting students and staff from biased actions
- Procedures for academic integrity and independence
- Approval, Implementation, and Revision of the Quality Policy

The adopted quality principles are quantified through appropriate monitoring indicators (KPIs) that exist in the ΟΠΕΣΠ database or are especially defined for the institution. These indicators are included in the goal setting framework of the institution and, since they are periodically updated, weaknesses can be identified and improvements can be implemented in each strategic plan axis,

followed by targeted operational actions. These actions may be the upgrading of the infrastructure, the development of human resources, the effective management of the Institution's resources, the enhancement of Study Programs, the establishing of partnerships with public and private entities domestically and abroad, and others.

Goal Setting

There is plenty of evidence in the material submitted that the institutional goal setting activities and associated resulting information is sufficiently comprehensive and that the periodic updating is ongoing. The goal setting information is incorporated and displayed in tabular format such as:

1. To display the tracking of the goal indicator values for the institution for the academic years 2017-2018 through 2021-2-22. These indicators cover the areas of educational work, research work, financing and allocation of funds, human resources, and infrastructure and services.
2. To compare the latest goal indicator base values on hand to the updated values at the end of the academic year 2024, for each one of the five axes of the strategic plan, taking into consideration the results of a SWOT analysis conducted prior to the updating.
3. To report to ETHAAE, as required, the values of mandated indicators within the ΟΠΕΣΠ database.

III. Conclusions

A commendable effort by the Quality Assurance teams of the institution is evidenced in the indicator choices and goal setting, tracking and updating of their values which are accompanied by verbal explanations and justifications. The areas of Strategic Planning and Quality Policy are supplemented and supported by the Goal Setting collection of indicators, thus binding all three areas into a comprehensive presentation of Quality Assurance for the institution.

Panel Judgement

Please tick one of the following:

Principle 1: STRATEGY, QUALITY POLICY AND TARGET SETTING OF THE INSTITUTION	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R1.1 Enhance and further strengthen the institutional strategic plan by seeking expanded and more dedicated involvement of external business and social partners whose feedback could be constructive for the overall plan and especially appropriate for anyone of the five plan axes individually.

Principle 2: PROGRAMMING AND ALLOCATION OF RESOURCES

INSTITUTIONS SHOULD ENSURE ADEQUATE FUNDING, HUMAN RESOURCES, INFRASTRUCTURE, SERVICES AND SYSTEMS FOR TEACHING, RESEARCH, AND INNOVATION, AS WELL AS FOR THE WHOLE RANGE OF THEIR ACADEMIC ACTIVITIES, FOR THE PURPOSE OF FULFILLING THEIR MISSION AND STRATEGIC GOALS. THE ABOVE RESOURCES ARE PLANNED OVER A FOUR-YEAR HORIZON, ARE LINKED WITH THE STRATEGY AND ARE ALLOCATED IN A RATIONAL MANNER, IN ACCORDANCE WITH THE PERTINENT PROCEDURES. THEIR MANAGEMENT AND MONITORING IS IMPLEMENTED BY MEANS OF INFORMATION SYSTEMS.

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 by exploiting external sources of financing. The financial planning and the operation of an effective financial management system constitute necessary tools for the full exploitation of the resources.

The annual public funding of the Institution follow the procedures set out in article 16 of Law 4653/2020 and the relevant ministerial decisions.

The annual budgets for the past five years, the absorption and the main categories of expenditure as well as the amount and sources of the external funding are key elements for the assessment of the principle.

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 with 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 favourable 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 favourable working environment and to ensure compliance with the existing provisions.

Human resources

The Institution and the academic units bear the responsibility for the allocation and

development of the human resources. The rational allocation of human resources is based on a system of criteria, in line with the mission and the strategic options of the Institution. 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 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 provides the necessary resources for the organization and staffing of the QAU, with a clear allocation of competences and tasks to its staff members.

Documentation/Annexes

E2.1 Annual planning and allocation of funding from all available sources for the next 4 years, or Programme Agreement of the Institution, if applicable

E2.2 Internal rules for the allocation and distribution of the financial and human resources to the academic units and the central services of the Institution

E2.3 Internal evaluation by the QAU of the resources, according to the relevant NISQA indicators and the performance indicators of the Institution

E2.4 Overview of the information systems for the management and monitoring of the financial and human resources of the Institution

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

The Institution places emphasis on the preparation of students for leadership roles in a local and globalized economy ,with focus on philosophy, sciences, economics and management sciences, health, education, engineering, social sciences, agriculture ,informatics and telecommunications ,fine arts and music studies . To facilitate and maintain a creative learning environment the Institution has significant requirements in its everyday operation. The institution has a defined procedure for identifying and planning the necessary resources to support its academic activities. The University has a Research and Innovation Center with 6 institutions.

The Institution annually plans for funding, human resources, infrastructure, services, and systems over five years. Moving things forward a new administrative service organization plans to be established, so that will

modernize the operation and reconsider all administrative positions. New positions will be established in key specializations. At the same time emphasis is placed on continuous training and evaluation of the staff. This matter falls beyond the Institution's control, as it depends on decision-making at the Ministry level.

Given the limitations in recruiting permanent administrative staff due to limited available resources and highly time-consuming and rigid practices, the institution meets part of its staffing needs through contract employees. At the time of the Panel visit the number of contract employees has approached the number of permanent administrative staff. With respect to teaching requirements the Institution hires lecturers that are being paid through internal pre-budgeted funding or via externally funded programs, for some departments . Despite the limitations all teams are well organized and as a result the scarcity on the available funding is somehow mitigated.

On the academic side, increased levels of financial support are provisioned for young faculty members (early career) to enable them to expand their research and built their networks. However, financial support for faculty members can be deemed as rather limited for publishing in high quality open journals that require timely payments of fees and invoices. Funding for doctoral and/or postdoctoral fellows is also limited .

II. Analysis

Undeniably, the institution relies heavily on public funding. Given the limitations of such funding, the institution faces considerable challenges in ensuring effective operational management and securing its long-term sustainability. However, the institution has a satisfactory skilled/knowledgeable, albeit aging, administrative staff members that manage to operate all aspects of the institutional life in an efficient manner.

On the other hand, the institution has been successful in increasing external funding such as for example an improved ERASMUS+ budget due to a successful overall internationalization strategy. In fact, the Institution is now operating an extensive Erasmus and internationalization program that includes a large number of international Universities, the operation of English based postgraduates' programs including the introduction in 2025/26 academic year of an English based undergraduate programme.

The Institution through ELKE ,participated in 792 funded projects with a total annual budget of 32 millions.

The Institution's central location in Ioannina city offers distinct advantages and also presents significant challenges, including limited available space, constraints on expansion, and aging buildings and infrastructure. Needed an appropriate infrastructure plan to ensure the maintenance, refurbishment and upgrade its facilities. There is an intention to upgrade the buildings . Nevertheless, parts of the infrastructure are in need of renovation and maintenance, for instance

changing tiles in floors in large parts of the buildings, specially plastering and painting walls (the Institution is involved in an energy upgrade programme – amount of 40 millions).

Despite the limited resources the university has been successful in maintaining an appropriate learning environment for students to study, socialize, learn and thrive. The library, situated within the main campus, is managed by a team of dedicated and highly skilled administrators. It provides access to a vast repository of knowledge, catering to all levels of study, including undergraduate, postgraduate, and doctoral programs. It is also accessible to students with disabilities.

On the other hand, there is a shortage of essential auxiliary facilities that contribute to student well-being and overall experience, such as adequate common/social areas where students can interact and athletic facilities that promote health and well being via physical activities for the broader student population.

In terms of infrastructure and overall operations, the Institution should develop a more clear and forward-looking vision that prioritizes issues such as energy efficiency, environmentally sustainable practices, and/or even pathways towards carbon neutrality. By committing to these efforts, the institution could not only reduce its ecological imprint and also serve as a model for sustainable higher education.

III. Conclusions

The external evaluation of the Institution's resources by the Panel reveals that despite the scarcity of the available funding and the heavy reliance on public funding the Institution manages to successfully operate and, in many respects, to thrive in such challenging conditions. The implemented four to five year strategic plan should be developed in alignment with a holistic vision that defines the Institution's desired strategic positioning within the specified time frame.

Panel judgement

Please tick one of the following (per subsection):

Principle 2: PROGRAMMING AND ALLOCATION OF RESOURCES	
2.1 Funding	
Compliance	X
Partial compliance	
Non-compliance	
2.2 Infrastructure	
Compliance	
Partial compliance	X
Non-compliance	
2.3 Working Environment	
Compliance	X
Partial compliance	
Non-compliance	
2.4 Human Resources	
Compliance	X
Partial compliance	
Non-compliance	

Please tick one of the following:

Principle 2: PROGRAMMING AND ALLOCATION OF RESOURCES (overall)	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R2.1 UoI should strengthen its interaction with external stakeholders.

R2.2 Seek ISO certifications for ELKE and laboratories

Principle 3: STRUCTURE, ORGANISATION AND OPERATION OF THE IQAS

THE IQAS INCLUDES ALL NECESSARY PROCESSES AND PROCEDURES FOR THE COMPLIANCE OF ALL THE INSTITUTION'S ACADEMIC STRUCTURES, ACTIVITIES AND ADMINISTRATIVE SERVICES WITH THE QUALITY STANDARDS. THE QAU IS THE COMPETENT UNIT FOR THE ORGANISATION AND OPERATION OF THE IQAS AND HAS THE REQUIRED FUNCTIONAL INDEPENDENCE AND OPERATIONAL CAPACITY FOR THE EFFECTIVE IMPLEMENTATION OF THE IQAS, AS WELL AS FOR ITS COMPLIANCE WITH THE PRESENT STANDARDS.

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 HAHE principles and guidelines described in these Standards.

Structure and organization

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 Institutions' 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 HAHE 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's Gazette, as well as on the Institution's website. The above are reviewed every five years, at the latest.

To achieve the above goals, the QAU collaborates with the HAHE, develops and maintains a management information system to store the quality data, which are periodically submitted to the HAHE, 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 Institutions' competent bodies, as provided by the law, while all competences accruing from this structure are clearly defined.

The QAU is staffed by a sufficient number of permanent personnel, so as that the operational needs of the IQAS are completely met. The administrative officer of the QAU

has comprehensive updating and knowledge about the implementation of its operations and activities.

Operation

The institution takes action for the design, establishment, implementation, audit and maintenance of the Internal Quality Assurance System (IQAS), taking into account the requirements of the Standards, while making any necessary amendments to ensure fitness to achieve its aims.

The above actions include:

- the provision of all necessary processes and procedures for the successful operation of the IQAS, as well as the participation of all parties involved, across the Institution. 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;
- the determination of how the IQAS procedures/ processes are audited, measured and assessed, and how they interact;
- provision of all necessary resources to enable the IQAS implementation.

Documents

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

Documentation

E3.1 Government Gazette for the approval, structure, and operation of the IQAS and the QAU

E3.2 Updated IQAS Quality Manual (including the QAU organisational structure- job descriptions, tasks, skills)

E3.3 QAU Internal Regulation

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

The University of Ioannina (Uoi) has established a policy and set goals for quality assurance and improvement, detailed in the Institutional Internal Evaluation Report (IIER). The procedures for this policy are available on the Quality Assurance Unit (QAU-MODIP) website. A key strength of a higher education institution is its capacity to continuously improve its internal quality assurance in education, research, governance, and innovation, ideally in a forward-thinking way.

Uoi's quality assurance procedures adhere to the HQA guidelines. Each academic unit, through its Internal Evaluation Group (OMEA), is tasked with collecting data and submitting annual reports to the QAU. The QAU reviews these reports, provides feedback and suggestions for improvement, and ensures that departments align with Uoi's academic mission. The QAU has shared recent academic unit reports, follow-up actions, and external evaluation reports with the EEAP. These documents demonstrate that Uoi has an effective system for recording data and comparing it to relevant quality indicators. Additionally, the quality manual clearly outlines the processes.

II. Analysis

The Uoi has a new strategic plan for 2024-2027, which targets research and education, outreach and market connections, and quality assurance for services provided to both the university community and the wider society.

The Quality Assurance Unit (QAU) at the University of Ioannina is an independent administrative entity that reports to the Vice-Rector for Academic Affairs and Student Welfare. Established by a Senate decision (Session Number 929/28-08-2008), the QAU's organization, structure, and operations comply with the current Greek legislative framework (Law 4957/2022, Article 215). The QAU is tasked with managing, implementing, and overseeing the Internal Quality Assurance System (IQAS), which encompasses all evaluation and quality assurance processes for study programs, services, and activities within the institution. The goal is to enhance the quality of educational, research, and administrative outputs in line with international standards. The IQAS covers the academic accreditation of study programs, the accreditation of the IQAS itself, and the application of quality assurance in the work of academic and administrative units.

The Internal Quality Assurance System (IQAS) is comprehensively outlined in the Quality Manual, which received initial approval from the Senate on March 22, 2018 (Government Gazette B'1345/19-4-2018) and was later amended on March 28, 2019 (Government Gazette 1704/16-05-2019). This amendment addressed the approval of changes to the Quality Assurance Unit (QAU) and the regulations governing the organization, structure, and operation of the IQAS at the University of Ioannina, following the incorporation of the Technological Educational Institute (TEI) of Epirus. The Quality Manual encompasses the Quality Policy along with procedures, processes, and guidelines that ensure the IQAS operates effectively.

It is important that the UoI and its administration ensures the necessary infrastructure and resources for the effective operation of the Internal Quality Assurance System (IQAS) and the implementation of its Quality Assurance Policy. Given the institution's size and the critical role of the Quality Assurance Unit (QAU), six administrative positions have been allocated to support the QAU. These positions are in the Administrative, Financial, and Statistical sectors, with clearly defined qualifications and duties as per the university's regulations. It has been pointed out that the difficulty in staffing the Service with permanent personnel and meeting its needs through mobility (secondment) and the hiring of external collaborators disrupts its smooth operation and can lead to discontinuity. Continuous training and education for QAU staff are deemed crucial and are promoted whenever possible. For instance, QAU staff have attended online seminars on Quality Management, Basic Management Principles, Organizational Behavior, and Quality Improvement in Education. Additionally, a notable achievement is the staff's contribution to an article in a Collective Volume published by the Democritus University of Thrace.

III. Conclusions

Based on the documents provided and the discussions during the EEAP's visit in the UoI, we acknowledge that there is full compliance with principle 3 of HAHE.

Panel judgement

Please tick one of the following:

Principle 3: STRUCTURE, ORGANISATION AND OPERATION OF THE IQAS	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R3.1 The QAU should establish processes to enhance and oversee the quality of Uol's interactions with both internal and external stakeholders.

R3.2 The Quality Assurance Unit (QAU) should take an anticipatory role and act as a central hub and driving force for sharing best practices.

R3.3 Make provisions to maintain enough employees.

R3.4 The QAU should continue the efforts for implementing a dynamic system to monitor and utilize the feedback received from departments, aiming at improving the quality manual and the IQAS in general.

R3.5 It is recommended to create a program that offers faculty opportunities to refine their teaching skills, embrace innovative teaching methods, and improve their pedagogical abilities.

Principle 4: SELF-ASSESSMENT

THE INTERNAL QUALITY ASSURANCE SYSTEM CONDUCTS INTERNAL EVALUATION OF THE WHOLE RANGE OF ACADEMIC AND ADMINISTRATIVE ACTIVITIES OF THE INSTITUTION, AS WELL AS ANNUAL REVIEW OF THE SYSTEM, TO IDENTIFY ANY OVERSIGHTS, DEFICIENCIES OR DISCREPANCIES. CORRECTIVE ACTIONS AND IMPROVEMENTS ARE PROPOSED TOWARDS THE ACHIEVEMENT OF THE QUALITY AND STRATEGIC GOALS. DURING THE SELF-ASSESSMENT, THE EFFECTIVE INTERNAL COMMUNICATION WITH THE INTERNAL AS WELL AS THE EXTERNAL STAKEHOLDERS IS ENSURED.

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 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 are made in the context of the annual IQAS review and 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 revised shortly, prior to the institutional approval of the programmes.

Documentation

E4.1 Minutes and other documents and relevant correspondence regarding the annual internal evaluation of the IQAS by the QAU

E4.2 Results of the last annual internal evaluation of the IQAS by the QAU, and the relevant minutes and documentation

E4.3 Correspondence and other actions (workshops, meetings) for collecting feedback from the external stakeholders

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

The Proposal for Accreditation document, E1_new_ΠροτΠιστΕΣΔΠ_ΠΙ, indicates that an Internal Evaluation of the IQAS for the institution was conducted in 2023-2024 using the data and indicators of OPESP for the academic year 2021-2022, the recommendations of the Accreditation certification of the UOI IQAS of 2018, the Quality Manual for IQAS and the relevant processes of that Manual. The documents submitted relative to that process and examined by EEAP are:

- E1_3_new_Στοχοθεσία_ΠΙ_τ.pdf
Goal Setting for the institution
- E3_2_ΕΣΔΠ ΠΙ.zip
The updated Institutional Quality Manual
- E3_3_new_ΕσωτΚανον ΜΟΔΙΠ_ΠΙ.pdf
Internal Operational regulations of MODIP
- E4_1_new_Ετησια ΕσωτΑξιολΕΣΔΠ_ΠΙ.zip

Documents Associated with the Annual IQAS Evaluation of MODIP

- E4_2_Ετήσια Ανασκόπηση ΕΣΔΠ_ΠΙ.zip
Results of the Annual IQAS Review by MODIP
- E5_1_new_Εκθαξιολογηση_ΠΙ.zip
Report of the 2021-2022 ΟΠΕΣΠ quality indicators by MODIP

From the documents mentioned above it appears that the most significant information and documentation relative to self-evaluation is found in the extensive effort that was dedicated in the goal setting and updating effort. In the absence of an Internal Evaluation report, the EEAP had to wade through the various tabular displays of goal setting and associated indicator values, supplemented by explanatory verbal comments and justifications, to evaluate the self-assessment effort.

II. Analysis

The purpose of the Internal Evaluation process of the IQAS, other than to serve in the quality assurance improvement in all operational aspects of the institution, is to demonstrate compliance with the seven (7) ETHAAE Principles that are described in the Accreditation Template. For that purpose, Principle 4 in this Template serves as the guide to ensure that the road map and the methodology used to evaluate the rest of the Principles are being applied as discussed in the Quality Manual of each institution. In the Manual, there is one Διεργασία (process) with several Διαδικασίες (procedures) corresponding to each Principle to be followed. That is, each Process discussed in the Quality Manual corresponds to a given Principle in the Accreditation Template.

Document E3_2_ΕΣΔΠ ΠΙ is the Quality Manual adopted by UOI enumerating Διεργασίες (Processes) and Διαδικασίες (Procedures) within each process and was followed by the quality assurance teams (OMEA / MODIP) to accomplish this task. Document E4-2_Ετήσια Ανασκόπηση ΕΣΔΠ_ΠΙ is a general, very brief and rather inadequate verbal description in the form of a report to the university faculty senate on the results of the Internal Evaluation on each procedure as described in the Quality Manual.

In a closer examination of document E3_2_ΕΣΔΠ ΠΙ, the EEAP observed that the Quality Assurance teams used the Quality Manual as a template and followed closely the steps and requirements described in each one of its 7 sections (i.e, 7 Processes with the procedures within each one) with one-to-one correspondence to the 7 IQAS Principles of the ETHAAE Accreditation Template to conduct the IQAS Internal Evaluation. The steps, requirements, actions, input and output information and results were mostly verbally descriptive, very clear and comprehensive but without the inclusion of metrics or quantitative data. Occasional references were made to the relevant goal setting indicators and their values that are included in the submitted goal setting documents.

Positive aspects of the Internal Evaluation process, as presented, include:

- a. The consultation, use, and close adherence to the Quality Manual to conduct the Internal Evaluation of the IQAS Principles to ensure compliance with the ETHAAE Accreditation Template requirements.
- b. The adoption of the “Process” and associated “Procedures” approach suggested by the Διεργασία 4 (Process 4) of the manual for the Internal Evaluation of all other Principles.
- c. The appropriate use of relevant quantitative (statistical) information (indicators (KPIs)) from both the OPESP data base and the those defined for a specific purpose (metric) by the institution.
- d. The extensive verbal description and justification of results, conclusions, recommendations, action items, implementation procedures and follow up corrective actions, as needed.

Weak aspects of the Internal Evaluation as presented are:

- a. The lack of direct use and inclusion of any quantitative information associated with the verbal description of any issue mentioned in any section of the Quality Manual which in a way also served as an Internal Evaluation report template. Nevertheless, most of the relevant metrics can be located by searching in the goal setting collection of documents.
- b. The absence of a document in the form of an Annual Internal Evaluation Report presenting the process, the results, the conclusions and follow up actions of each “Process” in the manual (equivalently each ETHAAE Principle) in a somewhat abbreviated form convenient for the reader to review rather than having the reader search, look and find quantitative information of interest dispersed within the extensive tables of goal setting indicators.
- c. The absence of at least one sample form (Έντυπο), such as the ones suggested in the Quality Manual Appendix D, to illustrate the formal recording and documenting of results and follow up activities of the Internal Evaluation.

III. Conclusions

The EEAP finds that the Internal Evaluation Process of the IQAS of UOI was conducted following the directives of the institutional Quality Manual. It was extensive and comprehensive encompassing a wealth of verbal qualitative information but lacked cohesiveness and documentation support since the relevant quantitative information was dispersed within the various goal setting documents. The quality assurance personnel conducted the tasks involved in a dedicated, thorough manner, with smooth cooperation and regular formal meetings that were documented in session minutes in which the results and

conclusions derived from the process were adequately presented and the follow-up actions were well articulated.

Panel judgement

Please tick one of the following:

Principle 4: SELF-ASSESSMENT	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R4.1 Present the Internal Evaluation process and its findings in a more cohesive and summarized version in the form of an Internal Evaluation Report that combines verbal descriptions coupled with corresponding quantitative (indicator) values or at least make appropriate references to the goal setting tables, easy to be located by the reader for verification. Perhaps one such report may be produced separately for each Principle, following the corresponding “Process” sections of the Quality Manual. Finally, these individual reports (one for each Principle) could be consolidated into a collective, comprehensive report.

R4.2 Under the guidance of the Quality Manual, consider the design/creation of a “Standard Template” for each Process (Διεργασία) / IQAS Accreditation Principle to be combined to an “Overall Standard Template” for the final report. The standard format of these templates

can be repeatedly used each year by merely updating the information. This will reduce the effort of the quality assurance teams and standardize the Internal Evaluation Report.

NOTE: It is recommended that a similar approach be adopted for the Internal Evaluation Reports of Academic Departments and Programs of Study, both Undergraduate and Graduate. The EEAP feels that ETHAAE should encourage, guide and support the effort of creating such “Standard Templates” in the same spirit as the development of the Accreditation Report Template. This will eliminate the non homogeneity that prevails among the Internal Evaluation results submissions among all academic institutions and will substantially decrease the work load of quality assurance teams in the future.

Principle 5: 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, THROUGH INFORMATION SYSTEMS, AIMING AT THE EFFECTIVE MANAGEMENT OF THE QUALITY DATA RELATED TO TEACHING, RESEARCH AND OTHER ACADEMIC ACTIVITIES, AS WELL AS THOSE RELATED TO THEIR ADMINISTRATIVE OPERATION.

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 indicators and data provided by the HAHE 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.

Institutions are under an obligation to provide or transfer data (through the QAU) to the HAHE, for the purposes of quality assurance, and monitoring of their strategy and funding.

Documentation

E5.1 Reports from the National Information System for Quality Assurance in Higher Education (NISQA) and accompanying assessment report by the QAU

E5.2 Description of the functions of the QAU information system

E5.3 Sample of fully completed questionnaire of satisfaction surveys addressed to the teaching and the administrative staff

E5.4 QAU report on the utilisation of the data collected from the QAU information system (internal evaluation, quality targeting, etc.)

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

At the UoI, the implementation of the Internal Quality Assurance System (IQAS) involves procedures for gathering, managing, and monitoring data related to teaching, research, administrative activities, and student satisfaction. Specifically, data is collected from various institutional systems such as the student registry, Research Committee (ELKE), Library, and Financial and Administrative services. According to HAHE guidelines, the QAU submits annual data on the institution and all its study programs (undergraduate, postgraduate, and doctoral) to the HAHE's Information System for Quality Assurance (OPESP). This data includes information on the student population, staff, infrastructure, resources (equipment, support services, IT facilities), research activities, and financial details, collected from the institution's information systems.

II. Analysis

The QAU analyzes the collected data and indicators to draw conclusions at various operational levels of the institution. Each year, the trends of these indicators are reviewed, and they are categorized in a document based on whether they need improvement or have a positive impact. Furthermore, the QAU compiles a Quality Target Report, incorporating previous years' targets to classify the indicators according to their trends (e.g., indicators that increased or decreased as intended, those that met or exceeded targets, etc.). This information is then used to set the annual quality targets.

The development of QAU's information system is a continuously evolving effort to streamline and enhance the processes of the submission of accurate and up-to-date data. The level of automation in data collection is steadily increasing and part of the institution's internal information systems was reorganized to achieve integration with HAHE's Information System for Quality Assurance (OPESP). Currently, the QAU's information system is connected to the student registry system (UNITRON) and the Administrative Directorate's system (HRMS). In the future, it is planned to connect the QAU's Information System with the corresponding systems of the Research Committee (ELKE) and the Financial Services, with the capability to interface with all the institution's individual information systems. The QAU's information system has an architecture of distinct systems, such as: a) Collection of HAHE indicator data, b) Teaching Staff

Inventory Report, c) Course Inventory Report, d) Creation of Questionnaires, e. Course Evaluation and f. Data extraction from international databases related to the research work of faculty members, e.g. Scopus.

An important tool is the Business Intelligence (BI) subsystem that enables users to generate and monitor indicators with cartographic representation. It serves as a strategic tool that provides a comprehensive view of educational progress to support effective policy decisions. The system integrates data from various subsystems and allows users to perform statistical analyses and monitor performance through interactive dashboards with KPIs.

The use of digital questionnaires for course evaluation, that replaced the older hard copies is a very positive development. The QAU manages an information system that includes student questionnaires, course outlines, and departmental reports. This system allows students to provide feedback on their courses and instructors electronically, ensuring a streamlined and efficient evaluation process. The digital form of the questionnaires lead to increased students' responses rates. Certainly, this is an effective way to increase students' participation and ensure privacy at the same time.

An important factor in evaluating universities is the career progression and employment absorption of graduates in the job market. The UoI is currently conducting a survey to track the career paths of its graduates from the years 2016-2017 and 2020-2021. This initiative aims to gather data on graduate employment and career progression, which is a key factor in university evaluations. Although the university lacks a centralized alumni tracking system, a dedicated team, led by a faculty member, is overseeing the survey. The survey adheres to HAHE standards and uses a standardized European questionnaire in Greek, distributed through LimeSurvey. Responses indicate that several departments, including Agriculture, Materials Science Engineering, Music Studies, Early Childhood Education, Computer Science and Telecommunications, Philosophy, Early Childhood Care and Education, Computer Engineering and Informatics, Architecture, and Medicine, have their own alumni associations.

The EEAP ascertained that the Institution systematically analyzes the information obtained from the satisfaction surveys. This information is demonstrated in graphs, appropriately communicated to all interested parties and used towards improvement. Specifically, the data collected from the QAU information system is utilized by: 1) The OMEA and the Presidents of the Academic Departments for conducting the internal evaluation of the Academic Departments and their Study Programs within the framework of the Internal Quality Assurance System (IQAS) of the UoI and according to its specifications. 2) The QAU (MODIP) for conducting the internal evaluation that MODIP carries out annually in all Academic Units. 3) The Administration of the UoI, for developing specific

indicators and goals included in the University's annual target setting, and 4) By the RANKINGS Committee of the Uof for the participation of the University (Academic Departments and Thematic Areas) in international ranking lists.

III. Conclusions

The QAU of the UoI has taken solid steps towards the collection, analysis and use of information in an integrated, factional and readily accessible manner. The above are fulfilled through the development of QAU's information system that provides an effective management of the quality data (teaching, research, administrative operation). Based on the above the Institution is in full compliance with HAHA's principle 5.

Panel judgement

Please tick one of the following:

Principle 5: COLLECTION OF QUALITY DATA: MEASURING, ANALYSIS, AND IMPROVEMENT	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R5.1 The “Satisfaction Questionnaires” (e.g., Annex E5.3) should allow the teaching and administrative staff to give descriptive answers rather than limit the answers to an “agree” or “disagree” option.

R5.2 Collect additional data from alumni and stakeholders. It would be useful to capture the connection between the job market and society through the collection of specific data via questionnaires directed at graduates (alumni) and social partners.

Principle 6: PUBLIC INFORMATION

INSTITUTIONS SHOULD PUBLISH INFORMATION ABOUT THEIR TEACHING AND ACADEMIC ACTIVITIES IN A DIRECT AND ACCESSIBLE MANNER. ALL PERTINENT INFORMATION THAT APPEARS IN THE INSTITUTION’S WEBSITE 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.

The public information available via the internet should appear in Greek and in English, the webpages should have uniform architecture, structure and content across all academic units of the Institution, so that the users can easily identify the information of their interest.

Documentation

E6.1 Results of the assessment of the functionality and the content, as well as of the maintenance and update of the Institution's webpage

E6.2 List of the links included in the Institution's and QAU webpage, and of the special personalized internet applications

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

As expected, the UoI uses its web pages as the main vessel for disseminating information to both UG and PG students, as well as visitors and other interested parties. It keeps a very elaborate collection of information categorised in four main groups: the Education, Research, University and University life. Within these groups there are several entries that span in all areas of information. Of particular interest is the level of detail and the volume of information included: e.g. there is a complete and updated list of contacts for all staff, together with their emails, research pages, publications, etc.

II. Analysis

In 2024, a new central website was created for the University, where all useful information is provided, such as the structure and operation of the University, strategic planning, which includes its vision, as well as internal and external evaluations. However, this information is not presented clearly and directly on the website, but rather through links and PDF files. The website also includes details about events taking place on campus, the curriculum, and more. It serves both undergraduate and postgraduate (including doctoral) students, with each department having its own profile, identity, and objectives. For more detailed information, such as courses offered by each department, users are redirected to the individual department websites. When accessing a department's website, information is available about the curriculum, faculty members, and more. The website is available in two languages, Greek and English, and is regularly updated. Access to some information is not immediate, and often users must search for a long time to find the information they need, such as the vision, which is not clearly stated on the website and is found in the strategic planning document. Additionally, some links provided to open other resources experience technical issues.

III. Conclusions

The accreditation committee is satisfied with the way that information is kept and discriminated by the University of Ioannina. All the necessary pieces of information are there, both in Greek and English with the appropriate level of detail and depth.

Panel judgement

Please tick one of the following:

Principle 6: PUBLIC INFORMATION	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

R 6.1 A change to the website should be made to make it simpler and more user-friendly for anyone who wants to get information about the University.

Principle 7: EXTERNAL EVALUATION AND ACCREDITATION OF THE IQAS

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

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.

Documentation

E7.1 Five-year Progress Report, on the response to the recommendations included in the most recent IQAS Accreditation Report

Institution compliance

Please comment on the compliance with the Principle. Specifically: Please describe the findings related to the Principle, analyse, and conclude your judgement. Findings, analysis of judgement and conclusions should be developed below in three distinct parts.

I. Findings

The Institution had a previous external evaluation and accreditation process (04-10/11/2018). The Panel has identified a consistent, active, and constant engagement of all the internal stakeholders of the academic community in the quality assurance process, as it is specified by MODIP. The meetings with the University Administration, the QAU/MODIP, and the OMEA groups have revealed that this procedure has become part of the Institution's life at all levels of its functions. The institution has contact with external stakeholders (alumni,

governmental agencies, local authorities, industry, business, and other research entities) either through personal contacts of the academic staff or high-level institutional agreements that are signed to foster collaboration.

II. Analysis

The Panel examined the responses to the recommendations of the 2018 IQAS Accreditation Panel Report included in the Document E7.1 (Progress Report) ,which were:

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

Document E7.1 (Progress Report) addressed all these recommendations by providing a verbal description and justification for the approach taken to achieve compliance, followed by a table of actions taken and a table of achieved results and follow up actions for each one. The tabular format for the “actions taken” table for each recommendation is: GOALS - ACTIONS - RESPONSIBILITIES - COMPLETION DEADLINES- RESOURCES REQUIRED.

The tabular format for the “achieved results and actions taken” for each recommendation is: ACTIONS TAKEN – ACHIEVED RESULTS – PERCENT OF GOAL. Finally, the Panel did not see any evidence that any of the stakeholders of the institution engaged in the IQAS accreditation review or the entailed follow-up actions, but on the other hand, there is no need to because the issue is exclusively the assurance that the institution needs to demonstrate a satisfactory response to the recommendations.

III. Conclusions

The evaluation was largely positive and, moreover, the University Administration endeavored to take into account the recommendations. In addition, as a result of the merger, some weaknesses were cured due to the effect of economy of scale. As a consequence, the panel finds that the institution is compliant with Principle 7.

Panel judgement

Please tick one of the following:

Principle 7: EXTERNAL EVALUATION AND ACCREDITATION OF THE IQAS	
Compliance	X
Partial compliance	
Non-compliance	

Panel Recommendations

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

NONE

PART C: CONCLUSIONS

I. Features of Good Practice

Please state aspects of good practice identified, regarding the IQAS.

During the formal meetings and the informal talks between the meetings the EEAP got the impression that a “state of collective effervescence” was created by the process of discussing quality matters and preparing the evaluation. Moreover, this has resulted in the creation of a “critical mass” of persons in all parts of the leadership and the administration of the university that are willing to engage in quality matters of the University, promote and materialize its strategic goals and enhance the overall quality of the University.

If this is the case, the process of evaluation has achieved a noble result, it has created a huge organizational capital and the EEAP hopes that the University works continuously to capitalise it and further enhance the overall quality of the University. This is one of the major findings of the external evaluation and the core recommendation.

The University and its Schools are engaged in international cooperation. Some of the schools and research environments are of high international standard. The same can be said about the physical condition of the infrastructure of these schools and environments. The standard of common facilities as the Library or the Aula is excellent.

The University was praised by students, alumni and the external stakeholders. Specially the zeal of the academic staff, the directness of teacher-student relationship and the possibility to exercise science by participating in workshops (Εργαστήρια) were mentioned by students and alumni. The external stakeholders mentioned the importance of the University for the development of the Region.

All relevant policies and procedures relating to quality matters are in place and well-staffed and organized.

II. Areas of Weakness

Please state weak areas identified, regarding the IQAS.

- The comparative advantage of the geopolitical position of the University is not fully materialized.
- The quality of academic environments and the condition of the material infrastructure of the campus are not equally distributed throughout the University.
- Some of the parts of the campus in Ioannina need restoration and generally a better and continuous maintenance. Graffiti in many places. (The University has secured financial resources for restoration).
- Relationships with external stakeholders are organized in an ad-hoc manner.
- Precarious economic situation of PhD students

III. Recommendations for Follow-up Actions

Please make any specific recommendations for development.

- Enhance and further strengthen the institutional strategic plan by seeking expanded and more dedicated involvement of external business and social partners whose feedback could be constructive for the plan and especially appropriate for anyone of the five plan axes individually.
- The Quality Assurance Unit (QAU) should take an anticipatory role and act as a central hub and driving force for sharing best practices.
- Make provisions to maintain enough employees.
- The QAU should continue the efforts for implementing a dynamic system to monitor and utilize the feedback received from departments, aiming at improving the quality manual and the IQAS in general.
- It is recommended to create a program that offers faculty opportunities to refine their teaching skills, embrace innovative teaching methods, and improve their pedagogical abilities.
- Present the Internal Evaluation process and its findings in a more cohesive and summarized version in the form of an Internal Evaluation Report that combines verbal descriptions coupled with corresponding quantitative (indicator) values or at least make appropriate references to the goal setting tables, easy to be located by the reader for verification. Perhaps one such report may be produced separately for

each Principle, following the corresponding “Process” sections of the Quality Manual. Finally, consolidate these individual reports (one for each Principle) into a collective, comprehensive report. In the report, feel free to make references to the documents that are associated with the quantitative information pertaining to the specific Principle.

- Under the guidance of the Quality Manual, consider the design/creation of a “Standard Template” for each Process (Διεργασία) / IQAS Accreditation Principle and an “Overall Standard Template” for the final report. The standard format of these templates can be repeatedly used each year by merely updating the information. This will reduce the effort of the quality assurance teams and standardize the Internal Evaluation Report.
- The “Satisfaction Questionnaires” (e.g., Annex E5.3) should allow the teaching and administrative staff to give descriptive answers rather than limit the answers to an “agree” or “disagree” option.
- Collect additional data from alumni and stakeholders. It would be useful to capture the connection between the job market and society through the collection of specific data via questionnaires directed at graduates (alumni) and social partners.
- Active participation of graduates in alumni groups through mentoring
- A change to the website should be made to make it simpler and more user-friendly for anyone who wants to get information about the University

IV. Summary & Overall Assessment

The Principles where compliance has been achieved are:

1, 2, 3, 4, 5, 6, 7

The Principles where partial compliance has been achieved are:

None

The Principles where failure of compliance was identified are:

None

Overall Judgement	
Compliance	X
Partial compliance	
Non-compliance	

The members of the External Evaluation & Accreditation Panel

Name and Surname	Signature
PAPAKOSTAS APOSTOLIS	Signed by PAPAKOSTAS APOSTOLIS - 29/03/2025 09:53:27 +02:00
Antoniou Maria	Signed by Antoniou Maria - 29/03/2025 09:53:27 +02:00
ECONOMIDES SPYROS	Signed by ECONOMIDES SPYROS - 29/03/2025 09:53:27 +02:00
Michiotis Ioannis	Signed by Michiotis Ioannis - 29/03/2025 09:53:27 +02:00
Πρωτονοταρίου Ελισάβετ	Signed by Πρωτονοταρίου Ελισάβετ - 29/03/2025 09:53:27 +02:00