Accreditation Report
for the Internal Quality Assurance System
(IQAS)

Institution : Democritus University of Thrace

Date: 04/07/2025

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

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PART A: BACKGROUND AND CONTEXT OF THE REVIEW

I.   The External Evaluation & Accreditation Panel

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

1. SKOUTERIS THOMAS (Chair)
    (Title, Name, Surname)
    The American University in Cairo
    (Institution of origin)

2. FRIDERIKOS VASILIS
    (Title, Name, Surname)
    King's College London (KCL), University of London
    (Institution of origin)

3. Michiotis Ioannis
    (Title, Name, Surname)
    CEN (European Committee for Standardization)
    (Institution of origin)

4. Skevoulis Sotirios
    (Title, Name, Surname)
    Seidenberg School of Computer Science and Information Systems, Pace University
    (Institution of origin)

5. ΜΑΤΙΚΑ ΒΑΣΙΛΙΚΗ
    (Title, Name, Surname)
    University of Patras
    (Institution of origin)

II.   Review Procedure and Documentation

Brief reference to the Panel preparation for the IQAS review, as well as to the documentation provided and considered by the Panel. Dates and of the site visit, visit schedule, meetings held and any additional information regarding the procedure.

The IQAS accreditation review of Democritus University of Thrace (DUTH) was carried out by the External Evaluation and Accreditation Panel (EEAP) from May 11 to May 17, 2025. The process began with a preliminary private meeting among EEAP members, during which responsibilities were allocated and a review of preparatory documentation was conducted, including the internal quality assurance system (IQAS) reports, strategic planning documents, and related institutional data. This allowed the Panel to prepare a focused agenda tailored to the university's profile and quality framework. The on-site portion of the review took place over two full days, hosted in Komotini. It commenced with a high-level introductory meeting with the Rector and Vice Rectors, offering a concise overview of the university's strategic directions, achievements, and areas requiring attention. This was followed by focused discussions with the Quality Assurance Committee (QAC) and MODIP (QAU), during which the Panel was briefed on the institutional approach to quality assurance, the internal evaluation processes, and the functional deployment of the IQAS. Throughout the site visit, the Panel engaged with a wide array of stakeholders in a constructive and collegial atmosphere. The schedule included meetings with Internal Evaluation Groups (OMEAs), teaching staff across disciplines and ranks, and extensive student representation. These sessions provided rich insights into how quality assurance mechanisms are experienced and perceived at operational levels. The Panel also conducted a physical tour of facilities, including classrooms, laboratories, libraries, and administrative spaces, with special attention paid to MODIP's infrastructure and digital systems. The Panel also met with postgraduate students and postdoctoral researchers to understand their academic trajectories and the institutional support available for research and mobility. Administrative heads shared their perspectives on the implementation of strategic and quality objectives within their units, and alumni and employers provided valuable feedback regarding the university's social relevance, employability outcomes, and external collaborations. Across all sessions, the Panel noted the high level of preparation, openness to dialogue, and the genuine commitment of participants. The review concluded with an internal debrief and final clarification meetings with MODIP and senior leadership. The atmosphere throughout was professional, reflective, and deeply collaborative, indicative of a mature institutional engagement with quality assurance. The Panel was particularly impressed by the inclusive participation and willingness to engage in constructive dialogue at all levels of the university.

III.   Institution Profile

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

Democritus University of Thrace (DUTH) is a public, multi-campus university established in 1973. It serves as a significant academic institution in the region of Eastern Macedonia and Thrace, Greece. The university's administrative headquarters are located in Komotini, with campuses spread across seven cities: Komotini, Xanthi, Alexandroupoli, Orestiada, Didymoteicho, Drama, and Kavala. DUTH comprises 10 schools and 28 departments, offering a wide range of undergraduate, postgraduate, and doctoral programs . The university has a student population of approximately 30,000, including over 1,700 PhD candidates . The academic staff consists of more than 700 members, supported by around 300 administrative personnel. The multi-campus structure allows DUTH to contribute significantly to regional development, providing educational and research opportunities across various disciplines. However, this geographical dispersion also presents challenges in terms of infrastructure, coordination, and resource allocation. The university has been proactive in addressing these issues through strategic planning and investment in infrastructure upgrades, particularly in the campuses of Drama, Didymoteicho, and Kavala. DUTH is committed to fostering a culture of quality and continuous improvement. The university has implemented an Internal Quality Assurance System (IQAS) aligned with the standards of the Hellenic Authority for Higher Education (HAHE). This system ensures the systematic evaluation and enhancement of academic programs, research activities, and administrative services. The Quality Assurance Unit (MODIP) plays a central role in coordinating these efforts, promoting transparency, and engaging stakeholders in quality assurance processes. In recent years, DUTH has emphasized internationalization, expanding its collaborations with institutions across Europe and beyond. The university offers several postgraduate programs in English and actively participates in European research projects, enhancing its global academic presence.

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

    I.   **Findings**

Democritus University of Thrace (DUTH) has in place a formally adopted four-year Strategic Plan, which is structured into strategic pillars that correspond to the main operational domains of the institution: education, research, social contribution, internationalization, infrastructure, and quality assurance. Notably, quality assurance is not treated as an auxiliary function but is embedded as a distinct strategic axis. This confirms the university's formal commitment to integrating quality mechanisms across its operations.

The strategic plan is accompanied by a documented SWOT analysis that identifies the institution's internal strengths and weaknesses, as well as external opportunities and threats. The SWOT is presented in a structured format and reflects a broad awareness of the university's operational environment, highlighting for example the institution's research potential, human capital, and challenges such as demographic decline and infrastructural limitations. However, the SWOT matrix is not supported by quantitative indicators or benchmarking data, and there is no visible connection between the SWOT findings and the prioritization of strategic actions or resource allocations.

Annual quality objectives are articulated in the institution's Quality Objective Setting document (E1.3), which operationalizes strategic goals through measurable indicators aligned with the SMART framework. These objectives are disaggregated across institutional domains, such as curriculum certification, student satisfaction surveys, and international program development. Each objective includes baseline and target values, responsible units, and timelines, and is clearly linked to broader strategic themes. Nonetheless, most of these targets focus on outputs rather than outcomes, and the rationale behind their selection is not always clearly grounded in performance evidence or stakeholder consultation.

The university's QA policy is codified in E1.2 and outlines the principles and operational mechanisms governing internal quality processes. It references the

European Standards and Guidelines (ESG) and assigns the responsibility for quality oversight to the Quality Assurance Unit (MODIP). MODIP is clearly authorized to manage and coordinate all aspects of the IQAS, including internal evaluations, data monitoring, program accreditation, and strategic alignment. Its central role is confirmed by internal reports and external evaluation findings, which acknowledge the unit's functionality, staffing, and active coordination with academic and administrative structures.

The quality culture described in the documentation appears to be structurally embedded through MODIP's activities, but there is little evidence of bottom-up engagement, grassroots ownership, or systematic quality awareness training across the university community. This appears to be the case especially with regard to students, alumni, and external stakeholders

II.   Analysis

In accordance with the HAHE standards for quality assurance in higher education, DUTH demonstrates substantial alignment with the core expectations of Principle 1. The presence of a coherent strategic plan with quality assurance as an explicit pillar indicates a sound institutional foundation. The six-pillar structure of the strategy ensures that quality objectives are embedded within each operational domain, and the corresponding annual objectives provide a formal mechanism to implement, monitor, and review progress.

However, there are limitations. The SWOT analysis, although present and institutionally relevant, is not utilized as a planning instrument to prioritize interventions or address identified vulnerabilities. Its descriptive nature limits its strategic utility. Moreover, the lack of performance indicators or benchmarking comparisons in the strategy and SWOT reduces the evidence base for decision-making. A clear system of prioritization of activities is missing.

The formulation of objectives in E1.3 is systematic and well-aligned with the strategic pillars, showing clear evidence of planning discipline. Nonetheless, the process of setting these objectives appears to be top-down and technocratic, with little (documented) involvement of all stakeholders in identifying needs or setting priorities. This lack of participatory input raises concerns about the embeddedness of quality processes within the broader institutional culture.

MODIP functions as the linchpin of the QA system and its role is well-supported by documentation and external verification. The unit coordinates internal evaluation procedures and supports academic units in meeting QA obligations. Its work is quite impressive. Its data infrastructure and evaluation functions are sufficiently mature. However, while MODIP appears highly functional, the broader institutional quality culture remains centralized and driven by compliance rather than shared engagement or reflective practice. In this regard, there appears to be some way to go.

Communication and transparency also represent areas for improvement. While the QA policy is public, its dissemination within the university is not systematically supported by awareness campaigns, feedback mechanisms, or internal audits of policy understanding. Monitoring of KPIs is performed, but the adaptation of objectives based on evidence or performance trends is not clearly documented. There is a lack of continuous improvement loops connecting data insights to strategic readjustments or resource reallocations.

III.   Conclusions

Democritus University of Thrace has made significant progress in establishing a structured and integrated quality assurance framework that aligns with its strategic development goals. The formal documents demonstrate that strategic planning, policy articulation, and operational implementation of quality assurance are institutionally prioritized and appropriately mandated. MODIP is functioning effectively as the central authority for quality management, and its work is embedded in the university's planning, evaluation, and reporting cycles.

Nevertheless, the institution's approach to strategy and quality, while procedurally robust, still lacks analytical depth and participatory dynamism. Strategic choices are not transparently justified through performance data or option appraisal, and the alignment between planning instruments such as SWOT, KPIs, and annual targets is more structural than evidence-based. Quality assurance is understood institutionally, but it is not yet fully internalized or co-owned by academic and support units.

In light of the above, the university is judged to be in substantial compliance with Principle 1 of the HAHE accreditation framework. Further development is needed to move from formal integration to strategic intelligence, participatory governance, and an institution-wide quality culture grounded in reflective, data-informed practice. Nevertheless, and in view of the tremendous progress achieved since the last assessment, the Panel finds that full compliance is more appropriate than 'partial', hoping that this will act as a catalyst and encouragement for further growth.

Panel Judgement

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

Panel Recommendations

R1.1: Strengthen the use of SWOT analysis in strategic planning by linking identified weaknesses and threats to clearly prioritized actions, supported by performance data and benchmarking.

R1.2: Justify the selection and prioritization of strategic goals through documented internal analyses, stakeholder input, and alignment with institutional performance gaps.

R1.3: Establish formal consultation and engagement mechanisms to include academic and administrative staff, as well as students, in the formulation of strategy and quality objectives.

R1.4: Promote a quality culture beyond compliance by developing bottom-up initiatives such as QA training, awareness sessions, and participatory evaluation workshops.

R1.5: Introduce a structured cycle of KPI review and target adjustment based on periodic performance monitoring and strategic reflection.

R1.6: Develop and implement internal communication strategies to disseminate QA objectives, results, and changes in a transparent and timely manner to all units.

R1.7: Broaden the KPI framework to include more qualitative and outcome-focused indicators, such as student learning achievements, graduate satisfaction, and research impact.

R1.8: Ensure the sustainability and institutional continuity of MODIP by reinforcing its staffing, resources, and integration within university governance structures.

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

I.   **Findings**

Undeniably the Democritus University of Thrace (DUTH) stands out both nationally and internationally for its strong commitment to academic excellence in teaching and research, as well as for its significant contribution to the cultural, social, and economic development of the region. Distinctive in both character and geography, DUTH is located at a strategic crossroad between Europe and Asia, and is notable for its decentralized structure, reflecting its role as a dynamic and regionally embedded institution. More specifically, the University operates over 7 different cities within Eastern Macedonia and Thrace and is populated by a large number of Departments that cover the whole spectrum of technology, medicine and humanities. In that respect, DUTH can be (and should be) considered as a truly comprehensive institution. Orchestrating and managing such a highly distributed University poses many challenges both in terms of logistics and organization as well as financial requirements. The recently published strategic plan of the University entitled 'DUTH at the Crossroads of Europe and Asia – Connecting Worlds 2025-2028' is a unique visionary document that provides not only the overall vision for the institution and its associated social responsibility but act also as a steering force that guides overarching plans for funding, human resources, infrastructure, services, and required IT systems. Members of the Panel had the opportunity to physically visit only (part of) the

Campus in Komotini; it was not possible to visit any other Campus of the University. Nevertheless, this was a very well-organized tour which was offered by the Rector of DUTH himself and allowed Panel members to immerse themselves into the different buildings of the campus, meet staff 'in action', as well as seen students in different educational activities, doctoral students and post-doctoral researchers in their labs working on their research projects. During the tour the Rector offered unique insights about future plans of expansions in the Campus in terms of infrastructure. Buildings were in general well maintained, whilst at the same time offering research labs and facilities (such as the cluster of pools) that are unique not only in the region but also in Greece. Students seem to highly respect the offered infrastructure and engage in keeping at a good condition. Having said that, maintaining the overall infrastructure of the University requires increased funding since in some cases such maintenance cannot be done by the estates and facilities technical team of the University but requires contractors with specialized equipment.

The University pays close attention on the continuous training and adaption to new technologies of the professional administrative staff. DUTH has a very well-formed IT teams and they are leaders in provisioning in-house solutions (tools that could be used by MODIP/OMEA).

Having said that above and based on the discussions during the two days visit, it became apparent that there are significant restrictions in recruiting permanent technical and professional administrative staff across the University. Currently there are 251 professional administrative staff, a number which is less than what used to be a couple of years ago. However, decisions regarding recruitment are normally made in a centralized manner by the Ministry of Education. Currently, the University is managing to provide fully functional departments through the solution of recruiting contracting employees (more than 100 at the moment). Limitations do exist also in the recruitment of new members of staff across the board. The situation varies from Department to Department, but the feedback received from current members of staff is that all members of staff are stretched to their limits to fulfill requirements across all their activities related to teaching, administration and research.

II.   Analysis

As eluded in the above section, during the discussion with members of staff it was unanimous accepted that they do operate in full capacity to fulfil their contractual duties in teaching, administration and research. This is an important issue especially when it is considered vis-à-vis with the fact that the average number of citations per faculty member falls below the national average. While faculty at the institution are obviously active in scholarly work (with a high number of them being world leading) the overall citation impact remains comparatively modest. This suggests potential for further strengthening research visibility and enhancing the international reach and influence of the university's

academic output. In parallel, it will be highly beneficial for the DUTH to increase the number of younger faculty of staff.

A major asset of the University is the strong link with social partners and stakeholders. It was evident to the Panel during the discussions with the stakeholders that there is a deep and enduring connection with social partners and stakeholders who shape and are shaped by its mission. This connection, in some sense, could be viewed as existential for the region. DUTH is a university rooted in the special characteristics of the region and as such, does not stand apart from the society in Thrace and Eastern Macedonia, but walks beside communities, industries, and local government. This strong multilateral communication and support ensures that ideas born in lecture halls find purpose in the pulse of the society; bring prosperity and ensure the long-term progress and viability of Thrace. Significant investments in technology and pharmaceuticals have been possible due to the high skilled working force trained from the University as well as the excellent research and personal that can assist industrial efforts to remain competitive in a global market.

Participation in the European University Alliances such as the EMERGE project that DUTH is a member offers a wide range of benefits for the university, academic staff, and students alike. Participation in EMERGE is well aligned with the strategic plan since it offers increased levels of visibility and competitiveness at the European level.

Managing and maintaining the highly distributed infrastructure and support the overall operations of the University possess clear challenges. In addition to the long-term projects envisioned for the expansion/modernization of the University care should be placed into day-to-day operations. For example, issues related to heating, low brightness projectors that hinder the quality of presentations, etc., should be considered in a speedy and timely manner.

According to the discussions with doctoral and post-doctoral researchers there are no problems (such as delays and/or inefficiencies) in supporting in the dissemination of their results via travel grants support and payments related to open access publishing.

III. Conclusions

The strength of the University is the highly motivated and capable leadership team that is setting the scene and agenda for a significant transformation of the University. The Strategic Plan 2025–2028 is a substantial and forward-looking document; the Panel sincerely hopes that its vision and guiding principles will be embraced by all members of the DUTH community — from academic staff and technicians to administrators and, ultimately, the students, who form the heart of the University. Key teams within the University such as ELKE, MODIP and IT support run in an excellent manner and in close collaboration. Despite the highly distributed nature of the institution, it was evident that there is a sense of

belonging. The University is growing, and based on the discussions over the two days visit it has become apparent that every effort has been taken to allow for a seamless integration of the new Departments that recently (just over a year ago) joined DUTH.

Panel judgement

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	

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

Panel Recommendations

R2.1 Increased levels of financial support should be provisioned for young faculty members (early career academics) to enable them to expand their research and built their networks.
R2.2 Efforts should be directed toward reducing the University's dependence on contract-based personnel and prioritising –where possible -- the expansion of its permanent

administrative workforce across all departments.

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:

- o 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;
- o the 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 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:

- o the Quality Policy and the Quality Assurance Objectives;
- o the necessary written Procedures, along with the entailed forms;
- o the necessary Guides, External Documents (e.g. pertinent legislation), as well as any other supporting data;
- o 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

I.   **Findings**

Democritus University of Thrace (DUTH) has implemented a well-structured approach to guarantee its quality assurance process and improvement, outlined in its Institutional Internal Evaluation Report (IIER). The procedures guiding this policy are available through the Quality Assurance Unit (QAU-MODIP) website. A fundamental strength of any higher education institution lies in its ability to

consistently refine internal quality standards in education, research, governance, and innovation, ideally in a forward-looking, proactive manner.

DUTH follows HAHE's guidelines for quality assurance, with each academic unit responsible for gathering and submitting annual reports via its Internal Evaluation Group (OMEA). These reports are reviewed by the QAU, which provides feedback, suggests improvements, and ensures that departments align with DUTH's academic mission. The QAU has presented recent evaluations, follow-up actions, and external assessment reports to the EEAP. These materials confirm that DUTH maintains an effective system for tracking data and comparing it against established quality indicators. Additionally, the institution's quality manual clearly defines these procedures.

The Quality Assurance Unit (QAU) has sufficient personnel to carry out its duties effectively. It was also noted that all staff members possess the necessary skills and qualifications for their roles. Furthermore, responsibilities are clearly defined, and tasks are appropriately allocated, ensuring efficient workflow within the unit.

The institution's Quality Assurance Unit (QAU) operates in full alignment with the legislative framework, ensuring that the Internal Quality Assurance System (IQAS) and its implementation processes adhere to decisions made by the relevant governing bodies, as mandated by law. It has successfully met its responsibilities, including the development of policies, strategies, and procedures for continuously enhancing the quality of institutional operations. Additionally, the unit has effectively organized, managed, and refined the IQAS while overseeing the evaluation processes for academic units and other institutional services. Furthermore, the QAU has played a key role in supporting the external evaluation and accreditation of the institution's programs and internal quality assurance mechanisms. Lastly, the unit offers sufficient infrastructure and guidance to sustain its quality assurance functions, reinforcing its commitment to institutional excellence.

II.   **Analysis**

DUTH's strategic plan for 2025–2028 focuses on the reinforcement of its commitment to high quality education, impactful research and social responsiveness. The plan has been designed to be flexible and adaptable to the ever changing of society while maintaining high quality standards in education and research.

The Quality Assurance Unit (QAU) functions as an independent administrative body reporting to the Vice-Rector for Academic Affairs. Its structure and operations comply with Greek law (Law 4957/2022, Article 215). The QAU oversees the Internal Quality Assurance System (IQAS), which covers evaluations and quality assurance processes for academic programs, institutional services, and university-wide activities. Its primary objective is to elevate the quality of educational, research, and administrative outputs to international standards.

IQAS encompasses academic program accreditation, the accreditation of the system itself, and the application of quality standards across various university functions.

III.   Conclusions

After reviewing relevant documents and discussions from the EEAP's visit, it is confirmed that DUTH fully complies with HAHE principle 3.

Panel judgement

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

Panel Recommendations

R3.1 Strengthen processes for improving and overseeing DUTH's engagement with internal and external stakeholders.

R3.2 The student body should be represented in QUA. The University needs to support student engagement in the quality system.

R3.3 The QAU should include a representation of external stakeholders in its annual internal quality assurance processes

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

I.   **Findings**

The Principle of Internal Evaluation in effect monitors, examines, and ensures that the issues and requirements of the instructional, research, and administrative sectors comply with the IQAS expectations of quality as prescribed by HAHE and as outlined and discussed in the institutional Quality Manual which serves as the guide of all processes and procedures that must be followed. The flow of tasks, the documentation of data gathered, the results, and follow-up adjustments and corrective actions, if needed, are recorded and presented in the Annual Internal Evaluation Report.

Several documents (files) have been submitted by the institution indicating the material gathered, processed, analyzed and documented to justify the effort expended by the Quality Assurance Units of the institution to accomplish the process. Document E1.(Proposal for Accreditation), is a verbal description of all tasks performed, personnel involvement, information Template for the IQAS Accreditation Report and resulting follow-up actions included in the Internal Evaluation for the academic years of 2018-2019/2019 to 2020-2021/2021 which was completed in the second semester of 2022 and submitted along with many documents of supplemental supporting information as well as additional work that was done in 2023 to expand upon this Principle 4 of self-improvement. This IQAS Internal Evaluation process was presented in an Internal Evaluation Report that was submitted.

II.   **Analysis**

The combination of the following documents provided useful information for the Panel to assess the performance and implementation of the institution's IQAS Annual Internal Evaluation Process. They collectively include qualitative and quantitative information relative to the performance and compliance of all Processes and Procedures of the institutional activities and areas (instructional, research, administrative), as well as services and facilities, as suggested and described in the Quality Manual and mandated by HAHE. - E4.2 (Minutes of the IQAS Review issued 12/03/2024, MODIP Review Committee). This document provides a rather comprehensive account of the IQAS performance comprised of a collection of tables with qualitative and quantitative data. It specifies institutional goal attainment values combined with performance indicators as prescribed in the Quality Manual for the evaluation of each one of the six principles (excluding the Internal Evaluation Principle 4) of the accreditation

report template of the IQAS. - The Internal Evaluation Report of the academic period 2018-2019/2019 to 2020-2021/2021 This report is quite extensive and discusses the evaluation of each Principle of the Accreditation Report Template following the processes, procedures and providing associated quantitative performance indicators as suggested in the Quality Manual. Discusses Identified adjustments, improvements and upgrades uncovered during the implementation of the processes and procedures as well as ways to take care of them are also listed. - Document E1.3_new (Quality Goals Attainment), - Document E3.3_new (MODIP Internal Regulation) This is a detailed account of the institutional framework of operation of MODIP discussing duties, responsibilities, subcommittees, data gathering, and other operational aspects. - Document E4.1-new (Minutes of Internal Evaluation) A collection of the minutes of each meeting of MODIP discussing in detail the tasks performed for the evaluation of IQAS issues and the actions taken accordingly. It includes a series of tables, in which the information gathered was classified and later used for the creation of the Internal Evaluation Report. - Document E4.3 (Feedback) Template for the IQAS Accreditation Report 1 Example of interactive activities between the institution and selected external private and public entities to document the effort to obtain feedback and suggestions with the purpose to supplement, enhance and expand programs of study and other activities of the institution, as they relate to the IQAS Accreditation Report Template Principles. - Document E5.1-new (IQAS Report) This is an extensive accumulation of statistical information on all three departments and associated undergraduate programs as well as for each postgraduate program that tracks all quality indicator values for each category of activity annually (in this case the academic year 2021-2022) as demanded by ETHAAE.

III.   Conclusions

The IQAS Self-Evaluation process as described in the submitted documents mentioned above and as reflected in the Internal Evaluation Report seems to be comprehensive, accurate and sufficient, following the processes and procedures suggested by the Quality manual. The documentation provided in a combination of qualitative and quantitative form is appropriate and informative. The objectives of the Self Evaluation and the resulting follow-up actions were met in a satisfactory manner. A thorough tracking of all quality indicators has been done and listed, demonstrating compliance with this HAHE requirement.

Panel judgement

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

Non-compliance	

Panel Recommendations

R 4.1 Streamline and consolidate the presentation of results in the documents as listed : E1.3_new Σ E4.1_new ΠΡΑΚΤΙΚΑ ΕΣΩΤ ΑΞΙΟΛ E4.2 ΠΡΑΚΤΙΚΑ ΑΝΑΣΚ ΕΣΔΠ E2.3 ΕΚΘ ΑΞΙΟΛ ΠΟΡΟΙ ,through the development of a standard Internal Evaluation template which will address the Principles of the HAHE Accreditation / re-Accreditation template following the Quality Manual processes , as they may be relevant. This template could be reused for future evaluations by merely updating the annual data gathered, just facilitating the preparation of producing the Internal Evaluation Report which will provide the comprehensive picture of the self-assessment efforts.

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

I.   **Findings**

Aligned with the Strategic Plan 2025-2028 the University is placing significant emphasis on data collection to allow for an evidence-based decision making to enhance quality assurance, meet targets and improve its overall day-to-day

operation. The University has developed an in-house Information System that is tailored to the specific needs of its Quality Assurance Unit (MODIP) and OMEA (which is the internal evaluation working groups per Department). Panel members had an opportunity to see a live demo of the system and it was clear to all that this is a well-designed, state of art system able to fulfil all requirements from MODIP aligned with the requirements stemming from the Hellenic Quality Assurance and Accreditation Agency (HAHE). Strengthening quality assurance processes and continuous training of human resources to enhance the University's prestige at regional, national, and international levels has been one key points mentioned by the Rector of his welcoming note during the first day of the visit.

MODIP operates in a well-structured and efficient manner. MODIP is composed by 6 senior academics, members of technical teaching staff and led by a highly professional administrator supported by a talented and well-staffed team. Communication between MODIP and the various OMEA units is effective and well-coordinated.

Every academic year MODIP publishes a report of the activities entitled 'Activity Report of the Quality Assurance Unit (MODIP) of the Democritus University of Thrace (DUTH)'. Those reports are available on the MODIP portal (www. modip.duth.gr) and provide a detailed review of all quality assurance activities that have been undertaken during the academic year.

II.   Analysis

The highly decentralized structure of DUTH, combined with the recent integration of new Departments located in different cities, necessitates a rapid digital transformation. This is essential to support timely policy implementation and decision-making, thereby ensuring coherent and coordinated operations across the entire University. For example, as has been discussed during the visit student feedback used to be via codes that have been handed out to students physically (paper format); the University has been moved to a completely digital and secure system that allows student to provide feedback in a reliable manner. This is just one example where the digital transformation of the University enables to implement better processes across all Departments. Clearly, in this transformational period MODIP and OMEA have a central role to play.

The in-house built IT system that supports the activities of MODIP and OMEA can be deemed as highly successful and its role is instrumental in standardizing quality data collection and supporting DUTH's compliance with quality assurance frameworks.

The overall student feedback response rate (~12%) could be deemed as rather low. If the 12% average masks significant variation (e.g., some modules scoring 5% and others 20%), quality assurance efforts should prioritize under performing modules while identifying best practices from higher-scoring ones. In the short

term it might be easier to reduce variability rather than dramatically increase the overall average rate. In mid to long term the average rate should also be increased reflected in suitable KPIs and monitored by MODIP & OMEA.

Efforts should be placed on the actual participation of the students to lectures and tutorials. Even though lectures are not mandatory they provide direct access to expert explanations, contextual insights, and real-world applications that may not be fully captured in textbooks or online resources. Also, interacting with classmates fosters study groups, collaborations, and professional networks that might extend beyond university. To this end, some attention is needed to quantify participation levels from students and understand key reasons for low attendance that might be mitigated with suitable action plans. Another area that deserves attention is the participation of students in the institution's governance bodies. Based on the discussions of the Panel with the students it becomes apparent that the student body in general is not well informed of the different areas that students could contribute to the University, i.e., student unions etc. The University has a complete set of Key Performance Indicators (KPIs) and complies to the requirements as set by HAHE. quality assurance, KPIs are typically categorized into two types: quantitative and qualitative. The establishment of target values for quantitative KPIs should be supported by a transparent and well-justified rationale. These targets must reflect institutional priorities, be informed by historical performance data and external benchmarks, and serve as realistic yet ambitious drivers of continuous improvement.

III. Conclusions

DUTH operates a very strong professional administrative MODIP team that orchestrate in an excellent manner information flow between the different OMEA teams and the senior academics that participate in MODIP. MODIP is supported by a technically fluent IT administrative team that develop also in-house IT systems. Challenges do exist, such as for example the rationalization of the quantitative KPIs but the EEAP concludes that the University exhibits strong capabilities in data collection and management, supported by clearly articulated goals and objectives that seek to further improve the efficiency and quality of these processes. In a nutshell, DUTH managed to operate a quality loop across the different entities, i.e., the University leadership team, MODIP, OMEA and the Departments.

Panel judgement

Principle 5: COLLECTION OF QUALITY DATA: MEASURING, ANALYSIS, AND IMPROVEMENT	
Compliance	X

Partial compliance	
Non-compliance	

Panel Recommendations

R5.1 Implement a realistic, albeit ambitious, plan to increase feedback rate across all modules offered by the University.

R5.2 Quantitative KPIs should be accompanied by a clear rationale that explains the reasoning behind the selected target values, including how they align with organizational goals, industry benchmarks, and historical performance. This context ensures that stakeholders understand not only what the targets are, but also why they are set at specific levels.

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

I. **Findings**

The Institution maintains an official website in both Greek and English language, as well as social media profiles, such as Facebook and You tube channel. Essential information regarding teaching and academic activities is readily available online and is presented clearly.

Course descriptions for undergraduate and postgraduate programs are effectively communicated with an objective approach. Each department's website provides access to curricula, course outlines, and schedules. Additionally, faculty curriculum vitae are accessible on their respective pages.

Key details for each study program, including attendance modes, assessment criteria, course outlines, degrees awarded, fees, and faculty CVs, are available online, Information about the structure and operation of the Institution's Internal Quality Assurance System (IQAS) is also provided.

An important observation is that there is not enough contact information of departments' administrative authorities.

The Institution's Mission Statement and Quality Assurance Policy can be found online, along with Internal and External Evaluation Reports for both the Institution and its Departments. These reports are clearly articulated, easily

accessible, and regularly updated.

All published information is current, clear, and easily navigable, presented in a consistent architecture, structure, and format across all academic units in both Greek and English. Additionally, the Institution offers various electronic services for students, as well as information through the e-class and progress systems. According to the administrative staff the website could be upgraded.

Finally, students emphasize the importance of improving communication regarding the Institution's activities.

II.   Analysis

The findings regarding the Democritus University of Thrace' s website reveal a well-structured and user-friendly online presence that effectively supports the institution's academic and administrative functions. Especially:

Bilingual Accessibility: The availability of content in both Greek and English broadens access for a diverse student body and international visitors.

Comprehensive Information: The website serves as a central hub for all critical information related to teaching and academic activities. The presence of detailed course descriptions, curricula, course outlines, schedules presents an organized and transparent academic environment.

Enhanced User Experience: By ensuring that all important academic information is clearly displayed and easily navigable, the university enhances user experience significantly, without neglecting to provide all the necessary contact details of departments and administrative authorities (telephone numbers and e mails).

Quality Assurance Transparency: The availability of the Institution's Mission Statement, Quality Assurance Policy, and evaluation reports on the website underscores a commitment to transparency and accountability. This openness instills confidence among stakeholders, including students, parents, and faculty.

Regular Updates: The practice of keeping information up-to-date and regularly articulating changes is crucial in a dynamic academic landscape, in both languages (Greek and English) . This responsiveness to change reflects the institution's proactive approach to maintaining relevance and ensuring that stakeholders have access to the latest information.

Uniform Structure Across Departments: The consistent architecture and structure across all academic units create a cohesive browsing experience, allowing users to navigate seamlessly between departments. This uniformity reinforces the university's branding and makes it easier for users to find information across different programs.

Supportive Digital Services: The inclusion of electronic services and information delivery through platforms like e-class and progress systems promotes a modern educational experience, facilitating communication and engagement between students and faculty.

Improvement of Communication: There is an acknowledgment that the current

communication approach policy should be improved.

III.   Conclusions

In conclusion, the Institution's website effectively fulfills its role as an informative and supportive resource for students and faculty alike. By maintaining clear, accessible, and bilingual online content, as well as ensuring regular updates and comprehensive information, the university positions itself as a forward-thinking institution committed to supporting its academic community. Effective communication and a well-defined policy are essential for ensuring transparency and enhancing the Institution's outreach and engagement.

Panel judgement

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

Panel Recommendations

R 6.1 The university should ensure that the English version of its website is updated more promptly with news and announcements, reflecting its strong commitment to internationalization.

R 6.2 The institution should provide more contact information about departments and administrative authorities.

R 6.3 The Institution could be more active in You tube and create accounts in more social media that prefer younger people, such as Instagram and Tik Tok.

R6.4. The institution should include direct navigation hyperlink between the main page and departments' landing pages and/or websites (e.g., the Law School)

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

I. **Findings**

The University underwent an external evaluation and accreditation process from November 12 to November 18, 2018. The panel observed a strong, active, and ongoing involvement of all internal stakeholders in the academic community's quality assurance efforts, as guided by MODIP. Meetings with the University Administration, the Quality Assurance Unit (QAU/MODIP), and the Internal Evaluation Groups (OMEA) confirmed that the quality assurance process has been fully integrated into the institution's operations.

Additionally, the university engages to some extent with external stakeholders—including alumni, government agencies, local authorities, industries, businesses, and research organizations—through both individual faculty connections and at an institutional level

All internal stakeholders of the programs, including academic, administrative, and support staff, are involved in the QA of the institution. External stakeholders and alumni are informally involved in the processes. During the meetings, the faculty demonstrated that they are fully aware of the importance of external

review and its positive effects in improving the Institution's quality. The University's QAU has taken into consideration all the recommendations of the Institution's external evaluation 2018 in topics of improving infrastructure and buildings, encouraging the participation of external stakeholders, improving course materials, enhancement of OMEA, and better-promoting research activities and the profile of academic staff. At the same time, it appears that has made progress towards increasing students' participation in the course assessment evaluation process, following the related recommendations of the external report.

II.   Analysis

The panel assessed the institution's response to recommendations from the 2018 IQAS Accreditation Panel Report, as detailed in Document E7.1 (Progress Report). Document E7.1 comprehensively addressed these recommendations, providing a narrative explanation and justification for the approaches taken to achieve compliance. It also included detailed tables outlining actions implemented, expected outcomes, and follow-up measures.
Although the panel did not find direct evidence of external stakeholder participation in the IQAS accreditation review or related follow-up measures, an effort to remedy that is underway. The primary focus is ensuring that the institution effectively responds to recommendations.

III.   Conclusions

As already discussed in the findings, faculty, staff, and lab personnel were sufficiently aware of the external review's importance and did their best to present relevant information to EEAP promptly and efficiently. The subsequent report evaluates the progress made in completing the action plans. Overall, the evaluation yielded positive results, with the University Administration demonstrating a commitment to addressing the 2018 panel's recommendations. Furthermore, institutional weaknesses were mitigated. Based on these findings, the panel determined that the institution is in full compliance with Principle 7.

Panel judgement

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

Panel Recommendations

R7.1 EEAP recommends that stakeholder involvement in the university's evaluation process be more systematically organized and formally incorporated.

R7.2 EEAP emphasizes the importance of directly linking achieved goals to the institution's initial objectives, which would enable more accurate tracking of the university's progress.

PART C: CONCLUSIONS

I. Features of Good Practice

1. The university has a formally adopted four-year Strategic Plan with clear strategic pillars, including quality assurance as a distinct axis.

2. Annual quality objectives are articulated using the SMART framework and linked to institutional strategy.

3. MODIP is well-structured, authorized, and effectively coordinates QA processes and internal evaluations.

4. DUTH follows HAHE guidelines and has a functioning Internal Evaluation Group (OMEA) process per department.

5. The strategic plan is visionary and well-aligned with funding, infrastructure, and operational goals.

6. Participation in the EMERGE European University Alliance enhances visibility and competitiveness.

7. DUTH maintains strong, organic links with social partners and stakeholders, promoting regional integration.

8. In-house development of IT systems for QA and MODIP enables standardized and efficient data handling.

9. MODIP publishes annual activity reports, enhancing transparency and accountability.

10. MODIP and OMEA units are well-coordinated and effectively integrated into QA processes.

11. The bilingual, regularly updated university website enhances accessibility and stakeholder communication.

12. Digital transformation initiatives (e.g., digital student feedback tools) modernize QA operations.

13. The internal QA system (IQAS) is systematically implemented and aligned with national frameworks.

14. DUTH has a strong administrative MODIP team and technically proficient IT staff.

15.   Comprehensive documentation (qualitative and quantitative) supports QA evaluations and continuous improvement.

II.   Areas of Weakness

1.   The SWOT analysis is descriptive and lacks integration with strategic prioritization or data benchmarking.

2.   There is limited evidence that SWOT findings inform strategic planning or resource allocation.

3.   Most KPIs focus on outputs rather than outcomes and lack performance-based justification.

4.   The process of setting objectives is top-down, with limited stakeholder consultation.

5.   Quality culture is centralized around MODIP, with lack of evidence of strong grassroots engagement or student involvement.

6.   Communication of QA policy and updates is not systematically implemented across the institution.

7.   KPI review and adaptation cycles are not clearly documented or linked to feedback mechanisms.

8.   Recruitment limitations constrain the hiring of permanent administrative and academic staff.

9.   There is a reliance on contract-based administrative personnel due to staffing shortages.

10.   Research impact, as measured by citations, remains below national average despite strong academic engagement.

11.   Student participation in governance and feedback processes is limited and requires activation.

12.   Physical infrastructure maintenance demands exceed internal capacity and require external contractors.

13.   Student feedback response rates are low (~12%) and show high variability across departments.

14.   Lecture and tutorial attendance among students is low and lacks systematic tracking or action plans.

15.   Some department websites lack adequate contact information, reducing administrative accessibility.

III.   Recommendations for Follow-up Actions

The following list of recommendations consolidates the various recommendations stated above, per principle, into a unified thematic list:

1. Strategic Planning Integration: Improve the strategic planning process by using SWOT analysis more effectively, linking findings to clearly prioritized goals, and justifying decisions with performance data, benchmarks, and stakeholder input.

2. Stakeholder Engagement: Establish formal mechanisms to systematically involve academic staff, administrative staff, students, and external stakeholders in the formulation, evaluation, and continuous improvement of strategy and quality assurance processes.

3. Quality Culture Enhancement: Foster a participatory quality culture through grassroots initiatives such as QA training, awareness programs, and shared ownership of evaluation practices across all university levels.

4. KPI System Improvement: Broaden and refine the KPI framework by including qualitative and outcome-based indicators (e.g., learning outcomes, graduate satisfaction, research impact) and ensure each is supported by a transparent rationale aligned with strategic priorities.

5. Performance Monitoring and Feedback Loops: Introduce a recurring cycle for reviewing KPI performance, adjusting targets based on results, and linking outcomes directly to institutional objectives for improved progress tracking.

6. Communication and Transparency: Develop comprehensive internal communication strategies to ensure QA objectives, results, and institutional updates are effectively disseminated within the university community.

7. Sustainability of MODIP: Reinforce the long-term sustainability of MODIP by securing adequate staffing, technical resources, and deep integration into the university's governance and operational systems.

8. Human Resource Development: Reduce

dependency on contract-based staff and prioritize permanent hiring across academic and administrative roles, while also increasing financial and developmental support for early-career faculty.

9.   Digital Transformation and Infrastructure Support: Expand and maintain digital systems to support QA processes and administrative coordination, including the development of a standardized Internal Evaluation template and IT tools tailored to MODIP and OMEA needs.

10.   Student Engagement and Participation: Increase student representation in quality assurance and governance processes, boost student attendance in academic activities, and work to raise student feedback response rates through targeted action plans.

11.   Website and Online Presence: Enhance the functionality and content of the university website by ensuring bilingual updates, improved navigation between department sites, full contact visibility, and expansion into youth-focused social media platforms.

12.   Stakeholder-Driven Evaluation: Institutionalize stakeholder input in evaluation and planning processes and ensure that achieved goals are systematically linked back to initial strategic objectives for coherent institutional learning and development.

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:

Not applicable

The Principles where failure of compliance was identified are:

not applicable

Overall Judgement	
Compliance	**X**
Partial compliance	
Non-compliance	

The members of the External Evaluation & Accreditation Panel

Name and Surname	Signature
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