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Accreditation Report for the Internal Quality Assurance System (IQAS)

Institution : University of Crete

Date: 10/12/2025



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 Crete for the purposes of granting accreditation.

TABLE OF CONTENTS

Part A: Background and Context of the Review	4
I. The External Evaluation & Accreditation Panel	4
II. Review Procedure and Documentation	5
III. Institution Profile	7
Part B: Compliance with the Principles.....	10
Principle 1: STRATEGY, QUALITY POLICY AND TARGET SETTING OF THE INSTITUTION	10
Principle 2: PROGRAMMING AND ALLOCATION OF RESOURCES	15
Principle 3: STRUCTURE, ORGANISATION AND OPERATION OF THE IQAS	20
Principle 4: SELF-ASSESSMENT	24
Principle 5: COLLECTION OF QUALITY DATA: MEASURING, ANALYSIS, AND IMPROVEMENT	28
Principle 6: PUBLIC INFORMATION	32
Principle 7: EXTERNAL EVALUATION AND ACCREDITATION OF THE IQAS	35
Part C: Conclusions	37
I. Features of Good Practice	38
II. Areas of Weakness.....	38
III. Recommendations for Follow-up Actions.....	39
IV. Summary & Overall Assessment	40

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 Crete comprised the following five (5) members, drawn from the HAHE Register, in accordance with Law 4653/2020:

- 1. MICHAILAKIS DIMITRIS (Chair)**
(Title, Name, Surname)
University of Linköping
(Institution of origin)

- 2. LIZARDOU DIMITRA PANAGIOTA**
(Title, Name, Surname)
National and Kapodistrian University of Athens
(Institution of origin)

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

- 4. MITSIADIS THIMIOS**
(Title, Name, Surname)
Universität Zürich, Switzerland
(Institution of origin)

- 5. PIMENIDIS ELIAS**
(Title, Name, Surname)
University of the West of England (UWE)
(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 accreditation review of the Internal Quality Assurance System (IQAS) of the University of Crete was carried in November 2025, following the procedures and guidelines set by the Hellenic Authority for Higher Education (HAHE). The review process adhered to the European Standards and Guidelines (ESG 2015) and national accreditation requirements, ensuring that the university's quality assurance mechanisms, governance structures, and educational provisions align with best practices in higher education.

The EEAP received all documentation relevant to the accreditation process in an easily accessible digital format. It was complete, thorough and very well prepared. Ahead of its review, EEAP members studied the material provided by the Hellenic Authority for Higher Education (HAHE). In order to coordinate its work and allocate tasks and priorities ahead of the scheduled on-site presentations by the Department, the EEAP met in private the first day (Monday, November 24th). The purpose of the meeting was to establish common terms of reference vis-à-vis the accreditation principles and criteria and to ensure that all members have had full access to digital materials which they have read carefully.

During the next day (November 25) the EEAPs met with the Rector and the Vice-Rector of academic affairs and Head of the MODIP, Vice-Rector of finance and infrastructure, Vice-Rector of administrative affairs and student welfare, Vice-Rector of development, international relations and outreach followed by a meeting with members of the quality assurance committee, MODIP staff and the staff of the quality assurance unit. Followed by a meeting with Internal Evaluation Groups (IEG/OMEA) members. Thereafter the EEAP met faculty members of all academic ranks. The EEAP participated in a tour of the departments of biology, chemistry, physics and other facilities (classrooms, lecture halls, libraries, laboratories, gym facilities, etc.). In this tour the EEAP was guided by QAC representatives, MODIP staff, teaching/administrative staff members as well as the heads of the aforementioned departments. The first day of our visit ended in a debrief meeting for EEAP members only.

On Wednesday, 26 of November the EEAP had a meeting with students from various years of study. After that meeting the EEAP met postgraduate students (MSc, PhD), postdoc researchers in order to review students' input in quality assurance; priority issues concerning grants, mobility, research and career opportunities. Next in our schedule was a meeting with the heads of administrative units to discuss special issues arising from the internal evaluation process. Thereafter the EEAP met a group of alumni and graduates where we discussed their experience of studying at the University of Crete and their career path. The EEAP also had a meeting with external stakeholders (industry/social partners/local authority) to explore their relations with the University of Crete.

The next meeting was scheduled with the Vice-Rector (Head of MODIP), QAC members, MODIP staff for a discussion on several points/findings which need further clarification. Finally, the EEAP had a closure meeting with the Rector and the Vice-Rector (Head of MODIP) where an informal presentation of the EEAP's key findings. During all meetings, the EEAP had the opportunity to meet, talk, and interact with all participants who were encouraged to express their views freely about their overall academic experience, matters of strategy and vision as well as adequacy of resources. All participants welcomed the opportunity to talk to the Panel and to voice their views. Discussions were informative and constructive and were conducted in a cooperative manner and attitude. Meetings included presentations and Q&A sessions.

All the meetings that took place under our review were characterised by professionalism and a spirit of cooperation from all parties involved. During the site visit, the university's representatives engaged openly and constructively, demonstrating a strong commitment to the principles of quality assurance.

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

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.

The University of Crete (UoC) was founded in 1973 and welcomed its first students in 1977. The University has its headquarters in Rethymno and is organized into 5 schools and 16 departments based in two university campuses, in Rethymno and Heraklion. Rethymno was designated as the seat of the University, where it was decided that the then unified Faculty of Philosophy would remain, while the Faculty of Science would be established in Heraklion.

The Faculty of Philosophy (Rethymno) accepted students for the first time in the academic year 1977–1978. Since 1983, the Faculty of Philosophy has been operating with three distinct departments: (1) Philology, (2) History and Archaeology, and (3) Philosophy and Social Science.

The School of Education (Rethymno) was founded in 1995. It incorporated the Department of Primary Education and the Department of Preschool Education, which had been operating independently since 1984–85 and 1987–88, respectively.

The School of Social Sciences (Rethymno) was founded in 1984 but began accepting its first students in the academic year 1987–1988, in three departments: Economics, Sociology, and Psychology. The Department of Political Science, which belongs to the same School, accepted its first students in the academic year 1999–2000.

The School of Health Sciences (Heraklion) was founded in 1976, it began operating with the Department of Medicine in the academic year 1984–1985, when it accepted its first students. The School of Science and Technology (Heraklion) began as the School of Physics and Mathematics and started taking students in the 1977–1978 academic year. From 1983, as the School of Science, it continued to operate with five distinct departments: Mathematics, Physics, Chemistry, Biology and Computer Science. In 2002, the school was renamed the "School of Science and Technology". In 1999, the Department of Applied Mathematics of the School of Science and Technology began operating, while the Department of Materials Science and engineering accepted students for the first time in the academic year 2001–2002.

The university of Crete offers undergraduate, postgraduate, and doctoral programs, structured according to the European Credit Transfer and Accumulation System (ECTS) to ensure compatibility with European higher education standards. According to its records, the University of Crete enrolls approximately 18,000 students (approximately 15,000

undergraduates and 2,300 postgraduates) across its various programs. The teaching staff comprises 600 members. The English-language taught medicine program has been running for three years and has a total of 100 students. The University of Crete offers 62 postgraduate programs leading to master's degrees (M.A./MSc). In total, 18 programs are taught entirely in English. All academic departments offer doctoral studies. The university has 1,300 doctoral candidates.

Overall, based on its self-assessment and documentation, the University of Crete presents itself as a research driven university with a commitment to academic quality, digital transformation, and international collaboration. The EEAP considers that the University of Crete has a very strong research profile. However, the research dimension is not developing at the expense of the educational dimension. The educational dimension is in no way underestimated, and this becomes evident in the University's student-centred orientation. The dimension of interconnection between research and education with society – both local and national – has not been neglected either.

In order to ensure continuous improvement in the quality of education and research in the University of Crete, as well as the effective operation and performance of its services, the internal quality assurance system (IQAS) comply with the corresponding quality standard of the HQA, which is harmonized with the principles of quality management and international practices, in particular those of the European standards and Guidelines (ESG 2015).

At the University of Crete, responsibility for organizing and implementing the internal quality assurance system (IQAS) lies with the Quality Assurance Unit (MODIP).

The IQAS is periodically certified by HAHE. The general criteria of the process include:

- the establishment of clear and specific objectives for ensuring and continuously improving the quality of the Institution's study programs, research, and support services,
- the policy planning process, effective organization, and decision-making process for continuous quality improvement,
- the policy implementation process for continuous quality improvement,
- documented quality improvement.

In this context, the University of Crete has incorporated a quality assurance policy into its strategic planning. This policy is developed and specialized in the areas of activity of the Institution and in meeting the quality requirements of its programmes of study, and other activities. Furthermore, the quality policy must be implemented with the engagement and contribution of all members within the institution (teachers, students, leadership, and

administration) and widely publicized.

The University of Crete has submitted a strategic plan for the next four years as a first systematic approach to meeting the requirement for recertification. The proposed development plan will be valid for the years 2024–2028.

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

The University of Crete (UoC), established in 1973 in the cities of Heraklion and Rethymnon, and started its function in 1977, has presented to the EEAP a comprehensive institutional strategy for quality setting, documentation, and monitoring for the period 2024-2028. This strategy builds on previous initiatives undertaken in 2019, reflecting continuity in institutional planning and a long-standing commitment to systematic quality assurance. The current strategy consolidates and extends the strategic decisions and business plan implemented in 2019, incorporating lessons learned and responding to the evolving priorities of the university. The adaptation includes the new administrative framework for the operation of universities with the establishment of the board of directors that began its work on September 1, 2024, and the upcoming reorganisation of UoC's organisational chart. The adaptation also includes the newly established strategic planning unit (government gazette 4619/issue B'/08.08.2024).

UoC's strategic axes include the academic, educational and research policies, the lifelong learning and education, the extroversion and internationalisation, the connection with the society and economy, the strengthening of the innovation, and the upgrading the academic environment quality. UoC's strategic objectives focus on maintaining and further enhancing its already established excellent academic and research profile, strengthening quality assurance mechanisms at departmental, school, and institutional levels, and further reinforcing its international character and outward orientation. Monitoring of quality assurance is primarily coordinated by an independent quality assurance unit located in Heraklion, which maintains ongoing communication with all departments across the two University's campuses. Although UoC's implements quality assurance mechanisms effectively across these two sites, several operational difficulties still do exist.

The strategy is underpinned by a detailed SWOT analysis, identifying key strengths such as highly qualified academic personnel, a continuous and strong commitment to quality monitoring, and a cohesive institutional culture among staff and students. Recognised weaknesses include limited support personnel, minor involvement of students, alumni and stakeholders, and difficulties in

transport and adequate accommodation for students (this last problem will be resolved during the next years with the construction of two large-capacity dormitories). UoC's distinctive geographic profile offers opportunities to secure external funding, further enhance international partnerships, and continue developing its unique institutional identity. Potential threats include competition from similar programmes at other world-recognised Greek institutions and the emergence of private universities facilitated by recent legislation. Performance monitoring relies on a comprehensive set of key performance indicators (KPIs) linked to UoC's strategic objectives and quality assurance plan. These KPIs are further integrated with the national information system for quality assurance in higher education (NISQA) administered by HAHE, ensuring alignment with national standards. The annual review and dissemination of KPI findings facilitate evidence-based adjustments to both operational and strategic decision-making, reinforcing a culture of continuous improvement.

II. Analysis

From the documentation provided and discussions with UoC representatives, it is evident that quality assurance is deeply embedded as a core institutional priority and actively supported by senior management. The EEAP particularly highlights the contributions of UoC leadership that has been instrumental in maintaining the already existing high professional standards, institutional pride, and a clear mandate for systematic evaluation.

The objectives of the quality assurance unit are clearly articulated, aligning closely with prior institutional efforts to implement structured and measurable monitoring mechanisms. Internal evaluation units within each department demonstrate active collaboration, sharing best practices and addressing challenges in a coordinated and systematic manner. This horizontal integration ensures improvements across the University, reinforcing institutional coherence and promoting a culture of mutual support and professional development.

The current strategy reflects a thoughtful and innovative approach to institutional development. During deliberations, the EEAP noted the potential benefits of emphasising UoC's connection to environmental and archaeological studies. Several departments hold expertise research interests relevant to aspects of the Cretan environment, spanning cultural, scientific, business, and educational perspectives. The eight well-thought and designed thematics will serve as an additional "brand" for the University, providing strategic long-term orientations that complement and potentially surpasses the focus on national significance. Integration of these eight new areas into UoC's identity could further strengthen its international visibility, foster collaborative opportunities with regional and global institutions, and enhance external funding prospects. Combined with robust quality assurance mechanisms, strong institutional commitment, and active engagement of academic staff and students, the evolving thematic identity positions UoC for sustainable growth in research, teaching, and community engagement.

The EEAP also recognises that while the IQAS functions effectively, challenges remain in fully capturing quantitative and qualitative student feedback, engaging alumni and external stakeholders systematically, and optimising the scale and quality of postgraduate study programmes and lifelong learning courses. Addressing these challenges would further consolidate UoC’s commitment to evidence-based improvement and strategic international positioning.

III. Conclusions

The EEAP found compelling evidence that UoC maintains a robust culture of self-evaluation, systematically applying its IQAS to enhance the quality of education, research, and institutional management. The clear articulation of objectives, combined with the regular monitoring of KPIs and annual reporting, demonstrates a sustained commitment to evidence-based improvement and strategic development.

Coordination between internal evaluation units, academic staff, and the quality assurance office ensures effective feedback loops and continuous refinement of institutional practices. Student engagement in this procedure is still poor, contrasting to students’ enthusiasm and willingness to contribute meaningfully to teaching and learning enhancements.

The EEAP concludes that UoC is well-positioned to continue advancing its strategic objectives. Greater emphasis on further enriching thematic focusing on environmental, archaeological and astrobiology studies will provide coherent frameworks linking the diverse activities of UoC departments and will strengthen its strategic positioning within Greece, Europe and Mediterranean context, and further reinforce its international profile.

Overall, the EEAP judges that the UoC demonstrates a high level of compliance with quality assurance principles, supported by a strong foundation of institutional commitment, systematic evaluation processes, and a forward-looking strategic orientation. Areas for further refinement, such as enhanced student feedback mechanisms, systematic alumni and stakeholder engagement, and strategic alignment of postgraduate programmes represent opportunities to consolidate excellence and sustain long-term institutional growth.

Panel Judgement

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

Panel Recommendations

R1.1 Maintain and further strengthen the independent quality assurance unit, ensuring it has sufficient resources to operate effectively.

R1.2 Position the UoC's unique geography as an asset while highlighting academic excellence and thematic specialisation.

R1.3 Expand mechanisms to collect and integrate quantitative and qualitative student feedback.

R1.4 Foster systematic engagement with external stakeholders, including industry, regional authorities, alumni, and international partners, to inform academic and research strategies.

R1.5 Continue to encourage interdisciplinary initiatives and research collaboration that integrate environmental, cultural, scientific, and business perspectives.

R1.6 Review and optimise postgraduate programmes and lifelong learning opportunities to align with strategic objectives and regional/international demand.

R1.7 Improve attractiveness for foreign visiting scientists and students, considering incentives for professional development and housing support.

R1.8 Further enhance and reinforce the strategic communication plan that clearly conveys UoC's identity, research strengths, and thematic focus to national and international audiences.

R1.9 Explore UoC's unique capabilities and interdisciplinary work to further enhance partnerships, funding prospects, and foreign student recruitment.

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 follows 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

The Institution places emphasis on the preparation of students for leadership roles in a local and globalized economy , with focus on philosophy, economics and political sciences, health, education, sciences and technology, social sciences . 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 8 institutions.

The Institution annually plans for funding, human resources, infrastructure, services, and systems over five years. Moving things forward the institution plans to establish a new administrative service, to implement the IQAS Accreditation Report 15, 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 of Education.

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 was almost equal to 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 in staffing 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. The Institution is now operating an extensive Erasmus and internationalization program that includes a large number of international Universities, the operation of English taught postgraduates' programs (18) including the introduction in 2022 academic year of an English based undergraduate programme (in Medical). The Institution through ELKE ,participated in funded projects with a total annual budget of 29 millions. The Institution's central location in Heraklion 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 for students as SDIT programmes . There are also facilities in Rethymno, where the School of Philosophy, the School of Education Sciences, and the School of Social Sciences operate, with corresponding amenities for students and staff. 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. In terms of infrastructure and overall operations, the Institution has developed a 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 can 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 Committee reveals that, despite the lack of available funding and the heavy reliance on public financing, the Institution manages to operate successfully and, in many respects, to thrive under such difficult conditions. The implemented four- to five-year strategic plan should be developed in accordance with a holistic vision that defines the desired strategic positioning of the Institution within the specified timeframe.

Panel judgement

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

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

Non-compliance	
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Panel Recommendations

R2.1 UoC needs to strengthen its network ,outward orientation and engagement with the domestic and international market through further collaborations (such as chambers of commerce, companies, etc.)

R2.2 ISO certifications for most laboratories

R2.3 Prioritization, where possible, through further reinforcement with permanent staff, with the aim of reducing the University's dependence on contract-based personnel in 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:

- 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

I. Findings

The Quality Assurance Unit (MODIP) has compiled a comprehensive quality manual that entails all the required processes and procedures that are required to make the institution compliant with the standards.

The Quality manual is well structured. It includes the rationale for all procedures and specifies the execution of all processes relevant to each procedure, providing

templates and forms for the appropriate documentation of the results of the completion of each process.

The Quality Assurance Unit (MODIP) is structured according to Law 4957/2022, art. 215 for functional independence.

MODIP is adequately staffed for the requirements and the size of the institution, comprising staff with the appropriate skills to complete assignments as they are specified by different processes and procedures.

Quality assurance procedures are executed with the participation of appropriately selected academic and administrative staff, that support their departments and/or service areas.

II. Analysis

Quality procedures are clearly presented in the quality manual. Their use is suitably explained by detailed guidance notes and well annotated templates. The templates are filled during relevant quality assurance procedures applied to academic areas, or service departments and the captured data are used for further analysis to support the compilation of required reports that support any follow-up recommendations and actions.

MODIP takes a leading role in ensuring that the institution's strategy is developed according to the requirements of the expected quality standards and organises and supports the various internal and external quality audits at different levels of the institution. It's role can be reinforced by increased independence.

MODIP staff are appropriately qualified and trained to ensure that their skills are suitable for supporting all relevant quality procedures and activities. The staff comprise permanent staff employed by the institution, long term contracted staff that are not permanently employed by the institution and specific period contracted staff. These different levels of employment ensure that the institution is able to provide MODIP with current and relevant skills to carry out their work uninterrupted by any delays in complex recruitment processes involving permanent staffing.

Training of permanent staff that are involved in quality procedures, within academic, service, and administrative departments is not clearly defined. This is essential for ensuring that MODIP plans and actions are completed accurately and in a timely fashion.

III. Conclusions

Overall, the structure, organisation, and operation of IQAS is appropriately structured, staffed, and delivered, fully compliant with the required standards.

Panel judgement

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

Panel Recommendations

R3.1 Produce a clear and transparent annual training plan for all staff from MODIP and academic, service, and administrative departments that are involved with quality procedures.

R3.2 Reinforce MODIP's independence.

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

Institution compliance

I. Findings

UoC has established a comprehensive multi-level internal quality assessment system (IQAS), which is functional, efficient, and tailored to the specific needs and context of the institution. This system ensures effective communication, structured data collection, and feedback processes between departments and the Institution, with the quality assurance unit serving as the coordinating and overseeing body. The implementation of the IQAS across geographically dispersed sites adds a layer of logistical complexity, including challenges related to coordination, consistency of procedures, and timely reporting. Nevertheless, the UoC has successfully managed these challenges through careful planning and established protocols.

The IQAS collects a wide range of performance indicators that are compatible with the requirements of the HAHE, spanning teaching quality, research outputs, administrative efficiency, student engagement, and resource utilization. The system is reviewed annually, a significant undertaking given the dispersed institutional structure and the volume of data collected. The results of these reviews are communicated internally, enabling departments and schools to reassess performance relative to strategic objectives and operational priorities. Key findings and action points are discussed at UoC's assemblies, formally recorded in action plans, and monitored for implementation.

Additionally, the IQAS monitors postgraduate study programmes (PSPs) and lifelong learning courses. This ensures that advanced academic offerings maintain standards of quality and relevance. However, the number of PSPs (a total of 62, 18 of them in English language) may present challenges in terms of staff workload, alignment with market demand, and ensuring consistent educational quality across programmes. The system also aims to capture engagement with external stakeholders, including local councils, businesses, and academic partners, although the systematic collection of this information is still developing.

II. Analysis

During EEAP' assessment visit, it was evident that the IQAS is firmly embedded within the institutional culture and is taken seriously by academic staff, administrative personnel, and departmental leadership. Staff perceive the IQAS not merely as a bureaucratic requirement but as a valuable tool for improving

teaching quality, research outputs, and overall institutional performance. Despite the challenges associated with two sites, the IQAS operates effectively, ensuring a high degree of consistency and reliability in data collection and analysis.

Undergraduate student feedback remains an area requiring further attention and needs a definitive solution. Various strategies are employed to gather quantitative data and structured input, however capturing qualitative feedback continues to be a challenge. The small representation of students within each internal quality assessment unit demonstrates a serious problem in communication between teachers and students, opposing to students' willingness to engage constructively with the system. The enthusiasm observed among students for contributing to quality processes during their meeting with EEAP is a particularly positive feature.

PSPs and lifelong learning courses are well monitored, though the large number of PSPs could stretch staff capacity and limit the ability to maintain consistently high standards across all offerings. Consideration of programme consolidation or prioritisation based on demand and institutional strategic goals may be beneficial. The engagement of external stakeholders is recognised as increasingly important, not only to validate academic outputs but also to inform programme development and align UoC's activities with societal and market needs. Developing a more systematic and structured approach to capturing and analysing external stakeholder input would enhance the strategic value of these collaborations.

Overall, the IQAS demonstrates strong alignment with institutional strategy, actively supports continuous improvement, and fosters a culture of reflection and accountability. Nevertheless, there are opportunities for refinement in areas such as quantitative and qualitative student feedback, programme management, and structured alumni and external stakeholder engagement, which would further strengthen the system.

III. Conclusions

The IQAS at UoC is a robust and effective mechanism for maintaining and enhancing academic standards across the operating two campuses. It successfully engages staff, departments, and institutional structures in continuous evaluation and improvement, ensuring alignment with both operational needs and strategic objectives.

While the system demonstrates many strengths, including structured data collection, and internal communication, certain areas merit further attention. Specifically, enhancing active student participation, qualitative student feedback mechanisms, optimising the portfolio and management of PSPs and lifelong

learning programmes, and developing a systematic approach to alumni and external stakeholder engagement would significantly strengthen the IQAS.

Overall, the UoC has cultivated a strong culture of self-evaluation and quality enhancement. The IQAS is a valuable tool that underpins institutional performance, fosters engagement across all levels, and positions UoC to respond strategically to both internal and external challenges. By addressing the identified areas for improvement, the UoC can ensure that its IQAS continues to drive sustainable excellence in teaching, research, and institutional development.

Panel judgement

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

Panel Recommendations

R4.1 Introduce structured feedback sessions at multiple points during the academic year, allowing for iterative improvements in teaching and curriculum design.

R4.2 Strengthen external stakeholder engagement.

R4.3 Ensure that data on stakeholder contributions and outcomes are collected regularly and integrated into strategic planning and programme development.

R4.4 Leverage stakeholder engagement to identify opportunities for funding, partnerships, and community impact projects, aligning with the UoC's strategic priorities.

R4.5 Review and optimise PSPs and lifelong learning courses.

R4.6 Conduct a strategic review of all PSPs in relation to staff capacity, student demand, market relevance, and alignment with UoC's long-term goals.

R4.7 Develop clear benchmarks and performance indicators for each programme, linking outcomes to the IQAS and broader institutional objectives.

R4.8 Ensure lifelong learning courses are aligned with regional and national needs, and evaluate their potential for innovative cross-departmental collaborations.

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

The information gathering process of the quality assurance system comprises data collected from the student body in relation to teaching methods and learning outcomes of all the courses that are taught in the institution

(undergraduate or postgraduate programmes of study). Data are also collected from staff involved in teaching activities, administrative tasks, and research and innovation.

Student satisfaction surveys are conducted every six months towards the end of each academic semester.

Information pertaining the infrastructure of the institution, with development and maintenance activities is also collected from relevant information systems. The institution is at advanced stages of a Digital Transformation process and many systems that facilitate the request, monitoring, and management of contracts, requests for maintenance of facilities, as well managing financial information are in place.

Based on the documentary evidence MODIP appears to be using advanced business analytics tools to process and evaluate the data collected. The accuracy and consistency of the data is monitored and evaluated as it is used to inform, review, and evaluate the institutions operational and strategic goals.

II. Analysis

The information collected via student satisfaction questionnaires is processed and analysed by MODIP and is made available to the relevant academic departments for evaluating the teaching and learning outcomes of course and programmes of study delivered. The timing of completing the questionnaires might vary from course to course and it depends on the academic responsible for teaching each course. This can affect the availability of the student body and therefore the level of participation to the satisfaction survey. As such the results might not be fully representative of the student body and this might affect the way the academics might perceive the outcomes of the survey and the way any adjustments to the delivery and / or the content of a course might be affected for future runs. Preparation of students by carefully explaining the purpose and importance of the surveys could enhance the number of students involved in the surveys and possibly improve the qualitative outcomes.

Feedback provided to students on the outcomes of previous surveys varies. Where this takes place at the start of the following semester in which a course will run, it benefits the student learning process, student confidence in the quality of the learning outcomes. It can also promote and enhance participation of students in the process, having demonstrated the usefulness of the student survey and its positive impact in the quality of their studies. Consistency across the academic community in engaging with such type of feedback should be promoted and possibly made compulsory across the institution. Currently there is no evidence of what percentage of academics engage in this so valuable process and the outcome and impact cannot be evaluated.

The institution collects data and information about the teaching and learning functions of the academic departments, research work carried by academics, structure of academic programmes of study, and other innovation units, financial

data on all functions of the organisation, data on students and staff, and infrastructure and services. MODIP has access to Business Intelligence tools, that the EEAP understands are relatively new to the process. It is expected that such tools will be utilised in processing the data collected and produce alternative formats of information (tabular, graphical, and textual) to inform the various bodies in the institution where decisions are made (strategic, operational, academic) in evaluating the level of attainment of goals and to revise operational process and procedures to promote future enhancements where appropriate.

III. Conclusions

The institution has a comprehensive system of collecting relevant data and information from all areas of interest. This appears to work well as a set of operational mechanisms, producing appropriate data. The depth and the quality of the data though could be improved to ensure the quality and impact of any enhancements inspired and actioned based on the ensuing analysis of the data if effective.

Specific emphasis should be placed on enhancing student understanding and appreciation of the purpose and value of the questionnaire surveys on their studies. Improvements on the rigour, consistency, widespread practice of feedback across the academic community should be put in place. Enhancing confidence in the value adding practice of feedback and ensuing improvements to their course and studies will influence students to achieve better, complete their studies faster, and improve the quality of the learning processes and outcomes.

Improving the utilisation of Business Intelligence tools to provide more diverse types of outputs of the analysis of data collected, can enhance the support to the institution in improving its attainment of strategic goals across all levels of the organisation.

Panel judgement

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

Panel Recommendations

R5.1 Make the student satisfaction survey, its purpose, outcomes, and resulting improvements more transparent, better communicated, more consistently organised to

improve its effectiveness on the quality of studies.

R5.2 Improve the utilisation of Business Intelligence tools by providing more diverse formats of outcomes, that enhance the level of comprehension across different entities of the institution.

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

Based on the documentation provided (including E6.1 and the publicly accessible webpages of the University of Crete), the Institution demonstrates a well-established and functional system for publishing academic and administrative information in a clear, accessible and systematic manner. The University maintains a comprehensive central website, supported by open code CMS technology, through which the Institution publishes its quality assurance structures, the IQAS framework, the institutional quality policy, as well as documentation related to internal and external evaluation processes.

The review confirms that the University has ensured bilingual availability (Greek and English) of key institutional information across its central and departmental webpages. Programmes, academic units, administrative structures, and services are also provided in English language, facilitating access for international users and meeting the expectations for transparency and visibility.

The E6.1 review shows that webpages are updated regularly, contain active links, and include clearly presented information about academic activities, regulations, student services, and study programmes. While minor differences in structure exist, the overall architecture remains coherent and consistent, enabling users to

identify and navigate relevant information effectively.

The University also offers publicly accessible policies, institutional documents, and links to central services, ensuring that essential information regarding teaching activities, programme profiles, academic curriculum, and governance structures is available to students, staff, stakeholders and the public.

In addition, the University webpage covers accessibility provisions for people with disabilities, as well as Artificial Intelligence technology through the use of Digital Assistance.

Furthermore, all University webpages are equipped with templates, for all academic departments, laboratories, independent bodies, based on the central webpage layout.

Overall, the University offers an extensive, structured, bilingual and objective webpage covering all accessibility needs.

II. Analysis

The analysis of the available documentation demonstrates that the University of Crete has developed and implemented an effective strategy for public information dissemination. The Institution's digital presence reflects a coherent approach to transparency, accessibility and user-oriented communication. The existence of bilingual webpages across academic units enhances international reach and ensures that information is available to diverse user groups.

The EEAP assessment confirms that the Institution monitors webpage functionality, content accuracy and update procedures. Departments adhere to the institutional guidelines by maintaining updated content, publishing essential academic and regulatory information, and ensuring the visibility of central policies and quality assurance frameworks.

The Institution also maintains the underlying structures and legal compliance mechanisms required to support students with disabilities.

Importantly, the public availability of the IQAS, internal evaluation reports, and external evaluation outcomes demonstrates the commitment of the University to transparency and accountability. The alignment between institutional communication practices and the expectations of the committee is evident, and the documentation supports the conclusion that the University has established an accessible, reliable and comprehensive public information framework.

III. Conclusions

The University of Crete fully meets the requirements. The Institution ensures the publication of clear, updated, bilingual and objective information concerning its teaching, academic activities, and quality assurance processes. The central and departmental webpages provide structured and accessible material, enabling the public, students and stakeholders to locate relevant information easily.

The University maintains consistent practices regarding the dissemination of

academic documentation, programme profiles, regulations, and institutional policies. Moreover, The University publishes the required quality assurance materials, demonstrating accountability and transparency. While the visibility of accessibility-related information can be further strengthened, the underlying mechanisms exist and are operational, and therefore do not affect the Institution’s overall compliance.

In conclusion, the Institution ensures an effective public information system that is continuously updated, bilingual, transparent and aligned with national and European quality assurance standards.

Panel judgement

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

Panel Recommendations

R6.1 Make the website more appealing and modern.

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 Internal Quality Assurance System (IQAS) is a continuous process, which begins with external evaluation, continues with internal evaluation, recording progress in relation to the findings, followed by the submission of the recertification proposal with its annexes for re-evaluation, for the continuous improvement of the IQAS. In this context, the documentation file/annex E7.1 "5-Year Progress Report on the response to the recommendations of the latest ESDP Certification Report" was drafted and is attached to the file for the recertification of the Institution's IQAS.

The five years since the previous external evaluation of the University of Crete have been a period of diligent work at the level of central administration, administrative services, and academic departments, in order to analyse the recommendations of the External Evaluation Panel and to plan the implementation of the necessary actions.

The Institution through:

- internal consultation procedures (general departmental meetings, establishment of working groups with members of MODIP and OMEA, informative meetings between the President of MODIP and the Academic Departments and services, exchange of information),
- the establishment of committees for drafting the Strategic Plan, the specification of the Quality Policy, the organisation of the IQAS, and the Institution's Quality Targets,
- utilization of the assessment of the findings of external evaluation and certification reports of the study programs at the institutional level,
- adopting Action Plans,
- installation of a quality assurance officer for each academic and administrative unit and co-operation with the MODIP,
- participation of students in the MODIP and in the academic departments' OMEA
- creation of a student register for quality issues,
- creation of a register of external bodies for quality assurance issues.

has drafted and adopted, via its collective bodies, the Strategic Plan, the Quality Policy, the organization of the IQAS, and the Quality Targets of the Institution.

During the quality assurance process, a series of important actions were implemented, such as course evaluation, data and indicator collection and processing, and the preparation of internal and external evaluations. With coordination from MODIP and OMEA, all teaching, research, administrative staff, students of all levels, as well external stakeholders, engage with the quality system and play a substantial and important role in improving the services provided by the institution.

II. Analysis

The quality assurance strategy governs all aspects of the University's strategy, improving its efficiency and effectiveness in achieving its strategic goals and providing high quality in all aspects of its activities. In this way, the EEAP believes, the University of Crete strengthens its trust and credibility, attracts high-level students, researchers, professors, and administrative and technical staff, making it an important centre of education, research, and innovation, as well as an attractive place to work.

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.

The way in which this policy is designed, approved, implemented, monitored, and revised is one of the procedures of the IQAS. The result of the implementation of the IQAS is its certification by the HAHE, with the aim of ensuring the quality of Higher Education, as well as the effectiveness and transparency of the overall operation of the University.

III. Conclusions

The University of Crete and its individual programmes of study comply with the principles of the HAHE’s quality standards and the quality assurance principles of the European standards and Guidelines (ESG).

The University's Quality Policy and the implementation of the strategic planning are carried out by the Quality Assurance Unit (MODIP), whose mission is to continuously improve the quality of the Institution's educational and research work, as well as the effective operation and performance of its services. At the same time, the Internal Evaluation Teams (OMEA) are responsible for coordinating and implementing the internal evaluation procedures of the Department and the external evaluation/certification of the Undergraduate, Postgraduate, and Doctoral Study Programs.

Thus, the EEAP is content with the way that the recommendations of the IQAS Accreditation Report of 2019 were handled and responded to via a combination of quantitative and qualitative information.

Panel judgement

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

Panel Recommendations

R7.1 Continue the positive attitude towards external evaluations.

PART C: CONCLUSIONS

I. Features of Good Practice

- Excellent and enthusiastic faculty with teaching experience, high research performances, capability to obtain competitive grants.
- Excellent academic and working environment.
- Student-centered philosophy.
- Information on courses, student life, faculty accomplishments, and employment perspectives is very well communicated.
- Important and well maintained facilities.
- Solid and experienced administrative staff.
- Continuous interactions of the UoC with the local society through the organization of forums, exhibitions, lectures etc.
- Outstanding commitment of all UoC players (faculty, staff, students) towards excellence.
- Established international recognition and visibility.
- High quality and well-maintained athletic centers.
- Very close interaction between UoC and FORTH/ITE.
- Increased number of very important interdisciplinary programs.
- Very positive feedback from alumni and stakeholders.
- Excellent strategic plan for the following 4 years.

II. Areas of Weakness

- Insufficient teaching and administrative staff for the needs of UoC.
 - Lack of one or more advisory boards composed by alumni and external stakeholders.
- * Partial MODIP independence.

III. Recommendations for Follow-up Actions

- UoC needs to strengthen its network and interaction with external stakeholders (like chambers, companies etc).
 - ISO certifications for most laboratories.
 - Prioritization, where possible, through further reinforcement with permanent staff, with the aim of reducing the University's dependence on contract-based personnel in all departments.
 - Expand mechanisms to collect and integrate quantitative and qualitative student feedback.
 - Foster systematic engagement with external stakeholders, including industry, regional authorities, alumni, and international partners, to inform academic and research strategies.
 - Review and optimise postgraduate programmes and lifelong learning opportunities to align with strategic objectives and regional/international demand.
 - Produce a clear and transparent annual training plan for all staff from MODIP and academic, service, and administrative departments that are involved with quality procedures.
 - Make the student satisfaction survey, its purpose, outcomes, and resulting improvements more transparent, better communicated, more consistently organised to improve its effectiveness on the quality of studies.
 - Improve the utilisation of Business Intelligence tools by providing more diverse formats of outcomes, that enhance the level of comprehension across different entities of the institution.
- Produce a clear and transparent annual training plan for all staff from MODIP and academic, service, and administrative departments that are involved with quality procedures.
- Construct a more appealing and modern website.
- Continue the positive attitude towards external evaluations.

IV. Summary & Overall Assessment

The Principles where compliance has been achieved are:

Principles: 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
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