



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO
STUDIJŲ PROGRAMOS *KLINIKINĖ SLAUGA*
(valstybinis kodas - 621B70002)
VERTINIMO IŠVADOS

EVALUATION REPORT
OF *CLINICAL NURSING* (state code - 621B70002)
STUDY PROGRAMME
at LITHUANIAN UNIVERSITY OF HEALTH SCIENCES

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Išvados parengtos anglų kalba
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DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

| | |
|--|---------------------------------|
| Studijų programos pavadinimas | <i>Klinikinė slauga</i> |
| Valstybinis kodas | 621B70002 |
| Studijų sritis | Biomedicinos mokslai |
| Studijų kryptis | Slauga |
| Studijų programos rūšis | Universitetinės studijos |
| Studijų pakopa | Antroji |
| Studijų forma (trukmė metais) | Nuolatinė (2), Iššęstinė (3, 5) |
| Studijų programos apimtis kreditais | 120 |
| Suteikiamas laipsnis ir (ar) profesinė kvalifikacija | Slaugos magistras |
| Studijų programos įregistravimo data | 2007-02-19 |

INFORMATION ON EVALUATED STUDY PROGRAMME

| | |
|---|---------------------------------|
| Title of the study programme | <i>General Practice Nursing</i> |
| State code | 621B70002 |
| Study area | Biomedical sciences |
| Study field | Nursing |
| Type of the study programme | University Studies |
| Study cycle | Second |
| Study mode (length in years) | Full-time (2), Part-time (3) |
| Volume of the study programme in credits | 120 |
| Degree and (or) professional qualifications awarded | Master in Nursing |
| Date of registration of the study programme | 19 February, 2007 |

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The Centre for Quality Assessment in Higher Education

CONTENTS

| | |
|---|-----------|
| I. INTRODUCTION | 4 |
| 1.1. Background of the evaluation process | 4 |
| 1.2. General..... | 4 |
| 1.3. Background of the HEI/Faculty/Study field/ Additional information..... | 4 |
| 1.4. The Review Team..... | 5 |
| II. PROGRAMME ANALYSIS | 6 |
| 2.1. Programme aims and learning outcomes..... | 6 |
| 2.2. Curriculum design | 7 |
| 2.3. Teaching staff | 10 |
| 2.4. Facilities and learning resources | 11 |
| 2.5. Study process and students' performance assessment..... | 12 |
| 2.6. Programme management | 14 |
| 2.7. Examples of excellence * | 15 |
| III. RECOMMENDATIONS | 16 |
| IV. SUMMARY..... | 17 |
| V. GENERAL ASSESSMENT | 19 |

I. INTRODUCTION

1.1. Background of the evaluation process

The evaluation of on-going study programmes is based on the **Methodology for evaluation of Higher Education study programmes**, approved by Order No 1-01-162 of 20 December 2010 of the Director of the Centre for Quality Assessment in Higher Education (hereafter – SKVC).

The evaluation is intended to help higher education institutions to constantly improve their study programmes and to inform the public about the quality of studies.

The evaluation process consists of the main following stages: 1) *self-evaluation and self-evaluation report prepared by Higher Education Institution (hereafter – HEI)*; 2) *visit of the review team at the higher education institution*; 3) *production of the evaluation report by the review team and its publication*; 4) *follow-up activities*.

On the basis of external evaluation report of the study programme SKVC takes a decision to accredit study programme either for 6 years or for 3 years. If the programme evaluation is negative such a programme is not accredited.

The programme is **accredited for 6 years** if all evaluation areas are evaluated as “very good” (4 points) or “good” (3 points).

The programme is **accredited for 3 years** if none of the areas was evaluated as “unsatisfactory” (1 point) and at least one evaluation area was evaluated as “satisfactory” (2 points).

The programme is **not accredited** if at least one of evaluation areas was evaluated as "unsatisfactory" (1 point).

1.2. General

The Application documentation submitted by the HEI follows the outline recommended by the SKVC. Along with the self-evaluation report and annexes, the following additional documents have been provided by the HEI before, during and/or after the site-visit:

| No. | Name of the document |
|-----|----------------------|
| - | |

1.3. Background of the HEI/Faculty/Study field/ Additional information

The external evaluation procedures of the nursing study field Master Degree (university studies; second cycle) Study Programme of Clinical Nursing (621B70002) at Lithuanian University of Health Sciences was initiated by the Centre for Quality Assessment in Higher Education of Lithuania.

The programme was registered in 1999. It is provided as full-time study (2 years) or part-time study (3 years) and is awarded with 120 ECTS. The part-time option is offered from 2011. The Master Study Programme Clinical Nursing has not been submitted for external expert evaluation before. The degree awarded and/or professional qualification (according to the main data of the study programme in self-evaluation report - SER) is a Master in Nursing.

For the purpose of the evaluation, the following documents have been carefully studied and taken into the consideration:

- Law on Higher Education and Research of Republic of Lithuania;
- Procedure of the External Evaluation and Accreditation of Study Programmes;
- General Requirements for Master Degree Study Programmes;
- Methodology for Evaluation of Higher Education Study Programmes;
- Descriptor of Study Cycles;
- Description of the Lithuanian Qualifications framework.

After studying the SER, external review team (hereinafter – ERT) spent a day discussing the study programme with administrative staff, SER group, teachers, students, graduates and employers. At the end of the site visit, the team leader presented preliminary findings and general remarks to the staff responsible for the study programme. After the visit, the review team discussed its findings and produced this joint evaluation report. The report is based on analysis of the assessment of submitted self-evaluation material and on interviews on a site visit conducted by the review team. Review team also included in the report observations of the evaluated services (classrooms for practice, library and computer facilities) and evaluation of students' final works.

1.4. The Review Team

The review team was completed according *Description of experts' recruitment*, approved by order No. 1-01-151 of Acting Director of the Centre for Quality Assessment in Higher Education. The ERT visit to HEI was conducted by the team on *11/November/2015*.

- 1. Andy Gibbs (team leader)**, *Senior Lecturer (International) School of Health and Life Sciences, Glasgow Caledonian University, United Kingdom*
- 2. Prof. Nadine Oberhauser**, *professor, dean sector midwives, Haute Ecole Cantonale Vaudoise de la santé, University of Applied Sciences, registered nurse, Switzerland;*
- 3. Assoc. prof. dr. Polona Mivšek**, *head of Midwifery programme, Faculty of health sciences, University of Ljubljana , Slovenia;*
- 4. Mrs. Mari Berglund**, *Senior Lecturer, Degree programme Leader, registered midwife, Finland;*
- 5. Mrs. Aušra Volodkaitė**, *Vice president of Lithuanian organization of Nurse specialists, Lithuania;*
- 6. Ms. Laura Žlibinaitė**, *student of Lithuanian Sports University, study programme Physiotherapy.*

II. PROGRAMME ANALYSIS

2.1. Programme aims and learning outcomes

Study aims are publicly accessible on the web site of the university and are defined as: *“The aim of the Master study programme Clinical Nursing is to provide students with theoretical knowledge for the evaluation of the quality of nursing, to plan scientific research, and to create conditions allowing the verification of the research results in practice”*. In SER report is written that programme emphasizes 5 main competencies: 1. Knowledge and its application, 2. Abilities to conduct a research, 3. Social abilities, 4. Personal abilities, 5. Special abilities. Each of these is assigned with specific learning outcomes that are research oriented. Learning outcomes of the programme, learning outcomes of the course unit, course unit methods and assessment strategy are presented in a table under each study module in study subject description and this forms a clear picture of the learning outcomes.

However from the study plan and from the description of study subjects is evident that programme does not grant graduates advanced nursing skills, therefore the term “clinical” in the title is problematic. From the description of the curriculum that describes only lectures, seminars and self-study is evident that the programme does not include study of clinical skills. This was confirmed also in the discussion with teachers and graduates and ERT can conclude that the programme is mainly focused in the research that can be used as a plan for the improvement of nursing management. ERT concludes that study objectives (for example SER page 5 - “... to train special skills...”), content and the learning outcomes (presented in Table 1.1. of SER, where no additional clinical skills of the graduate are mentioned) are not in accordance with the title of the programme “Clinical Nursing” that can be understood as that graduates will acquire new practical (clinical) competencies and be able to perform advanced clinical interventions after finishing the programme. Therefore it should be considered to change the title of the programme and abandon the word “clinical”. Also in the interview with the SER group and graduates, became clearly evident that the programme stresses educology and management, not the clinical part of the profession. Since the programme is focused to achieve greater quality in organization of nursing, which was stressed also by SER group, teachers and graduates, ERT concludes that the title of the study programme is not appropriate; it does not reflect study aims and learning outcomes.

Programme obviously addresses answers to public needs and needs of labour market, since the social partners and graduates reported same benefits of the programme: they can mentor students in practical settings, they gained better leadership skills, gained more credibility, can work in the managerial positions, where they can implement the organisation of the nursing etc., however again it was made clear that the title of the programme did not fit the content, since graduates

clearly stated that finishing MSc programme did not award them with any additional clinical competencies.

Second major concern that has arisen from the evaluation by the ERT was the level of the programme. The description of the subjects is very broad in content of the research courses. From this it could not be concluded whether programme achieves higher level of knowledge in methodological approaches of graduates in comparison with BSc level graduates, although according to study aims this would be expected. In the interview with teachers the qualitative approach was mentioned as the additionally gained methodological knowledge, specific to the MSc study level and SER team claims that subjects do go in depth, however this is not evident from the material provided (for example the description of the subject Qualitative research methods in the SER that awards student with 5 ECTS, consists of only three course contents: Quantitative and qualitative research in nursing, Quantitative research in nursing, Qualitative research in nursing. This description of the subject does not evidence any advancement in depth and does not demonstrate how it expands on the skills learned in the first cycle programme).

In the interview, students describe study on MSc level as more scientific in comparison to the BSc level, however this cannot be concluded from the samples of the thesis which ERT saw during the visit; the evolution of the methodological approach in comparison to BSc degree is not evident enough. In Appendix 3 of the document Descriptors of the study cycles is written that "Graduate has the ability to analyze, synthesize and assess research data necessary for studies" however the judgement of the ERT, when evaluating the thesis provided was, that stage of synthesis are in some thesis at the same level as in thesis of first cycle study.

2.2. Curriculum design

Master study programme Clinical Nursing, was registered in 1999 and was the first MSc programme, not only in Lithuania, but also in the Baltic region. In 2011 part-time possibility of studying was developed, due to the students' needs. Despite the different duration (2 vs 3 years), both programmes are compatible with national legal requirements as also reported in the SER:

- the volume of the programme is 120 ECTS (legislation requirements 90-120)
- there are 5 course units per semester (maximum is 5)
- 120 ECTS subjects of the study field (no less than 60 ECTS)
- Independent work of students is 47-55% (no less than 30%)
- 45 ECTS is dedicated for the preparation of final thesis (minimum 30 ECTS).

From the SER it was clear that BSc nursing and midwifery graduates are accepted in the programme. It is not stated in SER (page 22) why other disciplines are not accepted in the programme (graduates of other health professions that do not have second cycle programmes might be also interested in this study programme, especially it is more focused on educology and

managerial skills than clinical nursing). In the interview with SER group it was clear that bridging courses are made individual; on the basis of evaluation of the candidates BSc study programme. Because of this reason, the list of Supplementary subjects is not provided in the SER so particularly in this case it could not be fully confirmed by the ERT whether the required number of ECTS is compliant with national legal standards (60/90 ECTS). It might be considered to develop robust procedures to ensure the correct level of skills on entry and give equal and consistent bridging requests to all students who come from the same BSc study programmes as this might impact on their experience as students on this programme.

Students and graduates confirmed that study modules are spread evenly and that themes are not repetitive. Graduates of midwifery confirm that the programme contents within the subjects are adapted to their scope of practice.

Despite that the programme meets legal requirements, the ERT had certain hesitations. The first one was again the title of the programme, which, as already commented above, is also not well-chosen according to the fact that the students are graduates of nursing as well as of midwifery. Despite the fact that midwifery in Lithuania is the branch of nursing field, it is considered an autonomous profession in EU; therefore also the directive of EU (2013/55/EU) makes separate recommendations for nursing and midwifery BSc education and scope of practice. Many countries in Europe with well-established midwifery practice this dualism also on the MSc level, despite the fact that second cycle programmes are not regulated with the directive. It should therefore be considered, to provide the midwives, who will choose this MSc programme to gain the knowledge specific for their own profession, some specific midwifery subjects, to engage midwifery supervisors for the thesis and eventually to consider the change of the title of the programme (for example into Nursing and Midwifery).

Another already above mentioned hesitation is the compliance with the level of the study (second cycle) and the contents in the description of the study subjects. The methodological component of the programme should be strengthened in order to enable students to undertake statistical methods that should be evident from the final thesis of the graduates. These however did not provide assurance that the knowledge, provided in the study programme contributes to the higher qualitative problem-solving or scientific innovation level, as it should, according to the legal requirements for second level study programmes. Some examples from SER:

- the description of the subject Organization of the scientific research reveals that the basic SPSS knowledges are provided during the course, however this would be more appropriate for the first cycle programme, while on the second level, advanced statistical measures should be taught. In the same subject students are also given some other basic information that should be upgraded on the second cycle programmes;

- in the description of the subject Scientific research, basics of the SPSS are mentioned again;
- the description of the subject Qualitative research methods is very inadequate; it suggests that only basic information regarding the differences in approaches are presented to students.

As seen from the samples of the provided thesis (where in some the upgrading on the second level is not as clear as it should be), the methodology on this level could be improved and risen to the level that the Descriptors of the study cycles consider it sufficient for the second cycle programmes – “Graduate has the ability to... synthesize... research data... he/she has the ability to integrate knowledge, manage complicated situations and make decisions when there is no comprehensive and well-defined information, and assess alternative solutions and possible impact on environment“.

ERT estimates that thesis presented did not fully achieve exceptional level of quality, despite the fact that 45 ECTS is designated for their creation as presented in SER. However study plan and subject description are inconclusive. In the study plan 45 ECTS is assigned for the Final Master thesis (during 4th, 5th and 6th semester), while in the subject description the module has only 30 ECTS. In the meeting with teachers, review team was given an explanation that 15 ECTS out of 45 for the final thesis is dedicated for the project research design and are delivered from the 1st year of the study on as the contact hours. ERT therefore recommends that 15 ECTS is excluded from the module called Final Master Thesis and presented more clearly in the study plan. Despite very specific requirements for the final thesis mentioned in the SER, students were unable to distinguish major differences of BSc and MSc thesis, which again confirmed doubts regarding the appropriateness of the contents of methodological courses in the study programme. The ERT was undecided regarding the issue of full time versus part time study. The applicability for the improvements of quality of nursing is stressed in the study outcomes and the full time students, who are not employed, would be disadvantaged in achieving this goal. This fact was also emphasized in the interview by the students and graduates, who confirmed that this programme is the most beneficial when working in practice. It was obvious from the interview with the graduates that also those who study full time are working. Therefore it might be sensible to consider just the part-time mode of study.

Other subjects are consistent with the level of the study and are spread evenly through the programme. The content of the programme reflects latest achievements, however, due to above described inadequacies of methodological courses and as previously exposed lack of advanced nursing skills, ERT has doubts whether the programme ensures learning outcomes, as described in SER. For example: Since the programme does not cover the study of advanced skills in

interventions in nursing, the learning objectives, described on page 6 of SER “the objective of the study is to provide knowledge and develops competencies in modern clinical nursing” can not be achieved. Beside that, learning outcomes and competencies in Table 1.1 (SER page 7) reflect lower level of abilities to conduct the research in comparison to Descriptors of the study cycles. The problem is the graduates’ ability of synthesis (that is not mentioned in Table 1.1., but prescribed in document Descriptors of the study cycle); the lack of this advanced research skill that enables graduates the critical reflection, could be seen also from some of the thesis presented to ERT.

2.3. Teaching staff

The structure of the staff meets legal requirements - subjects are taught by the scientists with PhD (78,6%) and advanced subjects are taught by professors (42,8%). Teachers are appropriately qualified and numerous enough to achieve learning objectives. In SER it is written that “There is an optimal ratio between students writing final thesis and their supervisors: it is aimed, that one leader shouldn’t have more than 3-4 students supervising for final thesis”. From the meeting with teachers it was evident that the nursing profession is well represented among teachers who are involved in provision of the MSc programme. Students are satisfied to be taught by the teachers who can provide also examples from the practice.

As described in SER (page 28): »Quality of academic staff performance is evaluated by the criteria:

- 1) minimum experience of teaching;
- 2) number of scientific articles, published during the 5-year period;
- 3) number of teaching materials prepared for students.

Different criteria are applied for professors, associate professors, lecturers and assistant professors. The members of academic staff present research activities carried out by them and the list of publications during the meetings of the departments on an annual basis. The detailed analysis of the performance of the teachers is carried out at the department level before the accreditation of lecturers, which is carried out every 5 years.« So teachers have regular accreditation of their academic title (every 5 years); the requirements are based on the publishing criteria, research criteria and continuous education regarding the educational approaches and professional standards of nursing. In such way also their development is ensured. Teachers’ turnover is very low so the adequate provision of the programme might be ensured; usually a consequence of retirement or maternity leave. Teachers are active in publishing, research projects, are members of professional groups and editorial boards. This can be seen from their CV’s.

Students and graduates reported that teaching staff is responsive and takes into the consideration their initiatives and proposals for changes. For example: on the meeting, students said that they gave an initiative of two different directions of the study and that they were informed that this is going to be realized within the next study year.

One of the concerns of the review team was that since midwives also apply for the study, the staff cannot provide them with adequate supervisors, while there are no midwives in the team of the teachers. Despite the fact that the study provides midwifery graduates with the opportunity to study midwifery materials, there might be a difference in philosophy and consequently the interpretation if the supervisor for these students would be a midwife. With the fact that EU distinguishes midwives and nurses as two different health professions, it is also questionable whether a MSc in nursing is the best way to develop midwifery. However ERT can understand that the midwifery is still developing profession and this solution is temporary.

ERT noticed that inter-teacher's reliability linked with master thesis supervision. This was observed in the mark sheet provided. For example: students who belonged to one specific supervisors did in most cases graduated with the mark 10, while students of some other supervisor had most often completed the study with the mark 7. Since supervision arrangements might not be fully clear and fully consistent (for example there is no protocol of supervision that would enable unification of the process), the mark may depend on who supervises the student, despite the fact that 70% of the mark is based on the opinion of the commission and only 30% of mark is based on the opinion of the supervisor. Hence, this raises the issue of equity that needs to be addressed in the future in order to improve the quality of the study programme and equity amongst students.

2.4. Facilities and learning resources

Lectures, seminars and consultations take place in auditoria and rooms located in the buildings of LSMU Nursing faculty. Other premises used for the master studies of nursing include auditoria of departments of other university units. All auditoria and the consultation room are equipped with projectors, computers, and internet connection. The Department of E-Studies organises distance lectures and e-classes. In the meeting, SER team expressed wish to have more distance learning, which would be beneficial also for the students that study part-time.

The university has a modern library which is located within a walking distance from Nursing Faculty. Library opening hours are convenient for students. Visitors can use reading rooms, rooms for conferences, seminars or individual work. Also part of the lectures can be held in the library. The library has available main publications required for the study program. Each year, analysis of teachers' and students' needs for books are conducted, and according to that the

further procurement is planned. Library subscribes to Lithuanian biomedical journals and foreign periodicals; for health resources, 550 journals for the field of nursing are available. Electronic databases are accessible to the visitors.

Master students may also use the specialized nursing science reading room located in the premises of the University Hospital, where they have 14 computerized working places, and two equipped rooms can be used for writing research papers and Master thesis. In total, premises for studies seems to be good in their size and quality.

The Department of Nursing and Care issues a scientific peer-reviewed journal NERP (Nursing Education, Research, & Practice) in English, which ERT team has found very beneficial. This is a good opportunity to disseminate the results of the study also abroad.

The intranet system FirstClass was introduced in all study cycles and for communication between University subdivisions. This software facilitates cooperation between research personnel, teachers, and students. Students have continuous access to the material of the lectures – they can see all the updates, may have an online discussion and consultation with their teachers from any subdivision of the University.

On the basis of the shown facilities and information provided in SER and at the meetings with different parties, ERT can conclude that facilities and equipment are adequate and meet students' needs.

2.5. Study process and students' performance assessment

Overall impression of the review team was that students were satisfied with the study arrangements. The SER provide evidence of the academic and social support for students. From the meetings it became obvious that the university access the students' satisfaction with the programme regularly (each year the survey of the graduates is performed through moodle system) and provide students with the career centre services. Students and graduates confirmed that their aspects and initiations are always taken into the consideration and necessary changes are made very quickly. Students are also involved in the committees with the power to make changes of the study programme.

Admission criteria are well defined for the BSc midwives and nurses. It might be good to consider also the application criteria for other professions. For the professional BSc candidates the bridging courses are individually prepared, therefore it cannot be concluded if they fit legal requirements; the university should be attentive that they do not exceed prescribed 60/90 ECTS. It would be recommended to develop a robust procedures to ensure the correct level of skills on entry and to give students from the same BSc programmes with equal requests.

Organization of the study enables the achievement of the learning outcomes that are stressing leadership abilities and mentorship skills (not the clinical work as could be perceived from the title of the study programme).

It is commendatory that the university enabled part-time study, since a lot of students are working and studying at the same time, have families and because of the geographical distance. From discussions with different parties, the ERT could not identify advantages of provision of the full-time study; it was obvious that with the part-time study more benefits can be achieved (direct implementations of the practice by the evidence based knowledge received during the study, easier organization of the study for the students from other cities, employed students and students with families). Students do have different options of academic and social support as described in SER (page 24), such as introductory lectures, access to literature, individual help with teachers, possibility of loans, support for disabled students etc.

Students have the opportunity of mobility programmes, however the interest is low as mentioned in SER, since they already work and have families. In SER it is stated that 2 students joined the exchange in Nordinet network activities. The graduates also mentioned in meeting that they are involved in the research area and can present their papers in open conferences and professional events etc, which ERT estimates as beneficial. The graduates and employers exposed the benefits of the graduates, which are: qualifications to mentor BSc students, leadership capabilities, research skilfulness, etc. Most of them are employed in managerial places, as leaders of the departments and those responsible for nursing education. On the meeting with them, they highlighted this as professional development possibilities that the graduation on this study programme provided to them.

From the discussions, the indistinct difference of the BSc and MSc was approved; students acknowledged the difference of the theoretical part of the study (as to be more scientific) and also employers stated that certain tasks in the working environment can be performed and achieved exclusively by the MSc level staff (especially organizational matters in the managerial places), however in regard with the final thesis, students and graduates were not persuasive regarding the difference of the first and second cycle final work. The need to emphasise advanced methodological knowledge in order to use more complex statistical approaches was confirmed again.

The process of assessing the students' thesis is clearly defined, however the inter-teacher's reliability linked with master thesis evaluation is still a concern. The general claims for the thesis are developed, but the grades are as some of the interviewee said, also influenced by the personal characteristics of the teachers. It should be ensured that all students are given equal support and level of demands by the teachers who supervise their final work.

2.6. Programme management

Study programme is evaluated through different agencies on the national, university, faculty and departmental level. LSMU has an internal system of quality assurance based on the European Higher Education Quality Assurance provisions and the quality assurance strategy approved by the Higher education Institution that includes operating procedures and measures to guarantee the study quality in Higher Education. The Commission of Quality Assurance and Monitoring of Studies is responsible for the development of the internal quality assurance system at LUHS.

At the university level, the assessment of the quality of studies is performed every year by evaluating the subjects. The results of assessment are presented to the academic community in the University newspaper *Ave Vita*, on the website and in the rector's annual report. LUHS service of internal audit performs also regular inspections of the use of classrooms and following of timetables of subjects. Students and stakeholders actively participate in the quality assessment and it was confirmed during the site visit as well. On the faculty level The Study Programme Committee, which is responsible for the contents of the programme and educational quality assurance as well as continuous improvement, is proposed by the Dean and approved by the Order of the Rector. The quality and administration of the Study Programme is regulated by the documents approved in LSMU. These documents can be found in Dean's of the Faculty office, relative departments, and on the University Web site at <http://www.lsmuni.lt>. LSMU has an internal system of quality assurance based on the European Higher Education Quality Assurance provisions and the quality assurance strategy approved by the Higher education Institution that includes operating procedures and measures to guarantee the study quality in Higher Education. Analysis of the students' satisfaction regarding the study programme is regularly conducted. Changes for improvements are done quickly as stated by the students and graduates. Also employers expressed good connection to university and commended their responsiveness to their suggestions. Implementations are done also according to the findings of internal and external evaluation procedures.

Teachers' development is regularly accessed (every 5 years) in order to maintain the quality of staff (criteria are clearly defined for each academic title). They are involved assessed by the publishing, research and educology criteria. For the evaluation of the teachers' qualifications is responsible The Centre of Teachers' Educational Competency that was established at LUHS in 2003.

From the site visit discussions it became obvious that the process is very clear at the leading circles, but gets misted with lower levels of organization. For example: it was obvious from the ERT meetings that those who wrote SER have a very clear perception of the whole study

programme, while teachers mainly have insight solely of their subject, therefore it would be recommended to collaborate more closely (as a multi-professional team), when planning changes and improvements of the programme. Despite that the service for the quality is well established by the agencies and commissions, it might be beneficial to include more intensively in the process all teachers that provide the programme. With this quality assurance process would be more effective.

2.7. Examples of excellence *

* if there are any to be shared as a good practice

III. RECOMMENDATIONS

1. In order to harmonize contents, study aims/outcomes, and also the inclusion of the applicants from different branches of the nursing field and qualifications with the name of the study, ERT recommends the change of title of the programme. As currently named, it is misleading – one would expect more advanced practical clinical nursing skills in the programme, however it is actually more focused on educology and managerial skills. The title should be broader, so that also other health professions could join the programme.
2. Methodological content in the subject description should be advanced in order to fulfil the expected learning outcomes and empower students for more advanced statistical methods in the final thesis when this is master level studies. As currently described it does not provide high enough level of methodology to fulfil the Descriptors of second cycle programme (especially not the synthesis that is crucial for critical thinking in research reflection process). According to the description of the contents of the methodological subjects, that are much downgraded, students acquire basic knowledges in topics that should be advanced when providing second level of study. The weak ability of synthesis was clear also when ERT was evaluating some of the graduates thesis.
3. ERT suggests to allocate more credits to methodology subjects, since the 15 ECTS that is used for research design of the master thesis project are already provided during the first three semesters of study.
4. It should be considered to include in the programme also supervisors for the students with the midwifery background.
5. Arrangements for supervision of the MSc thesis should be equitable. Since one of the concerns of the ERT was inter-teacher's reliability linked with master thesis supervision, ERT would suggest the development of the protocol for supervising the thesis. With such unification of the supervision approach, students would get equal approach and with the same level of input in students, also the final marks would be more objective.
6. The admission requirements (more precisely – bridging courses) in SER should be defined more clearly.
7. Consideration could be given to arrangements for both full time and part time modes of study for the inclusion of work based learning.

IV. SUMMARY

Study programme MSc Clinical nursing is a great benefit for the professional development of nursing in Lithuania. Therefore it is crucial that it is of high quality and promotes the specificity of the nursing.

Study aims and learning outcomes are clearly defined and publicly available and the programme addresses public needs and the needs of the labour market, however the name of the programme is not compatible with programmes' learning outcomes, content and the qualifications offered. Interviews of different groups of people reflected that the originality of this MSc programme in nursing is its focus on educology and nursing management. Review team would therefore recommend the change of title in order to reflect better the specific focus of the provided contents and would take into the consideration that the applicants are from different branches of nursing field.

Curriculum design meets legal requirements and the length of the programme is sufficient to ensure learning outcomes, however improvements of the subjects' content (depth of the statistical knowledge) should be made in order to enable that the programme methodologic topics would be consistent with the level of study and its learning outcomes and would sustain students for the research topic of their thesis.

Professional development of the staff is regularly accessed and stimulated (every 5 years the renewal of the title; the criteria are research, publication, professional knowledge). The strength of the programme is very strong basis of nursing teachers with appropriate qualifications that can develop the nursing as an autonomous, scientific profession. Since also graduates of the BSc of midwifery can apply to the programme, it would be beneficial to have supervisors also for this branch of the study field. Inequality of the supervision of the MSc thesis should be investigated and appropriately addressed.

Beside the strong nursing basis among staff, the very good examples are also facilities and learning resources that are available for the students of this programme. The library is exemplary supplied and the opening hours were adapted to the students' needs.

Students expressed high level of satisfaction with the study. Also employers see the general application of the graduates in their working environments, however it can be seen that the graduates are mainly prepared to work in hospital settings. Their involvement in the community services should be considered as the part of the future development. Part-time and full-time study organization of the study can achieve learning outcomes, however a question is whether provision of the full-time study could be organised differently, since a lot of students work at the same time and they clearly expressed the benefit of practicing nursing in order to be able to implement the practice by the learned evidence-based facts during the study programme.

The assessment of the quality is formally well established. Students and stakeholders play an active role in the evaluation. Results are available to all parties and improvements derive from the internal and external evaluations. More intensive involvement of individual teachers who perform the study programme would probably strengthen the internal quality measures and would make the process more effective.

V. GENERAL ASSESSMENT

The study programme CLINICAL NURSING (state code – 621B70002) at LITHUANIAN UNIVERSITY OF HEALTH SCIENCES is given **positive** evaluation.

Study programme assessment in points by evaluation areas.

| No. | Evaluation Area | Evaluation of an area in points* |
|-----|--|----------------------------------|
| 1. | Programme aims and learning outcomes | 2 |
| 2. | Curriculum design | 2 |
| 3. | Teaching staff | 3 |
| 4. | Facilities and learning resources | 3 |
| 5. | Study process and students' performance assessment | 3 |
| 6. | Programme management | 3 |
| | Total: | 16 |

*1 (unsatisfactory) - there are essential shortcomings that must be eliminated;

2 (satisfactory) - meets the established minimum requirements, needs improvement;

3 (good) - the field develops systematically, has distinctive features;

4 (very good) - the field is exceptionally good.

| | |
|---------------------------------|--------------------------------|
| Grupės vadovas: Team leader: | Andy Gibbs |
| Grupės nariai: Team members: | Prof. Nadine Oberhauser |
| | Assoc. prof. dr. Polona Mivšek |
| | Mari Berglund |
| | Aušra Volodkaitė |
| | Laura Žlibinaitė |

**LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO ANTROSIOS PAKOPOS
STUDIJŲ PROGRAMOS *KLINIKINĖ SLAUGA* (VALSTYBINIS KODAS – 621B70002)
2016-04-01 EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-84 IŠRAŠAS**

<...>

V. APIBENDRINAMASIS ĮVERTINIMAS

LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO studijų programa *KLINIKINĖ SLAUGA* (valstybinis kodas – 621B70002) vertinama **teigiamai**.

| Eil. Nr. | Vertinimo sritis | Srities įvertinimas, balais* |
|---------------------|--|---|
| 1. | Programos tikslai ir numatomi studijų rezultatai | 2 |
| 2. | Programos sandara | 2 |
| 3. | Personalas | 3 |
| 4. | Materialieji ištekliai | 3 |
| 5. | Studijų eiga ir jos vertinimas | 3 |
| 6. | Programos vadyba | 3 |
| | Iš viso: | 16 |

* 1 - Nepatenkinamai (yra esminių trūkumų, kuriuos būtina pašalinti)

2 - Patenkinamai (tenkina minimalius reikalavimus, reikia tobulinti)

3 - Gerai (sistemiškai plėtojama sritis, turi savitų bruožų)

4 - Labai gerai (sritis yra išskirtinė)

<...>

IV. SANTRAUKA

Magistrantūros studijų programa *Klinikinė slauga* yra labai naudinga rengiant Lietuvoje profesionalius slaugytojus. Todėl ypač svarbu, kad ji būtų kokybiška ir užtikrintų slaugos specifiškumą.

Programos tikslai ir numatomi studijų rezultatai yra aiškiai apibrėžti ir viešai skelbiami, programa atitinka visuomenės ir darbo rinkos poreikius, tačiau programos pavadinimas nesuderintas su numatomais studijų rezultatais, programos turiniu ir suteikiama kvalifikacija. Per pokalbius su įvairių grupių žmonėmis paaiškėjo, kad šios slaugos magistrus rengiančios studijų programos originalumas yra jos orientavimasis į ugdymą ir slaugos vadybą. Todėl vertinimo grupė rekomenduoju pakeisti programos pavadinimą, kad jame geriau atsispindėtų, į ką konkrečiai orientuotas jos turinys, ir būtų atsižvelgta į tai, kad stojantieji atstovauja įvairias slaugos krypties šakas.

Programos turinys atitinka teisės aktų reikalavimus, programos trukmė (apimtis) yra pakankama, kad užtikrintų numatomus studijų rezultatus, tačiau reikėtų patobulinti dalykų turinį (statistinės informacijos intensyvumą), kad programos metodiniai dalykai atitiktų studijų lygį ir numatomus studijų rezultatus bei padėtų studentams pasirinkti su jų baigiamaisiais darbais susijusių mokslinių tyrimų temas.

Nuolat skatinamas ir įgyvendinamas darbuotojų profesinis tobulinimas (kas penkeri metai atnaujinamos pareigos; kriterijai yra moksliniai tyrimai, publikacijos, profesinės žinios). Šios studijų programos stiprybė yra labai stipri tinkamą kvalifikaciją turinčių slaugos dėstytojų bazė; šių dėstytojų dėka kuriama savarankiška, mokslinį pagrindą turinti slaugytojo specialybė. Kadangi į šią programą gali stoti ir akušerijos bakalauro laipsnį turintys studentai, būtų naudinga, kad ir ši studijų krypties šaka turėtų vadovus. Reikėtų išnagrinėti ir tinkamai spręsti nevienodo vadovavimo magistriniam baigiamajam darbui klausimą.

Kitos šios studijų programos stiprybės (be stiprios slaugos dėstytojų bazės) yra materialieji ištekliai, kuriais jos studentai turi galimybę naudotis. Yra puikiai aprūpinta biblioteka, kurios darbo valandos pritaikytos studentų poreikiams.

Studentai išreiškė pasitenkinimą studijomis, o darbdaviai mato, kokioje darbo aplinkoje gali būti pritaikytos absolventų žinios. Tačiau matyti, kad iš esmės absolventai yra parengti darbui ligoninėse. Ateityje jie dar turėtų būti rengiami teikti paslaugas bendruomenei. Studijų organizavimas taikant iššęstinę ir nuolatinę studijų formas gali padėti pasiekti numatomus studijų rezultatus, tačiau kyla klausimas, ar nuolatinės studijos galėtų būti organizuojamos kitaip, nes daug studentų kartu ir dirba, be to, jie aiškiai pareiškė, kad praktikuoti slaugą yra naudinga, norint moksliniais įrodymais pagrįstais faktais pagrįsti praktiką, atliekamą studijuojant šią programą.

(Studijų) kokybės vertinimas formaliai organizuotas gerai. Vertinimo procese aktyviai dalyvauja studentai ir socialiniai dalininkai. Rezultatai yra prieinami visoms šalims, o patobulinimai atliekami atsižvelgiant į vidaus ir išorės vertinimus. Vidinio (studijų) kokybės (užtikrinimo) priemonės tikriausiai būtų stipresnės, o vertinimo procesas veiksmingesnis, jei jame aktyviau dalyvautų atskiri šios studijų programos dėstytojai.

<...>

III. REKOMENDACIJOS

1. Tam, kad šios programos turinys, tikslai ir (arba) numatomi rezultatai ir kvalifikacijos būtų suderinti su studijų pavadinimu, išorinio vertinimo grupė rekomenduoja pakeisti programos pavadinimą. Dabartinis jos pavadinimas yra klaidinantis – pagal šią programą tikimasi įgyti pažangesnių praktinių klinikinės slaugos įgūdžių, nors iš tikrųjų programa yra labiau

orientuota į ugdymą ir vadybą. Pavadinimas turėtų būti platesnis, ši programa turėtų apimti ir kitas su sveikatos priežiūra susijusias profesijas.

2. Dalykų aprašų metodologinis turinys turėtų būti pažangus, kad būtų pasiekti numatomi studijų rezultatai ir kad studentai (jei jie magistrantai) savo baigiamuosiuose darbuose galėtų taikyti pažangesnius statistikos metodus. Dabartinių aprašų metodologinis lygis nepakankamai aukštas, kad atitiktų antrosios pakopos programų aprašus (ypač nepakankamai aprašyta sintezė, kuri yra svarbiausia kritinio mąstymo dalis tyrimų refleksijos procese). Sprendžiant iš metodologijos dalykų turinio aprašo, kuris yra labai supaprastintas, bazinių žinių studentai įgyja iš dalykų, kurie studijuojant magistrantūrą turėtų būti sudėtingesni. Tai, kad sintetinio gebėjimai yra silpni, ekspertams paaiškėjo ir vertinant kai kuriuos absolventų baigiamuosius darbus.
3. Išorinio vertinimo grupė siūlo skirti daugiau kreditų metodologijos dalykams, nes 15 ECTS kreditų už mokslinių tyrimų projektą, sudaromą rengiant magistro baigiamąjį darbą, skiriami jau per pirmuosius trejus studijų semestrus.
4. Reikėtų apsvarstyti ir studentų praktikos vadovų, turinčių akušerinį išsilavinimą, įtraukimo į programą klausimą.
5. Susitarimai dėl vadovavimo magistrantūros baigiamiesiems darbams turėtų būti lygiateisiai. Kadangi vienas iš dalykų, kėlusį rūpestį išoriniams vertintojams, buvo dėstytojų patikimumas, susijęs su vadovavimu magistro baigiamiesiems darbams, išorinio vertinimo grupė siūlytų parengti vadovavimo baigiamiesiems darbams protokolą. Taip suvienodinus požiūrį į vadovavimą, studentai būtų traktuojami vienodai, visiems būtų vienodai padedama ir galutinis vertinimas (pažymiai) būtų objektyvesnis.
6. Savianalizės suvestinėje reikėtų aiškiau apibūdinti priėmimo reikalavimus (tiksliau – išlyginamąsias studijas).
7. Reikėtų apsvarstyti nuolatinę ir ištęstinę studijų formas siekiant įtraukti mokymąsi dirbant.

<...>

Paslaugos teikėjas patvirtina, jog yra susipažinęs su Lietuvos Respublikos baudžiamojo kodekso 235 straipsnio, numatančio atsakomybę už melagingą ar žinomai neteisingai atliktą vertimą, reikalavimais.

Vertėjos rekvizitai (vardas, pavardė, parašas)