



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

Klaipėdos universiteto  
***SLAUGOS STUDIJŲ PROGRAMOS (621B70003)***  
**VERTINIMO IŠVADOS**

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**EVALUATION REPORT**  
**OF *NURSING (621B70003) STUDY PROGRAMME***  
at Klaipėdos University

Grupės vadovas:  
Team leader:

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Išvados parengtos anglų kalba  
Report language - English

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2014

## DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	<i>Slauga</i>
Valstybinis kodas	621B70003
Studijų sritis	Biomedicinos mokslai
Studijų kryptis	Slauga
Studijų programos rūšis	Universitetinės studijos
Studijų pakopa	Antroji
Studijų forma (trukmė metais)	2 (nuolatinės studijos)
Studijų programos apimtis kreditais	120
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	Slaugos magistras
Studijų programos įregistravimo data	2007-01-27

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## INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	<i>Nursing</i>
State code	621B70003
Study area	Biomedical Sciences
Study field	Nursing
Kind of the study programme	University Studies
Study cycle	Second
Study mode (length in years)	2 (full time)
Volume of the study programme in credits	120
Degree and (or) professional qualifications awarded	Master of Nursing
Date of registration of the study programme	27-01-2007

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## I. INTRODUCTION

This *Nursing* study programme was introduced in 2004 to Klaipeda University (KU). It was developed in partnership with other Universities from Finland and Sweden in response to reforms in health care and need for more highly qualified specialists. Programme under evaluation is offered by the Department of Nursing (DN) within the Faculty of Health Sciences (FHS). It is delivered over two years and upon successful completion the students are awarded a Master's Degree.

The programme undergone external evaluation carried out by the international review panel in 2010. It was given three years accreditation. The recommendations of the previous evaluation panel are as following:

1. Clear philosophy of expectations of a Master's prepared nurse, which incorporates the art as well as the science of nursing, needs to be articulated.
2. Learning outcomes need to be at a higher level.
3. Student development should not be limited by having to choose thesis topic in first semester.
4. A third pathway in nursing (rather than management or education) should be developed.
5. The purpose of the clinical placement should be clearly articulated and supervisors given some training.

The current review panel took into account these recommendations when evaluating this study programme in spring of 2014 and although some significant changes have been introduced into the programme to address these recommendations there is some of these areas that are still problematic. These areas will be referred to in the following report.

The evaluation team were provided with a self-evaluation report (SER) that was developed by an appointed self-evaluation group prior to the site visit in April 2014. This report provided the basis for the evaluation visit. Unfortunately there were a number of major errors that were evident within this report (learning outcomes being included within tables that did not exist) and this needed to be raised with the SER team at the start of the site visit. It was emphasised that in the future the SER should be checked for accuracy before submission and dissemination to the evaluation team as inaccurate reports do not allow a curriculum to be assessed effectively. In addition the evaluation team identified after the site visit that the report did not accurately reflect

the activity that was happening within the University. For this reason it has to be emphasized that the SER and the evaluation visit jointly provide the basis for this report.

This evaluation was carried out by the evaluation team led by Prof. dr. Lynn Kilbride, Glasgow Caledonian University, and composed of Ms. Inge Bergmann – Tyacke, Bielefeld University of Applied Sciences, Germany, Ms. Hannele Tiittanen, Lahti University of Applied Sciences, Finland, Assoc. prof. dr. Carol Hall, University of Nottingham, UK, Ms. Kristi Toode, North Estonia Health Centre, Estonia and Ms. Laura Žlibinaitė (student member), Lithuanian Sports University, Lithuania.

## II. PROGRAMME ANALYSIS

### *1. Programme aims and learning outcomes*

The aims and LOs of the programme were clearly articulated within the SER and reference was made to all of the pertinent higher education regulatory documents and international requirements for nursing that these aims and learning outcomes were based upon. It is stated within the SER that the aims and LOs are clearly made public using the national AIKOS system ([www.aikos.smm.lt](http://www.aikos.smm.lt)) however on looking at this website the English version did not have all of this detail. There is mention of the fact that the information is provided on the web site of KU ([ww.ku.lt](http://ww.ku.lt)) and provided to students at open days. This was verified by the students on the programme who all stated that they had access to the programme aims and LOs.

Although the SER provided some insight to the relationship between the programme aims and LOs to academic/professional requirements, public needs and the needs of the labour market it was only through face to face discussion that the evaluation team could establish the appropriateness of these for the advancement of the Lithuanian Nursing Workforce. The self assessment team identified in discussions with the evaluation team that they were aware of the changing health needs of Lithuanian population in terms of elderly care, dementia, community nursing and agreed with the suggestions of the evaluation panel and acknowledged that these future requirements of nurses should have been made more explicit within the LOs of the programme. However they were less articulate about the needs in terms of advancing the nursing workforce. It is suggested that the programme team could look at other countries' advancements and determine for Lithuania what aspects of advanced nursing would be most beneficial e.g. specialist nursing, management and leadership or research. This would allow them to ensure that the LOs of the programme were more appropriate for masters level nurses in Lithuania and then

construct the LOs around this aim. The students that the evaluation team spoke to indicated that if they were to recommend any changes to the programme it would be more emphasis within the programme aims and LOs about leadership principles and the innovation of nursing. They felt that these principles were within the current programme but that this was not reflected within the aims, MO's and module titles.

Despite this apparent lack of scoping in terms of need for advance practice the social partners and students were very complementary about their involvement in the evaluation and development of this programme and felt that the aims and LOs of the programme was suitable for them as employees and employers. The skills mentioned above e.g., leadership and innovation were seen as key to the advancement of nursing.

As per the recommendations of the previous evaluation team it was felt that the academic level of the LOs within the documentation needs to be reviewed for second cycle studies as some of them are more appropriate for first cycle studies e.g. A2 (Ability to apply models), B1 (identify and raise research problems), .E1 (the ability to work in a groups). Additionally it was identified that the content of the programme (module content and assessment) did not align with the aims and LOs stated. This will be discussed within section 2 of this report more explicitly.

## ***2. Curriculum design***

The curriculum of the study programme is based on national and international requirements for nursing and second cycle study programmes and complies with the Bologna Declaration (1999). The curriculum team stated within the SER that took on board the comments of the last evaluation team who stated that the learning outcomes were too ambitious. In attempt to address these comments they aligned the revised the new learning outcomes with the necessary higher regulatory documents and international requirements for nursing. However as has been described in the previous section further work needs to be undertaken to ensure that the revised learning outcomes are at the correct academic level for second cycle studies.

The modules within the programme are not repetitive in their content but in the SER Table 8 (The links between the learning outcomes of the study programme and of the courses) indicates that the programme team need to spend more time aligning the module content with the LOs of the programme. For example: Some of the core LOs; E3 (ability to take responsibility for the quality of one's own subordinates' performance) are not aligned to any modules that are delivered within the programme. Also, there are two LOs (C1; C4) which are aligned with one

course/module only. Thus, the integration between courses need to be enhanced too. Additionally it is challenging to identify how some of the assessments that are used within some of the module. For example, in the module Clinical nursing one of the course LOs that are assessed is: The ability to assess the data of the clinical nursing process, to take decisions in the case of new causes, and to understand the principles of advanced nursing. The programme learning outcomes that is also assessed is: „The ability to integrate the knowledge generated by means of independent applied research into the practice of nursing and to assess its potential impact on professional activity.” It is not easy to understand how an exam or group work can assess these types of skills. It is this lack of alignment between the LOs, module content and the methods of teaching and assessment needs to be addressed to ensure that the programme demonstrates continuity for the effective development of advanced nurses.

This lack of alignment within the curriculum applies to both theory and practice. Practice is mentioned throughout the SER but when questioned it was hard to identify the exact nature of this practice element in this programme and the linkage to the LOs. It would be beneficial if into the future the curriculum had a clear statement of what, where and when the practice element of this programme is delivered and what alignment it has with the LOs. There was no consistency from the students or teaching staff about the exact nature of the practice element of this programme.

The team need to be commended on the introduction of this programme to the University as it is enabling the capacity and capability of nursing leadership to be developed within the region and country. It is identified that they acknowledge the importance of developing the advanced nursing workforce but consideration needs to be given to the aspects of advanced nursing the programme is developing e.g. leadership and management, education, specialist practice or research. Currently the programme is generic in nature and this dilutes the impact that the programme has on advancement of nursing practice and consequently patient care.

### ***3. Staff***

The staff at KU is competent to successfully deliver the Master's programme. There has been significant investment in DN to change the profile of the staff from being medically and/or science orientated to having a nursing background. This has had a positive impact on the curriculum and has ensured that the DN is now in a transitional stage of its development. This was very apparent to the evaluation team during their visit. In terms of master's programme it is

important that there continues to be investment in highly qualified nursing staff and consideration should be given to staff exchange so that the curriculum can be influenced by nursing leaders from other countries via staff exchange programmes. The ratio of staff to students is very good (1:12) and the student/staff relationship was reported as excellent by all interested parties.

The academic staff has been recruited on the basis of the teacher's research field, scientific publications and the expertise of pedagogical work. (2 PhDs in Nursing, 1 PhD student in Nursing, 1 PhD student from education). Subject studies: 86,6% is taught by the 18 PhDs, 2 of them has PhD in nursing. List of academic staff, there are 1 PhD in Nursing and one teacher who is a doctoral student in Nursing, other teachers are having their PhDs from other sciences, mostly from biomedical sciences. There are 20 teachers implementing the programme. 16 teachers (4 full-time, 12 par-time) are from the department of nursing (they occupy 2,29 positions). 4 teachers are from other departments, 1 visiting teacher from Tampere. Most of the teachers (8) are 45-54 years old.

For the MA programme it is imperative that students have access to research opportunities and it was reported that all students have access to the staff's research activities and can if appropriate integrate these interests into their studies. The staff all demonstrate pedagogical and research competence in terms of publications, attendance at conferences and most of this activity aligns with the module topics within the programme.

KU supports the professional development of its teaching staff in terms of teaching and research. It offers staff the possibilities to attend international conferences, to write textbooks, participate in internships and to write and defend scientific research papers. Every 5 years staff need to demonstrate their capability (60 hours of certified Continuous Professional Development) to be able to hold their position. Between 2010 and 2013 almost all the teachers improved their pedagogical qualifications by attending courses or seminars according to their interests, and they have been financed from various university and European funding sources. It was noticed by the evaluation panel that most of the staff development has been research focused and/or focussed upon staff personal interest. What was unclear was how staff development aligned itself with the development of the nursing departments and its educational provision. There was lack of reference to how the studies advanced the art and science of nursing and advanced nursing research.



The current staff is competent and adequate to deliver the MA in nursing but it is recommended that KU identify the area of advanced nursing practice they would like their programme to focus upon and then identify partners or staff exchanges that could allow this to happen from a nursing focus. This will significantly expedite the development of the curriculum and advancement of nursing practice in Lithuania.

#### ***4. Facilities and learning resources***

Through a campus tour the evaluation team were able to assess that the facilities, equipment and teaching materials were suitable and adequate for the provision of the programmes. There were areas where the evaluation panel felt there could be more investment to improve this for the staff and students into the future.

All the necessary study materials for the MA are available for students in the KU Library or in the methodological centre but the majority of these are in Lithuanian. It is recommended that scientific articles on contemporary researches of nursing practice in the Lithuanian and English language should be added to the present collection of principal and supplementary literature of study field subjects. Consideration should be given also to updating texts to the most recent editions where knowledge has advanced and perspectives regarding nursing theory and practice have changed. This recommendation is specifically relevant to clinical subjects where the role of nursing should be more incorporated.

In many subjects the number of textbook copies are limited (1-10) but students indicated that they had good access and that the shortages of literature in the traditional format are compensated for by the subscription to e-books and databases. There is free on line access to full text articles for all students and teachers. The databases and subscribed periodicals (in Lithuanian and English) are appropriate for providing education and research of nursing at Master's level.

#### ***5. Study process and student assessment***

Students are admitted to the Masters in Nursing at the Klaipeda University through assessment of their achievement at undergraduate level in accordance with University and National regulation, applicants must complete a BSc in nursing at a university or complete a professional Bachelor plus 60 credits of further study. The School has applied a slightly higher minimum threshold that indicated by the national regulator and this is permitted. There was a high attrition

rate identified for the MA programme by the evaluation team and it was identified that this was for financial reasons. Despite the fact that the SER identifies a clear support for students including state funding and motivational and other grants for those who may not be eligible to receive such funding.

Although the organisation of the MA Nursing programme has been revised since the last evaluation e.g., there are more nursing qualified teachers on the programme, it is recommended that the team at KU make further changes to this programme to meet patient and social partner needs. The percentage of hours spent face to face, undertaking independent learning and in clinical practice work is not clear within the SER and could not be adequately established during the site visit. It is recommended that the aims and contributions of each of these elements of the programme are established to ensure that the balance is correct to achieve the programme LOs.

The level of academic and student support provided to students is sufficient to ensure a good pass rate. Students have a close relationship with the teachers and they indicate that they are readily available when support is needed. The social support provided to students is well evaluated and appears well organised.

There is no evidence of how the practice component of the Master in Nursing is assessed nor how the mentors in practice assess students. However, as detailed in Section 2 the practice component of this programme needs to be made clear. Do students need to undertake clinical practice to complete this programme successfully or is this an option for them.

The assessment system is clearly identified and there are clear structures for supporting failing students. The University also offers guidance for schools about academic integrity including ethics, misdemeanours and plagiarism.

The social partners were extremely complementary about the KU programme and its graduates. They feel that the students are prepared with the correct, knowledge, skills and competence for practice and their roles within hospitals and community. The close relationship between the social partners and the University is extremely beneficial and students appear to benefit from this immensely. In the future it will be interesting to see if the advancements in the programme are preparing the advanced nursing workforce.

## ***6. Programme management***

The programme is managed at four levels however from the discussion with the evaluation team all involved with this process seem very clear about their roles and responsibilities and consequently an student or administrative issues can be dealt with effectively. The actual monitoring of the MSc nursing programme happens within the Department of Nursing and the collection and analysis of the data is regularly collected and analysed. Most important is that the results of this data analysis informs the programme development and social partners and students are very aware that their feedback is used to improve the programme where possible

The data about the programme in a number of ways: questionnaires, meetings, surveys and via student representative. The students and staff are all very aware of the processes that they can use to provide feedback. The social partner feedback is collected through close relationships, collaborative ventures, involvement in student assessment and meetings. Social partners are also very aware of this process and feel fully engaged.

There are frequent meetings of the programme team about student issues and progress and student attendance is monitored closely. Evaluation happens frequently and is collected from students, staff and social partners. Evaluation of this data collection happens and action is taken promptly if necessary. There have been many changes made to the programme in light of feedback and this should be commended.

The processes and procedures used with KU for programme management seem to be very clear and transparent however as the programme still needs further development (as detailed in sections 1 & 2 of this report) the evaluation team would suggest that there needs to be a review of the stakeholders that are involved in this process. It is suggested that the team at KU make more use of their visiting scholars and external partners (outwith Lithuania) to seek some advice on the development of the programme. As indicated earlier consideration needs to be given to the aspects of advanced nursing the programme is developing e.g. leadership and management, education, specialist practice or research. Currently the programme is generic in nature and this dilutes the impact that the programme has on advancement of nursing practice and consequently patient care. It is felt that if the team at KU would expand the scope of the individuals that they involve in the evaluation of the programme its advancement would be more advantageous for all involved.

The processes for change do not appear to be lengthy and overall there is a high level of satisfaction with the management of the programme.

### III. RECOMMENDATIONS

1. Future reports need to be completed accurately and reflect the activity of the department to prevent detrimental evaluation feedback.
2. The transition of the nursing programme needs to continue and the focus of the programme needs to be determined through a review of nursing practice and patient need.
3. The linkage between aims, learning outcomes and module content needs to be aligned to ensure that there is a holistic programme delivered to students.
4. It would be beneficial if into the future the curriculum had a clear statement of what, where and when the practice element of this programme is delivered and what alignment it has with the LOs.
5. Ensure teaching and learning materials are up-to-date, and implemented into the study programme, particularly books and journal articles on nursing.

### IV. SUMMARY

In summary there are many positive aspects that can be expressed via this evaluations. The team are taking great steps to take the programme from being 'medically dominated' to being nursing programme led by nurses and incorporating nursing principles and this is evidenced in increasing number of academic staff with higher qualification in the subject area of nursing and increase in nurse led teaching and learning, Nursing being core to the focus and topic of final theses.

The level of student and social partner engagement is very positive and the student/staff ratios are to be commended. The students feel very well represented within the Department and have positive experience in terms of 'being heard'. Staff are also engaged positively in the transition of the Department and they have great enthusiasm to be involved in this process. There may be a need for pedagogical development of these staff into future to ensure that they are suitable for this new 'era' of the department.

However, it should be also mentioned that the SER was very badly written and they did not reflect any of the positive activity within the Department. The report could have been extremely detrimental to the department in terms of this evaluation.

Overall there is a need for the transition of this programme to continue so that nursing becomes core e.g. nurses teach all of the theory modules using up to date literature and standards, theory modules all relate to nursing as opposed to medicine, the embedding of nursing principles using recent evidence based literature. In addition programme team needs to consider the expertise of the programme in terms of leadership, management or clinical expertise and ensure that this is a focus for the programme.

## V. GENERAL ASSESSMENT

The study programme *Nursing* (state code – 621B70003) at Klaipeda University is given **positive** evaluation.

*Study programme assessment in points by evaluation areas.*

No.	Evaluation Area	Evaluation Area in Points*
1.	Programme aims and learning outcomes	2
2.	Curriculum design	2
3.	Staff	3
4.	Material resources	3
5.	Study process and assessment (student admission, study process student support, achievement assessment)	3
6.	Programme management (programme administration, internal quality assurance)	2
	<b>Total:</b>	<b>15</b>

\*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:

Prof. Dr. Lynn Kilbride

Grupės nariai:

Team members:

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Ms. Kristi Toode

Ms. Laura Žlibinaite

**KLAIPĖDOS UNIVERSITETO ANTROSIOS PAKOPOS STUDIJŲ PROGRAMOS  
SLAUGA (VALSTYBINIS KODAS – 621B70003) 2014-06-30 EKSPERTINIO  
VERTINIMO IŠVADŲ NR. SV4-381 IŠRAŠAS**

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**V. APIBENDRINAMASIS ĮVERTINIMAS**

Klaipėdos universiteto studijų programa *Slauga* (valstybinis kodas – 621B70003) 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	2
	<b>Iš viso:</b>	<b>15</b>

\* 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)

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**IV. SANTRAUKA**

Šiame vertinime pastebėta daug teigiamų aspektų. Studijų programos komanda imasi puikių veiksmų, kad studijų programa, kurioje dominuoja medicinos dalykai, taptų slaugos studijų programa, kuriai vadovauja slaugytojai ir kurioje vadovaujama slaugos principais. Tai patvirtina didėjantis akademinio personalo su aukštesne kvalifikacija slaugos srityje skaičius, auganti dėstymo ir studijų, kurioms vadovauja slaugytojai, dalis bei tai, kad studijų programos ir baigiamojo darbo dėmesio centre yra slauga.

Studentai ir socialiniai partneriai labai tinkamai įtraukiami į studijų programą, o studentų ir personalo santykis – pagirtinas. Studentai mano, kad jiems labai gerai atstovaujama Katedroje ir mano, kad jų nuomonė išklausoma. Personalas taip pat aktyviai dalyvauja Katedros pertvarkymo procese ir jis labai entuziastingai nusiteikęs šiuo klausimu. Ateityje gali tekti kelti personalo pedagoginę kvalifikaciją, siekiant užtikrinti, kad jie tiktų darbui šioje naujoje Katedros „eroje“.

Vis dėlto taip pat reikėtų paminėti, kad Savianalizės suvestinė labai prastai parengta ir joje neatsispindėjo jokia teigiama Katedros veikla. Dėl tokios Savianalizės suvestinės Katedra galėjo sulaukti itin neigiamų pasekmių šiame vertinime.

Apskritai reikia toliau keisti šią studijų programą, kad ji būtų sutelkta į slaugą, pavyzdžiui, slaugytojai dėstytų visus teorinius modulius, naudodami naujausią literatūrą ir slaugos standartus, visi teorijos moduliai būtų susiję su slaugą, o ne medicina, į juos būtų įtraukti slaugos principai, kuriuose naudojama naujausia įrodymais pagrįsta slaugos mokslo literatūra. Be to, studijų programos komanda turėtų apvarstyti studijų programoje įgyjamas lyderystės, vadybos arba klinikinę kompetencijas ir užtikrinti, kad joms studijų programoje būtų skiriama daugiausiai dėmesio.

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### III. REKOMENDACIJOS

1. Ateityje savianalizės suvestinės turi būti tikslios ir atspindėti Katedros veiklą, kad būtų išvengta neigiamų vertinimo pasekmių.
2. Reikia toliau keisti studijų programą *Slauga* ir atlikus slaugos praktikos ir pacientų poreikių analizę nustatyti, į ką studijų programą sutelkti.
3. Reikia susieti tikslus, studijų rezultatus ir modulių turinį, siekiant užtikrinti, kad studentai studijuotų holistinėje studijų programoje.
4. Būtų naudinga, jeigu ateityje studijų turinyje būtų aiškiai nurodyta, kokia šios studijų programos praktika vykdoma, taip pat kur ir kada ji vykdoma bei kaip ji susijusi su studijų rezultatais.
5. Užtikrinti, kad dėstymo ir studijų medžiaga, ypač knygos ir žurnalų straipsniai apie slaugą, būtų naujausia ir naudojama studijų programoje.



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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)