



## OVERVIEW REPORT FOR *Rehabilitation* STUDY FIELD

*Year of Evaluation 2015*

### INTRODUCTION

This report is based on the external quality evaluation of the following study programmes in the study field of *Rehabilitation* in Lithuanian Higher Education Institutions: at *LITHUANIAN UNIVERSITY OF HEALTH SCIENCES, OCCUPATIONAL THERAPY (state code - 612B32001) and PHYSIOTHERAPY (state code - 612B31002)* and at *VILNIUS UNIVERSITY- OCCUPATIONAL THERAPY (state code - 612B32001, PHYSIOTHERAPY (state code - 612B31001) and REHABILITATION (state code - 621B30001)*.

The external evaluations were organised by the Lithuanian Centre for Quality Assessment in Higher Education (SKVC).

The external evaluations were performed according to the evaluation areas and criteria: (1) Programme aims and learning outcomes, (2) Curriculum design, (3) Teaching staff, (4) Facilities and learning resources, (5) Study process and students' performance assessment, and (6) Programme management.

Comprehensive external evaluation reports including strengths and weaknesses and concluding with some recommendations were prepared for each evaluated programme and included evaluation marks. This overview focuses on the main findings of the external evaluation of the *Rehabilitation field* from a general point of view.

Four of the programmes received *positive* evaluation and *one* programme received negative evaluation.

*Overall observations by the review team regarding the most positive aspects of the study field in Lithuanian HEIs as well as areas in need of improvement. The analysis should cover all 6 evaluation areas.*

### OVERVIEW BY EVALUATION AREAS

(1) **Programme aims and learning outcomes** of the five programmes that were evaluated were very variable and received scores from 4-1. The aims and learning outcomes of the 4 programmes were clear and expressed at the right level compared to similar programmes and requirements elsewhere. They are in general expressed in appropriate language and match the learning outcomes of the different study units, but some study units need further clarification to bring them into line with the aims of the whole programme. Also a review of current practices of the professions would help to update the learning outcomes and aims to better match the developing health, social and rehabilitation provision in Lithuania and wide world. Unfortunately the aims and learning outcomes of one of the programmes did not match the current requirements of level 7 studies in Lithuania or elsewhere and it was recommended to revise the ethos of this programme.

(2) **Curriculum design** in general are presented in detail and show logical progression of the studies. Aligning learning outcomes, content,

teaching and learning methods and assessment could be revisited in all the programmes in future developments. Different types of assessments to better facilitate student centred learning and represent real life situations could also be considered in the near future. In general the programmes are designed around medical and biological models of health and health care, and this could be looked into to take into account current approaches to health and health professions.

- (3) **Teaching staff** in general are highly qualified and from different professions and disciplines, providing students with expert input and variety of viewpoints. Integration of the subjects and disciplines in the curriculum may be compromised, but in general there seems to be a good communication and willingness to collaborate. In some of the courses more profession specific input is recommended and also academics from outside the home University would bring new and different ideas to the programmes. Continuing development of pedagogic knowledge and skills of academics to facilitate student centred learning, develop self directed, critically analytical graduate is highly recommended. Staff and student mobility is also encouraged the expand the knowledge and skill set.
- (4) **Facilities and learning resources** are in general good quality and continuing improvement seem to be taking place. Access to other facilities at the home University and placements could be encouraged further and inter professional learning, between these programmes and others e.g. medical and nursing students may also facilitate and improve integration.
- (5) **Study process and students' performance assessment** in general are well detailed and thorough. However the assessment formats do not always match the learning outcomes and could be more varied. Instead of closed examinations, students course work in different formats could be used more, and these could mimic real life situation and thereby help students to apply their knowledge and skills in practice.
- (6) **Programme management** in general seem to be robust and students are involved in the feedback and suggesting changes. However the feedback and input from staff and students could be communicated more at all levels and the loop of this feedback could be closed more explicitly.

## MAIN STRATEGIC RECOMMENDATIONS FOR THE IMPROVEMENT OF STUDY PROGRAMMES IN *Rehabilitation* STUDY FIELD

- **Strategic recommendations at institutional level (for Higher Education Institutions):** The programmes in general are in line with similar programmes in Europe. However a more current approach to these professions as autonomous health care providers, lifelong learners and members of multidisciplinary team could be integrated in the programmes. Adapting biopsychosocial and occupational theories in the programme developments may help to further develop the programmes and professions in Lithuania. Student centred, interprofessional, independent and blended learning approaches are also recommended in order to develop the courses to meet the future progress.
- **Strategic recommendations at national level (for the Ministry of Education and Science):** Above mentioned development at the institutional level, and more autonomy for institutions and professions to develop their education is recommended. This would facilitate faster

and more flexible development of programmes to meet the fast changing and rapid development of health care. Monitoring the number of programmes and students enrolled in these courses would also help to develop the programmes to higher level and secure high quality graduates and appropriate employment and career progression.

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