



CENTER FOR QUALITY ASSESSMENT IN HIGHER EDUCATION

EVALUATION REPORT
DENTAL HYGIENE STUDY FIELD
AT KLAIPEDA STATE COLLEGE

Review' team:

1. **Dr. Kevin John Davey (team leader)** *member of academic community;*
2. **Assistant Professor Sandra Ribeiro Graça,** *member of academic community;*
3. **Bo Danielsen,** *member of academic community;*
4. **Prof. dr. Vytautė Pečiulienė,** *representative of social partners';*
5. **Meda Vaitonytė,** *students' representative.*

Evaluation coordinator -

Dr. Ona Šakalienė

Report language – English

© Centre for Quality Assessment in Higher Education

Study Field Data

Title of the study programme	Dental Hygiene	Odontological care
State code	6531GX003	6531GX004
Type of studies	College studies	College studies
Cycle of studies	First cycle	First cycle
Mode of study and duration (in years)	Full-time - 3 (years)	Full-time - 3 (years)
Credit volume	180	180
Qualification degree and (or) professional qualification	Professional Bachelor of Health Sciences Dental Hygienist	Professional Bachelor of Health Sciences Assistant of the doctor odontologist
Language of instruction	Lithuanian English	Lithuanian
Minimum education required	Secondary education	Secondary Education
Registration date of the study programme	2008-06-26	2001-11-29

CONTENTS

I. INTRODUCTION	4
1.1. BACKGROUND OF THE EVALUATION PROCESS.....	4
1.2. THE REVIEW TEAM	4
1.3. GENERAL.....	5
1.4. BACKGROUND OF STUDY FIELD/STUDY FIELD PLACE AND SIGNIFICANCE IN HEI.....	5
II. GENERAL ASSESSMENT	6
III. STUDY FIELD ANALYSIS.....	7
3.1. STUDY AIMS, OUTCOMES AND CONTENT	7
3.2. LINKS BETWEEN SCIENCE (ART) AND STUDY ACTIVITIES	11
3.3. STUDENT ADMISSION AND SUPPORT	12
3.4. STUDYING, STUDENT PERFORMANCE AND GRADUATE EMPLOYMENT	16
3.5. TEACHING STAFF	19
3.6. LEARNING FACILITIES AND RESOURCES	21
3.7. STUDY QUALITY MANAGEMENT AND PUBLICITY	23
IV. RECOMMENDATIONS	26
V. SUMMARY	26

I. INTRODUCTION

1.1. BACKGROUND OF THE EVALUATION PROCESS

The evaluation of study fields is based on the Methodology of External Evaluation of Study Fields approved by the Director of Centre for Quality Assessment in Higher Education (hereafter – SKVC) 31 December 2019 Order [No. V-149](#).

The evaluation is intended to help higher education institutions to constantly improve their study process 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 field SKVC takes a decision to accredit study field either for 7 years or for 3 years. If the field evaluation is negative such study field is not accredited.

The study field is **accredited for 7 years** if all evaluation areas are evaluated as “exceptional” (5 points), “very good” (4 points) or “good” (3 points).

The study field is **accredited for 3 years** if one of the evaluation areas was evaluated as “satisfactory” (2 points).

The study field **is not accredited** if at least one of evaluation areas was evaluated as “unsatisfactory” (1 point).

1.2. THE REVIEW TEAM

The review team was completed according to the Experts Selection Procedure (hereinafter referred to as the Procedure) approved by the Director of Centre for Quality Assessment in Higher Education on 31 December 2019 [Order No. V-149](#). The Review Visit to HEI was conducted by the team on 24/11/2020. The review visit was organised online using video-conferencing tool (Microsoft Teams).

1. **Dr. Kevin John Davey , (group leader)** Associate Dean for Quality and Academic Standards Unit of Periodontology (Restorative), Dundee Dental Hospital and School, University of Dundee, Scotland;
2. **Assistant Professor Sandra Ribeiro Graça** Department of Dental Hygiene, School of Dental Medicine, University of Lisbon, Lisbon, Portugal;
3. **Bo Danielsen**, School Director of School of Oral Health Sciences, Faculty of Health and Medical Sciences, University of Copenhagen, Denmark;
4. **Prof. Dr. Vytautė Pečiulienė**, Director of the Hospital „Žalgiris“ klinika of the Vilnius University, Lithuania;
5. **Meda Vaitonytė**, student of Iscte - University Institute of Lisbon, 1st-year student of the Second Cycle Study Programme Psychology of Intercultural Relations. Portugal.

1.3. GENERAL

The 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.	Students dropout percentages: 2016-2019
2.	

1.4. BACKGROUND OF STUDY FIELD/STUDY FIELD PLACE AND SIGNIFICANCE IN HEI

Klaipeda State University of Applied Sciences (KVK) was established in August 2009 and provides college level higher education. KVK comprises of 3 faculties (Business, Technology and Health Sciences) and 10 departments, covering 25 study programmes across 21 study fields. KVK has 2288 students (October 2019), of which, 904 students belong to the Faculty of Health Sciences. Within the Faculty of Health Sciences, the Department of Oral Care has 2 programmes within the oral care study field, which are Dental hygiene (DH) and Odontological care (OC). The OC programme was established over 20 years ago, whilst the DH programme was introduced 12 years ago. Both programmes are 3-year full-time Bachelor degree level programmes amounting to 180 ECTS. The DH programme is taught in Lithuanian and in English. KVK is the only provider of oral care programmes in Western Lithuania. Both programmes were evaluated in May 2015 and accredited for 6 years.

II. GENERAL ASSESSMENT

Dental Hygiene field and **first cycle** at Klaipeda State College is given **positive** evaluation.

Study field and cycle assessment in points by evaluation areas.

No.	Evaluation Area	Evaluation of an area in points*
1.	Study aims, outcomes and content	3
2.	Links between science (art) and study activities	3
3.	Student admission and support	4
4.	Studying, student performance and graduate employment	4
5.	Teaching staff	3
6.	Learning facilities and resources	3
7.	Study quality management and publicity	4
	Total:	24

*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 evaluated very well in the national and international context, without any deficiencies;

5 (exceptional) - the field is exceptionally good in the national and international context/environment.

III. STUDY FIELD ANALYSIS

3.1. STUDY AIMS, OUTCOMES AND CONTENT

Study programmes' aims, outcomes and content shall be assessed in accordance with the following indicators:

3.1.1. Evaluation of the conformity of the aims and outcomes of the field and cycle study programmes to the needs of the society and/or the labour market (not applicable to HEIs operating in exile conditions);

The overall aim of the KVK oral care study field is to train DH and OC who are able to work either independently or in conjunction with dentists/other healthcare professionals, to provide evidence-based oral health interventions at both individual and community levels. These oral health preventive interventions are needed to reduce the relatively high levels of caries and periodontal disease in the population. Evidence is provided in the Self-Evaluation Report (SER) that the aims and learning outcomes of the programmes have been formulated in relation to the appropriate Lithuanian and European legislation, and guidance documentation.

Evidence in the SER and from the expert panel meetings demonstrate that there is good communication with the social partners, employers and alumni which help to ensure the graduate's competencies are fit for the needs of the labour market. For example, the social partners take part in annual discussions with the oral study field staff to discuss the competences of the DH and OC graduates. Evidence was also presented in the SER that these annual meetings results in changes to the programmes. For example, new teaching has been introduced into both programmes to improve communication skills and conflict management following feedback from the social partners.

One of the issues raised in previous inspection reports was whether the DH and OC programmes should be merged. This proposal was not supported by the Lithuanian Dental Chamber. Although this issue was not specifically discussed during the meetings with the expert panel, the information outlined in the SER provided sufficient justification that the two programmes should remain separate entities and are needed by the labour market.

It was apparent from both the SER and the expert panel meeting with the social partners, employers and alumni that there is still a very high demand for dental assistants. This demand is partly met by DH graduates working part-time as dental assistants, especially in the early years following graduation and in smaller dental practices. However, in 2019 KVK introduced a 1½ year intensive DH conversion programme for OC graduates. This was viewed as a positive change, although it is too early to ascertain the impact of this new programme.

3.1.2. Evaluation of the conformity of the field and cycle study programme aims and outcomes with the mission, objectives of activities and strategy of the HEI.

The aims of the programmes are clearly stated and align with the learning outcomes (see annex 2A and 2B) and these conform with the KVK mission statement "to develop a personality for meaningful activities by training highly qualified professionals capable of successfully adapting to the changing regional, national and European labour market".

Furthermore, the strategic aim of the oral care field is the “Ability to provide comprehensive, technologically and scientifically developed oral care services to patients with various needs”.

It was clear to the expert panel that KVK and the Health sciences faculty, which includes the oral care study field, have a very ambitious strategic vision. This was evident at the panel meeting with the senior management team, who outlined the future plans to have a very well equipped patient clinic, subject to the acquisition of a license, and to integrate artificial intelligence (AI) and robotics into oral healthcare. These plans would include the development of a joint laboratory to research and embed AI and robotic technologies into healthcare in general, including those related to the oral care field. This would lead to significant research relating to the oral care field, which would have a positive impact on both staff and students. The expert panel commend this ambitious plan, however, it must be sufficiently resourced in order to achieve its full potential.

3.1.3. Evaluation of the compliance of the field and cycle study programme with legal requirements;

The oral study field complies with the Lithuanian legal requirements relating to these studies, including those stipulated by the Minister of Education and Science (Order Numbers: V-1012 16/11/16 and V-1168 30/11/16) and the Law on the Recognition of Professional Qualifications Regulated by the Republic of Lithuania, Lithuanian Medical Standards MN 35: 2019 “Dental Hygienist” and MN 24: 2017 “Dentist’s Assistant”, Professional Standard for Healthcare and Beauty Services.

Both programmes are 3-year full-time (180 ECT), divided evenly across 6 semesters (i.e. 60 ECTS per year), which meets the ECTS requirements for a first cycle professional Bachelor degree. The programme also is compliant with the regulations in terms of: (i) number of ECTS credits directly attributable to the oral field study is greater than 120 credits; (ii) practical placements/internships = 35 ECTS credits (must not be less than 30 ECTS); (iii) number of credits for the final work = 9 ECTS (must not be less than 9 ECTS); (iv) proportion of research teaching = 10% (must not be less than 10% of the volume of the study subjects); and (v) proportion of lecturers with at least 3 years of practical experience in their subject = 74% DH and 72% OC (must not be less than 50%). The level of complexity of the qualifications for both programmes are at level VI in terms of both European and national requirements.

It is the expert panel’s opinion that the oral care study field is compliant with the legal requirements.

3.1.4. Evaluation of compatibility of aims, learning outcomes, teaching/learning and assessment methods of the field and cycle study programmes.

The programme learning outcomes (DH(7); OC(7)) define the knowledge, skills, attitudes and attributes required upon graduation and appear to conform to the Lithuanian regulatory requirements. Although, there is some inevitable overlap between the learning outcomes of the two programmes, there is sufficient difference in them to clearly differentiate the two programmes. The learning outcomes for each programme are clearly defined and have been mapped to the individual subject areas (annexes 2A and 2B) and there is evidence of constructive alignment between the learning outcomes, the teaching methodology and the assessments (annex 3). The learning outcomes for the DH programme include important

references to evidence-based preventive practice and being flexible in terms of changes in technology and service demands, however, it would be good to include an element of reflective practice (self-evaluation) in order to promote life-long learning. With regards to the OC programme ILOs, it would be worth considering including more references to evidence-based practice, changes in technology and reflective practice/life-long learning.

There was evidence in the SER and from the meeting with the teachers and students that a variety of learning and teaching methods are used, many of which are student-centred in terms of both individual and group work, including elements of problem-based learning, situational analysis and simulation. There was clear evidence that the learning and teaching methods used help the students to link theory into practice. At the expert panel meeting with the students, they reported that they were very happy with quality of the teaching and the practice placements, and they found the teaching staff to be extremely approachable. They also reported that the course workload (learning and assessment) was sufficient to allow them to have enough free time to pursue leisure activities and work (voluntary or paid), although the programmes were more demanding at certain times of the year (e.g. in November).

A variety of assessment tools are used to provide evidence that the students have attained the learning outcomes (SER annex 3), and as previously stated, there appears to be good constructive alignment between the learning outcomes, teaching and the assessments. With the exception of the final theses and practical exams, , suggest that many of the written assessments are a mixture of multiple choice and short answer type questions. However, it was unclear from the SER or from the various meetings, the fine details of the subject-level assessments, such as the time allocation and how the pass marks were determined (i.e. whether standard setting procedures are used). It would be useful to have a brief summary of this information included in the annexes for future inspections. However, no concerns were raised by the students regarding the assessment processes and they were aware of the assessment criteria. Furthermore, the students reported that they received assessment results and feedback promptly and the feedback was very helpful in guiding their progression (i.e. feeding forwards).

3.1.5. Evaluation of the totality of the field and cycle study programme subjects/modules, which ensures consistent development of competences of students.

The study plans for each programme are shown in annexes 1A (DH) and 1B (OC), and the workload distribution (theoretical teaching, practicals, consultation hours, independent work and practice) across the academic years of the programmes are shown in Table 3. Generally, there is a change in emphasis across the programmes, from being more theoretical-based early on, to more practical-based in the later years. It is evident that the study subjects appear to follow a logical pattern, with the foundation basic science subjects being taught in semesters 1 and 2, followed by the professional related subjects across semesters 3-6. For example, in the DH programme the specialised practical teaching related to the practice of DH takes place in a series of modules, one per semester over years 2 and 3, called Professional DH modules 1 to 4. There is some evidence of a spiral-type curriculum, where subjects taught earlier in the programmes are developed further and integrated in later modules. Furthermore, there is evidence that the timing of some of the theoretical teaching is co-ordinated with its practical application. For example, in the OC programme, cross-infection teaching is co-ordinated with its application during the practice placements.

It was noted, however, that the formal teaching of Periodontology in the DH programme takes place in semester 4, which is after the some of the behaviour change, practical and practice elements relating to periodontology are taught. Consideration should be given to moving some of the teaching of Periodontology to earlier in the DH programme to help contextualise the teaching of associated subjects in semesters 2 and 3.

One of the outcomes of the previous inspection visit was the recommendation that the DH students were given more experience of working with more complex periodontal conditions. It has been noted in the progress report (annex 7) that the number of ECTS credits relating to the management of more complex periodontal cases has been increased from 6 to 8 ECTS. This change will help to address this issue. However, this issue was raised at the panel meeting with the social partners, employers and alumni. In particular, for the DH students to have more experience with working on more complex cases and working directly with a Periodontist. While the OC graduates stated they would have liked more experience with working with different dental specialists, such as orthodontists. Whilst acknowledging that it will take time for the measures already taken by the DH programme to increase the exposure of students to complex periodontal cases, further consideration should be given to further increase this experience and with working directly in conjunction with a periodontist.

3.1.6. Evaluation of opportunities for students to personalise the structure of field study programmes according to their personal learning objectives and intended learning outcomes.

Students are able to personalise the structure of their studies through the selection of a range of optional subjects (9 credits) from four semesters. These optional subjects are publicised on the KVK website and cover a range of subjects, not just related to the oral care field. Common subjects chosen by the students include “Stress and basics of self-regulation, Phyto therapy and Massage. Students who undertake an Erasmus+ foreign exchange also have an additional opportunity to individualise their studies depending on the opportunities available at the foreign institutions. There is some scope for students to gain credits for their studies carried out whilst on exchange.

3.1.7. Evaluation of compliance of final theses with the field and cycle requirements.

Nine ECTS credits are attributed to the preparation of the final theses and final examinations, which is in line with the regulatory requirements. KVK have clear regulations for the preparation and defence of the final theses, which are available on the Moodle virtual learning environment (VLE) and on the KVK website. The development of the final theses in the oral care field involves the students carrying out a literature search and analysing the relevant scientific papers in order to develop a research question for the study. Several of the studies had been commissioned by the social partners. Examples of final theses were available and a list of the titles of the final theses for the previous 3 years was provided (annex 5). The majority of the final theses appear to be directly attributable to clinical practice and the examples of the final theses supplied appeared to be of a high standard. The vast majority of students were awarded very high marks, typically between 8 (good) and 10 (excellent).

Recommendations for this evaluation area:

The expert panel commend the ambitious plans to develop a clinical practice facility on campus and to carry out cutting edge research in healthcare technology, however, it must be sufficiently resourced in order to achieve its full potential.

Consider changes to the programme learning outcomes to incorporate more reflective practice (self-evaluation) to promote life-long learning. Furthermore, consider more emphasis on evidence-based practice in the OC programme learning outcomes.

Consider moving some of the teaching of Periodontology to earlier in the DH programme to help contextualise the teaching of associated subjects in semesters 2 and 3.

Increase the opportunities for the DH and OC students to work with different dental specialist.

3.2. LINKS BETWEEN SCIENCE (ART) AND STUDY ACTIVITIES

Links between science (art) and study activities shall be assessed in accordance with the following indicators:

3.2.1. Evaluation of the sufficiency of the science (applied science, art) activities implemented by the HEI for the field of research (art) related to the field of study.

As stated in the SER, the aim of the KVK applied scientific activities is to develop applied research and experimental developments in the fields of technology, medical and health sciences, as well as natural sciences necessary for the region of Western Lithuania, to consult local government and economic entities, to carry out educational activities that enable the integration of scientific knowledge into studies. The Centre for Applied Research is responsible for the implementation of the KVK Strategic Action Plan programme “Development of Applied Research” and KVK has appropriate processes to ensure the development and on-going evaluation of their applied research activities (as detailed in the SER). For example, to ensure the ongoing adequacy of the level of applied research activity, KVK carries out annual quantitative and qualitative evaluations. In 2019, the quality of the applied research activities associated with the oral care field/dentistry was rated as being good. Furthermore, during the period 2017-2019 the performance evaluation of the department of oral care (based on indicators such as percentage of lecturers and students involved in applied research, numbers of publications, references in international databases, etc) rated the percentage of criteria met to be relatively high (80-85%).

The applied research related to the oral care study field is focussed on both the local needs in Western Lithuania and the KVK research priority of “Advanced applied technologies for personal, public health and social care”. Research studies have been carried in conjunction with various external partners such as social partners, including the local public health office, commercial companies and foreign academic institutions.

The expert panel recommend the continuation of the development of applied research activities with more collaborations both within KVK and internationally. This would help to improve both national and international visibility of the research through more publications in international journals, including joint papers with international partners. Increased research visibility would help attract international students (full-time and foreign exchanges) and help with the development of the proposed masters in DH programme.

3.2.2. Evaluation of the link between the content of studies and the latest developments in science, art and technology.

Students have the opportunity to experience innovations related to their studies through various educational workshops/lectures delivered by a range of dental companies and business representatives. Students also have the opportunity to apply some of these innovations to their practice. For example, students had the opportunity to use the mobile BOB app (Curaden Academy) for patient behaviour change. The use of this app was highlighted in a number of the meetings with the panel during the inspection.

Several examples were given in the SER of how the results of applied research are integrated into the study programmes. Students also have the opportunity to learn how to collect data using a standardised research methodology. Some of this data was used in the student's final theses. It is anticipated that the KVK's drive for more research in dental healthcare technologies will provide students with more opportunities to learn about and carry out research in this field as part of their studies.

3.2.3. Evaluation of conditions for students to get involved in scientific (applied science, art) activities consistent with their study cycle.

Several examples were provided in the SER on how students can undertake research and learn about research methodology as part of their studies (section 3.2.2), for example, students have the opportunity to take part in research during their internships. The main opportunity for students to undertake research is for their final theses and they have the opportunity to present their work at national and international conferences, including publications in conference publications. During the evaluation period, 8.4% of oral care field students had publications in 2017, 8.3% in 2018 and 5% in 2019. Measures have been taken to engage students in applied research by encouraging them to take part in various public health literacy initiatives, science festivals and through the KVK Young researcher school. Furthermore, approximately 10% of the oral care field students actively take part in the KVK student scientific society.

The expert panel acknowledge that there has been progress in increasing the involvement of students in applied research since the previous inspection. However, work should continue to further increase student involvement in applied research.

Recommendations for this evaluation area:

The expert panel recommend the continuation of the development of applied research activities with more collaborations both within KVK and internationally.

The expert panel acknowledge that there has been progress in increasing the involvement of students in applied research since the previous inspection. However, work should continue to further increase student involvement in applied research.

3.3. STUDENT ADMISSION AND SUPPORT

Student admission and support shall be evaluated according to the following indicators:

3.3.1. Evaluation of the suitability and publicity of student selection and admission criteria and process.

It was stated in the SER, and confirmed during the panel meeting, that the oral study field programmes are the most popular programmes in KVK. The admission criteria for the KVK oral care field programmes are reviewed and updated annually, and are available on the KVK website. Student selection is by competitive scoring and the required subjects for the oral care field are biology (primary requirement) and either chemistry, maths or information technology (secondary requirements). In addition to the competitive scores, additional points can be awarded for specific conditions and these are clearly outlined in the SER. These additional points are available for all types of funded places (i.e. state funded, non-state funded and scholarship). As an incentive to attract OC graduates with clinical experience to apply for the DH programme, an additional point can be awarded. This measure is to cater to the requirements of the labour market, who have a high demand for graduates with DH and OC skills. Similar requirements are used in the selection of international students based on the competitive score and evidence of motivation.

Data relating to the number of applicants was stated in the SER. Data from 2017 to 2019 show that there has been a reduction in the number of students choosing the DH and OC programmes as their first priority (2017: DH=48 OC=14; 2018: DH=49 OC=10; 2019: DH=23 OC=13). However, there were significant numbers of students who applied to these programmes in the remaining priorities. The overall numbers of students entering the oral field study programmes has remained relatively stable, although there was a dip in the number of entrants to the OC in 2019, especially in the non-state funded places (Table 4). To help address this trend, a fee reduction was introduced in 2020 for the OC programme non-state funded places, as well as a small fee increase for the DH programme non-state funded places.

Data relating to the competitive scores for the entrants was presented in the SER (table 5) and the oral care study field programmes have the highest average competitive scores of any programmes at KVK. The data shows an increase in the average competitive scores in both programmes over the period from 2017 to 2019, although there are large ranges in the competitive scores of the students (i.e. the difference in the minimum and highest scores). However, the trend shows that the minimum competitive scores for both programmes has generally increased during this time. No data was supplied to indicate whether there were any significant differences in the competitive score levels of the state and non-state funded places. Altogether, this data suggests that the academic ability of the entrants has improved, which will be a benefit to the profession.

The expert panel considered the admission process to be transparent, objective and the relevant information is freely available to the applicants.

3.3.2. Evaluation of the procedure of recognition of foreign qualifications, partial studies and prior non-formal and informal learning and its application.

The Study Quality Assessment Centre (SKVC) is responsible for the recognition of prior learning (RPL) with regards to foreign qualifications, and the KVK website has links to the relevant SKVC webpages. KVK has procedures for the recognition of partial studies from Lithuanian and foreign higher education institutions. Likewise, KVK has procedures for the

recognition for studies involving knowledge and skills (formal and informal) acquired through work either in Lithuania or abroad. These regulations may allow some individualisation of the study programme depending on individual circumstances. Data was provided in the SER with regards to the recognition of study results in the oral care field, however, this was mainly the result of the RLP for OC graduates entering the DH programme and the recognition of credits for students who have undertaken Erasmus+ exchanges. No information was supplied in the SER regarding the maximum volume of studies the KVK regulations allows with regards to the RPL.

3.3.3. Evaluation of conditions for ensuring academic mobility of students.

KVK offers opportunities for the oral field programme students to undergo academic mobility, mainly through the Erasmus+ mobility programme, the funding available for which has significantly increased over the evaluation period (KVK received 191,470 Euro in 2017 increasing to 452,525 Euro in 2019). The students are informed about academic mobility by a variety of means, including during the Spring and Autumn International Weeks, information on the KVK website, leaflets, information on social media and by students sharing their experiences of foreign exchange visits. Students are informed about the requirements, selection criteria, the list of institutions available for exchanges, recognition of learning whilst learning abroad, application process, etc. Furthermore, students are sent invitations to apply for Erasmus+ exchanges at least twice a year.

During the period 2016-17 to 2018-19, 37 oral care study students undertook part-time studies or internships of at least 15 ECTS credits, although no indication was given in the data presented in the SER regarding the distribution of students between the 2 programmes. These exchanges took place with higher education institutions in Italy, Portugal, Spain, Sweden and Turkey.

The KVK DH programme is available in English, however, this accounts for a small but increasing percentage of students in the oral care study field (2.1% in 2017-18 to 5% 2019-2020). Furthermore, it was apparent from the panel meetings that very few foreign students undertake exchanges at KVK. There is good information in English on the KVK website with regards to both full-time study and Erasmus opportunities at KVK. Furthermore, there are Erasmus network student mentors available in KVK to assist students on Erasmus visits to Klaipeda.

It was apparent during the expert panel meeting with the students, that they felt that they had sufficient information regarding student foreign exchanges (student satisfaction questionnaire results 2019: 4.58 DH and 4.47 OC out of 5) and those students who undertook exchanges found them to be an extremely valuable experience. However, many students felt that they lacked confidence in their ability to speak and write in English, and this was a barrier to them going on an exchange. The students confirmed that it was mandatory for them to have some competency in English to enter the oral care field programmes in order to be able to carry out literature searches using search engines, international journals and textbooks in English. The students on both programmes confirmed that they did have English language teaching in first year, however, they felt having it throughout the programmes would help to improve their skills and confidence.

In the meeting with the teachers group, the teachers reported that they felt that the student's lack of confidence in English was the main barrier for not taking part in academic mobility. However, the teachers stated that student's level of English was generally very good, both in terms of spoken and written English. However, one of the outcomes of the 2018 employers survey was the need for graduates to have more foreign language skills.

A significant issue raised during the panel meeting with the SER development group, was the current lack of a common European curriculum for the study programmes, which creates several academic issues with regards to student exchanges. Although students can be given credit for their studies abroad, students may be required to catch-up with teaching not covered during their exchanges. A proposed common European DH curriculum has been recently published, which might help to mitigate some of these issues.

The expert panel confirms that KVK takes various measures to inform, encourage and provide good opportunities for student mobility. However, following the previous inspection, when it was suggested that the student's confidence in English was a barrier to mobility, some additional measures (annex 7) have been taken. These included the recommendation that DH and OC students present reports at a public seminar and the encouragement of teachers to increase their competency in English through additional training. It is apparent that the student's lack of confidence in their English language skills is still a significant barrier to them undertaking exchanges and that further measures should be taken to overcome this issue. Possible solutions could be to have English language classes throughout the curriculum and require students to carry out more translations. Furthermore, encouraging more international students to study at KVK, full-time programmes and student exchanges, would promote internationalisation and encourage foreign language development.

3.3.4. Assessment of the suitability, adequacy and effectiveness of the academic, financial, social, psychological and personal support provided to the students of the field.

Although the details of the KVK support processes were not explicitly discussed in the SER, the links in the SER demonstrate that there is comprehensive information available regarding the various types of student support and how to apply/access these on the KVK website (psychological help, financial support, social scholarships and support for the disabled). Detailed information about the various types of financial support, including state subsidised loans, social and study scholarships, targeted benefits for disabled students and various other types of financial support are available on the KVK website. Data on the numbers of oral care field students accessing the various types of financial support is detailed in Table 7 of the SER. This shows that during the evaluation period, one-off incentive scholarships were the most common type of financial support. One oral care field student was awarded an annual scholarship to support the most talented students in Klaipeda. No concerns were raised with the expert panel by the students with regards to financial or social support.

Information in the SER, student satisfaction questionnaire (annex 9) and from the panel meetings with the students suggested that there are good levels of academic and personal support available to the students. The students reported in the meeting with the panel that the teaching staff were very approachable and they were happy to discuss problems with the staff. During the meeting with HEI learning resources group, it was confirmed that students are provided with 4-6 hours of teaching in 1st Year with regards to their introduction to studies and the use of the Library resources. In addition, there is further information on how to use the library resources online and library staff are available to help students with

research activities and their final theses. There is also clear information regarding access to career guidance, using the career management system, and accessing psychological help on the KVK website.

It is clear to the expert panel that the support services provided to the oral care field students is appropriate, readily available and effective.

3.3.5 Evaluation of the sufficiency of study information and student counselling.

The oral care study field students are provided with detailed information regarding their studies (study schedule, types of assessments, etc) during the first week at KVK. This is part of the First-year student adaption programme. In September, two meetings are held with the first year students to allow tutors to provide students with support during their transition to higher education.

Information is provided to students using a variety of resources, such as the VLE (Moodle), the KVK website, tutors, student representatives, etc. This was confirmed during the panel meeting with the students, who stated that the communication between the staff and students was good and regular meetings between staff and student representatives take place. The students were satisfied with the level of study information and counselling provided.

Recommendations for this evaluation area:

No recommendations

3.4. STUDYING, STUDENT PERFORMANCE AND GRADUATE EMPLOYMENT

Studying, student performance and graduate employment shall be evaluated according to the following indicators:

3.4.1. Evaluation of the teaching and learning process that enables to take into account the needs of the students and enable them to achieve the intended learning outcomes.

The learning and teaching carried out in the oral care study field is regulated by the Description of the Field of Study in Oral Care 2020 project. Information about the teaching and assessments is provided by the teachers at the start of each study subject and is made available on the VLE. It is evident that the study subjects follow a logical pattern, with the foundation basic science subjects being taught in semesters 1 and 2, followed by the professional related subjects across semesters 3-6. Various active student-centred teaching methods are used to engage students, including role-playing, discussions, reflection, creating posters and videos. In the majority of the oral care study field subjects, independent work is carried out in teams, which helps the students to achieve learning outcomes such as leadership. This was one of the recommendations of the previous evaluation in 2015. Independent work accounts for at least 30% of the study time. Various types of assessments are used to provide evidence of attainment of the learning outcomes and support learning through feedback. Student feedback questionnaires are used to help further develop the teaching in order to aid the achievement of the learning outcomes.

The students confirmed at the meeting with the expert panel, that they were aware of the assessment criteria and they found assessment feedback to be prompt and useful in promoting their future studies (feeding forwards). The students confirmed that they felt the teaching and learning facilities to be of a high standard and the staff were very approachable if

they had any problems. However, the panel found little evidence that students were given sufficient opportunity to give and receive feedback, which are important skills required for effective teamworking and life-long learning.

3.4.2. Evaluation of conditions ensuring access to study for socially vulnerable groups and students with special needs.

KVK has procedures to allow individualised study plans for students from socially vulnerable groups or with special needs. These students can also have individual consultations with staff, free study schedules and have alternative formats for completing study work. Detailed information regarding financial support is available on the KVK website, including additional financial support for studying abroad. Training for staff on how to increase the accessibility for students from socially vulnerable groups and special needs is available to staff. There were no students in the oral care field who had 45% or lower working capacity during the evaluation period, however, the KVK campus is designed to cater to the needs of disabled students (e.g. improved access and specialised learning equipment). The expert panel are satisfied that there is sufficient support for socially vulnerable students and those with special needs.

3.4.3. Evaluation of the systematic nature of the monitoring of student study progress and feedback to students to promote self-assessment and subsequent planning of study progress.

The progress of the oral care study field students is monitored at both faculty level and within the department of oral care. At the end of each semester student achievements are analysed in terms of each study programme and study subject, and the outcomes are presented to the faculty. Within the oral care field, student progress is analysed twice a semester and students have individual interviews with the head of department and lecturers in order to discuss their progress. Various methods are used to promote student self-evaluation, such as self-monitoring questions and tasks, to help students to monitor their own progress and aid motivation. Staff development training on the assessment of student progress was provided in 2018. At the student meeting with the expert panel, the students were satisfied with the timing, amount and quality of the feedback and the academic counselling they received from staff to aid their progress.

3.4.4. Evaluation of the feedback provided to students in the course of the studies to promote self-assessment and subsequent planning of study progress.

Students receive frequent feedback both individually and on a group basis, this may include verbal as well as written/online feedback. Feedback is provided during many aspects of the teaching, such as during practical classes and following submission of assignments (individual study) and assessments. Students are able to access assessment results and individual written feedback using the KVK Advanced Study Management System. The students confirmed in the panel meeting, that the feedback they received was useful for promoting their future learning. The expert panel were satisfied with the processes used to provide feedback to students, the methods used to promote self-assessment and support provided to students to ensure progress in their studies.

3.4.5. Evaluation of employability of graduates and graduate career tracking in the study field.

KVK gathers graduate employment and careers data using governmental sources (e.g. State Social Insurance Fund Board, Employment Service, Government Strategic Analysis Centre, etc) and from the KVK Career Management Information System (6 months and 12 months after graduation). The average employment rate for the oral field graduates a year after graduation (over the 3 year evaluation period) was 80.5%, with the employment rate for OC graduates (85.9% 3 year average) being higher than for DH (75.2% 3 year average). This latter point reflects the high labour market demand for dental assistants, resulting in many DH graduates working as dental assistants (albeit part-time) early in their careers. However, it was stated that the annual employment rate for the DH graduates had recovered to 93% after 2019.

The percentage of graduates who continue with their studies has decreased during the evaluation period (2017 = 9.3%; 2018 = 4.1%; 2019 = 2.5%). Data from the Government Strategic Analysis Centre showed that there have been a recent significant drop in the percentage of oral care field graduates working in their area of graduation after 1 year (2016 = 70%; 2017 = 74%; 2018 = 55%), although more recent data was not available in the SER. In response to this data, discussions were held between KVK, the largest oral companies in Western Lithuania and the Chamber of Dentists. The outcome of this meeting was that there are sufficient DH graduates, but incentives should be given to encourage students to study OC. No difficulties were reported in finding jobs by the graduates who attended the meeting with the expert panel. They stated that many graduates are offered jobs in the practices where they had their internships. Many employers request that the DH graduates work as part-time dental assistants, especially early on in their careers and in small practices where there isn't sufficient patients to employ full-time dental hygienists. One of the DH graduates reported that working as a dental assistant allowed her to learn more about the management of complex periodontal cases.

The social partners and employers confirmed, at the meeting with the expert panel, that the graduates have good levels of knowledge and are well trained. This was also confirmed in a recent questionnaire where employers reported that knowledge and skills of the graduates met the needs of the employers (DH = 4.3; OC = 4.13 out of 5). Furthermore, they reported an improvement in the competencies of the graduates over recent years. However, they reported that students should receive more communication training and practical work, including in relation to more complex periodontal cases and with working in conjunction with a periodontist. Similar comments were made by the DH graduates, who were unsure of when to refer patients to a periodontist. The OC graduates requested better training in working with various dental specialists, such as orthodontists. Both the social partners/employers and the graduates stated that there was very good lines of communication with KVK and there was evidence that KVK used their feedback to help to improve the programmes. The graduates stated that KVK keeps in touch with them for a long time after graduation and they are surveyed regarding areas of improvement with regards to the study programmes. For example, new subjects have recently been added to the programmes following feedback from the employers and graduates including communication psychology and conflict management, and working with patients with special needs.

One of the outcomes of the KVK graduate surveys was that graduates would like to be able to undertake a masters programme in DH at KVK. This was confirmed at the graduate meeting,

where it was reported that several graduates had completed masters programmes, usually in public health, at other institutions. The graduates supported the desire for KVK to develop a DH masters programme. Furthermore, the social partners and employers also supported this development.

It was clear to the expert panel that there is good employability of oral care field graduates, especially for the OC programme, although many DH graduates are working as dental assistants. It was stated in the SER that graduates are surveyed at 6 and 12 months after graduation, it would be worth considering longer term monitoring of graduate's career progression. However, it is clear that there are very good lines of communication between the KVK and the social partners, employers and graduates, which results in the continued development of the oral care programmes.

3.4.6. Evaluation of the implementation of policies to ensure academic integrity, tolerance and non-discrimination.

The KVK Code of Academic Ethics is the key policy document which establishes the principles of academic integrity, tolerance and non-discrimination, and is applicable to all staff and students. All students are also required to sign the KVK Student Declaration of Academic Integrity agreement. Clear processes are in place to ensure the integrity of the assessment processes, including the submission of the final theses. Between 2017 and 2019 there were no complaints regarding violations of academic integrity, however, one KVK student was expelled in 2020 on the grounds of a violation of academic integrity. The expert panel confirms that the policies which ensure academic integrity, tolerance and non-discrimination are transparent, fair and are fit for purpose.

3.4.7. Evaluation of the effectiveness of the application of procedures for the submission and examination of appeals and complaints regarding the study process within the field studies.

The KVK Appeals and Complaints Procedure outlines the submission and examination appeals and complaints processes. There have been no submissions over the last 3 years. The expert panel confirms that the procedures for the submission of examination appeals and complaints are transparent, fair and are fit for purpose.

Recommendations for this evaluation area:

No recommendations

3.5. TEACHING STAFF

Study field teaching shall be evaluated in accordance with the following indicators:

3.5.1. Evaluation of the adequacy of the number, qualification and competence (scientific, didactic, professional) of teaching staff within a field study programme(s) at the HEI in order to achieve the learning outcomes.

There is a total of 28 lecturers in the oral care study field (2019-20), of which 19 have been employed for at least 3 years (>50% full-time). At least 68% of the teachers, over the last 3 years, have worked at least 0.5 full-time equivalence (FTE) (see Table 10). Fourteen percent of staff are graduates of the KVK oral care field. The staff include assistants (5%), lecturers

(74%) and associate professors (21%), who have a large range in teaching experience (3 to 39 years; average 13 years). Annex 4 provides a list of staff, details of their academic backgrounds, including whether they have pedagogical or scientific qualifications, and their recent most significant publications, but does not list their actual qualifications. Although not stated in the SER, there appears to be at least 4 staff members in the oral care field, out of the 19 listed in annex 4, who have PhDs (the staff list is incomplete). However, it was stated at the panel meeting with the senior management team that currently 22% of the oral care field staff have PhDs and the plan is to increase this in the future. This would help to increase the research potential of the department, although the ambition is the production of high quality research rather than quantity.

In 2019-2020 there were 164 student enrolled in the oral care field (DH=95 students including 8 international students; OC=69 students) with 28 lecturers assigned to the DH programme and 23 to the OC programme (overall lecturer-student ratio of 1:5.86). In terms of the teaching staff, the teacher-student ratio is 1:16:8 for the DH programme, 1:14.24 for the OC programme and 1:16.4 for the oral care study field. The workload of staff varied from 0.5 to 1.5 FTE, with an average of 0.74 FTE.

Sixty four percent of the oral care field lecturers are directly involved in the teaching of the international students on the DH programme. Feedback indicates that the international students are satisfied with the quality of most of the teachers involved in the English language DH programme. With the aim of the oral care field to attract more full-time international students and foreign exchange students (Erasmus+), it is important that the standard of the English language competencies of the teachers continues to improve. To aid this ambition, there is a plan to employ at least one foreign lecturer annually to help increase the internationalisation of the oral care field.

The expert panel confirm that the composition of the academic staff complies with the legal requirements and is sufficient to ensure the appropriate attainment of the learning outcomes.

3.5.2. Evaluation of conditions for ensuring teaching staffs' academic mobility (not applicable to studies carried out by HEIs operating under the conditions of exile).

The academic mobility of staff is carried out in accordance with the KVK Erasmus+ mobility programme co-ordination procedure (30th Jan 2017) and the International Strategy of KVK 2018-2020 (26th Jan 2017). All lecturers have the opportunity to apply for academic mobility and a grant is awarded for the time away. Destinations for academic mobility include various academic institutions in Italy, Portugal, Spain, Sweden and Turkey. It evident from the SER and from the expert panel meetings, that a significant number of oral care field staff undergo academic mobility (13%-25% during the evaluation period) and smaller numbers of foreign staff visit the department. However, staff visiting in the wider Faculty of Health Sciences also contribute to the teaching of oral care study field students.

It was stated in several of the panel meetings and in the SER, that one of the positive consequences of the Covid-19 pandemic was the ability to have foreign lecturers to take part in remote teaching on the programmes. For example, a dental hygienist from Italy provided practical online training to the first year DH students on the use of smart technologies to help motivate patients to carry out more effective oral care. Student feedback following these events was very positive.

3.5.3. Evaluation of the conditions to improve the competences of the teaching staff.

KVK ensures the systematic and continuous improvement of the teaching staff competences in accordance guidelines for the development of teacher's competences in HEIs (order no. V936 – 19th June 2020). The annual review procedure to assess staff development needs is outlined in Figure 3 of the SER, which involves an annual interview with the head of department to discuss areas for development/improvement of qualifications. At the panel meeting with the teaching staff, it was confirmed that the senior management are helpful in facilitating continued staff development (KVK development courses, conferences, study time doctoral studies, etc).

KVK provide a variety of pedagogical training events which oral care study field staff are encouraged to attend, especially new staff. For example, oral care study field staff attended courses on improving teacher's didactic competencies (14% of staff), coherence of the subject description in the study programme (37%) and assessment of student progress (37.5%). Furthermore, as a result of the Covid-19 pandemic, additional training resources were made available to help staff become proficient in the use of different online teaching platforms (IT seminars, online material, weekly IT drop-in sessions, etc). The teachers reported to the panel that they initially had some challenges in producing and storing videos/podcasts, but the IT help provided was useful. The teachers also reported that a positive outcome of the move to distance learning was that it allowed practitioners to view some of the teaching. The details of the additional resources made available to the teachers to aid the move to distance learning was confirmed during the meetings with the senior management and the HEI learning resources groups.

The expert panel confirms that there are appropriate procedures to ensure the continued development of teacher's competencies. However, as stated in section 3.5.1., there is a need to encourage teaching staff to enhance their foreign language skills, especially in English.

Recommendations for this evaluation area:

The expert panel supports the ambition to increase the number of oral care field staff who hold PhDs, especially the DH staff.

As with the previous inspection report, further development of the English language competency of the staff is required to encourage more international full-time students and foreign exchange students to visit KVK. This would also encourage students to improve their competence and confidence in English/foreign languages.

3.6. LEARNING FACILITIES AND RESOURCES

Study field learning facilities and resources should be evaluated according to the following criteria:

3.6.1. Evaluation of the suitability and adequacy of the physical, informational and financial resources of the field studies to ensure an effective learning process.

There are seven auditoriums, six can accommodate 40-60 students and one 40 students, and a hall (90 students), available for theoretical teaching in the main oral care study field building. The information in the SER and photographs/videos demonstrate that these teaching rooms have appropriate IT facilities for learning and teaching and are fit for purpose. Furthermore,

there are ten fully equipment dental units/workplaces, a sterilisation training unit and a pre-clinical training laboratory. The photographs and videos demonstrate that the dental equipment is of a high standard, appears to be well maintained and is appropriate for the training of both the DH and OC students. Furthermore, there is evidence of good dental educational material, dental instruments, dental materials, oral hygiene products and oral hygiene instruction aids, etc. Evidence is also provided in the SER that there is continued funding for repair and upgrading of the facilities (e.g. purchase of new ultrasonic scalers during the evaluation period).

Within the main oral care study field building there are two information research laboratories equipment with 14 and 17 computerised workstations used for teaching. There is an appropriate range of software available including statistical packages, such as SPSS 19. Students also have online access elsewhere on the campus, including the library and within the KVK dormitories. Although there are currently no students with significant disabilities, the information technology laboratory has one workstation with a computer designed for the visually impaired.

Some elements of student practice, such as oral disease prevention, takes place in schools and pre-schools in conjunction with the local Klaipeda public health offices. Practice internships take place in a number of local dental clinics, many of which are modern and well equipped, one of which was visited during the previous inspection in 2015. Furthermore, detailed information and pictures of the Lela dental centre were available in the SER. This provided evidence of the high quality dental and educational environment available at this centre. OC students can also have placements at the Klaipeda orthodontics centre and experience working in a specialist centre. No details were available in the SER to indicate whether all OC students have the opportunity to visit the orthodontics centre, the desire to have orthodontic experience was mentioned by the OC graduates in their meeting with the expert panel. The expert panel, however, were unable to find a clear policy with regards to the calibration of mentors or the standards expected during internship (numbers and complexity of patients, and the consistency of assessment and feedback).

As discussed in section 3.1.2. there are plans to build a well-equipped patient treatment clinical facility, subject to the acquisition of the appropriate licenses. This would greatly improve the student's educational experience and patient selection (in terms of complexity and types of disease), as well as making consistency of clinical assessment and feedback easier. It would also be a more attractive facility for international full-time students and foreign exchange students.

The KVK library has facilities in the three KVK faculties and publications applicable to social sciences, technology, and medicine and healthcare. There is an independent study centre with 6 reading rooms and 283 workstations, 106 of which have computers. There is an extensive library catalogue which is available within the libraries and online, and the library computers have specialist software for special needs/disabled students. The Faculty of Health Sciences library has 57 workplaces, 25 of which have computers. There are 127 copies of books relating to dentistry and 16 periodicals, and there are also a wide range of books and periodicals available relating to healthcare sciences. Some resources are in Lithuanian and others are in English. Access is also available to a number of databases, e-journals and e-books. The library also provides a variety of additional teaching material online and provides

individual guidance with regards literature searches and for the preparation of the final theses.

With regards to the move to distance learning due to the Covid-19 pandemic, it was confirmed in the panel meetings with teachers and HEI learning resources groups that additional IT support was made available to the staff to help with the transition of distance learning. This included access to IT support from home, Feedback from the staff and students was generally positive with regards to the move to distance learning, with students being able to access the teaching material using computers or their phones. A positive outcome of this situation was the online teaching carried out by academics from foreign institutions, which is hoped to continue in the future.

Feedback from the meeting of the panel with the students and the student satisfaction questionnaire (annex 9) demonstrated that they were very happy with the learning facilities and resources available to them. The only negative comments made by the students were regards to some of the KVK leisure facilities. The panel were satisfied that the learning facilities and resources were suitable for achieving the learning outcomes.

3.6.2. Evaluation of the planning and upgrading of resources needed to carry out the field studies.

The long and short-term requirements for the oral care study field programmes are discussed within the department and take account of student feedback and the depreciation of assets. This information is used to develop a priority list which guides the annual procurement plan.

The key development currently, is the purchase of a hygiene passport for oral care services and the associated certification to allow DH students to provide services to the local population in practical training laboratories. KVK are also considering acquiring a license to develop a well-equipped patient care facility on the campus. These developments would significant benefit the educational and clinical environment for the oral care study field students by providing more opportunity for clinical practice in a more real world situation. During the meeting with the senior management, it was stated that such a development would also include the ambition to develop AI and robotic technologies in relation to dental healthcare.

Recommendations for this evaluation area:

Clarify the protocols for the internships/placements with regards to the minimum standards of patient treatment to ensure similar experiences for all students, as well as assessment and feedback.

The panel support to development of KVK patient treatment facilities, including the development of such a facility on the KVK campus.

3.7. STUDY QUALITY MANAGEMENT AND PUBLICITY

Study quality management and publicity shall be evaluated according to the following indicators:

3.7.1. Evaluation of the effectiveness of the internal quality assurance system of the studies.

The KVK internal quality management system (QMS) complies with both the Lithuanian and European quality assurance requirements and with other requirements and legal acts regulating the activities of KVK. The KVK criteria for the quality assurance system is set centrally and is reviewed and adjusted annually. KVK collects and analyses a wide variety of data through surveys (e.g. student and graduate satisfaction surveys, employers surveys, etc) and conducts direct discussions with stakeholders, study programme committees, etc. It is the responsibility of the administrative units (Quality Centre, Study and Career Centres, etc) to collect and process the feedback data from the stakeholders.

At the level of the oral care study field, quality is ensured through the preparation of improvement plans as part of the annual planning process, which is influenced by the results of feedback surveys completed by the students, graduates and employers. The head of department of oral care is responsible for the analysis of the feedback surveys and preparation of the improvement action plan. The study programme committee, which has representation from the staff, students and employers, is the main committee responsible within departments for the management and enhancement of the individual programmes.

3.7.2. Evaluation of the effectiveness of the involvement of stakeholders (students and other stakeholders) in internal quality assurance. Evaluation of the planning and upgrading of resources needed to carry out the field studies.

KVK addresses the needs and expectations of stakeholders of the oral care study field as part of the Management and development of the College's Strategic Partnerships (2013-2020) document. The main means of communicating with the stakeholders is through meetings, visits to social partners and graduates, having representation on the Study Programme Committees, Final thesis defence commissions, qualification commissions and through surveys. For example, the department of oral care had round table discussions with various social stakeholders in 2017 and 2019, which led to changes to the programmes. It was confirmed during the expert panel meeting with the social partners, employers and alumni that there is good on-going dialogue with KVK, which often resulted in changes to the programmes. For example, following feedback from the 2018 employers survey with regards for the needs of graduates to have more foreign language skills, changes were made to the programmes to include scientific English literature skills.

Occasional meetings are organised with graduates of the DH and OC programmes, the last of which took place in 2019. Although annual graduate surveys are conducted by KVK, the information gained is too general, so organised meetings provide more relevant information.

Meetings between the teachers and the DH and OC students take place once a semester. These are opportunities for students to comment on the previous semester and their expectations of the next semester. There is also student representation on departmental committees, such as the Study Programme Committees. A further means of involving students in the quality assurance processes is through the student satisfaction survey. In the 2018 survey, it was highlighted that there was insufficient quality of the organisation of the practices at the KVK training base and there were insufficient opportunities to achieve the goals of the external internships. Measures were taken to address these concerns; including a practice organisation

protocol was subsequently implemented and regular visits by lecturers to the practices. These actions results in good improvements in the survey results in the following years.

3.7.3. Evaluation of the collection, use and publication of information on studies, their evaluation and improvement processes and outcomes.

Various types of data relating to the oral care study field is collected both internally (e.g. admissions data, assessment performance, student feedback, etc) and externally from stakeholders, employers and government agencies (e.g. graduate employment rates, employers surveys, etc). This data is published on various websites including the KVK, AIKOS and Lama Bpo websites. Information about the oral care field study programmes is also published in the “Choosing where to enrol” magazine and is presented at higher education fairs and online KVK information days. It was noted by the expert panel, that some of the links provided in the SER were not functioning.

3.7.4. Evaluation of the opinion of the field students (collected in the ways and by the means chosen by the Centre or the HEI) about the quality of the studies at the HEI.

The outcome of the student satisfaction surveys for 2017 to 2019 were outlined in the SER (Table 13) and in annex 9. Overall student satisfaction in the programmes was high (2019: DH=87%; OC=99%) and there was evidence of an increase in scoring across the various categories during the evaluation period, although there is room for improvement in areas such as teaching, use of active teaching methods and feedback. The students were highly satisfied in areas such as co-operation with the teachers, practice in the college, practice organisation, the organisation of the studies and the library facilities. The same high level of student satisfaction was reported during expert panel meeting with the students, although some negative comments were made regarding the KVK leisure facilities. The students reported that the teaching was of a high standard, which helped them to put theory into practice, feedback was useful for helping them to progress, there is good communication between the staff and students, very good equipment for clinical training and the library facilities are good. The students confirmed that their workload is sufficient to allow them to have enough free time, although the programmes were more demanding at certain times of the year (e.g. November). Students confirmed that they are given experience of working with different patient age groups and patients with various disabilities, especially during their internships. During the discussion it was apparent that there is scope for more teamworking between the two programmes. Although there is joint teaching between the programmes in first year, there appears to be little interaction between the programmes in later years. The expert panel recommend that there is more interaction between the two programmes throughout the curricula to promote teamworking and leadership skills.

It is evident to the expert panel from the extensive information provided in the SER and from the information gained from the various expert panel meetings that there are comprehensive internal quality assurance and enhancement processes in place both at KVK and departmental levels. These ensure that the oral care study field remains compliant with the regulatory requirements and continues to improve to meet the needs of students, staff and the various stakeholders.

Recommendations for this evaluation area:

No recommendations

IV. RECOMMENDATIONS

1. *Consider changes to the programme learning outcomes to incorporate more reflective practice (self-evaluation) and more opportunities for interaction between the two programmes throughout the curricula to promote teamwork, leadership and provide more opportunities for students to give and receive feedback (peer assessment). Furthermore, consider more emphasis on evidence-based practice in the OC programme learning outcomes and earlier introduction to Periodontology in the DH programme.*
2. *Increase the opportunities for the DH and OC students to work with different dental specialists.*
3. *Continue the development of applied research activities, including developing more collaborations both within KVK and internationally, increase the number of oral care field staff who hold PhDs (especially the DH staff) and further increase student involvement in applied research.*
4. *Take further measures to improve student and staff language skills, particularly in English, to help promote academic mobility and encourage more foreign students to enrol onto the full-time English language DH programme.*
5. *Continue to seek foreign exchange institutions with similar curricula to the KVK oral care study field programmes and consider adopting the European DH standard curriculum.*
6. *Clarify the protocols for the internships/placements with regards to the minimum standards of patient treatment to ensure similar experiences for all students (categorisation of patients according to difficulty level and oral health/disease status), as well as ensuring consistency in assessment and feedback.*
7. *Extend the follow-up time of graduates in order to have more data regarding career progression.*
8. *Consider utilising the SKVC questionnaire to help ensure the fulfilment of the requirements of the HEI and aid benchmarking with other similar programmes in Lithuania.*

V. SUMMARY

The KVK oral care study field programmes in DH and OC are well managed, have enthusiastic and caring teachers, attract very high calibre and motivated students, have good employment

rates and the graduates are well regarded by the social partners and employers. There is clearly a good working relationship between the department and the social partners, employers and the alumni. The expert panel were impressed and support the ambitions to develop the KVK run patient treatment facilities and the development of research facilities involving dental healthcare technology. These developments would significantly improve the educational and research environments for both the students and staff, and make the department more attractive to international students (full-time DH students and foreign exchange students), as a destination for international staff and for potential DH master's students. However, for the full potential of these developments to be achieved, it must be sufficiently resourced. Furthermore, the expert panel support the development of a master's programme in DH. There was clear evidence found to support this development.

The expert panel were satisfied with the quality of the learning facilities and resources, the staff development opportunities, the quality management processes and the information available to the students regarding the various types of support, the study programmes and student exchanges.

The key areas of development recommended by the expert panel included measures to further enhance internationalisation, continued development of applied research, more interaction between the DH and OC students, and more opportunities for students to work directly with dental specialists.

One of the key areas which would improve internationalisation of the programmes would be to continue to improve the English/foreign language competencies, and confidence, of both the staff and students. This would promote increased staff and student foreign exchanges, including attracting more visits by staff and students to KVK. Improved staff English language skills would also help to attract more international students, including potentially international master's students in the future. Ideally, English should be taught throughout the curricula and staff encouraged to attend on-going staff development courses in English language. Related to the internationalisation issue, is the continued development of applied research, including more collaborations with different faculties/departments at KVK, but also with national and international HEIs. The proposed development of digital healthcare technology research facilities would certainly help to achieve this need within KVK. Increased national and international visibility of the oral care department's research, for example, increasing the number of publications in international journals would help support the internationalisation agenda and potentially increase the numbers of international staff and students coming to KVK. Continued efforts to increase the involvement of students in applied research would also increase the student's educational experience and motivate them to pursue further qualifications (e.g. masters and PhDs). Having more oral care field staff with PhDs, especially DH staff, would further promote the department's research activities and provide more research opportunities for the students.

Finally, more interaction between the DH and OC students throughout the curriculum would promote teamwork and leadership competencies as well as leading to some teaching

efficiencies. For example, more interaction between the student groups would help the enhance the student's ability to give and receive feedback. Furthermore, more opportunities for students to work with various dental specialists would help the students to transition more easily into clinical practice after graduation.

Expert panel:

1. Dr. Kevin John Davey (team leader), member of academic community;
2. Assistant Professor Sandra Ribeiro Graça, member of academic community;
3. Bo Danielsen, member of academic community;
4. Prof. dr. Vytautė Pečiulienė, representative of social partners';
5. Meda Vaitonytė, students' representative.