



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO  
**STUDIJŲ PROGRAMOS AKUŠERIJA**  
*(valstybinis kodas - 612B72001)*  
**VERTINIMO IŠVADOS**

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**EVALUATION REPORT**  
**OF MIDWIFERY** *(state code - 612B72001)*  
**STUDY PROGRAMME**  
at LITHUANIAN UNIVERSITY OF HEALTH SCIENCES

**Experts' team:**

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2. **Prof. Nadine Oberhauser,** *academic,*
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6. **Ms. Laura Žlibinaitė,** *students' representative*

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Išvados parengtos anglų kalba  
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## DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	<i>Akušerija</i>
Valstybinis kodas	612B72001
Studijų sritis	Biomedicinos mokslai
Studijų kryptis	Slauga
Studijų programos rūšis	Universitetinės studijos
Studijų pakopa	Pirmoji
Studijų forma (trukmė metais)	Nuolatinė (4)
Studijų programos apimtis kreditais	240
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	Slaugos bakalauras, akušeris
Studijų programos įregistravimo data	2010-06-15

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## INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	<i>Midwifery</i>
State code	612B72001
Study area	Biomedical sciences
Study field	Nursing
Type of the study programme	University Studies
Study cycle	First
Study mode (length in years)	Full-time (4)
Volume of the study programme in credits	240
Degree and (or) professional qualifications awarded	Bachelor in Nursing, Midwife
Date of registration of the study programme	15 June, 2010

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The Centre for Quality Assessment in Higher Education

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## **I. INTRODUCTION**

### ***1.1. Background of the evaluation process***

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

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

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

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

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

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

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

### ***1.2. General***

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

No.	Name of the document
-	

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

The external evaluation procedures of the study programme Midwifery (state code – 612B72001) at Lithuanian University of Health Sciences was initiated by the Centre for Quality Assessment in Higher Education of Lithuania.

The first cycle programme Midwifery was started in 2010 at the LSMU which is the largest institution for training of health care specialists. The last external audit was done in 2013 and the programme was accredited until 30 June 2016. This denomination has to be questioned because, in most European countries, nursing and midwifery are two different fields. If both of them

include cares, nursing means care AND the profession. Some skills are common to both fields, but cannot be joined under the same word (modules from the semester I to IV in table 1.3).

The subject has been discussed during the Faculty meeting, and the Ministry of Education is working on a new denomination to separate clearly nursing and midwifery.

The faculty of Nursing has six departments, to which belongs the Midwifery programme (Department of Nursing and Care). It has to be mentioned that the LUHS is the only university in Lithuania providing doctoral studies (PhD) in nursing.

It provides a full time study (four years) and is awarded by 240 ECTS. The degree awarded and/or professional qualification (according to the main data of the study programme in self-evaluation report – SER) is a Bachelor in Midwifery.

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

- Law on Higher Education and Research of Republic of Lithuania
- Description of the Lithuanian Qualification Framework
- Self-Assessment report
- Methodology for Evaluation of Higher Education Study Programmes
- Descriptor for Study Cycles
- Procedure of the External Evaluation and Accreditation of Study Programmes

After studying the SER, external review team (hereinafter – ERT) spent a day discussing the study programme with administrative staff, SER group, teachers, students, graduates and employers. At the end of the site visit, the team leader presented preliminary findings and general remarks to the staff responsible for the study programme. After the visit, the review team discussed its observations, analysis and findings and produced this final joint evaluation report. The report is based on the assessment of the submitted SER, meetings and interviews on a site visit conducted by the complete review team. It includes also all the reported observations of the evaluated services (classrooms, simulation centre, maternity ward, library and computer facilities) and the assessment of the students final bachelor thesis.

#### ***1.4. The Review Team***

The review team was completed according *Description of experts' recruitment*, approved by order No. 1-01-151 of Acting Director of the Centre for Quality Assessment in Higher Education. The Review Visit to HEI was conducted by the team on *9/November/2015*.

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

## **II. PROGRAMME ANALYSIS**

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

The presentation of the programme aims is closely related to the midwifery practice and the WHO recommendations about motherhood safety. Considering the context and the legal framework, the general aim of the Midwifery programme is “*To train highly qualified midwives who would implement midwifery care on all levels of health care when working in a specialist team or independently*”. It enhances the specific competences provided by midwives. The related learning outcomes are well defined and allow a good vision of the targeted profile. It integrates the EU Directives 2005/36/EB minimal requirement for midwives and the legal rules of the country. Programme related information is clear and accessible on the internet site.

The analysis of the labour market as well as the professional profile linked to epidemiological data shows how the learning outcomes are coherent with the midwifery activities and the needs of the specific population considered.

The complexity of the learning outcomes of the Midwifery study programme is well produced and allows understanding of the importance of an academic education which develops research and evidence-based problem solving in this field. It meets the main fields of the university’s activities which are “studies, research and health care”.

The association between programme-level learning outcomes and subject –level learning outcomes (SER, table 1.3) shows the specific learning outcomes for the midwifery field which is good.

The type of the evaluation of the learning outcomes is decided in advance by the teacher. There are different strategies described in the syllabus of the modules, and the theoretical examination is taken in written form.

The practical skills are assessed with an objective structured clinical examination (OSCE) introduced after the last accreditation procedure.

There is a Bachelor thesis to be completed during the fourth year of studies. It is worth 10 ECTS plus 2 ECTS for the defence. The samples examined show a still strong biomedical approach of the subjects. Furthermore, the specific role of the midwife is not really examined. The scientific sources are numerous, but very few are research results issued from midwives and there are very few references issued from international midwifery textbooks. The methodological side is very good, but the field should be more specific and related clearly to Midwifery.

The stress on the proximity of nurses and midwives (Lithuanian Classification of Occupations) clarifies the reason why the Midwifery programme is pursued on the field of Nursing. At the programme level, it appears with the contents of the two first years, offering the general basics of the study area, and the study field named “Nursing” in the SER.

Apart from this nomenclature problem which shows the necessity to strengthen the midwifery field at different levels, the learning outcomes and the aim of the programme and the qualifications offered are logically linked together. The programme aims and learning outcomes are also consistent with the type and the level of the studies.

It appears during the meetings that Midwifery can be considered as “Work in progress” in Lithuania, because of the lack of midwives at the level of the academic staff, and the participation of one midwife only (from outside the faculty) to the elaboration of the SER. It can be understood as an historical consequence, but should not be underestimated during this period of transition. The concept of Midwifery and the Midwifery field should be led by midwives themselves and not doctors or nurses, the interprofessional approach of complex situations being of course a must.

The shortage of midwives in Lithuania enables the new graduate to avoid unemployment, and as long as their diploma are accepted and appreciated in foreign countries, it shows the quality of the studies and challenges the Lithuanian market to attract them in order to keep their competencies inside the country.

## ***2.2. Curriculum design***

Some changes have been made at the level of some contents and structure since the last accreditation procedure in 2013. Basically, the curriculum design of the Midwifery Programme from the LMSU meets the legal requirements at the national and international level and the aims and learning outcomes has been expressed according to the Framework of Qualifications for the European Higher Education Area (Dublin Descriptors). The EU directives are also followed.

As mentioned, the study programme is of 240 ECTS over 4 years with the first two years dedicated to general subjects. The length of the study programme can also be justified by the requirements of the EU about the number of tasks/acts (follow-up and examination of pregnant

women, participation and assistance during childbirth, prenatal care and postpartum care for women and new born, new-born examination: up to a certain number for each, for example 40 deliveries) in order to have their degree validated. It justifies also the time for the clinical placement going up to 84 credits (2261 hours).

Each year has two semesters of 30 ECTS. Each semester has 2-3 modules and doesn't ask for more than 5 examinations. The development of the programme is based on alternating theory and practice (Clinical training). The focus on Midwifery comes at the third year, in an increasing complexity. The content of the modules is coherent with the learning outcomes, consistent and allows to reach the expected level of the studies. Again, Midwifery should be more present in order to develop a proper academic Midwifery culture.

Based on student centred approach, the programme uses various pedagogical approaches. The clinical skills can be trained in a hybrid laboratory and in a medical simulation centre.

All the periods of clinical placement are under the supervision of midwives in obstetrical wards. The mentorship is strong and very much appreciated by students. A specific training is offered to the midwives who want to become a mentor. The "Clinical Training Diaries" are very good tools to help the students to achieve the expected competences during the clinical placement.

It has to be mentioned that the very enthusiastic and strong commitment of the department of gynaecology and obstetrics is very supportive during the clinical placements and very helpful to develop the expected level of specific competencies of the students.

Considering Table 1.3. in the SER, association between programme-level learning outcomes and subject-level learning outcomes (SER, p. 14), it appears that outcomes and the scope of the programme is sufficient to ensure learning outcomes and study subjects and modules are spread evenly, their themes are not repetitive: the SER points 54 to 57 illustrates how it has been built with a progressive and integrative vision, showing that the content of modules are appropriate for the achievement of the intended learning.

The changes since last accreditation illustrates the improvements realized (SER, p. 17). If a large part of the content of the programme reflects the latest achievements in art, biomedical sciences and technologies, midwifery as a science doesn't appear to be underpin the professional profile in all its dimensions.

### ***2.3. Teaching staff***

The study programme is provided by a staff meeting legal requirements. The qualifications of the teachers are good : 4 PhD, 2 PhD students, 4 professors/associate professors (list of the teaching staff, and SER, p. 18-19, 67-69-70), and in terms of level and pedagogical skills, they mostly have extended knowledge and competences in their field and have true commitment with the

programme. Nevertheless, the number of teachers coming from the field of Midwifery is very low (actually two assistants mentioned in the list, among 18) even though number increased since last accreditation procedure. This situation can be explained with the following arguments: the belonging of the Midwifery study programme to the field of Nursing, a lack of educated midwives meeting the requirements to be hired at a university level.

The Head of the Department is aware of the situation. Actually, few midwives are being trained at a Master level (Clinical Nursing Master) in order to join the staff and strengthen the Midwifery culture with specific knowledges, competencies and research. There is not yet possibility to follow a PhD in Midwifery in Lithuania. Due to the recent opening of the Masters in this field in Lithuania, and still some difficulties with the English language, the education is on the way to be completed, but a few more years are needed. The higher education institution creates conditions for the professional development of the teaching staff necessary for the provision of the programme with these specific profiles. The Centre of Teacher' Educational Competences has been created to support and develop the educational competences, and some international collaborations are running in order to work on this topic.

The teaching staff of the programme is involved in research (art) directly related to the study programme being reviewed. Publications are made at a national and international level, nevertheless the field of the midwifery should be considered as priority to define the research subjects. As already mentioned, midwifery as a field of proper science doesn't appear very clearly, this can be seen either in the programme or in the teaching qualifications. One knows a profession have to evaluate and use the result of scientific research about their practice (Evidence Based Midwifery), and allow their knowledges and practice to be up to date. If the field of research is not covering Midwifery ant its practice, but mostly biomedical topics, it doesn't the need and the requested academic rules on basing teaching on research results. Bachelor thesis and research subjects are not directly centred on the core concept of Midwifery.

The number of teachers is adequate and the turnover of the staff is very low : the main reasons are retirement or maternity leave (SER, p. 18, 70). These two conditions contribute to ensure learning outcomes of good quality.

Fortunately, the problem of the academic teacher's profile is balanced with a strong support/mentorship from midwives for the students in the clinical practice. The cooperation of the LMSU obstetrical department with a Swiss team project (Lithuania and Swiss cooperation program for pregnant women, maternal and health care services in Lithuania) has shown very interesting and stimulating results on care and education outcomes, for instance flow charts for new born resuscitation.

The students are very satisfied with the teaching staff, always helpful and available. Changes are made very quickly when asked and needed, and a continuous support is offered. They mentioned examples about workload or assessments to be adapted or revised, and the positive answers they got.

#### ***2.4. Facilities and learning resources***

Facilities and learning resources are a very strong point of the LUHS. There is no doubt that the premises for studies are adequate both in their size and quality for the students of the Midwifery programme. A new building has just been open and a very good library is available for the students.

The teaching and learning equipment (laboratory and computer equipment, consumables) are brand new and more than adequate both in size and quality. The new building allows students to benefit very good environment for learning (size of the classes, different libraries very easily accessible at different spots, and modern hybrid laboratory and material to exercise different skills). They have textbooks and films and the students can practice the procedures (groups, direct supervision or taping). They have 30 scenarios to exercise. They use Tellyes suturing kits for example.

The higher education institution has adequate arrangements for students' practice including access to the medical simulation centre with high fidelity mannequin both at the university and the hospital. The teachers were trained to use simulators. Some of the places were visited by ERT and equipments are the very last models on the market. Accessibility is very good.

The clinical placements are possible in various places all over the country, in different cities, structures and field of midwifery on request (SER, p. 23, Changes in the study programme), however it could be extended with international exchanges in order to increase the mobility of the students.

Teaching materials (textbooks, books, periodical publications, databases, SER, p. 23, 98-99-100) are adequate and accessible. The textbooks and books are mainly Lithuanian publications related to obstetrical and midwifery practice, and databases suit the international standarts: Pubmed, Medline. The NERP (Nursing Education, Research and Practice) review is a good example of the willingness to compete on the international context of research publications. It is published by the LSMU, bi-annual, peer-reviewed, international and general research journal.

Considering the changes made since the last accreditation procedure: update of scientific database, extension of the internet connections, access to the database from outside for the students, implementation of the First Class system shows the care of the Faculty to give the students the best conditions for their studies.

The ERT noticed that the foreign literature about Midwifery could be advantageously expanded with midwifery textbooks from reference authors like L. Page, S. Down, B. Hunter, M. Mead, for instance, in order to have common and closer references with the EU and ICM.

### ***2.5. Study process and students performance assessment***

The study process is clear and well established in its different steps. The SER shows that LUHS respects the general rules of admission to the Lithuanian higher education schools.

Many changes have been made in the programme during the last few years, and actually seems to meet the student's requests and expectations. The introduction of the OSCE in the programme and the involvement of the students in clinical research like the algorithm for the resuscitation of the neonates attest a very dynamic management of the study process.

During the visit, the expert team could visit the postpartum ward from the LUHS hospital and meet the Head of the department. The unit led by a midwife was shown to ERT and the cooperation with a Swiss team for pregnant women, maternal and neonatal health care services in Lithuania was presented. The team also could see the result of an interprofessional collaboration between neonatologists, obstetricians, anaesthesiologists, midwives, and student midwives to create algorithm for the resuscitation of the neonates.

It is an example of close collaboration between the university and the hospital, a very profitable dialogue around the students midwives to contribute to the achievement of the study process, and the acknowledgement of the midwives competencies in allowing them to lead a ward.

It included an international partnership to promote the quality of perinatal health care which promote cross-cultural approaches and competence sharing.

The workload is estimated to be well distributed during the studies, and the students have their practice following and according to the lectures on specific subject. In addition to the academic process showing a narrow follow-up of the students and their studies (SER, p. 24, 109-110), psychological and social support is also available, same with financial support including disabled people (grant and loan, social scholarships)

The system allows the achievement of the learning outcomes, and the diary helps to assess the student's progress on expected competencies. The assessment process of the students meets the needs of the programme, and the students are satisfied with assessment approaches. The students are very pleased with the programme, they can discuss questions and issues with the different teachers. They express security and a good support during their studies.

The final thesis enables students to develop a scientific project or a literature review, and they can choose the topic and the mentor. Topics are also suggested by the lecturers. Quality and assessment show differences due to the topics and the profile of the experts. It shows also an

unequal use of midwifery research results and international midwifery references in the bibliography. Again, there is no midwife actually undertaking the mentorship of the final theses. All the system and the results of the assessment are clear and available. There is no evidence of participation of the students in scientific activities conducted by teachers and this point should be extended in the future to meet the academic standards.

The mobility program has been increased, but their development should be pursued in order to satisfy all the student's requests and have a better visibility (SER, p. 26, Changes in the study programme).

The support given to the students at different levels and described in the SER shows the attention paid to them, and the students themselves express a very level of satisfaction regarding this point, enhancing the availability of the staff, as long as its determination to be helpful and find solutions to any problem that can be reported. For example, students enhance the availability of teachers when the need more explanations about topics they didn't understand, or support before the exams when they are stressed.

Graduates express their satisfaction about the study programme, considering the practice as excellent and enough represented to develop the expected competencies. They are sure to find a job when they graduate and express the value of bachelor at the university level. Most of them intend to follow their studies with a Master degree, but wish to enter a Midwifery Master degree rather than any other. The social partners are also willing to employ this type of profile and encourage more midwives to get Master Degrees in their teams.

Their competences are appreciated, despite the fact that they cannot work in total autonomy in their field.

## ***2.6. Programme management***

Changes have been made since the last accreditation procedure in order to clarify the management, and the Study Programme committee of the Midwifery programme was newly formed in 2013. Two midwives and a student midwife are part of it, showing the will of the faculty to empower midwifery in the nursing department.

The programme management is under the responsibility of the two bodies of the university: the Council and the Senate, and the Faculty of Nursing. These three levels are in charge of the responsibilities and decisions, and are working together. The links between the levels, types of responsibilities and decisions appear clearly in the SER but didn't seem to be accurate enough for some members of the team during the meeting with the academic staff. The physicians have still an important place in the decision processes and the management of the programme, and the importance of including midwives in it is still not completely integrated. If all members of the

administrative staff did agree on the relevance of a specific midwifery programme, there is still not a proper culture and professional vision carried by midwives themselves.

In the nursing department, the study programme committee is responsible for the contents and the educational quality assurance, and proposed by the Dean and approved by the Order of the Rector Order. The team could note a very dynamic network between the different bodies and collegiality, and the possibility for the teachers to engage their personal responsibility for decision making. These interactions around the programme management include the students, and tools from the quality system. This system is responsible for collecting the information and data about the programme, and the outcomes of internal and external evaluations are used to make improvements. The process seems to be effective, and the stakeholders express their entire satisfaction about it.

The ERT couldn't see proper templates from the quality framework and relate it to the measures taken in order to evaluate their effectiveness and efficiency, but the meetings with the students, graduates and representatives from the health system tends to proof the efficiency of the programme management. Same could be concluded for the teaching staff, undergoing attestation procedures every five years.

## **2.7. Examples of excellence**

### **III. RECOMMENDATIONS**

**Expert's team recommendations are the following:**

1. The programme could show clearly its focus on Midwifery by using an appropriate terminology.
2. Culture of Midwifery could be embedded with clear references related to Midwifery textbooks and research, and evidence based midwifery practice.
3. The process on educating and integrating more midwives in the programme studies could be formalised with an explicit development plan.
4. Midwifery could be carried at the different levels of the administration of the programme by midwives.

#### **IV. SUMMARY**

The first cycle programme Midwifery started at the LUHS in 2010. It belongs to the Nursing Faculty and was assessed in 2013 with an accreditation lasting until June 30, 2016. Changes have been made since then, and this summary is enhancing the main points to be considered.

The programme aims and learning outcomes are clearly developed and allow the students to reach the expected level of competencies to get a Midwifery degree.

The belonging to the Nursing Faculty and the traditional proximity of Nursing subjoin with common modules/subjects during the first two years makes difficult to consider Midwifery for itself as an independent and proper field of study and competencies.

The lack of midwives contributing to the programme studies because of an inappropriate level of education and for some of them, basic knowledges of English language results in a poor representation of the profession at the university and absence of role model for the students. The situation is highlighted by major references to biomedical contents and few of them issued from the field of Midwifery. The following Master degree in Clinical Nursing doesn't help to emphasise that Midwifery is a distinct profession.

Improvements and changes have been made in the programme itself, and the training of few midwives at a Master level should allow the situation to progress in the future.

The curriculum design is well balanced, and centred on student's needs. The alternate periods of clinical placements and theoretical approach allows the students to get the learning outcomes and competences at the expected level at the end of the studies. The skills are very well followed and developed being supervised by mentor midwives and documented in a Clinical Training Diary. The assessment process ensures the students to get a feed-back about their level. The teaching staff is very supportive for them.

If the teaching staff is very much involved and very competent in the different fields involved, the lack of midwives involved in the theoretical teaching prevent the students from a midwifery based approach of the situations and the proper culture and concepts defining the Midwifery field. It is well balanced during the clinical placements with the mentorship practiced by midwives.

Facilities and learning resources are of a high level of quality and quantity. The Faculty and the teaching staff are listening to the student's needs, and can answer with various methods, and equipment. The library is of very high quality and access to the various database easy for students is easy even from outside. However, textbook should be completed with Midwifery

literature not only about skills, but also theoretical and conceptual approach of the field, and related to the EU and international references in Midwifery.

The study process and students performance assessment is very satisfying for all the stakeholders, and various ways of assessment are used. The teaching staff is very supportive to help students to get the right level for the assessments.

Mobility programme offer has been increased and should be encouraged and enlarged during the next years.

The programme management shows concern and very high reactivity to student's questions and requests, and take care of the teaching staff qualification in order to deliver the best teaching. The involvement of the students at the different levels of the university administration is very clear and dynamic.

The attention and concentration on the proper Midwifery field and its concepts and theories, the adaptation of the terminology of the programme and the education and integration of a substantial number of midwives at the different levels of the academy and in the teaching staff should promote significantly the profession and the culture of Midwifery.

## V. GENERAL ASSESSMENT

The study programme MIDWIFERY (state code – 612B72001) at LITHUANIAN UNIVERSITY OF HEALTH SCIENCES is given **positive** evaluation.

*Study programme assessment in points by evaluation areas.*

No.	Evaluation Area	Evaluation of an area in points*
1.	Programme aims and learning outcomes	3
2.	Curriculum design	3
3.	Teaching staff	3
4.	Facilities and learning resources	4
5.	Study process and students' performance assessment	3
6.	Programme management	3
	<b>Total:</b>	<b>19</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:	Andy Gibbs
Grupės nariai: Team members:	Prof. Nadine Oberhauser
	Assoc. prof. dr. Polona Mivšek
	Mari Berglund
	Aušra Volodkaitė
	Laura Žlibinaitė

**LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO PIRMOSIOS PAKOPOS  
STUDIJŲ PROGRAMOS AKUŠERIJA (VALSTYBINIS KODAS – 612B72001)  
2016-04-01 EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-86 IŠRAŠAS**

&lt;...&gt;

**V. APIBENDRINAMASIS ĮVERTINIMAS**

LIETUVOS SVEIKATOS MOKSLŲ UNIVERSITETO studijų programa AKUŠERIJA (valstybinis kodas – 612B72001) vertinama **teigiamai**.

<b>Eil. Nr.</b>	<b>Vertinimo sritis</b>	<b>Srities įvertinimas, balais*</b>
1.	Programos tikslai ir numatomi studijų rezultatai	3
2.	Programos sandara	3
3.	Personalas	3
4.	Materialieji ištekliai	4
5.	Studijų eiga ir jos vertinimas	3
6.	Programos vadyba	3
<b>Iš viso:</b>		<b>19</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)

&lt;...&gt;

**IV. SANTRAUKA**

Pirmosios pakopos studijų programa *Akušerija* Lietuvos sveikatos mokslų universitete pradėta vykdyti 2010 m. Ji įgyvendinama Slaugos fakultete, buvo įvertinta 2013 m. ir akredituota iki 2016 m. birželio 30 d. Nuo to laiko padaryta studijų programos pakeitimų, o šioje santraukoje nurodomi pagrindiniai dalykai, kuriuos reikėtų apsvarstyti.

Studijų programos tikslai ir numatomi studijų rezultatai yra aiškūs, jie leidžia studentams pasiekti laukiamą kompetencijų lygį, atitinkantį akušerijos bakalauro mokslinį laipsnį.

Dėl šios studijų programos priskyrimo Slaugos fakultetui ir tradicinio akušerijos artimumo slaugai kartu su bendrais moduliais ir (arba) dalykais, dėstomais dvejus pirmuosius studijų metus, akušeriją sunku laikyti savarankiška ir tinkama studijų bei kompetencijų sritimi.

Kadangi trūksta akušerių, kurie galėtų prisidėti prie šios studijų programos dėstymo, nes jų išsilavinimo lygis, o kai kurių ir anglų kalbos žinios yra nepakankamos, ši profesija universitete reprezentuojama nepakankamai ir studentai neturi sektino pavyzdžio. Tokią padėtį rodo

pagrindinės nuorodos į biomedicinos turinį, beje, tik nedaugelis jų yra iš akušerijos srities. Baigus studijas suteikiamas slaugos bakalauro, akušerio laipsnis nepadeda akcentuoti, kad akušerija yra atskira profesija.

Padaryta pačios studijų programos pakeitimų ir patobulinimų, o kelių akušerių rengimas magistro lygiu leidžia tikėtis, kad ateityje ši padėtis turėtų keistis gerąja linkme.

Studijų programos sandara gerai subalansuota ir orientuota į studentų poreikius. Besikaitaliojantys klinikinės praktikos ir teorinių užsiėmimų laikotarpiai padeda studentams studijų pabaigoje pasiekti numatomus studijų rezultatus ir įgyti laukiamą kompetencijų lygį. Įgūdžiai sėkmingai gerinami prižiūrint akušeriams mentoriams, jie registruojami Klinikinės praktikos dienyne (*Clinical Training Diary*). Vertinimo procese užtikrinama, kad studentai gautų grįžtamąjį ryšį apie savo lygį. Dėstytojai labai padeda studentams.

Nors dėstytojai labai aktyvūs ir kompetentingi įvairiose susijusiose srityse, trūksta akušerių, kurie dėstytų teoriją, todėl studentai neturi galimybės susidaryti akušerinio požiūrio į situacijas ir tinkamos kultūros bei idėjų, apibrėžiančių akušerijos sritį. Tam padeda mentorystė, kurią per klinikinę praktiką vykdo akušeriai.

Materialieji ištekliai yra kokybiški ir jų daug. Fakultetas ir dėstytojai atsižvelgia į studentų poreikius, naudoja įvairius metodus ir įrangą. Biblioteka labai gera, studentai turi galimybę naudotis įvairiomis duomenų bazėmis netgi nebūdami joje. Tačiau komplektuojami vadovėliai turėtų apimti ne tik gebėjimus, bet ir teorinį bei idėjinį požiūrį į akušeriją, būti susiję su ES ir tarptautinėmis nuorodomis į akušerijos literatūrą.

Studijų eiga ir jos vertinimas puikiai tenkina visus socialinius dalininkus. Taikomi įvairūs vertinimo būdai. Dėstytojai visokeriopai padeda studentams, kad šie pasiektų atitinkamą lygmenį atitinkamiems įvertinimams.

Padaugėjo galimybių pasinaudoti judumo programa; jas reiktų ir toliau plėsti bei skatinti kitais metais.

Studijų programos vadovai labai reaguoja į studentų klausimus ir prašymus, rūpinasi dėstytojų kvalifikacija siekdami užtikrinti geriausią mokymą. Studentų dalyvavimas įvairių lygių universiteto valdymo veikloje yra labai aiškus ir dinamiškas.

Dėmesys tinkamai akušerijos kryptims ir jos idėjoms bei teorijoms, šios programos terminų taikymas ir didelio akušerių skaičiaus ugdymas ir integravimas į įvairius akademijos lygius bei į dėstytojų būrį turėtų smarkiai skatinti šios profesijos pasirinkimą ir akušerijos principus.

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### III. REKOMENDACIJOS

#### Ekspertų grupė pateikia šias rekomendacijas:

1. Vartojant tinkamus terminus galėtų būti aiškiau parodyta, kad pagrindinis studijų programos dėmesys skiriamas akušerijai.
2. Akušerijos kultūra (*principai*) galėtų būti įtvirtinta su aiškiais nuorodomis į akušerijos vadovėlius, mokslinius tyrimus ir įrodymais pagrįstą akušerijos praktiką.
3. Didesnio akušerių skaičiaus įtraukimo į šią studijų programą ir jų ugdymo procesas galėtų būti formalizuotas parengus išsamų vystymo planą.
4. Visuose programos administracijos lygmenyse akušeriją galėtų atstovauti akušerės.

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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)