



## KAUNO MEDICINOS UNIVERSITETO

medicinos krypties  
*medicinos* studijų programos  
išorinio išsamiojo

### VERTINIMO IŠVADOS

Kaunas University of Medicine

study field of medicine  
external assessment of  
*medicine* study programme

Final Report

Grupės vadovas: prof. Samuel Leinster  
Team leader:

Nariai: prof. Ilze Akota  
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## *Profile of programme of Medicine study field*

<b>Title of study programme</b>	<i>Medicine</i>
<b>State code</b>	60107B101
<b>Kind of study<sup>1</sup></b>	I
<b>Mode of study<sup>2</sup> (duration in years)</b>	F (6)
<b>Volume of study programme in credits</b>	240
<b>Degree and (or) professional qualification to be awarded</b>	Master of Medicine, Doctor
<b>Programme registration date, order No.</b>	1997-05-19, Nr. ISAK-565

### **1. Introduction**

This report is based on a review of the supporting documentation and self evaluation report by the Faculty of Medicine and on the visit to the Faculty and clinics on 15th December 2004. The expert team are grateful to the staff and students of the Faculty of Medicine at Kaunas University of Medicine for their co-operation in the preparation of this report including the good documentation and the full and frank discussions which provided additional information. We are especially grateful to the representatives of the employers who met with us. Kaunas University of Medicine has all the necessary capacities for an annual enrollment of 250 students on the study programme “Medicine”.

### **2. Aims and goals of study programme**

The aims and goals of the programme are clearly stated and are entirely appropriate. The emphasis on health care and prevention in the Aim is commended. Also commended is the goal of developing professional attitudes in the students.

### **3. Analysis of the programme**

#### **3.1. Programme *Medicine***

##### **3.1.1. Structure, contents and study methods**

The overall structure of the course is good and there is a good balance between contact time and independent study. The balance

<sup>1</sup> **NU** – Non-university studies; **U** – Undergraduate studies; **M** – Masters’ studies;

**SP** – Specialised Professional studies; **I** – Integrated studies;

<sup>2</sup> **F** – Full-time; **PE** – Part-time (Evening); **PX** – Part-time (Extramural).

between general university studies and medical studies is appropriate. Elective programmes currently amount to 20% of the total and these are especially concentrated in the 4th, 5th and 6th years. There are plans to increase this to 25% which seems ideal. The Faculty is organising individual subjects into blocks which will improve the integration of the subjects and enhance the students' learning.

The programme covers all the relevant areas of medical theory and practice but the Faculty continue to look for ways of improving the relevance of the course to the current health needs of the country.

Research is not compulsory but students are encouraged and supported to undertake it. The research project can gain the student extra points in the competition for residencies. All students undertake courses on research methods and critical thinking.

The Faculty is actively moving towards study methods that encourage self-directed learning and student participation. In particular, they are reducing the number of lectures and increasing the number of small group sessions. The small group sessions include the need for students to prepare beforehand topics for discussion in the group.

The assessment methods are transparent and the students are given clear guidance on what they should know. We are particularly impressed by the emphasis on the examination of practical clinical skills. Students must pass the practical part of the examination before they can proceed to the written. The written examination in finals is well-designed and makes use of various formats of multiple choice questions in line with current international best practice.

The Faculty, in consultation with the students, are introducing a new system of continuous assessment called the 'accumulation of studies evaluation'. This will account for at least 50% of the marks in any examination. In preparation for this they have introduced documentation listing the conditions which a student must have seen in each discipline. The student has to obtain the signature of a teacher to confirm that they have satisfactorily completed the task. The experts view this as an excellent development.

### **3.1.2. Execution of studies and support for students**

The students report feeling well-supported by staff. Information on the course is readily available. The first year students are given a booklet '*For first year students*' and there is a compulsory course '*Introduction to the studies*' which provides extra support.

Student representatives are regular members of the important Faculty committees.

### **3.1.3. Variation in the number of students**

The number of students has increased considerably since 2000. Competition remains high. The drop out rate is acceptable at 13% and is in line with international comparisons.

### **3.1.4. Teaching staff**

The teachers are highly qualified within their own disciplines. The Faculty recognises the importance of good teaching and rewards it. The Centre for Educational Competence, which is led by a professional educationalist, organises regular training courses in pedagogy. Staff must show evidence that they have participated in such courses at their review once in every 5 years. New teachers have an introductory programme during which their teaching is mentored.

### **3.1.5. Advantages and disadvantages of the programme**

The main strength of the programme is the high quality of the graduates from the programme particularly in regard to their practical skills and their ability to apply their knowledge. This covers all of the subjects connected with medicine. The teaching of general university subjects is a further strength. The course meets the requirements for minimum credits in each subject.

These strengths are facilitated by the high quality of the staff and their good international connections. This has led to well developed Erasmus and Socrates programmes. The student exchanges on these programmes are possible because of the Medicine programme in the English language which is provided for international students.

It is a disadvantage that research is not compulsory for all students. The Faculty identified inadequate teaching in Primary Care as a disadvantage. Other disadvantages identified by the Faculty in their self evaluation are already being addressed.

## **4. Material conditions**

The infrastructure for teaching is good. The auditoriums are well equipped and adequate in numbers and size. The Faculty library is being rebuilt and when this is completed there will be good facilities for private study including more computers.

The clinical settings are well-equipped and there are large numbers of patients with a wide variety of clinical conditions.

## **5. External relations**

There is evidence of good international connections with joint research projects with other EU countries and with the USA. There appear to be good relationships with other national bodies

## **6. Feedback**

Feedback is organised on a regular basis. Once every two years a survey was carried out of all students and the results were used to modify the course. This function has been taken over by the Centre of Educational Competence which carries out regular anonymous surveys and collates the results.

## **7. Internal assurance of study quality**

The Faculty has a well-developed programme of quality assurance. Regular feedback is collected by the Centre of Educational Competence and reported to the Commission for the Co-ordination of the Study Programme. There is input to the process from the Office of Student Representatives. The Faculty completes an annual self-evaluation which is discussed at Faculty Council. Issues that require attention are reported to the relevant departments for action.

## **8. General assessment of the programmes within the study field**

### **8.1. Recommendations to the higher education institution**

1. The Faculty should continue the systemisation of their quality assurance programmes
2. The Faculty should continue to ensure increasing integration between course units.
3. Research should be made a compulsory part of the programme
4. The Faculty should continue to monitor and develop its teaching and learning strategies
5. There should be an increase in teaching in Primary Care and in interprofessional learning

## 8.2. Proposal on accreditation

Study programme of Kaunas University of Medicine:

university integrated study programme *Medicine* (state code 60108B101) is given full accreditation.

*Team leader:*

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Samuel Leinster

*Members:*

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Ilze Akota

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Laimutis Paškevičius

Final Report signed

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2004 12  
(date)

Vilnius  
(place)

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