

LITHUANIAN UNIVERSITY OF HEALTH SCIENCES  
MEDICAL ACADEMY



**STUDY FIELD OF NURSING**

**FIRST-CYCLE (BACHELOR'S DEGREE) STUDY PROGRAMME**

**MIDWIFERY**

(State code – 612B72001)

***SELF-ANALYSIS REPORT***

A handwritten signature in blue ink, consisting of several fluid, connected loops and strokes.

Rector of the Lithuanian University of Health Sciences ..... Prof. Remigijus Žaliūnas  
(Signature)

A handwritten signature in blue ink, featuring a prominent 'A' and 'B' followed by several loops.

Head of the self-analysis group ..... Assoc. Prof. Aurelija Blaževičienė  
(Signature)

Kaunas  
June 2015

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## Main data of the study programme

Study programme	Midwifery
State code (first 7 symbols)	61211B1
Study area	Biomedical sciences
Study fields (code)	Nursing (B700)
Branches of the study field (if applicable)	Midwifery (B720)
Type of studies	University studies
Cycle of studies	First
Form of studies (duration in years)	Full-time (4 years)
Scope of the study programme in credits	240 ECTS
Minimal education required for entry	Secondary
Degree and/or professional qualification awarded	Bachelor of nursing, professional qualification of a midwife
Date of the programme registration	15 June 2010

## List of the members of the self-analysis group

No.	Name, surname, scientific degree, academic title	Position	Phone (office and mobile)	E-mail
1.	Assoc. Prof. Dr. Aurelija Blaževičienė	Head of the Department of Nursing and Care	+370 37 327147 mobile +370 68245936	aurelija.blazeviciene@ismuni.lt
2.	Dr. Alina Vaškelytė	Lecturer at the Department of Nursing and Care	+370 37 787328 mobile +37061429691	alina.vaskelyte@ismuni.lt
3.	Dr. Viktorija Grigaliūnienė	Associate professor at the Department of Nursing and Care	+370 37 787328 mobile +37069957539	viktorijagr@ismuni.lt
4.	Dr. Lina Spirgienė	Lecturer at the Department of Nursing and Care	+370 37 787328 mobile +37065190435	lina.spirgiene@ismuni.lt
5.	Assoc. Prof. Dr. Eglė Barčaitė	Lecturer at the Department of Obstetrics and Gynaecology	mobile +37061041617	egle.barcaite@ismuni.lt
6.	Ilona Joleniūnienė	President of the Lithuanian Midwives Association	+370 37 32 65 30	akuseriusajunga@gmail.com
7.	Lukas Petraitis	Student of the Midwifery programme	mobile +370 68036642	petraitislu@gmail.com

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## ABBREVIATIONS

CQAHE	Centre for Quality Assessment in Higher Education
ECTS	European Credit Transfer System
FN	Faculty of Nursing
LSMU	<b><i>Lithuanian University of Health Sciences</i></b>
MA	Medical Academy
SSS	Students' Scientific Society
VA	Veterinary Academy
FC	FirstClass

1. **Lithuanian University of Health Sciences** (hereinafter - LSMU) is the largest educational institution for training of health care specialists. It has long standing traditions and its history goes back to the Faculty of Medicine at Vytautas Magnus University, which later became the Institute of Medicine. According to the resolution by Seimas of the Republic of Lithuania on the 30<sup>th</sup> of June, 2010 Kaunas University of Medicine and Lithuanian Veterinary Academy were merged. LSMU is the largest university of biomedical sciences that continues the best traditions of both educational institutions.

2. The University has two collegial management bodies – the Council and the Senate, and a sole management body – the Rector, who is elected by the Council. Chancellors and Vice-Rectors provide help for Rector. Medical Academy and Veterinary Academy are the main units of the University, which also includes Faculties, Research Institutes, University Hospital, Veterinary Clinics, Centre of Practical Training and Experiments, Theoretical and Clinical Departments, Faculty Institutes, Research Laboratories; other structural and functional units, which provide the needs for studies, research, health care and social, and cultural life.

3. Teaching staff of LSMU consists of 161 professors, 229 associate professors, 298 lecturers, and 454 assistant professors (by December 31, 2014). These entire staffs provide qualitative studies of the first, second, integrated and third circle in biomedical sciences. The University offers 29 study programmes. More than 6481 students including 613 foreign students from more than 35 countries are studying in these programmes.

4. **The Faculty of Nursing** (hereinafter - FN) was established in 1990 and consists of six departments: Department of Rehabilitation, Department of Geriatrics, Department of Nursing and Care, Sports Institute, Department of Children Rehabilitation, and Department of Behavioural Medicine.

5. **The mission of the Faculty** is to prepare highly qualified specialists of nursing, midwifery, physical therapy, and occupational therapy by giving them knowledge, professional skills, and forming the system of their attitudes and values, also by letting them participate in scientific investigations of nursing, midwifery, rehabilitation, gerontology, physical therapy and occupational therapy. They can also participate in the formation and implementation of health policy decisions.

6. Four **bachelor** programmes of the first cycle are conducted at the faculty: *Nursing, Midwifery, Physical therapy, and Occupational Therapy* and four **master** programmes of the second cycle: *Clinical Nursing, Physical Medicine and Rehabilitation, Health Promotion Through Physical Exercise, and Art Therapy*. The latter is a joint programme with Kaunas Faculty of Vilnius Art Academy. The graduates from these programmes have a right to work in all health care institutions. LSMU is the only university in Lithuania having the right to conduct **doctoral studies** (PhD) in nursing<sup>1</sup>.

7. This self-evaluation report contains data about the first cycle programme *Midwifery*, which was started in 2010. The self-evaluation group was formed by the Rector of the University<sup>2</sup>. All members were responsible for a certain task in the report field. The summary of the self-evaluation was discussed at the meeting of Nursing and Care Department staff on the 15<sup>th</sup> of May 2015 (minute No. SLF-04-4-14). The summary of self-evaluation has been prepared according to the requirements of external audit for the study programmes<sup>3,4</sup>. The latest external audit was done in 2013 and the programme was accredited until 30 June 2016.<sup>5</sup> After that, the University has been improving the programme according to the recommendations of the experts.

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<sup>1</sup> Decision of Ministry of Education and Science of Lithuanian Republic. 2011-06-08 Nr. V-1019 and 2011-06-21 Nr. B-1124

<sup>2</sup> LUHS Rector's Order, 20 - 02 - 2013, No V-145 "On the formation of the self-evaluation group.

<sup>3</sup> The Description of the external audit and accreditation order, confirmed by the Minister of Education and Science of LR on 24 July, 2009, No ISAK- 1652. (Amendment of the order No V-1487, 29-07-2011 by the Minister of Education and Science of LR)

<sup>4</sup> The Methods of study program evaluation, accredited by the order of Director of the Study Quality Centre on December 20, 2010.

<sup>5</sup> Order of the Director of the Centre for Quality Assessment in Higher Education (CQAHE) on the Accreditation of Study Programmes. 26 June 2013, No. SV6-48, Vilnius

# ANALYSIS OF THE PROGRAMME

## 1. AIMS AND LEARNING OUTCOMES OF THE PROGRAMME

### 1.1. The need, the purpose, and the aims of the programme

8. **The need for specialists in the labour market.** In Lithuania, the prerequisites for the practice of midwifery are professional qualification of a midwife and a valid licence for practice in midwifery.<sup>6</sup> According to the number of personal stamps, the current number of midwives practicing in Lithuania is 1441<sup>7</sup>. According to the data of the study “The Pilot “Day Photography” Analysis of the Number, Requirement and Workload of Medical Personnel” ordered by the Ministry of Health (subsequently – MoH) and conducted in 2011, the mean age of practicing midwives in Lithuania was 47.7 years, the majority of midwives being in the age group of 40-49 years<sup>8</sup>.

9. Like nurses, midwives belong to the occupational group of nursing specialists whose training and practical activity are regulated mostly by the same legal acts, resolutions, and declarations (the European Union (EU) Directive<sup>9</sup>, the Republic of Lithuania Law on Nursing Practice and Midwifery Practice<sup>1</sup>, orders of the MoH, and the Munich Declaration<sup>10</sup>).

10. **The aim of the Midwifery study 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.

11. **The aim and the learning outcomes** (the learning outcomes are more broadly described on p. 8) of the Midwifery study programme are oriented towards education and training of a separate group of health specialists – midwives. These specialists will provide midwifery care and nursing according to the midwife’s fields of activity, rights, duties, competence, and responsibility defined in the Lithuanian Norm of Medicine *Midwife*<sup>11</sup>.

12. In Lithuania, university-level studies of midwifery are available only at LSMU. The University also offers the first-cycle study programme *Nursing* in the study field of Nursing. University studies at the Faculty of Nursing are closely related to other study programmes of the University and training of health care specialists – physicians, odontologists, pharmacists, physiotherapists, and occupational therapists. This allows for developing health specialists’ teamwork skills and forming an equal team member – a self-confident specialist, and also ensures the continuity of studies, as the graduates may continue their studies in Master’s programme, and subsequently – in doctoral studies.

### 1.2. The demand for the programme among the entrants

13. In Lithuania, entry to higher education institutions is organised by the Association of Lithuanian Higher Education Institutions LAMA BPO<sup>12</sup>. The dynamics of the general admission to the *Midwifery* study programme over the period of five years is presented in Table 1.1.

**Table 1.1. The demand for the *Midwifery* study programme among the entrants during 2010-2014**

No.	Data on the entrants to the Midwifery study programme	2014	2013	2012	2011	2010
1	Number of students planned for admission/admitted	14/15	17/16	17/20	15/17	15/17
2	Students admitted to state-financed/self-financed study places	8/7	11/5*	1/19	0/17	0/20
3	Number of students who indicated this programme as number one choice	107	94	47	58	39
4	Number of students who indicated this programme as choice of any priority	712	727	458	474	373
5	The highest competition score	8,64**	19,44	19,08	19,22	18,16
6	The lowest competition score	4,7 **	14,58	17,50	16,86	13,74

\*New regulations for entering the study programs in biomedicine field were introduced allowing nursing, midwifery and public health students to have better access to state-financed places \*\*Since 2014, 0-10 scoring scale has been used to calculate the competition score.

<sup>6</sup>The Republic of Lithuania Law on Nursing Practice and Midwifery Practice, 14 July, 2009, No. XI-343, Vilnius

<sup>7</sup>State Health Care Accreditation Agency under the Ministry of Health. Licensing of specialists. Personal stamp numbers given to midwives. <http://www.vasptv.gov.lt/index.php>

<sup>8</sup>The Pilot “Day Photography” Analysis of the Number, Requirement and Workload of Medical Personnel. Kaunas 2011

<sup>9</sup>Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on minimum training requirements and the recognition of professional qualification of nurses and midwives.

<sup>10</sup>Munich Declaration “Nurses and Midwives: a force for health”. Copenhagen, WHO Regional Office for Europe, 2000

<sup>11</sup>Order of the Minister of Health of the Republic of Lithuania No. V-245 “On the Approval of the Lithuanian Norm of Medicine MN 40:2006 “A Midwife: Rights, Duties, Competence, and Responsibility” (Official Gazette, 2006, No. 40-1446)

<sup>12</sup>Association of Lithuanian Higher Education Institutions LAMA BPO [www.lamabpo.lt](http://www.lamabpo.lt)

### 1.3. The conformity of the purpose of the programme with the institution's, national, and international directives

14. *The associations of the purpose of the programme with the mission of the higher educational institution and the strategy of its development.* The LSMU Statute<sup>13</sup> emphasizes that “the principal aim of the University is to develop a healthy and educated society, and its main objectives are the following: 1) to conduct the studies, which provide the person with higher university education and qualification of higher education corresponding to the modern level of knowledge and technologies based on scientific research, and to develop the comprehensively educated, ethically responsible, creative and enterprising personality; 2) to elaborate harmoniously the scientific cognition of various areas, to conduct scientific research and experimental (social, cultural) expansion of high level, to prepare scientists, to conduct various practical activities and to cooperate with national and international partners in the scientific and other areas; 3) to provide health care services to the Lithuanian population; 4) to improve specialists' qualification and to retrain them; 4) to develop international cooperation in the main fields of activity.

15. The main fields of the university's activity are studies, research, and health care<sup>14</sup>. The strategic aim of the LSMU defined in its strategic action plan for 2013-2015 is “to create, accumulate, systematise, and disseminate scientific knowledge and the newest achievements of science and studies, to educate and develop a creative, honest, proactive, well-educated, independent, and enterprising personality, to foster democracy and well-being, and to develop a healthy and well-educated society; through this activity, to promote the economic and cultural prosperity of the country, the competitiveness of the economic activity, and social concord irrespectively of the employees', the students', and the free listeners' sex, race, political and religious beliefs, nationality, and citizenship”. The aim of this strategic plan is to ensure the quality of the education and training of biomedical specialists, to strive that the supply of the specialists meets their demand in the competitive labour market.

16. Thus, the *Midwifery* study programme conforms to the LSMU mission, strategic plan, and further development.

17. The *Midwifery* study programme also conforms to the project of the Nursing Studies Benchmark Statement <sup>15</sup>.

18. *The purpose of programmes for the acquisition of regulated professions.* Training programmes of midwives – like nurses, physicians, odontologists, and other specialists – in the EU member countries are harmonised according to the provisions of the Directive of the European Parliament and European Council on specialist training and recognition of professional qualifications – i.e. the Directive 2005/36/EC regulates the role of a midwife and defines minimum requirements and the order of activity and recognition of diplomas (registration)<sup>16</sup>. According to this Directive, a midwife's competences are oriented towards activities that ensure safe activities in midwifery. In the EU, midwives are attributed to the group of free mobility specialists, which means that their professional qualification acquired in Lithuania is automatically recognised in any EU country, provided the requirements of the aforementioned Directive are met. Free specialist mobility in the EU is necessary to ensure smooth functioning of the internal market because this stimulates competitiveness within the EU – and thus the improvement of personal and professional skills of these specialists. The teaching contents of the theoretical part and practical training of the *Midwifery* study programme fully conforms to the requirements for midwife training set in the aforementioned Directive and the new EU Directive 2013/55 /EC<sup>17</sup> which will come into force since 1<sup>st</sup> January 2016.

19. The university-level first-cycle study programme *Midwifery* also meets the provisions of the Bologna process. Upon acquiring Bachelor's degree, the students will be able to continue their studies in Master's programmes at the LSMU or other university-level higher education institutions, and following that – in the only doctoral study programme in the field of Nursing at the LSMU, or in other doctoral study programmes.

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<sup>13</sup>LSMU Statute. Resolution of the Seimas of the Republic of Lithuania No. XI-973, 30 June 2010 (new wording of the Resolution of the Seimas of the Republic of Lithuania No. XI-2147, 28 June 2012)

<sup>14</sup>LSMU Strategic Action Plan for 2013-2015 [www.lsmuni.lt](http://www.lsmuni.lt)

<sup>15</sup>Nursing Studies Benchmark Statement. Vilnius, 2015

[http://www.skvc.lt/uploads/documents/files/Kokybės%20užtikrinimas/krypciu\\_aprasai/Slaugos\\_krypties\\_aprasas.pdf](http://www.skvc.lt/uploads/documents/files/Kokybės%20užtikrinimas/krypciu_aprasai/Slaugos_krypties_aprasas.pdf)

<sup>16</sup>Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on minimum training requirements and the recognition of professional qualification of nurses and midwives.

<sup>17</sup> Directive 2013/55/EU Of The European Parliament And Of The Council of 20 November 2013



#### 1.4. Validity of the aims of the programme

20. *The associations of the aims of the programme with its purpose.* The aim of the first-cycle study programme *Midwifery* is to educate and train highly qualified midwives who would provide midwifery care on all levels of health care when working in a specialist team and/or independently.

21. Since 1988, the profession of a midwife in European countries, including Lithuania, has undergone major changes in the fields of specialist training, midwifery practice, professional regulation, and freedom of mobility. In 2000, the WHO encouraged all countries to consider safe motherhood as the priority when forming state policy and budget. The Aachen declaration “Midwifery for All” (2000) further strengthened this political principle by stating that the provision of maternity care to the 435 million women in the European Region of WHO is a major public health issue, given that four out of five women become mothers<sup>18</sup>. In Lithuania, in the development of primary health care, outpatient assistance, and nursing, increasingly more functions and responsibilities in the activity of a multidisciplinary health care team are delegated (or intended to be delegated) to a midwife – as to all nursing personnel<sup>19,20,21</sup>. A midwife provides services of health education and improvement, family planning and reproductive health, midwifery care and assistance not only to girls, women, pregnant women and women after childbirth, but also to newborns and whole families<sup>22</sup>. High-quality midwifery care may only be ensured by highly qualified midwifery specialists, teachers, and researchers.

21. *The associations of the aims of the programme with the type and the cycle of studies.* The aim of the first-cycle study programme *Midwifery* is to educate and train highly qualified specialists, and thus a graduate needs general university education subjects, basics of the profession, and special professional subjects. The first-cycle programme educates and trains specialists who are capable of working both independently and in a team, and thus 50% of the scope of the programme is clinical training. The university-level study programme is based on cognitive abilities and the development of the research competence, which corresponds to the A sublevel of the VI qualification level in the National Qualifications Framework of Lithuania (i.e. university studies)<sup>23, 24</sup>.

#### 1.5. Results of the studies of the programme

##### ***Comprehensiveness and attainability of the learning outcomes***

22. *The contents of the learning outcomes.* The learning outcomes of the first-cycle study programme *Midwifery* are in detail presented in Tables 1.2 and 1.3. Students who successfully complete the first-cycle study programme *Midwifery*:

- 1) *Will understand* and critically evaluate theories and principles of professional activity;
- 2) *Will know* the newest methods of professional activity and will be capable of creatively solving problems arising in a midwife’s work;
- 3) Will be able understand relationship between the state of health and the physical and social environment of the human being, and of his behaviour;
- 4) *Will be able* to prepare women, pregnant women, and women after childbirth for instrumental examinations and therapeutic interventions;
- 5) *Will be able* to provide midwifery care and assistance to mature girls, adolescents, and women prior to, during, and after pregnancy, and to provide care of the newborn;
- 6) Will be able recognising the warning signs of abnormality in the mother or infant which necessitate referral to a doctor and assisting the latter where appropriate;
- 7) *Will be able* to manage low-risk childbirth and provide care to the neonate;

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<sup>18</sup>Association of Radical Midwives. The Aachen Declaration on Midwifery for All, Germany, 2000 <http://www.science-parliament.eu/node/554>

The Republic of Lithuania Law on Nursing Practice and Midwifery Practice, 14 July, 2009, No. XI-343, Vilnius

<sup>16</sup> Order of the Minister of Health of the Republic of Lithuania “On the Requirements for the Provision of Obstetric and Gynaecological Outpatient Personal Health Care Services” No. V-527, 9 June 2003, Vilnius

<sup>17</sup>A Draft of the Reorganisation of the Health Care System. Ministry of Health of the Republic of Lithuania.

[http://www.sam.lt/go.php/sveikatos\\_prieziuros\\_reforma](http://www.sam.lt/go.php/sveikatos_prieziuros_reforma)

<sup>18</sup>Order of the Minister of Health of the Republic of Lithuania No. V-245 “On the Approval of the Lithuanian Norm of Medicine MN 40:2006 “A Midwife: Rights, Duties, Competence, and Responsibility” (Official Gazette, 2006, No. 40-1446)

<sup>19</sup>Draft of the National Qualifications Framework. Lithuanian Labour Market Training Authority, 2007, Vilnius.

<http://www.lkt.gov.lt/files/LNKS%20metmenys.pdf>

<sup>24</sup>UNFPA. The State of the World’s Midwifery 2011. [www.unfpa.org/sowmy/resources/en/main.htm](http://www.unfpa.org/sowmy/resources/en/main.htm)



- 8) *Will be able* to perform therapeutic procedures and midwifery operations within the limits of a midwife's competence and functions;
- 9) *Will be able* to organise and implement family reproductive health care, to provide consultations on family planning and family education, to prepare parenthood programmes, and to prepare a woman for childbirth;
- 10) *Will be capable* of cooperation and leadership in teamwork when providing midwifery assistance and care, and will be able to develop independence and professional and personal responsibility;
- 11) *Will be capable (will acquire transferable abilities)* of qualified conveyance of professional knowledge and practical experience when implementing informal education of midwifery and specialised midwifery practice and when performing the functions of a professional clinical training teacher (mentor);
- 12) *Will be able (will acquire transferable abilities)* to participate in scientific research in the fields of midwifery and nursing, and will develop evidence-based practice.

23. *The complexity level of the learning outcomes.* The complexity of the midwifery practice and the degree of responsibility raises certain requirements to a midwife's competence, which consists of the knowledge of theories and principles of professional activity and cognitive (especially those of logical and creative thinking) and practical abilities to perform the work and to develop one's professionalism<sup>25</sup> (learning outcomes 1-2).

24. After the reorientation of midwifery care towards the primary health care level, a significant part of a midwife's activity moved from the hospital to the community where a midwife is responsible for family members' health education and improvement, and disease prevention (learning outcome 3).

25. The increasing (albeit not significantly so) prevalence of infectious sexually transmitted diseases (tuberculosis, hepatitis, HIV/AIDS) in the EU countries threatens maternal and neonatal health and life, and expands the midwife's field of activity. In Lithuania, 40.7% of children's deaths occur during the perinatal period (from the 22<sup>nd</sup> week of pregnancy until the end of the 6<sup>th</sup> day after the birth)<sup>26</sup>, and during this period, a midwife is the main specialist who takes care of the mother's and her foetus or newborn's health (learning outcomes 4-6).

26. Midwives perform a unique role in strengthening and protecting women's health, providing consultations on family planning and care of reproductive health, and taking care of families with children (learning outcome 7).

27. When providing services to pregnant women and those who have recently given birth<sup>27</sup>, a midwife faces double professional responsibility - for the mother and for the foetus or a newborn. For a midwife, it is especially important to develop the abilities of cultural tolerance, respect to human dignity, representation and defence of rights, communication and cooperation, and management and leadership (learning outcome 8).

29. In addition to the maximally adapted university-level practical training base, practical training of midwives in the informal education setting also requires qualified teachers in midwifery. In addition to the necessary cognitive and practical abilities, students in the *Midwifery* study programme also develop the necessary transferable abilities of qualified conveyance of professional knowledge and practical experience when participating in the professional training and qualification improvement of midwives and when performing the functions of a professional clinical training teacher (mentor) (learning outcome 9).

30. Midwives have the right to conduct scientific research in midwifery, and thus the 10<sup>th</sup> learning outcome is about the development of midwives' scientific competence, which is required in the evaluation of the benefit of the health care reform, the planning of staff resources, the quality of health care and midwifery services, and also for the renewal and creation of an effective space of European scientific research<sup>28</sup>.

31. The complexity of the learning outcomes of the *Midwifery* study programme is determined by the characteristics of a midwife's activity: 1) The complexity of technological, organisational, and occupational tasks; 2) High or nearly absolute level of independence; 3) great responsibility for the decisions made (a question of patients' life); 4) team-based and multidisciplinary character of the work; 5) continuously changing (in terms of knowledge and technologies) environment of activity; 6) functions of management and leadership; 7) creative and scientific evidence-based problem solving.

<sup>25</sup>Order of the Minister of Health of the Republic of Lithuania "On Health Examinations of Pregnant Women", No. V-1135, 29 December 2006, Vilnius

<sup>26</sup> Lithuanian Health Information Centre. <http://www.hi.lt/>

<sup>27</sup> <sup>17</sup>A Draft of the Reorganisation of the Health Care System. Ministry of Health of the Republic of Lithuania.

[http://www.sam.lt/go.php/sveikatos\\_prieziuros\\_reforma](http://www.sam.lt/go.php/sveikatos_prieziuros_reforma)

<sup>28</sup> Fleming V, Holmes A. Basic nursing and midwifery education programmes in Europe. 2005 March

32. The programme is oriented towards students' learning achievements that, according to the character of the knowledge, abilities, and competences (expanded functional and cognitive competences)<sup>29</sup> required for a midwife's activity and the criteria and characteristics of a midwife's activity correspond to the A sublevel of the VI qualification level in the National Qualifications Framework of Lithuania (i.e. university studies)<sup>30</sup>.

33. In the Lithuanian Classification of Occupations<sup>31</sup>, midwives are not separated, and are closest to nurses (2230). The newly approved Classification of the Areas and Fields of Studies<sup>32</sup> lists the field of nursing (B700), and midwifery is a branch of the study field of nursing because in international documents, midwifery is attributed to the study field of nursing (B720)<sup>33</sup>. For this reason, the *Midwifery* study program is pursued in the study field of Nursing. The administration of the programme is the responsibility of the Department of Nursing and Care (the Faculty of Nursing). The Department is very closely cooperating with the Clinical Department of Obstetrics and Gynaecology (Medical Academy, Faculty of Medicine).

### ***The compatibility of the learning outcomes***

34. *The learning outcomes at the programme level.* The programme has been designed, taking into consideration the functional, cognitive, and general competences of a midwife necessary for the graduates of the first-cycle (university-level full-time professional study) programme. The first two years of studies in the programme are oriented towards the general basics of the study area (Biomedical Sciences) and study field (Nursing), while the other two years – towards deeper studies of the basics of midwifery and specialised education. The learning results of the programme are oriented towards the learning outcomes and are formulated as a clear criterion for achievement evaluation because they show students' behaviour after graduation (Table 1.2).

35. *Associations between programme-level and subject-level learning outcomes.* The learning outcomes include the abilities that are suitable and most important for the professional activity. The learning outcomes are coordinated with the aims of the programme. The learning outcomes of the *Midwifery* study programme are compatible with each other, do not duplicate but rather complement each other, and create the whole of the necessary knowledge and cognitive, practical, and transferable abilities (see Tables 1.3). The studies are pursued based on the module principle. Each module has its aim, objectives, content, and the end result. The arrangement of the modules is based on the principle of logic – i.e. a module cannot be taught if the set result has not been achieved beforehand.

36. During the first year of studies, mostly general university education subjects and general subjects of the *Midwifery* programme predominate. During the later years of studies (semesters 4-8), specific clinical subjects are taught, requiring cognitive, practical, and transferable abilities (see Table 1.3); practical abilities predominate – and they are directly compatible with the aforementioned learning outcomes (see Table 1.2).

37. *Evaluation of learning outcomes.* The University applies diagnostic, formative, and cumulative assessment of students' achievements<sup>34</sup>. The diagnostic evaluation is applied to check the students' minimal required preparation for the classes, and helps teachers to select the methods of studies and/or adapt the study content, creating favourable conditions for the students' more effective achievement of the expected learning outcomes. The formative assessment is applied during the course of the module for critical assessment and adjustment of students' learning. In order to evaluate general competences in study programmes (or their parts) where practical and social skills are important (problem-solving in problem-based studies, practical training, residency programmes, etc.), the formative assessment is used by applying the multi-source feedback technique (teacher-group-individual feedback, 360-degree feedback, etc.). The cumulative assessment is used to evaluate student's achievements in the studies of a subject (module). The cumulative score is part of the cumulative assessment.

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<sup>29</sup> Education and Practice of Midwifery in Europe Workshop. Summit of European Midwifery regulators, 2009 May 22, London. Nursing and Midwifery Council. <http://www.nmc-uk.org/aDisplayDocument.aspx?DocumentID=5953>

<sup>28</sup> Draft of the National Qualifications Framework. Lithuanian Labour Market Training Authority, 2007, Vilnius. <http://www.lkt.gov.lt/files/LNKS%20metmenys.pdf>

<sup>29</sup> Lithuanian Classification of Occupations. [http://213.197.179.229/mod/klasifikatorius/?p=0\\_9](http://213.197.179.229/mod/klasifikatorius/?p=0_9)

<sup>30</sup> Resolution of the Government of the Republic of Lithuania "On the Approval of the List of Qualification Degrees and the Areas and Fields of Studies According to which Studies at Higher Education Institutions are Organised", No. 1749, 23 December 2009.

<sup>31</sup> Joint Academic Classification of Subjects [www.hesa.ac.uk/dox/jacs/JACS\\_complete.pdf](http://www.hesa.ac.uk/dox/jacs/JACS_complete.pdf)

<sup>34</sup> Regulations of the Assessment of Students' Learning Achievements. Approved by the LSMU Rectorate, 20 June 2014. Nr.47-05

**Table 1.2. Competencies and learning outcomes of Midwifery programme** (in correspondence with legal documents)

Competences		Learning outcomes	
1.	Knowledge and its application. A graduate has the following abilities:	1.1	Knowledge of the newest methods of professional activity - <i>Nursing Studies Benchmark Statement</i>
		1.2	Knowledge of the professional terminology and the context and aims of its use. - <i>Nursing Studies Benchmark Statement</i>
		1.3	Understanding, critical evaluation, and application of the theories and principles of professional midwifery and nursing. <i>EU Directive Article 40 3.a - detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology</i>
		1.4	Knowledge of the anatomical, physiological, and pathological peculiarities of the development of a mature girl, an adolescent, and a woman. Knowledge of the anatomical, physiological, and pathological peculiarities of the development of a foetus and a newborn. <i>EU Directive Article 41 c - detailed knowledge of biological functions, anatomy and physiology in the field of obstetrics and of the newly born, and also a knowledge of the relationship between the state of health and the physical and social environment of the human being, and of his behaviour</i>
		1.5	Knowledge of the processes and course of physiological and pathological pregnancy and childbirth, the principles of analgesia and woman's care, and the principles of the provision of primary and special resuscitation assistance. <i>EU Directive Article – V.5 b- Preparation for childbirth and parenthood, including psychological aspects; Analgesia, anaesthesia and resuscitation</i>
		1.6	Knowledge of the regularities of the principles of theoretical and general pharmacology and the characteristics of the main groups of pharmaceuticals. <i>EU Directive Article 42 j - carrying out treatment prescribed by doctors</i>
2.	Abilities to conduct a research. A graduate has the following abilities:	2.1	Participation in scientific research in the field of midwifery. <i>EU Directive Article 40 3.a - detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology</i>
		2.2	The ability to collect information, analyse data, and correctly present and interpret the results. <i>EU Directive Article 40 3.a - detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology</i>
		2.3	The development of evidence-based midwifery. <i>EU Directive Article 40 3.a - detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology</i>
3.	Social abilities. A graduate has the following abilities:	3.1.	Qualified conveyance of professional knowledge and practical experience. <i>EU Directive Article 40 3.a - detailed knowledge of the sciences on which the activities of midwives are based, particularly midwifery, obstetrics and gynaecology</i>
		3.2	Performing the functions of a professional clinical training teacher (mentor). <i>EU Directive Article 41 e - adequate understanding of the training of health personnel and experience of working with such personnel</i>
		3.3	Cooperation and leadership in teamwork, and solution of management and legal issues in the work of a midwife. <i>EU Directive Article 40 3.b -adequate knowledge of the ethics of the profession and the legislation relevant for the practice of the profession</i>
		3.4	Knowledge of the regularities of the principles of theoretical and general pharmacology and the characteristics of the main groups of pharmaceuticals. <i>EU Directive Article 41 c adequate knowledge of general medical knowledge (biological functions, anatomy and physiology) and of pharmacology in the field of obstetrics and of the newly born</i>
4.	Personal abilities. A graduate has the following abilities:	4.1	The development of independence and professional and personal responsibility. <i>Nursing Studies Benchmark Statement</i>
		4.2	Independent study and critical analysis of the newest scientific professional literature. <i>EU Directive Article 41 a - adequate knowledge of the sciences on which the activities of midwives are based, particularly obstetrics and gynaecology</i>
5.	Special abilities. A graduate has the following abilities:	5.1	Understanding of the family policy, consulting individuals on questions of family planning, family education, and provision of psychological assistance in case of crisis. <i>EU Directive Article 42 a provision of sound family planning information and advice</i>
		5.2	Organisation and implementation of health education and self-care for healthy and ill individuals. <i>EU Directive Article 42 a provision of sound family planning information and advice</i>
		5.3	Managing low-risk childbirth and provision of full care to the woman and the neonate. <i>EU Directive Article 42 h - examining and caring for the new-born infant</i>
		5.4	Provision of care to healthy and ill newborns. <i>EU Directive Article 42 h- taking all initiatives which are necessary in case of need and carrying out where necessary immediate resuscitation</i>
		5.5	Provision of midwifery care and assistance to mature girls, adolescents, and women prior to, during, and after pregnancy. <i>EU Directive Article 42 b - diagnosis of pregnancies and monitoring normal pregnancies; carrying out the examinations necessary for the monitoring of the development of normal pregnancies</i>

	5.6	Preparation of women, pregnant women, and women after childbirth for instrumental examinations and therapeutic interventions. <i>EU Directive Article 42 e - caring for and assisting the mother during labour and monitoring the condition of the foetus in utero by the appropriate clinical and technical means</i>
	5.7	Performing therapeutic procedures and midwifery operations within the limits of a midwife's competence and functions, and provision of CPR and first aid to pregnant women and neonates. <i>EU Directive Article 42 f - conducting spontaneous deliveries including where required episiotomies and in urgent cases breech deliveries</i>
	5.8	Controlling the dosage of medicines and providing the initial pharmacological correction required during the main midwifery procedures. <i>EU Directive Article 42 j - carrying out treatment prescribed by doctors</i>
	5.9	Recognising the warning signs of abnormality in the mother or infant, which necessitate referral to a doctor and assisting the latter where appropriate. <i>EU Directive Article 42 g - recognising the warning signs of abnormality in the mother or infant which necessitate referral to a doctor and assisting the latter where appropriate</i>
	5.10	Organisation and implementation of reproductive health care for families. <i>EU Directive Article 42 a - provision of sound family planning information and advice</i>
	5.11	Preparation of parenthood programmes, preparation of a woman for childbirth, and promotion of natural breastfeeding. <i>EU Directive Article 42 d - provision of programmes of parenthood preparation and complete preparation for childbirth including advice on hygiene and nutrition</i>
	5.12	Creative solution of problems arising in a midwife's work, and application of ethical decision-making models and ethical principles in daily activity. <i>EU Directive Article 40 b adequate knowledge of the ethics of the profession and the professional legislation</i>

38. The methods of the evaluation of students' achievements are selected by the teachers preparing the subjects (modules) and approved by the Study Programme Committee (see section 5.4). The assessment strategy is included in the description of the subject (module) and defines the form, the time, and the criteria of each evaluation, as well as its percentage in the total evaluation (if applicable). The methods of the evaluation correspond to the learning outcomes defined in the programme of the subject (module) and are in line with the content and the methods of the subject (module). When selecting the evaluation methods, teachers may receive methodical assistance from the LSMU Centre for Teachers' Educational Competence.

39. When applying the cumulative assessment, its components are used to evaluate certain learning outcomes set in the programme of the subject (module). The evaluation strategy and criteria of the subject (module) is publicly presented in the description of the subject (module) (available in the SIS) prior to the initiation of the studies of the concrete subject (module), and the students are familiarized with them before the studies begin. The cumulative score is calculated in the 10-point scoring system, summing up all evaluations from 1 to 10, and multiplying the sum by the coefficient that corresponds to the percentage share of the teaching part. The cumulative portion should be no less than 50% of the final evaluation. If a student failed the final examination but accumulated no less than 80% of the cumulative score, he or she, with the permission of the Dean, has the right to one more attempt at passing the examination. Students have the right to forgo the final examination if the cumulative score is sufficient for a positive final evaluation. Students' theoretical knowledge and practical skills are evaluated separately; the evaluation of practical skills is also part of the cumulative score.

40. All theoretical examinations are taken in written. Students may view their final module evaluations in the Study Information System (SIS) via access with an individual code. Upon a student's request, he or she may receive an explanation of the evaluation. The student dissatisfied with the final evaluation has the right to an appeal; the hearing of this appeal follows the order set in the Regulations of Studies<sup>33</sup>.

41. If at the end of the semester a student fails to get the intermediate credit, he/ she is deemed an under-achiever and is reported to the Dean's Office.

42. The criteria of the evaluation of students' achievements correspond to the expected learning outcomes: practical skills are evaluated by practical assignments, and theoretical knowledge – by tests.

43. Practical skills are evaluated throughout the study process in various subjects and according to the requirements defined in the descriptions of concrete subjects. The evaluation of practical skills is carried out by using an objective structured clinical examination (OSCE). During this examination, all students are examined at the same stations, receive the same tasks, and are evaluated by the same evaluators. Each station has a very specific task, which is presented and evaluated in the same manner. At the end of each semester, students undergo clinical training where

their practical skills are evaluated. To evaluate skills gained during clinical training, “Clinical Training Diaries” are prepared with a detailed description of the learning outcomes to be achieved during each clinical training period. The competences expected to be achieved during the clinical training are in line with the EU Directive 2005/36/EC<sup>7</sup> and EU Directive 2013/55 /EC<sup>35</sup>.

44. The graduation thesis is prepared during the fourth year of studies; its preparation is assigned 10 credits. A Bachelor’s graduation thesis has to analyse an issue relevant for the field of midwifery or health policy and its formation, striving to use the obtained results in practical midwifery activity or for further research. The order of the preparation and defence of Bachelor’s graduation theses is regulated by the LSMU Regulations of Studies<sup>36</sup> and the Regulation for Writing and Defending Theses for First-Cycle (Bachelor) Study Programmes at the LSMU Faculty of Nursing<sup>37</sup>. These documents provide detailed, understandable, and clear information about the course of the preparation of the graduation thesis, including the selection of the topic, the formatting of the work, and its presentation at a public meeting. Detailed instructions for students about the preparation of scientific work in the fields of rehabilitation and nursing are given in the University publication “Preparation of Research Papers in Study Fields of Rehabilitation and Nursing”<sup>38</sup>.

45. *Reasonable updating of learning outcomes.* The learning outcomes are being continuously updated in response to the changes in the legal acts of Lithuania and the EU regulating professional competences and abilities (e.g. after the new “Law on the Nursing Practice and Midwifery Practice” was passed), and taking into consideration the results of the internal assessment of the quality of studies (see section 2.6.2) and the opinions and propositions of social shareholders (graduates, employers, or professional organisations).

#### 1.2.3 Periodicity of the revisions of the study outcomes, and the involvement of social stakeholders

46. Regular reassessment of the learning outcomes increases the competitive superiority of the study programme with respect to other similar programmes. The Study Programme Committee analyses the collected information about the correspondence of the expected learning outcomes to the current scientific progress, evaluates the shortcomings of the study programme that emerge during the studies and, if needed, recommends methods for the elimination of those shortcomings. The conclusions and the recommendations of the Committee are discussed at the Faculty Board, and respective resolutions are made. Changes in the curriculum and the contents of the study programme are made with the participation of all departments, also taking into account students’ and graduates’ opinion and in cooperation with social stakeholders and employers.

#### **Changes in the study programme since the last accreditation procedure**

*The aim of the study programme was reviewed and slightly edited, highlighting midwifery skills. Competences were reviewed and edited in order to make them to conform both the EU Directive 2005/36/EC and EU Directive 2013/55 /EC. Evaluation of the clinical skills is carried out by using an objective structured clinical examination (OSCE). Since 2014 “Clinical Training Diaries” have been updated in accordance with the EU Directive 2005/36/EC and EU Directive 2013/55 /EC provided a list of competencies and number of required procedures to perform during the studies.*

#### **Summary**

47. The aim of the *Midwifery* study programme meets University mission, and the learning outcomes of the *Midwifery* programme correspond to the international recommendations. System of monitoring do all graduates are achieving stated learning outcomes on proper level is under development.

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<sup>35</sup> Directive 2013/55/EU Of The European Parliament And of The Council of 20 November 2013

<sup>36</sup>Regulations of First-Cycle, Second-Cycle and Integrated Studies at the Lithuanian University of Health Sciences. Approved by the LSMU Senate on 20 June 2014, by Resolution No. 47-05

<sup>37</sup> Kimtys A. et al. Regulation for Writing and Defending Theses for First-Cycle (Bachelor) Study Programmes at the Lithuanian University of Health Sciences Faculty of Nursing. Kaunas, 2012; <http://ismuni.lt/it/struktura/medicinos-akademija/slaugos-fakultetas/svarbiausi-fakulteto-dokumentai/>

<sup>38</sup> Pauliukėnas L, Šeškevičius A. Reabilitacijos ir slaugos krypčių mokslinių darbų rengimas (Preparation of Research Papers in Study Fields of Rehabilitation and Nursing). Kaunas, Vitae Littera, 2008





## 2. THE DESIGN OF THE STUDY PROGRAMME

### 2.1. Curriculum of the programme

48. **Suitability of the scope of the programme.** The duration of the studies is four years, 240 ECTS credits, type of studies – full-time studies. Such duration of studies is necessary for the successful implementation of the aim and the objectives of the programme. The duration (four years) of the programme is especially determined by the requirements of the Directive for midwifery students to fulfil a certain number of concrete tasks (examination and follow-up of pregnant women, participation and assistance during childbirth, postpartum maternal and neonatal examinations, etc.) during their clinical training (learning in real clinical environment). These tasks are related to the probability and frequency of concrete midwifery situations in a health care institution – the base of clinical training. The character of full-time studies is regulated by the EU Directive<sup>39</sup>.

49. The study programme consists of 8 semesters, and the scope of each semester is 30 credits. The subjects of the programme are linked into modules and divided into subject groups: subjects of the study field - 208 credits, general university subjects – 20 credits, and 12 credits are intended for the thesis preparation and defence (totally 240 ECTS, Table 2.1.).

50. Clinical training is organized in such way that during all four years students gain competences intended in the EU Directive for practical and clinical training (Annex 1 and Clinical Training Diaries). Clinical training consists of 2261 hours (84 credits). During Clinical Training students gain the competences intended in clinical training of the EU directive 2005/36/EC and Directive 2013/55/EU, i.e. not fewer than 100: pieces of advice for the pregnant and prenatal control/examinations; care of not fewer than 40 pregnant; participation in not fewer than 40 deliveries; seaming of perineum; women care in case of a risky pregnancy (>40) and care of not fewer than 100 women after a delivery and care of their neonates. The following is recorded in the Clinical Training Diaries.

**Table 2.1. The structure of the programme corresponds to the EU<sup>40</sup> and national<sup>41</sup> requirements for studies**

	Credits of the subjects on the midwifery study programme	National requirements
Subjects of the study field (including elective courses)	208 credits	≥165 credits
General university education subjects	20 credits	≥15 credits
Preparation and defence of the graduation thesis	12 credits	≥12 credits
Totally the programme	240 credits	240 credits
Clinical training	2261 hours (84 credits)	≥15 credits

51. After the completion of each module, students' knowledge and abilities are evaluated by an examination. After clinical training and practical classes students undergo the evaluation of practical skills. The study programme is completed with the preparation of Bachelor's graduation thesis and its defence at a public session of the Defence Committee.

#### 2.2.2. Consistency of the study subjects

52. The studies are pursued on the basis of the module principle: related subjects are grouped into one module with a single aim. Each semester contains 2-3 modules, not more than 5 examinations. Each year, students undergo clinical training.

53. The structure of the programme allows the students to acquire important basic knowledge and skills during the first two years of studies. This knowledge and skills are based on the integration of theory and practice, emphasize the importance of midwifery, and form professional principles.

54. During the first year of studies, students become familiarized with the basics of clinical nursing and acquire knowledge in normal physiology, human anatomy, pathology, sociology, and ethics. The subjects taught meet the

<sup>39</sup>Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on minimum training requirements and the recognition of professional qualification of nurses and midwives.

<sup>40</sup> Directive 2013/55/EU Of The European Parliament And of The Council of 20 November 2013

<sup>41</sup> Resolution of the High Education Ministry of the Republic of Lithuania "On the general requirements for undergraduate and integrated study programs", No. V- 501, 09 April 2010



requirements set for midwives by the EU Directive<sup>42,43</sup>. During the first and the second year of studies, the students undergo clinical training at the LSMU Hospital (Department of Obstetrics and Gynaecology and Department of Neonatology). During their clinical training, students become familiarised with the hand hygiene principles and methods for performing nursing procedures. They also learn to perform anthropometric measurements, personal hygiene procedures, patient transportation and feeding, how to measure and record body temperature, pulse, and arterial blood pressure, and how to perform injections and infusions, catheterisation, wound dressing, gastric lavage, and oxygen therapy. In addition to that, students also learn how to fill in medical documents.

55. During their third year of studies, students learn how to provide maternal and foetal (neonatal) care in normal and pathological pregnancy and delivery as well as during the early postnatal period, they learn the peculiarities of maternal and neonatal care, the main features of a midwife's work, and the principles of the organisation of assistance. During their practical training, students learn to identify and evaluate life-threatening conditions and to provide emergency assistance. The students learn to manage physiological delivery and to provide immediate postnatal care to the mother and the new born, and become familiarised with the principles of the organisation of assistance during critical conditions of the mothers immediately after the delivery as well as with neonatal first aid and resuscitation principles. In addition to that, the students learn how to prepare couples for parenthood and childbirth, and to consult pregnant women and to educate them about healthy lifestyle.

56. During the fourth year of studies, the students during their clinical training become familiarised with the basics of neonatal care and the principles of care and nursing of healthy and ill neonates. They also learn to apply various techniques and educational programmes, emphasizing the peculiarities of nursing of healthy and ill neonates, and to explain the peculiarities of medication use in neonatology and possible adverse effects of medication.

57. In the fourth year, clinical subjects are grouped in such modules as "Health care of a mother and a neonate", "Critical conditions in midwifery", "A woman's health and community nursing", etc., and help students develop practical and cognitive abilities required for the care of a women's a neonates' and families' well-being. The studies of these subjects also form transferable abilities and competencies that can be applied in the care of new born of women's of any age and health status.

58. The subjects in the programme are arranged so that the students develop analytical and critical thinking, and during their fourth year of studies are capable of systematising information, compiling a plan of care, and making decisions. Such arrangement of the modules ensures the development of abilities as well as their applicability in other areas.

59. The students complete their studies by defending their Bachelor's thesis. The students have to choose the topic analysing an issue relevant for the field of midwifery. Bachelor thesis is mostly supervised by midwives (Annex 4).

60. The graduation thesis may be defended by a student who has completed the whole study programme and is allowed by Rector's order for public defence. The graduation thesis should reveal the student's ability to apply the knowledge acquired during his or her studies, to select scientific literature and use it (present, analyse, etc.), to apply research methods, to tackle the set tasks independently, to present conclusions and recommendations, and to describe the work in a concise and orderly manner, and in correct language.

61. The student prepares the graduation thesis independently, consulting the scientific supervisor. The preparation of the graduation theses is supervised by the LSMU MA FN qualification committee for graduation theses in first-cycle studies in the rehabilitation study field; the Committee is appointed by the order of the Rector. Students defend their graduation theses at the graduation theses defence committee formed by the Rector of the LSMU.

62. The compulsory subjects ensure the formation of skills necessary for professional activity and defined in legal acts<sup>44</sup>. The elective subjects allow students to engage in deeper analysis of the topics of interest. Elective subjects (along with free-elective subjects) are listed in the LSMU information system of studies (LMUSIS)<sup>45</sup>; students choose the subjects and register for them according to the order set in the LSMU Regulations of Studies.

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<sup>42</sup>Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on minimum training requirements and the recognition of professional qualification of nurses and midwives.

<sup>43</sup> Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System

<sup>44</sup>Order of the Minister of Education and Science of the Republic of Lithuania No. V-2212, 21 November 2011 (Official Gazette, 2011, No. 143 - 6721)

<sup>45</sup> The Lithuanian University of Health Sciences <https://lsmusis.lsmuni.lt/>

### **2.2.3. Compliance of the contents of the studies with legal acts**

63. The *Midwifery* study programme has been prepared in compliance with strategic documents:

- The Law of the Republic of Lithuania on Higher Education and Research (Official Gazette, 2009, No. 54-2140);
- Methodical guidelines for the preparation and evaluation of the description of study programmes intended to be implemented (approved by the Director of the SKVC on 20 December 2010 by Order No. 1-01-162);
- Nursing subject benchmarking statement prepared at the SKVC by an expert group operating according to the agreement on public procurement of paid services (No. 7ESF9- 10, 1 October 2010; Amendment 2015);
- Description of the National Qualifications Framework, the resolution of the Government of the Republic of Lithuania of 4 May, 2010, No. 535 (Official Gazette, 2010, No. 56 – 2761).
- Description of the study cycles, approved by the Minister of Education and Science of the Republic of Lithuania on 9 April 2010 by Order No. V – 501 (Official Gazette, 2010, No. 44 – 2139).
- Order of the Minister of Health of the Republic of Lithuania of 3 April 2006, No. V-245 “On the Approval of the Lithuanian Norm of Medicine MN 40:2006 “A Midwife: Rights, Duties, Competence, and Responsibility” (Official Gazette, 2006, No. 40-1446).
- Recommendations for the preparation of the descriptions of fields of studies approved by the Minister of Education and Science of the Republic of Lithuania (on 15 December 2014 by Order No. V. – 2463);
- LSMU Regulations of Studies (Approved by the LSMU Senate on 20 June 2014, No.47 - 05; internet access: [www.lsmu.lt](http://www.lsmu.lt));
- Directive 2005/36/EC of the European Parliament and of the Council on minimum training requirements and the recognition of professional qualification of nurses and midwives;
- Directive 2013/55/EU of the European Parliament and of the Council of 20 November 2013 amending Directive 2005/36/EC on the recognition of professional qualifications and Regulation (EU) No 1024/2012 on administrative cooperation through the Internal Market Information System ( ‘the IMI Regulation’)
- The Munich Declaration “Nurses and Midwives: a force for health” (Copenhagen, WHO Regional Office for Europe, 2000).
- Fleming V., Holmes A. Basic Nursing and midwifery education programmes in Europe. A report to the World Health Organization Regional Office for Europe. March 2005

### **Changes in the study programme since the last accreditation procedure**

*The content and structure of some subjects (6 Module. Nursing Model; 7 Module. Basics of Clinical Nursing; 8 Module. Health care of a mother; 9 Module. Health care of a mother and a neonate I, 10 Module. Health care of a mother and a neonate II) have been significantly modified. 6 Module. Nursing Model: reduced theoretical hours, nursing plans were adapted for midwives and prolonged the hours of clinical training. 7 Module. The Module Basics of Clinical Nursing: adapted to midwives launching a new subject “Nursing of Women with Surgical Diseases” and prolonged clinical training. There were designed three separate modules from two modules (according to the requests and the needs of students): Health care of a mother; Health care of a mother and a neonate I and II, followed by separate clinical trainings in these modules. There was also reorganized Midwifery Clinical Training I, II and III with prolonged hours for clinical training.*

### **Summary**

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64. Programme structure, content, and scope of study are appropriate to achieve learning outcomes and meet the Lithuanian and European legislation requirements. The subjects are organized in a consistent sequence and are not duplicating. The programme structure has changed due to increased numbers of hours dedicated to clinical training. Student – centred and outcome based approach is still quite new for the staff and needs further development. To develop student’s practical skills, the clinical skill training rooms have been outfitted and a modern hybrid laboratory has been equipped. In addition to that, students can develop their practical skills in the Medical Simulation Centre.

### 3. TEACHING STAFF

#### 3.1. Staff recruitment

65. In order to ensure that the staff's abilities, skills, and knowledge are sufficient for the implementation of its strategy, the University plans the need for human resources (from the quantitative and qualitative perspectives) on the basis of its Statute and Guidelines, and satisfies this need in accordance with the EC on the European Charter for Researchers and on a Code of Conduct for the Recruitment of Researchers (2005/251/EC), the Labour Code of the Republic of Lithuania<sup>46</sup>, the Law of the Republic of Lithuania on Higher Education and Research, the Description of Minimal Qualification Requirements for the Positions of the Research Workers of National Institutions of Science and Studies approved by the Research Council of Lithuania<sup>47</sup>, and the Methods for the Evaluation of the Real Resources of a Higher Education Institution<sup>48</sup>. On the basis of these and other legal acts, the principles of the selection and evaluation of the LSMU personnel<sup>49</sup> and the Order of the Organisation and Certification of Admission to LSMU Teacher's and Scientific Worker's Positions<sup>50</sup> have been prepared.

66. Because the *Midwifery* study programme belongs to the study field of Nursing, this programme is implemented by the Department of Nursing and Care. Since 2008, the Department has been headed by Assoc. Prof. A. Blaževičienė: pedagogical experience – 12 years, scientific experience – 7 years, Master's degree in Public Health, and a doctorate (PhD) in Biomedical Sciences.

#### 3.2. Staff structure

67. The principal criterion for teachers working in the *Midwifery* study programme is their competencies in respective areas, allowing for achieving the aim and the learning outcomes of the study programme. Teachers working in the *Midwifery* study programme have not only long experience in pedagogical work, but also the highest clinical qualification – they participate in the activity of various specialised organisations (related to midwifery): the Lithuanian Society of Obstetricians-Gynaecologists, the Society of Obstetricians-Gynaecologists of Kaunas Region, the Lithuanian Society of Contraception, and the European Society of Contraception and Reproductive Health (Annex No. 3, teachers' CVs). The Department of Nursing and Care together with the Department of Obstetrics and Gynaecology participates (since 2011) in the activity of the "Centre for the Sciences of Human Reproductive Health" established by the initiative of the World Health Organisation (WHO).

68. The LSMU *Midwifery* study programme has sufficient technical personnel – each department (department/clinic/institute) of the LSMU has an administrator for studies, who is responsible for assistance in the organisation of the study process, and a laboratory assistant who is responsible for the subdivision's material property and its maintenance. The LSMU also has a Centre of Information Technologies, whose staff is responsible for the maintenance of computers and software. If needed, all teachers and students have access to the assistance of the technical staff.

69. Teachers engaged in the training of students' practical skills have sufficient experience of practical work. The majority of the teachers are involved in clinical work at the LSMU Hospital and/or Kaunas Clinical Hospital, which allows for achieving the expected learning outcomes.

70. Teachers' turnover is very low, and its main reasons are either natural turnover (retirement or maternity leave) or the expiration of the employment agreement. This turnover does not have any influence on the quality of the study programme.

71. In total, 99 teachers participate in the *Midwifery* study programme. The youngest teacher is 26 years old, and the oldest – 73 years old. Teachers younger than 40 years of age comprise 19.2% (n=19) of the staff, those 41-50 years of

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<sup>46</sup> Labour Code. Seimas of the Republic of Lithuania. Official Gazette (2002, No. 64-2569);

<sup>47</sup> On the Approval of the Description of Minimal Qualification Requirements for the Positions of the Research Workers of National Institutions of Science and Studies. Resolution of the Research Council of Lithuania, Official Gazette (2009, No. 126-5472); On the Approval of the Description of Minimal Qualification Requirements for the Positions of the Research Workers of National Institutions of Science and Studies. Resolution of the Research Council of Lithuania, Official Gazette (2011, No. 60-2882);

<sup>48</sup> On the Approval of the Methods for the Evaluation of the Real Resources of a Higher Education Institution. Order of the Minister of Education and Science of the Republic of Lithuania, Official Gazette (2011, No. 92-4392).

<sup>49</sup> On the Approval of the Methods for the Evaluation of the Real Resources of a Higher Education institution. Order of the Minister of Education and Science of the Republic of Lithuania, Official Gazette (2011, No. 92-4392).

<sup>50</sup> Order of the Organisation and Certification of Admission to LSMU Teacher's and Scientific Worker's Positions at the Lithuanian University of Health Sciences. Approved by the LSMU Senate, (23 December 2010, No. 4-3; 30 May 2012, No. 21-08);

age – 36.4% (n=36), and teachers ≥50 years of age – 44.4% (n=44) of the staff. Of all teachers, 72.2% (n=72) have Doctor's degree, and 27.3% (n=27) – Master's degree; a part of them are doctoral students. Assistant teachers comprise 24.3% (n=24) of all teachers of the *Midwifery* study programme, lecturers - 30.3% (n=30), associate professors - 30.3% (n=30), and professors - 15.2% (n=15) of all teachers.

72. The qualification and professional activity of the academic staff are presented in Annex 2. The curriculum vitae, participation in scientific research, projects, scientific conferences, probation work, seminars, and exchange programmes, as well as the publications of the academic staff are presented in Annex 3.

70. The University's Centre for Teachers' Educational Competence<sup>51</sup>, following the Order of Ensuring LSMU Teachers' Educational Competence<sup>52</sup>, creates conditions for the teachers to develop their educational competencies.

73. The LSMU has created favourable conditions for the professional improvement of the staff. To develop educational competence, the Centre of Teachers' Educational Competence (CTEC) has been established at the LSMU. The Centre is engaged in continuous monitoring and improvement of educational competence, in compliance with the Order of the Assurance of Teachers' Educational Competence. Seminar cycles are organised, including "The Systems and Didactics of Higher Education", "The Peculiarities of Changes in the Paradigms of Teaching and Learning in the Context of the Bologna Declaration", "Organisation of Students' Independent Work", etc. The CTEC provides information about the courses, the topics, and the schedule of the classes in the LSMU website and the weekly "Ave Vita". The CTEC receives finances for the development of teachers' educational competence from the LSMU budget.

74. Some teachers are experts of the WHO, TAIEX, CQAHE, LSMU Science Foundation, and other programmes, members of various work groups of the Ministry of Health of the Republic of Lithuania, participants of various national and international projects, editorial board members or reviewers of national and international scientific journals, authors of articles in scientific, educational, and other journals, authors of textbooks and teaching books, and lecturers at the LSMU Centre for Postgraduate Studies. They also carry out various programmes for nurses and other health care specialists.

75. The proportion of the academic staff with over 10 years of experience in scientific, pedagogical, and practical fields is, respectively, 63.6%, 71.7%, and 68.7% (Annex 2). The teachers' practical activity is related to the subjects they teach. During the analysed period, the number of midwives-teachers has increased from 1 to 4 (Annex 2). Besides this, there are four midwives currently studying in Master's program who will join in teacher process in nearest future (according the requirements of the University only those who hold master degree can be employed as a teacher).

### **Teachers' participation in applied scientific research, projects, and scientific activity directly related to the analysed programme**

76. The academic personnel actively participate in scientific activity. Research related to midwifery is on following topics: Analysis of midwives participation in family planning counselling, Midwives' knowledge and opinion about different modes of delivery, Analysis of midwife-led care in low-risk delivery, Evidence based management of infertility, Creation of institution of mentorship/paediatric and adolescent gynaecology, Lithuania and Swiss cooperation program for pregnant women, maternal and neonatal health care services in Lithuania, Research in perinatology, Quality of perinatal care, prenatal, maternal and neonatal health care services in Lithuania, Pregnant women eating habits, Women's complaints after episiotomy and perineal ruptures analysis, Parental knowledge about Kangaroo method of newborns, In the first half of pregnancy, a woman tedious symptoms fit with their body mass index, Natal women knowledge about breastfeeding, European Survey of Sedation and Analgesia Practices for Newborns Admitted to Intensive Care Units.

77. Other scientific studies and projects related to the professional activity of the academic personnel are the following: project „Creation of the model of practice/training for I-II cycles teacher's and student's of Lithuanian higher educational institutions“, Project „Preparation and renovation of descriptors of study regulation“, development of the LieDM network, development of a qualification improvement programme for nursing specialists to acquire skills in electronic document management (ELDOKS), Project "Development of the Model for International Practice/Traineeship of Lithuanian Teachers and Bachelor/Master Students in Foreign Enterprises (located in the EU, EFTA, and NATO countries) and in International Organisations", Revival of educational programs of Nursing, Public Health and Veterinary Safety of Food enhancing international activities (SVEVIT)", School-age children and young people's health and physical activity research methodology, The improvement of activity of health care service institutions and enhancement of their service

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<sup>51</sup> Regulations of the LSMU Centre for Teachers' Educational Competence, Resolution of the LSMU Senate (20 June 2014, No. 47-03)

<sup>52</sup> Order of Ensuring LSMU Teachers' Educational Competence, Resolution of the LSMU Senate (21 January 2011, No. 5-07).

quality by personnel education, Leonardo da Vinci transfer of innovation project under the Lifelong Learning Programme LLP-LdV-TOI-2011-LT-0094 „The 11-13 weeks scan“, EmpNURS project, Higher Education as a Generator of Strategic Competences-HEGESCO". Education and Culture. Lifelong learning Programme, Renewing study programmes in undergraduate level based on principles of European higher education Area, International project LdV LLP LdV project My Compass, international project LdV LLP LdV project Fresh Start, International project: „Academy of New Possibilities - parents schools as a way of increasing competences connected with looking after and education of children", International study HAPIEE, EC project CHANCES, The Project of Research Council of Lithuania „The importance of risk factors in the predicting incidence and mortality from CVD“, Two-country Project „Impact of nutrition and smoking habits, consumption of supplements on biomarkers in groups of middle-aged and elderly persons“.

78. The academic personnel have published textbooks, monographs, methodical aids, scientific articles in peer-reviewed journals, etc. The publications of the academic personnel are presented in Annex 3.

#### Academic personnel-student ratio and workload

79. A suitable teacher-student ratio is ensured in lectures, seminars, development of clinical skills, and laboratory classes; this ratio is reasonable, as it is based on the documents regulating the teachers' workload – the Labour Code of the Republic of Lithuania<sup>53</sup> and the Regulation of the Calculation of the LSMU Subdivisions' Pedagogical Workload and Salary Fund<sup>54</sup>, which has been approved by the LSMU Senate and is continuously updated.

80. During the first and the second years of studies, all subjects in the speciality of nursing are taught by nurses with Master's or Doctor's degree. During the third and the fourth years of studies, speciality subjects are taught by midwives and obstetricians-gynaecologists. Clinical training is provided by midwives – “practice teachers” (clinical training mentors).

81. The ratio between students writing the graduation theses and their scientific supervisors is optimal: the aim is for one supervisor to have 4-6 students writing the graduation theses. Each student writing the Bachelor's graduation thesis has a scientific supervisor who may be an obstetrician-gynaecologist, a midwife. The intranet *FirstClass* contains information about preliminary topics of the final bachelor thesis, which are relevant for the programme, and potential supervisors. Teachers who supervise graduation theses help students prepare publications on the proceedings of scientific conferences, and prepare scientific articles.

82. The teachers involved in this programme quite actively participate in the mobility activities. According to the signed contract for the Faculty exchange programmes (ERASMUS, LLLP) the Faculty of Nursing is provided 19 approved contracts (including other bilateral contracts). The teachers' participation in Nursing exchange programmes provides the possibility of going to other European universities as well as to deliver lectures and to develop their knowledge and competence. The dynamics of teachers' mobility during the assessment period is demonstrated in Tables 3.1 and 3.2.

**Table 3.1. Teachers of Nursing and Care Department Outgoing for Academic Work**

Academic Year	Number	Percentage of all teachers who are involved in this programme	Country
2010-2011	13	32.5	Finland, Norway, Portugal, the United Kingdom, Germany, Holland, Italy, Belgium, Sweden, Scotland
2011-2012	15	37.5	Finland, Norway, Portugal, United Kingdom, Germany, Holland, Italy, Belgium, Sweden, the USA, Canada, Spain, Denmark, Portugal, Romania, Island
2012 -2013	10	21.5	Sweden, Norway, the United Kingdom, Germany, Holland, USA, Denmark, Portugal, Romania, Kazakhstan
2013-2014	12	28,8	Sweden, Turkey

**Table 3.2. The Number of Teachers Incoming for Academic Work**

Academic Year	Number of incoming teachers	Country
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<sup>53</sup>Labour Code of the Republic of Lithuania / Official Gazette, 2002, No. 64-2569; Official Gazette, 2002, No. 71

<sup>54</sup>Regulation of the Calculation of the LSMU Subdivisions' Pedagogical Workload and Salary Fund. Approved by the Resolution of the LSMU Senate No. 48-01 on 30 June . 2014



2010 - 2011	8	Finland, Holland, Portugal, the United Kingdom, Scotland, Portugal, the USA
2011 - 2012	4	Sweden, Norway, Turkey
2012 - 2013	4	Holland, Finland
2013 - 2014	8	Turkey, the USA, Sweden

### **Changes in the study programme since the last accreditation procedure**

Increase number of midwives teachers in the Programme (Annex 2). They are responsible for the “Introduction to studies”, Midwifery Clinical training (Annex 1). Supervisors for final bachelor theses are mostly midwives (Annex 4).

## **SUMMARY**

83. A large team of highly qualified teaching staff participates in the programme of *Midwifery*. The unity of research, education and practice is realised in the programme; conditions for teachers’ improvement are created. As the material supply of the university increases, the activities for teachers’ educational skill improvement are actively promoted. There is still a shortage of teachers midwives because the Midwifery study programme was launched only in 2010, and thus not enough teachers midwives holding at least master degree (which is minimum degree to teach at the university) have been trained yet.

## **4. FACILITIES AND LEARNING RESOURCES**

### **4.1. Material base**

84. The first-cycle studies in midwifery are carried out according to the general order of the organisation of studies at the LSMU, coordinating the place and the time of studies with other programmes of the University (this is the responsibility of the LSMU Study Centre). Lectures and seminars take place in 15 general-purpose auditoria: 3 auditoria have places for 200-300 students, 6 – for up to 100, 5 – for 20-60 students, and one – for 10 students. Other premises used for the Bachelor studies of midwifery include auditoria of individual departments, the clinical base of the LSMU Hospital, and LSMU Centre for Distance Education, where distance lectures and e-classes may be organised.

85. A part of the LSMU Department of Nursing and Care is located in the premises of the Public Establishment Kaunas Clinical Hospital (*address: Laisvės ave. 17*), and has two auditoria with 30 places each, 2 auditoria with 20 places each, 1 auditorium with 10 places, and one room – for student consultation; another part of the Department is located at the Public Establishment Hospital of the Lithuanian University of Health Sciences Kauno klinikos (*address: Eivenių str. 2*), the premises of the Department of Cardiology, where it has an auditorium with 20 places. All auditoria and the consultation room are equipped with projectors, computers, and internet connection. The Department of Nursing and Care has acquired 15 tablet computers, 4 mini computers, and 4 laptop computers, which are used during seminars.

86. The Department of Obstetrics and Gynaecology has the Great auditorium with ca. 200 places. It has all the necessary equipment for making presentations. If needed, a direct link may be established between the auditorium and the operating theatre of the Department to demonstrate and comment on the surgical operations. There is one auditorium with 30 work places, one – with 15 work places, two - with 12 work places, and one auditorium – with 10 work places; there is also a museum of the Clinical Department with 20 work places. The Department of Obstetrics and Gynaecology also has a hybrid laboratory with a dummy of a female pelvis and a dummy imitating pregnancy and labour. Teachers may view and evaluate students’ work in this laboratory remotely because the whole class is filmed by video cameras. Three auditoria have computers, and two of those auditoria also have projectors for the demonstration of lectures. There are also 3 laptop computers available in the auditoria.

87. Clinical skills are taught at the beginning in safe and simulated environment – specialized pre-clinical skills training classes of the LSMU Department of Nursing and Care, Department of Obstetrics and Gynaecology and Medical Simulation Centre. To form students’ practical skills, high-quality dummy models are used: arm models for venipuncture, models for subcutaneous injections and intramuscular injections, a model for intracutaneous injections, a model for catheterisation and stoma care, a dummy of an adult person, and a dummy of a neonate. The Department of Obstetrics and Gynaecology has 3 dummies of female pelvis and genitals, 3 dummies imitating pregnancy and a foetus, a dummy of the muscles of the fundus of the pelvis, dummies of the osseous pelvis, and a breast palpation training model.

88. Students of the *Midwifery* study programme have the possibility to use LSMU Medical Simulation Centre, where students may simulate life-threatening conditions in a safe environment, may develop their practical skills and solutions

of clinical situations without harming patients using high fidelity manikins (advanced patient simulators). Students may also choose a suitable pace of the training.

89. The LSMU Department of E-Studies (*address: Sukilėlių ave. 17*) organises distance lectures and e-classes. They may also be broadcasted over the internet or recorded and saved in the server. In addition to that, direct video conferences or tele-consultations may be organised as well.

90. The following software is installed in the computers in the LSMU auditoria, the LSMU Library, and the Health Science Information Centre: MS Word, MS Excel, Statistica, Epi Info 2000, and SPSS; Anti-Virus software is used for virus protection, and thus all the computers have a safe access to the internet.

#### **4.2. The practical training base of the University**

91. Students' clinical training is organised according to the approved Order of Students' Practical Training at the Lithuanian University of Health Sciences Faculty of Nursing<sup>55</sup> by clinical training tutor (teacher from the department) and clinical training mentor (hospital staff who is qualified in midwifery). The departments selected for clinical training correspond with the aims and the learning outcomes of the programme. First-year students undergo clinical training in departments of different profiles, the aim of the training being to consolidate the skills of the nursing technique. Second-year students undergo clinical training in departments of therapeutic and surgical profiles. Third- and fourth-year students acquire specific knowledge and skills of their speciality in tertiary-level departments of the Hospital of the LSMU Kauno Klinikos Department of Obstetrics and Gynaecology. Students also have the possibility of undergoing practical training in approved hospitals of other cities; before that, teachers responsible for organising clinical training evaluate whether the selected hospital meets the requirements set for clinical training.

92. The strategic aim of the LSMU development includes the renovation of the infrastructure of studies, and an overhaul of the Teaching Laboratory Building (*address: Eivenių str. 4*) is scheduled to be completed in the autumn of 2015<sup>56</sup>. The premises of the Department of Nursing and Care will be situated in the renewed Teaching Laboratory Building. The strategic aim of further development of the LSMU also includes a new study and research base of the Faculty of Nursing – i.e. a new building with the total area of ca. 5.500 m<sup>2</sup>.

#### **4.3. Methodical resources**

93. In 2007, the LSMU Library and the Health Science Information Centre (*address: Eivenių str. 6*) moved into a new building that meets international standards. On Mondays to Fridays, the LSMU Library is open from 07.30 to 22.30, and on Saturdays and Sundays – from 10.00 to 20.00. The visitors of the Library may use 4 reading rooms with a total of 332 work places, of which 56 are computerised, 3 reading rooms for group learning, a computer training class with 12 places, and seminar and conference halls.

94. The LSMU Library and the reading room have main publications required for the programme. Each year, analyses of teachers' and students' needs for books are conducted, and possibilities for acquiring the necessary books are sought based on those needs.

95. The LSMU Library subscribes to Lithuanian medical journals and periodicals. All information is provided in the Library's website <http://library.lsmu.lt>. Electronic databases are accessible: currently, there are 19 open access databases and 16 subscription-only databases; newly tested databases may also be used regularly. The LSMU Library subscribes to the database "Health Source: Nursing/Academic Edition", which contains 550 journals on nursing and midwifery. We have access to 4486 Free Medical Journals who contains scientific journals about midwifery as well. Employees of the LSMU Library Health Science Information Centre conduct the search of information in medical databases, search for full-text articles, and order copies of articles in journals and books from Lithuanian and other libraries, and order copies of articles and various publications from Lithuanian and foreign libraries.

96. All students may use computer classes in the University Library with 142 places with Internet access and the possibility to use such subscribed electronic databases as MEDLINE, PUBMED, EBSCO, Up To Date, BMJ Journals, MD Consult, RefWorks etc. (in total, 29). Students and teachers may access the above-mentioned databases from computers at the University and the HLSMU KK. The subscription to these databases also provides access to scientific journals in midwifery: Journal of midwifery and women's; Midwives Women and birth; Journal of the Australian College of

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<sup>55</sup>Order of Students' Practical Training at the Lithuanian University of Health Sciences Faculty of Nursing. Approved at the meeting of the Council of the Faculty of Nursing on 9 October 2013, protocol No. SLF-13-10

<sup>56</sup>Resolution of the Council of the Lithuanian University of Health Sciences "On the Approval of the Altered Guidelines of the Strategic Development of the LSMU, their Implementation Plan, and Descriptions of Evaluation Criteria for Projects" No. 6-10, 20 December 2013, Kaunas.



Midwives; BMC pregnancy and childbirth; The Australian & New Zealand journal of obstetrics and gynaecology; International journal of community based nursing and midwifery.

97. Students may use the *specialised nursing science reading room* located in the premises of the University Hospital (*a subdivision of the LSMU Library; address: Eivenių str. 2*). This reading room is open to master students from 8.00 to 17.00 on Mondays to Thursdays, and from 8.00 to 15.45 – on Fridays. The specialised nursing science reading room has 14 computerised working places, and two equipped rooms can be used for writing research papers. The employees provide consultations concerning search in databases. The reading room has 741 publications (books, journals, etc.). In 2014, the reading room had 16 853 visitors, and lent 35 945 publications.

98. The realisation of the project “The Implementation of Innovative Methods and Forms of Teaching/Learning in the Study Fields of Nursing, Occupational Therapy, and Physiotherapy” financed by the EU Structural Funds (No. BPD2004-ESF-2.4.0-03-05/0090) ensured the preparation of new study material for the study field of Nursing. The prepared publications are accessible to the students at the LSMU library and reading room. These books are used for achieving the learning outcomes of the Midwifery programme during the first and the second years of studies.

99. The Department of Nursing and Care stores all issues of the journal NERP (Nursing Education, Research, & Practice <http://nerp.lsmuni.lt/>). The journal NERP is a scientific journal in English, published by the LSMU Faculty of Nursing and issued twice yearly since 2011. Its purpose is to accumulate the newest data and disseminate the results of scientific research that are important for nursing and midwifery practice.

100. The library of the Department of Obstetrics and Gynaecology has 338 books on the related topics and 20 copies of video material, as well as all issues of the quarterly “The Lithuanian Obstetrics and Gynaecology”. Material resources and methodical aids are renewed whenever possible.

101. In 2012, the intranet system *FirstClass* was introduced in all study cycles for communication between University subdivisions. This software facilitates cooperation between research personnel, teachers, and students. Subdivisions of the University may exchange information and documents, and may place advertisements. Students have continuous access to the material of the lectures – they can see all the updates, may have an online discussion with their teachers, and may ask questions on the topic of interest or (to clarify something) to any subdivision of the University. Each user has his or her interactive calendars, which allows for efficient time planning. The address of the University’s FirstClass system is <http://fc.lsmuni.lt/>.

### **Changes in the study programme since the last accreditation procedure**

*Continuous update of scientific literature and databases according to the needs of students and teachers is performed. The equipment used for the study process was renewed. The Internet connection has been set up in all the auditoriums and computer labs. Students have access to the majority of Library resources from computers outside the University (until the year 2014, there was a possibility to use data bases only from the university computers). The number of clinical training bases has been extended. The first and the second year clinical trainings can be completed by students in all Lithuanian hospitals those meeting the requirements set for the training (practice) bases. Students can complete Midwifery Trainings at The Hospital of Lithuanian University of Health Sciences (LUHS) Kauno klinikos, Kaunas Clinical Hospital, Kauno P. Mažylis Maternity Home, Vilnius University Hospital Santariskiu Klinikos (Santariškių Klinikos) (previously only 1 clinical training base was offered). These are the hospitals where the students gain all clinical competences those are determined in the EU Directive 2005/36/EC and EU Directive 2013/55 /EC. In the year 2014 – 2015, 22 students completed training in different Lithuanian hospitals.*

## **SUMMARY**

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102. The number of auditoria, laboratories and other facilities at LSMU is sufficient to ensure a successful teaching and learning process. LSMU library is fully supplied with books, methodical and scientific publications necessary for studies. To develop student’s practical skills, clinical skill training rooms have been outfitted and a modern hybrid laboratory has been equipped. In addition to that, students can develop their practical skills in the Medical Simulation Centre.

## **5. STUDY PROCESS AND STUDENTS’ PERFORMANCE ASSESSMENT**

### **5.1. Selection of students**

103. The students are accepted to the programme according to the general rules of admission to the Lithuanian higher

education schools to the first cycle of studies and in the integrated studies. These rules are confirmed by the Lithuanian Higher Education Association of Joint Admission and are approved by the LSMU Senate each year. Admission to study programme Midwifery is allowed only after completion of 12 years of general school education.

104. In order to ensure the admission of highly motivated students capable of carrying out studies of the Programme, the lowest competitive score should not exceed 20% of the lowest competitive score received by the student who is entitled to the State funded place (more at section 1.2).

105. Programme implementers care about the information and promotion of the programme in the society, trying to draw up students' motivation to study. The University participates in the Fair of High Schools, which is held twice a year in Vilnius and Kaunas as well as organizes Open Days at the University during which students are introduced to the programme and career perspectives. The LSMU Student Association organizes Career Days, also visits schools, publish informative articles in the press, display the information on TV, and etc. The measures are appropriated according to their interest in the programme and show the effectiveness of fairs, but the effectiveness is difficult to externalize in numerical terms.

106. Students' drop-out over the five years of the existence of the programme is presented in Table 5.1. Of all students who entered the programme in 2010, four changed the study programme (LSMU Faculty of Medicine) during their first year of studies, and out of all students who entered the programme in 2011, 7 failed to complete their studies. This year was the most critical year for the programme. The main reasons for drop-out are changing study programmes, maternity leaves, and changing the place of residence.

**Table 5.1. Drop Out of Students in Midwifery programme**

Year of Entering	Entered	Dropped out
2010/11	19	4 (21%)
2011/12	17	7 (41%)
2012/13	20	2 (10%)
2013/14	16	0 (0%)
2014/15	15	1 (7%)

## 5.2. Study process

107. Study course schedule<sup>57</sup> is made under the regulation LSMU undergraduate and graduate studies<sup>58</sup>. There is no session week at the end of the semester because most of the subjects are delivered as cycle-based, so exams and credits are distributed evenly during the course of the semester to avoid over-exertion in certain periods.

108. Lectures, seminars and clinical skills teaching are usually held in Nursing and Care Department (at Kaunas Clinical Hospital (Laisvės al. 17) and the Department of Obstetrics and Gynaecology auditorium in the University Hospital, and the clinical training is carried out in LUHS Kauno klinikos and Kauno Klinikinė ligoninė or other approved clinical training places<sup>59</sup>. The plan of the improvement of education in Midwifery has been developed and approved by the Senate<sup>60</sup>.

## 5.3. Support for students

109. Academic support for students is ensured as is presented in the following:

- After entering to LSMU students are introduced to the study curator and coordinator, the study programme committee and with other people who are responsible for study administration. Studies begin with the "Introduction to Studies" course during which junior students are acquainted with the studies at the university as well as with the specificity of the programme, its results, outcomes, and the assessment of outcomes. The information about the study subjects and schedules is given in the LSMU website. Large amount of valuable information is available in the Student Union website [www.lsmusa.lt](http://www.lsmusa.lt). Students are informed about the possibility of participation in the ERASMUS LLP student exchange programmes (LSMU International Relations and Studies Centre is responsible for the administration of these programmes);

<sup>57</sup><http://lsmuni.lt/lt/activity/studies/study-center/study-shedules/>

<sup>58</sup>Regulation of the studies of the first and second level and continuous studies. Approved by Senate, June 20, 2014, 47-05

<sup>59</sup> Nursing Faculty Resolution on "Order for student practices organization", on December 2013 No. SLF-13-10

<sup>60</sup> LUHS Senate Resolution on "Lithuanian University of Health Sciences Faculty Nursing studies and development of infrastructure, on September 5, 2012, No. 23-03

- Continuous support of the system is ensured during all the study period. At the beginning of each module students are always presented the contents, aims, outcomes, assessment, list of literature and schedule of the module. Personal consultations are organized in the departments.
- In addition, students are presented the employment opportunities. Meetings with potential employers and career days are organized.

110. Based on LSMU Study Regulation students are given opportunities to study according to the individual programme, although the students in *Midwifery* programme use this possibility very rarely (only during baby feeding period). The assessment of students' achievements are recognized and validated according to the same rules as for those who study according to the usual study schedule.

111. The students can receive *psychological support* during their study process (The Youth Office is functioning: student volunteers and psychologists are involved in this work). The University "Sports Centre" facilitates a variety of sports activities (basketball, football, swimming, tennis, and etc.) in which students can be involved "Neris" activities or dance in folk dance ensemble "Ave Vita".

112. *Social support* is also available for students. The administration of scholarships and support for students is determined by the Senate approved documents. Students may be granted social scholarships which are awarded and administered by the State Study Foundation<sup>61</sup>. This fund is composed of the State Budget assigned funds as well as the funds which are given by the State Budget Fund delivered for payment of State financed places and study fees.

113. Students can be granted study loans allocated by the State Studies Foundation:

- For living expenses (the amount of loans for living expenses assigned additionally in the spring semester shall not exceed 25 basic social benefits (942 EU).
- State-supported loans for studies in accordance with international (inter-institutional) agreements. This amount during the whole academic year shall not exceed 60 basic social benefits (2261 EU).

114. Students wishing to receive a State loan or a State-supported loan have to fill in an application form on the Foundation website and submit it to the Foundation before the indicated deadline.

115. Support for disabled students. The LSMU supports financially disabled students with the following means:

- A monthly targeted benefit for special needs in the amount of 50% of the state social insurance basic pension (currently 52 EUR);
- A targeted benefit to partially pay tuition fees for partially state-funded and non-funded students in the amount of 3.2 basic social benefits per semester.

116. Targeted benefits for students with disabilities are allocated by the LSMU, and their payment is administered by the State Studies Foundation. The amount of a targeted benefit is 4 basic social benefits per month. Targeted benefits are allocated for one study semester including the exam and vacation periods of that semester, but not longer than up to the end of studies. Disabled students who wish to receive financial support have to submit the required documents to the LSMU Study Department.

117. Social scholarships. Social scholarships can be awarded to:

- Students whose families (or students themselves) have a right to receive or receives social benefits;
- Students with a 45% (or lower) level of working capacity or severe or moderate disability;
- Students who were under guardianship (care) until adulthood or who have deceased parents (or a single parent).

118. The students of the *Midwifery* Programme have the opportunity to participate in professional networks such as Linea Rosa, NORDMAN, Nordinett (*NordPlus* funded), where multi-professional intensive training programmes are organized. In 2013 the Nursing and Welfare Department organized an international IP course "Wellbeing Technology" on different methods to help create more effective and evidence-based practice in health care by using new technology solutions which was attended by students from 6 countries

119. The University possesses five dormitories where the students enrolled in various programmes are accommodated. The dormitory places are assigned to the students according to the provisions of Student Dormitories in LSMU<sup>62</sup>.

<sup>61</sup> On allocation of social stipends for students of higher schools and the approval of administration procedure No.1801 (Official Gazette, 31-12-2009, No. 158-7187)

<sup>62</sup>LUHS Students resolutions of hostels. Approved by Rectorate on June 4, 2012.

#### 5.4. Evaluation of achievements

120. The assessment of student achievements is directly related to the learning outcomes and assessment principles which are set in the LSMU study regulation and in the LSMU student achievement assessment procedures<sup>63</sup>, and are also described in each course syllabus. The requirements for the rating structure are determined in the LSMU Senate documents and detailed in each course syllabus. Students are directly informed about the assessment results on their achievements which are available in an online database for everyone with their ID and password (see The Assessment of The learning outcomes on Page 12).

121. The feedback among students and teachers is ensured by regular meetings with the Programme teachers, the Study Programme Committee and the Administration of the Faculty. The students express their wishes, hopes and problems during the meeting. The Study Programme Committee considers all the students' preferences and the possibility to adjust the degree programme and its organization according to their needs. All the Study Programme issues are presented by the Dean of the Faculty to the Faculty Council and the Rector twice a year.

122. The assessment and recognition of non-formal adult education competencies were approved by the LHUS Senate on September 27<sup>th</sup>, 2013. Following this regulation there is a possibility to have all the informally and non-formally acquired competencies recognised and validated. The Programme teachers participated in the project "The Formalization and Implementation of Informally and Non-Formally Acquired Competencies in the System in Higher Education Networking" (VP1-2.1-MES-04-K-03-0050). The teachers learned to assess the competences which were acquired informally and non-formally and received international qualification certificate.

#### **Changes in the study programme since the last accreditation procedure**

*The number of possibilities to international mobility and exchange programmes has increased (2 new bilateral agreements for Midwifery programme students). Students have become more active in organizations and more involved in the development of the programme. At the end of the Module Basics of Educology, the students in Midwifery programme hold a scientific conference where they deliver reports based on their scientific research outcomes or the analysis of scientific literature in Midwifery. They submit that to the University Newspaper Ave Vita. Twice per semester they meet with the members of the Study Committee and once per semester with all lecturers in the programme where they share their further expectations. Once a month they meet with a lecturer – the course tutor, who they discuss the organization of the study process with.*

#### **Summary**

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123. Students' academic and social support system is well-functioning. The graduates of the programme have an excellent opportunity to continue professional education and residency to pursue a professional career. Unfortunately, although we have many agreements with foreign universities (ERASMUS) students were not active enough.

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<sup>63</sup> LUHS Regulation on the assessment of students' achievements. Approved by Senate on June 20, 2014, No. 47-05

## 6. PROGRAMME MANAGEMENT

### 6.1. Programme administration

124. *The composition of the Administration of the Programme is described in detail in section 3.2. Personnel Competencies.*

125. The Study Programme Committee, which is responsible for the contents of the programme and educational quality assurance as well as continuous improvement, is proposed by the Dean and approved by the Order of the Rector Order (see Section 3.2. Personnel Competencies).

126. Every five years the Council of the Faculty is formed of the permanent faculty teachers who have not less than 0.5 of workload, the other teachers involved in teaching and students as it is allowed by the Regulation of the University. Its main purpose is education and research organization. Currently, the Faculty Council consists of 13 members, the Council works under the Council Regulation<sup>64</sup>. The Nursing Faculty Council has a continuous Study and Research Committee which considers and develops study related regulations and proposals, considers the resolutions and works out the conclusions to be submitted to the Council for further development of plans, programmes and curriculum with regard to quality.

127. *Collegiality and personal responsibility for decision making.* The University has Collegial Administrative Bodies: the University Council, the University Senate, and the university Rector as a sole executive body. The administration of the university is based on the principles of democracy, competence, and self-efficacy<sup>65</sup>. The full-time, integrated and postgraduate studies are organised and coordinated by the University Study Centre. The analysis of Academic affairs is carried out by vice-rector for studies. The study related issues (the assessment of study plans, the assessment of learning outcomes, the assessment of study quality, and other academic and strategic faculty issues) are presented and discussed at the meetings of the rectorate. The meetings are held twice a month and consist of university administration, key department managers and students' representatives. Senate meetings take place once a month in various issues of academic matters and also include the approval of study plans for students, the establishment of rules and regulations, and other study related issues. There is an Internal Audit Service in the University. In order of appearance of various different questions temporary working groups with responsible persons are created for solving the issues.

128. *Programme information base.* The quality and administration of the Study Programme is regulated by the documents approved in LSMU. These documents can be found in Dean's of the Faculty office, relative departments, and on the University Web site at <http://www.lsmuni.lt>. All the activities which are related to incoming and outgoing documents, the Rector and Senate resolutions and other material, contact information of applicants are stored in the Faculty Dean's office. The sequence of decision-making, review of quality assurance and approval of selected is regulated comprehensively and clearly. LSMU implemented the project on "Lithuanian University of Health Sciences for the Enhancement of Performance" (project no. VP1-3.1-MES-07-K-02-062) which is designed for the improvement of document management and administration.

### 6.2. Study quality assurance

129. As stated in the Berlin Communiqué (2003), even the idea of Higher Education Institution autonomy itself means greater responsibility and accountability for all concerned as regards study quality: students, their parents, graduates, employers, and government institutions.

130. *The Relevance of Programme Quality Assessment.* LSMU has an internal system of quality assurance based on the European Higher Education Quality Assurance provisions and the quality assurance strategy approved by the Higher education Institution that includes operating procedures and measures to guarantee the study quality in Higher Education.

131. The quality system is ensured in the following levels: 1) on a unit (teaching staff) level; 2) on the subject and module level; 3) on the faculty level; 4) on the university level; 5) on the national level, 6) on the international level. This quality assurance system corresponds to the international quality management system.

132. The quality of the departments (teaching staff, subjects and modules) is assured by undergoing attestation procedures every five years (see Section 2.3. Personnel).

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<sup>64</sup> LUHS Regulation of the Faculty Council. Approved by Senate, October 28, 2011, No. 14-07

<sup>65</sup> LSMU Statute. The LRS decision on June 30, 2010, No. XI-973 (a new version of LR Seimas (Parliament) decision on June 28, 2012, No. 2147



133. **At the national level**, the quality of studies is ensured by programme accreditation every 5 years, which aims at evaluating whether the programme complies with the regulations of the quality of studies.

134. **At the university level**, the assessment of the quality of studies is performed every year by evaluating the subjects (content, complexity, examinations and assessment forms). The results of assessment are presented to the academic community in the University newspaper 'Ave Vita', on the website and in the rector's annual report. LUHS service of internal audit performs regular inspections of the use of classrooms and following of timetables of subjects.

135. The Centre of Teachers' Educational Competency was established at LUHS in 2003. The aim of the Centre is to provide the continuous assurance of teachers' educational competency and to guarantee an appropriate level of educational competencies. The Centre has launched the Programme on Teachers' Quality Assurance. This programme was prepared based on the national collaborative project, which involved Kaunas University of Technology, Vilnius University and students' organisations, and was supported by the Open Society Foundation Lithuania.

136. The Commission of Quality Assurance and Monitoring of Studies is responsible for the development of the internal quality assurance system at LUHS (lead by the vice-rector for studies). The aim of this Commission is to assist faculties and the departments in the development of the continuing quality assurance system.

137. The assessment of students' knowledge and skills is considered as an important component in study quality assurance. The assessment procedures of students' academic achievements are described in the Regulations of Regulations of First-Cycle, Second-Cycle and Integrated Studies at the Lithuanian University of Health. According to these regulations, academic staff, rector, vice-rector and dean have a right to participate in exams as external observers. If the student does not agree with the mark, he/she has a right to lodge an appeal to the dean. In this case, the independent group of examiners is formed for the additional examination of the student.

138. **At the faculty level**, quality assurance is implemented through the activities of the Council of the NF (a more detailed description about the role of the Council in quality assurance is described in the section 'Management of the study programme'). Every year, the Dean of the Faculty gives reports, which analyse the annual activities of departments to improve the quality of the *Midwifery* study programme, to the Council. The dean's meetings with students are held at least once a year in order to get feedback on the implementation of various projects for the improvement of study quality and discussions on the effect of implementation. Students can discuss different study-related questions, and if problems occur, appropriate departments are informed.

139. Since 2012, **the Study Programme Committee** of the *Midwifery* programme has been involved in the quality assurance of the study programme. The Committee analyses the content of the programme and study subjects and prepares the recommendations for their improvements. It is headed by Dr. A. Vaškelytė from the Department of Nursing and Care. Its members are Assoc. Prof. Dr. A. Blaževičienė (Department of Nursing and Care), Assoc. Prof. Dr. E. Barčaitė (Department of Obstetrics and Gynaecology), Virginija Stankevičiūtė, a midwife (Department of Obstetrics and Gynaecology), Ilona Joneliūnienė, a midwife, President of the Lithuanian Midwives' Association, and Lukas Petraitis, second-year student of the *Midwifery* study programme

140. **At the departmental level**, quality assurance is implemented through the accreditation of academic staff (at least once in 5 years) and continuous teachers' professional development at the Centre of Teachers' Educational Competency. Quality of academic staff performance is evaluated by the criteria, which are applied for the accreditation of academic staff at the NF. These criteria describe the following: 1) minimum experience of teaching; 2) number of scientific articles, published during the 5-year period; 3) number of teaching materials prepared for students. Different criteria are applied for professors, associate professors, lecturers and assistant professors. The members of academic staff present research activities carried out by them and the list of publications during the meetings of the departments on an annual basis. The detailed analysis of the performance of the teachers is carried out at the department level before the accreditation of lecturers, which is carried out every 5 years.

141. The Study Programme Committee, which is responsible for the contents of the programme and educational quality assurance as well as continuous improvement, is proposed by the Dean and approved by the Order of the Rector Order.

142. The Study Programme Committee analyses information on the adequacy of learning outcomes to current achievements, evaluates the shortcomings of outcomes and recommends ways to eliminate them. Social partners are invited to present their opinion about the graduates' knowledge and practical abilities. The same questions are addressed to the graduates, aiming at indication of the possible ways for improvement of the programme and its

outcomes. Activities are divided by the period of implementation: carried out on a month, regular, semester, or annual basis.

143. The Study Programme Committee is responsible for the quality of the studies. The *Midwifery Programme Committee* develops and regularly updates the plan of activities, involving the objectives and implementations of teaching and evaluation methods. This Committee periodically carries out students' interviews about study quality, as well as meets students' representatives and discusses the issues of the organisation of the study programme. The study plan and the achieved outcomes of the programme as well as the necessary changes are reviewed after these meetings. Also, the Programme Committee systematically monitors the *First Class* uploaded lectures, compositions, the schedules of subjects studied and organizes meetings with programme teachers and students.

144. The Council of the Nursing Faculty manages study quality at the Faculty level (see section 6.1. *Programme Administration*). The Dean's report is presented and approved each year at the Council. The report includes the analysis on the department activities in the period of one year as well as the implementation of the study programmes. The recommendations related to work and study process, and research development are provided. The Dean meets the students regularly to give students an opportunity to discuss various study-related issues. In case of important issues relevant departments are informed.

145. Regular assessment of the quality of studies is conducted by the Senate as approved by the Study Quality Assurance provisions at Lithuanian University of Health Sciences<sup>66</sup> and Lithuanian University of Health Sciences curriculum development, improvement and management<sup>67</sup> is administered at the university level. Each year, Study Quality Commission is composed regularly and delivered subjects in units are assessed (content, complexity, reporting and evaluation forms), the results are analysed and presented at Rector meetings that ensure the elimination of shortcomings.

146. The precise quantitative and qualitative information (for example, the annual reports of the Rector) is announced publicly and constantly in LSMU Website and in the local newspaper "Ave Vita" which deals with the programmes of study, with a higher education qualification, students' views on the quality of higher education, students' views on the quality of higher education that are considered by the authorities of the University related to operational assessments graduates for career performance.

147. The Rector, the Vice-Rector and the Dean of the Faculty have the right to participate in the exams as external evaluators as it is determined by the LSMU study regulation.

148. The quality of education on the national level is ensured regularly as well as making programme accreditation, which aims to assess the programme's compliance with the requirements of the quality of studies.

149. Regular rising of teachers' professional and educational competence is ensured in quality of education on the international level as well as the participation in the international trainings and student exchange programmes.

150. *The Use of the Evaluation Results.* All the assessment results are used to improve the quality of the programme: the students' oral remarks and formal evaluations are taken into account.

151. *The Dissemination of the Quality Improvement Results.* Quality improvement in Study assessment of programme is performed on periodic student surveys and meetings with students. Commission of Quality Assurance and Monitoring of Studies annually presents the outcomes and assesses the changes in academic society.

152. *Student Participation in Quality Assessment and Improvement.* Students take a significant role in the management of the Clinical Nursing programme. Students' representatives are authorized to make proposals on different issues and to take personal responsibility for the implementation of such proposals. The students' representative is a member of the Study Programme Committee of the Midwifery programme and holds the same rights as any other member in this Committee. In addition, the students' representative is a member of Commission for recruitment and probation of academic staff at the NF and has the same voting rights as other members of this Commission.

153. *Stakeholder Participation in Assessment.* The social partners are actively involved in improvement of the study programme and in the Programme Committee, in assessment of final works, and in participation of Career Days. The social partners supervise students' final works and prepare current clinical database topics.

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<sup>66</sup> Provisions of Study Quality Assurance at the Lithuanian University of Health Sciences. Approved by the LUHS Senate, 20 January 2012, No. 17-01.

<sup>67</sup> Procedure for the Development, Improvement and Management of Study Programmes at the Lithuanian University of Health Sciences. Approved by the LUHS Senate, 30 May 2012, No. 21-12.



154. Clinical training mentors (who are not teachers) are actively involved in the process of clinical skills training and evaluation.

155. The LSMU Senate approved “The Procedure of Student, Teacher and Stakeholder Opinion Research”<sup>68,69</sup> which regulates the internal degree of quality assurance testing procedures, techniques and tools for Lithuanian University of Health Sciences in connection with the study participants (teachers and students) and the social partners (employers, graduates and others) survey.

**Changes in the study programme since the last accreditation procedure**

*The Study Programme Committee of the Midwifery programme was newly formed in 2013 (the first Study Committees was established 2012). It has become the main body of the programme management and quality assurance. The committee of the study programme consists of 2 midwives, 2 nurses, 1 obstetrician-gynaecologist, and a student of the Midwifery programme. New Regulations of First-Cycle, Second-Cycle and Integrated Studies have been approved. This document made a significant improvement in the organization, management and evaluation of the study process.*

**Summary**

156. The management system of *Midwifery* study programme is clear and effective. University identifies processes and key structures and persons responsible for program implementation and management. The LSMU operates monitoring system of study quality, the work of Programme Committees has justified expectations improving the quality of the programme. It is believed that effective functioning of Study Programme Committee enables to foster collaboration of whole academic community, students and social partners in program management.

**7. SUMMARY OF THE CONCLUSIONS OF THE PREVIOUS ASSESSMENT**

The external evaluation of the programme has been carried out for the second time.

**Table 7.1. Summary of the conclusions of the previous assessment and changes in the curriculum**

	Summary of the conclusions of the previous assessment	Changes in the curriculum
1	To create the main workgroup for the management of the programme, which would mainly consist of midwives and which would elaborate a system of versatile development of knowledge, skills and competences in obstetrics.	The committee of the study programme now consists of 2 midwives, 2 nurses, 1 obstetrician-gynecologist, and a student of the Midwifery programme (earlier – 1 midwife). The committee of the study programme is in charge of the continuous security of quality in the study programme; the review of the subjects, changes in the programme taking into consideration both students’ expectations and expectations of the health care system.
2	To review and revise the composition of the programme so that it fully conforms to the recommendations of the EU Directive (2005), the provisions of the Republic of Lithuania Medical Norm of Midwifery, and students’ expectations.	The changed curriculum came into effect at the beginning of 2014: the content and structure of some subjects ( <b>6 Module.</b> Nursing Model; <b>7 Module.</b> Basics of Clinical Nursing; <b>8 Module.</b> Health care of a mother; <b>9 Module.</b> Health care of a mother and a neonate I and <b>10 Module.</b> Health care of a mother and a neonate II) have been significantly modified. The content and structure of some subjects (6 Module. Nursing Model; 7 Module. Basics of Clinical Nursing; 8 Module. Health care of a mother; 9 Module. Health care of a mother and a neonate I, 10 Module. Health care of a mother and a neonate II) have been significantly modified. 6 Module. Nursing Model: reduced theoretical hours, nursing plans were adapted for midwives and the hours of clinical training were prolonged. 7 Module. The Module Basics of Clinical Nursing: adapted to midwives launching a new subject “Nursing of Women with Surgical Diseases” and prolonged clinical training. There were designed three separate modules from two modules (according to the requests and the needs of students): Health care of a

<sup>68</sup>LUHS. Students, teachers and social partners (employers) opinion research order. Approved by Senate on October 11, 2013, resolution No. 37-11

		mother; Health care of a mother and a neonate I and II, followed by separate clinical trainings in these modules. There was also reorganized Midwifery Clinical Training I, II and III with prolonged hours for clinical training.
3	To develop professional clinical training in order to ensure that the number of hours and the contents correspond to the requirements of the EU Directive, and that the organisation of the clinical training creates conditions for effective learning.	<p>Hours for clinical training are clearly identified in Subject description, Study plan, Clinical Training Diaries and Study Timetable. Clinical Training hours are clearly assigned (2261 hours).</p> <p>Clinical training is organized entirely in the health care institutions (genuine clinical setting) under supervision of a clinical training mentor (hospital staff who is qualified in midwifery). Clinical training of students in the <i>Midwifery</i> programme is the responsibility of midwives (mentors). 10 midwives have graduated from the courses for mentors.</p> <p><i>Classroom hours of clinical training and simulation are not included in clinical training hours.</i></p> <p>Clinical training diaries were revised and renewed according to the planned outcomes and learning outcomes. During Clinical Training students gain the competences intended in clinical training of the EU directive 2005/36/EC and Directive 2013/55/EU, i.e. not fewer than 100: pieces of advice for the pregnant and prenatal control/examinations; care of not fewer than 40 pregnant; participation in not fewer than 40 deliveries; seaming of perineum; women care in case of a risky pregnancy (&gt;40) and care of not fewer than 100 women after a delivery and care of their neonates. This is recorded in the Clinical Training Diaries.</p>
4	To develop competence-based system of teaching methods and evaluation both in theoretical subjects and in practical training.	<p>New Clinical Training Diaries allow graded assessment of clinical training.</p> <p>Number of the exams does not exceed the number of allowed by the Ministry of Education and Science of the Republic of Lithuania (currently 15 exams /7 Projects).</p> <p>The teacher and mentor evaluate students' clinical training. Every clinical training day a mentor provides the student with some feedback concerning his/her performance and at the end of the training after having reviewed the clinical training diary of his/her clinical training and having carried out a discussion with a student, the mentor evaluates it.</p> <p>The teachers evaluate the theoretical subjects according to the accepted evaluation system in LSMU. Mentors evaluate the students' gained clinical skills after having marked that in clinical training diaries.</p> <p>During the examination of the nursing technique and the final examination of the practical training, the objective structured clinical evaluation (OSCE) is applied, which allows for an objective evaluation of clinical skills.</p> <p>The study programme is completed in accordance with "competence – based system".</p>
5	To develop research, and to formulate the topics of graduation theses using the experience and support of professional midwives.	<p>Developing of critical thinking of the students starts at the first year of the studies (1 Module. Humanities and Social Sciences; 3 Module. Fundamentals of Nursing; 11 Module. Administration of midwifery and research work; 14 Module. Basics of Educology).</p> <p>The students choose the title of the thesis at the end of the third year. The qualification committee (involves 2 midwives, 2 nurses, 1 obstetrician gynecologist and 1 statistician) is formed and monitors the training process of the students' research.</p> <p>The topics selected for the graduation theses are the most relevant issues of modern midwifery. A list of tentative thesis topics are uploaded in FC, where students can get introduced to them and select them. Midwives usually supervise theses mostly and they are thesis advisors too.</p>

**In summary of the self-evaluation of the *Midwifery* Programme, we believe that all changes were implemented with regard to all expert conclusions and recommendations.**