



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

Klaipėdos valstybinė kolegija

**STUDIJŲ PROGRAMOS  
BURNOS HIGIENA (valstybinis kodas – 653A51005)  
VERTINIMO IŠVADOS**

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**EVALUATION REPORT  
OF DENTAL HYGIENE (state code -653A51005)  
STUDY PROGRAMME**

at Klaipėda State College

**Experts' team:**

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## DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	<i>Burnos higiena</i>
Valstybinis kodas	653A51005
Studijų sritis	Biomedicinos mokslai
Studijų kryptis	Burnos priežiūra
Studijų programos rūšis	koleginės studijos
Studijų pakopa	pirmoji
Studijų forma (trukmė metais)	Nuolatinė (3)
Studijų programos apimtis kreditais	180
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	Burnos priežiūros profesinis bakalauras ir burnos higienisto profesinė kvalifikacija
Studijų programos įregistravimo data	2008-06-26

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## INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	<i>Dental Hygiene</i>
State code	653A51005
Study area	Biomedical Science
Study field	Dental care
Type of the study programme	Higher Education College Studies
Study cycle	first
Study mode (length in years)	Full-times (3)
Volume of the study programme in credits	180
Degree and (or) professional qualifications awarded	Professional Bachelor in Dental Hygiene and professional qualification of a dental hygienist
Date of registration of the study programme	26 <sup>th</sup> June 2008

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The Centre for Quality Assessment in Higher Education

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## I. INTRODUCTION

### 1.1. Background of the evaluation process

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

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

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

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

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

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

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

### 1.2. General

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

No.	Name of the document
1.	Examples of final theses

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

The Study Programme of Dental Hygiene (hereinafter – “DH”) is implemented by the Faculty of Health Sciences (hereinafter – the “FHS”), Klaipėda State University of Applied Sciences (hereinafter – the “KVK”). The programme is carried out by the Department of Oral Health (hereinafter – the “Department”).

The KVK is managed by the KVK Council and the Academic Council. KVK activities are organised by the KVK Director, three Deputies (for academic activities, for strategic development and for infrastructure) and a KVK Management Group (Director, Deputies, Faculty Deans, Heads of other organisational structures, and President of the Student Union).

The KVK has three faculties (of Health Sciences, of Social Sciences and of Technologies).

In the academic year 2013-2014, the KVK had 3,857 students. They were taught by 267 teachers. The KVK implements first-cycle professional Bachelor-degree studies which meet

Level 6 of the European Qualifications Framework (EQF) and the National Qualifications Framework (NQF).

The Faculty of Health Sciences is one of the three KVK faculties, which enjoys the academic autonomy. In the academic year 2013-2014, the FHS had 1,037 students. The FHS consists of five departments (General Practice Nursing, Social Work, Beauty Therapy, Physiotherapy, and Oral Health), a library, an online reading room, a video-conference room and two information technology rooms.

The DH study programme was evaluated by an international expert group on 2 October 2012. On 17 December 2012, the DH programme was accredited for three years (Summary of conclusions from the previous external evaluation, Annex 7). The self-evaluation report of the DH study programme, prepared in 2014, was discussed by the FHS Study Committee.

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

The review team was completed according *Description of experts' recruitment*, approved by order No. 1-01-151 of Acting Director of the Centre for Quality Assessment in Higher Education. The Review Visit to HEI was conducted by the team on 12/05/2015.

1. **Dr. Kevin J.Davey**(team leader), University of Dundee, Scotland;
2. **Prof., Dr. Sandra Ribeiro Graca**, University of Lisbon, Portugal;
3. **Assoc.prof., Dr.Egita Senakola**, Riga Stradins University, Latvia;
4. **Dr. Erminija Guzaitiene**, dentist and owner of dental clinic, social partner, Lithuania;
5. **Mr. Mindaugas Vilius**, student of Vilnius College, Lithuania;

## **II. PROGRAMME ANALYSIS**

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

The programme aims and learning outcomes were clearly defined and formulated with regards to both the National and European Qualification frameworks, the recommendations of the Guide to Study Programmes and the Medical Standard for Dental Hygienists (MN 35:2012). Furthermore, steps have been made to ensure that the programme aims and learning outcomes comply with those of international partner institutions (Kristianstad University, Sweden and Polytechnic Institute of Portalegre, Portugal) and with the recommendations of the International Federation of Dental Hygienists. It is the view of the expert panel that the learning outcomes are suitable for the type, field and cycle of studies, and these learning outcomes can be achieved within the 3-year programme at 180ECTS (European Credit Transfer and Accumulation System). The learning outcomes of subjects are consistent with the learning outcomes of the programme and the KVK DH study programme is consistent with identical study programmes of other colleges in Lithuania.

The validity of the programme learning outcomes displayed by the graduates were assessed through interaction with the local employers (dentists and dental hygienists) by the use of a survey, and by stakeholders and students having input into departmental evaluation meetings. Through this interaction the programme learning outcomes were modified to meet the needs of the social partners (see Programme Management). An example of a change made following this survey was the subsequent inclusion of the “Practice of working with a Patient and Community” module which was designed to develop the graduates’ abilities to plan and apply oral health instruction at both individual and community level.

The expert panel acknowledges that the DH study programmes’ aims and learning outcomes are widely available to the public via the KVK website and through various events such as exhibitions, annual visits to schools and gymnasiums, a career conference and through collaboration with representatives of the Klaipėda Youth Labour Exchange. The DH students interviewed by the panel confirmed that information about the DH course was readily available to them when they were at school.

The aims and learning outcomes of the study programme are in compliance with the regional development perspective, and related to one of the priorities provided for in the Klaipėda city strategic development plan “Development of Education and Culture” and the strategic development area of the Strategic Development Plan of Klaipėda District until 2020. Further evidence that the programme meets the needs of the labour market is shown by the high placement rates of the graduates (incomplete data), 75% (2012) and 89.5% (2013).

***Strengths:***

- *Clearly defined programme aims and learning outcomes.*
- *All stakeholders, including the social partners, have an input into the committee structures involved in the development/modification of the programme learning outcomes.*
- *The programme has been developed to fulfill the needs of the community and has an emphasis on prevention.*

***Weaknesses:***

- *No significant weaknesses in addition to those addressed in the appropriate sections below.*

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

The DH study programme complies with the Description of the General Requirements of Degree Study Programmes, which are approved by the Lithuanian Minister of Education and Science, and complies with the ECTS requirements for a first cycle Bachelor degree programme. It is a 3 year full-time programme consisting of 180 ECTS (60 ECTS per annum). All of the general college subjects are taught in the 1st year (18 credits) with the study field subjects and practice being appropriately distributed over the 3 years of the programme. Student selected elective projects, covering a wide variety of subjects areas outwith the core DH

curriculum, are taken during 2nd year and 3rd year (12 ECTS). Preparation for the qualifying examination and for defence of the final thesis (12 ECTS) take place in 3rd year.

The expert panel acknowledges the changes in the programme implemented following the recommendations made by the previous expert panel (2012). Changes included the addition of Histology into the Anatomy and Physiology course to increase the quantity of Histology taught. The rearrangement of the timing of some field study subjects within the curriculum, along with the renaming of some subjects, has improved the vertical integration of subjects within the curriculum, allowed the earlier introduction of clinical care in the programme and has improved the timing of the theoretical teaching in comparison with the practice. For example, the teaching of Emergency Aid was moved from the 5th to the 3rd semester which integrates better with the start of clinical practice. Similarly the teaching of cross-infection control procedures had been moved to earlier in the programme to allow more practice. Furthermore, these changes have improved the teaching of ergonomics, teamwork and there is a greater focus on the management of patients with special needs and community groups. However, the expert panel recommends the teaching of English throughout the curriculum.

Benchmarking of the curriculum with international partners (Kristianstad University, Sweden and the Polytechnic Institute of Portalegre, Portugal) has been carried out and this will continue as more international exchange agreements are signed. This issue is discussed further in other sections of this document.

Another recommendation of the previous inspection panel was to widen the range of patients, special needs and geriatric patients, seen by the students are part of their clinical practice. An agreement has been arranged with the University of the 3rd Age to allow patients over the age of 60 years old to attend practice clinics. Students also have access to disabled patients as a result of a teacher's charitable work. Comments were made during the visit regarding the desire for the students to see more patients, especially those with more complex periodontal needs. This may require a greater input from specialist Periodontologists.

Although the proposal to combine the similar DH and Dental Assistant (DA) programmes was rejected by the Lithuanian Dental Chamber, the Association of Dental Hygienists and the Association of Dental Assistants (Annex 6), there have been adjustments made in the 2 programmes to allow co-ordinated group teaching of various theoretical subjects in order to improve efficiency of the teaching. It was reported that approximately one third of the general study subjects were identical between the 2 programmes. In order to encourage a higher level of team work the expert panel recommends that the DH and DA students work clinically together more often.

Overall the study subjects are appropriately distributed within the programme, are consistent with the programme learning outcomes and there is little evidence of inappropriate repetition. Repetition of teaching between subjects is monitored by the Study Programme Committee which receive self-evaluation reports from each subject. The range of teaching methods used, both passive and active, are appropriate and the students confirmed during the visit that teaching material is available on the Virtual Learning Environment/MOODLE. However there is scope to

utilise MOODLE more in the learning and teaching process. Changes in the programme content have resulted from a comparison of the DH programme with international standards, benchmarking with international partner institutions and recommendations provided by experts during the external evaluation 2012. However, changes in the programme content should be continue to be reviewed following feedback from stakeholders and continued benchmarking with international partners in order to facilitate the continued improvement of the study programme.

***Strengths:***

- *Study subjects are appropriately distributed within the programme, are consistent with the programme learning outcomes and there is little evidence of inappropriate repetition.*
- *Acknowledgement of the positive changes to the curriculum implemented following the recommendations made by the previous expert panel (2012).*
- *Benchmarking of the curriculum with international partner institutions has been improved and should be developed further.*

***Weaknesses:***

- *Further increasing the amount of clinical practice, especially more experience of complex periodontal cases.*
- *Recommend the teaching of English throughout the curriculum to encourage international student exchanges.*
- *In order to encourage a higher level of team work the expert panel recommends that the DH and DA students work clinically together more often.*
- *More scope to utilise MOODLE (Virtual Learning Environment) in the learning and teaching process.*

### **2.3. Teaching staff**

The staff engaged in the implementation of the programme complies with the legal requirements. The workload rates and remuneration of teachers are in accordance with legal acts. In the academic year 2013-14 27 teachers (15 full-time, 12 part-time) were involved in the implementation of the DH programme, 20 (74%) of which taught study field subjects including 2 teachers (11%) with doctoral degrees in science. Eighteen (67%) of the teaching staff are permanent. Seventy percent of the study field subject teachers have at least 3 years of practical work experience in their subject within the previous 7 years. Eight full-time teacher-practitioners (5 dental hygienists and 3 dentists) are involved in the delivery of the clinical practice aspects of the programme at personal healthcare establishments in Klaipeda City and district. It was reported in the SER that the average staff/teacher-student ratio for the DH study programme was 1:16.49 (2014). The senior management reported that the staff-student ratio was 1:6 for the practices and 1:4 when working at the college work stations, these figures were confirmed by the students. The number of staff is sufficient to ensure the delivery of the learning outcomes and the expert panel commend the good staff-student ratios for the practical/clinical aspects of the programme. The expert panel considered that having 2 out of the 5 practices within the College was a very positive aspect of the programme.

Staff turnover was relatively high with 4 study field teachers leaving during the academic year 2013-14 and these staff were replaced by 4 new teachers. The age distribution and the turnover of staff was viewed by the senior management as having a positive impact on the programme resulting from a wider range of clinical and pedagogical experience amongst the staff. This created favourable conditions to promote further positive changes to the programme.

The College has clear procedures for assessing the teachers' continuing professional development requirements through the use of annual Departmental Development Plans, the Teacher's Non-contact Work Plans and Teacher's Performance Reports. Teachers undergo a certification process every 5 years. Funding is available from the College for staff to attend professional development courses both internally and externally, and additional funding can be applied for to allow staff to gain further qualifications. The staff indicated that they were engaged in professional development. In the academic year 2013-14 nine staff from the Department of Oral Health were further developing their professional qualifications and three DH programme teachers had completed pedagogical development courses. One member of staff took part in a two week Erasmus programme traineeship in North Karelia, Finland. The support provided by the College for professional development is sufficient.

As part of the of benchmarking of the curriculum with international partners, there has been opportunities for staff to develop their English skills through staff exchanges. Staff from Kristianstad University (Sweden) and the Polytechnic Institute of Portalegre (Portugal) have taught on the programme through the Erasmus exchange programme. These sessions have promoted the development of the English language skills of both the staff and the students. Furthermore, two of the programme teachers have recently given lectures in English in the Polytechnic Institute of Portalegre. So far, the number of staff engaged in exchange programmes has been small and should be further developed. It was reported that further exchanges are planned with Riga Stradins University (Latvia) and the University of the West of England (UK). The senior management outlined a strategic plan to improve the development of teaching competencies, in particular English language skills, for example there have been short English language courses available within the College to encourage the English skills of young teachers.

DH teachers are involved in applied research activities directly related to the programme. Five study field teachers have actively been involved in research projects on Oral Health issues in Western Lithuania and the results of these projects have been published and presented at international conferences. Other research activity included research on health service management issues, sociological issues, reflection skills of students in practice and the need for Dental Hygienists in Lithuania. Students have the opportunity to carry out applied research for their term papers and their final theses which are based on the applied research projects carried out by the department.

***Strengths:***

- *Well qualified, dedicated and enthusiastic staff both within the College and in the practices.*
- *Very good staff-student ratios for the practical and clinical aspects of the programme.*

- *There are clear procedures for the monitoring of the continuing professional development needs of the teaching staff.*

**Weaknesses:**

- *The number of staff undertaking international exchanges with partner institutions has been small and should be increased. This would further encourage staff to develop their English language skills and may promote more student exchanges. The College should also encourage staff to enroll onto longitudinal English language courses.*

**2.4. Facilities and learning resources**

The infrastructure within the faculty, both in terms of size and equipment, is sufficient for the implementation of the programme in comparison to the number of enrolled students. Within the faculty there are well equipped lecture halls, classrooms, teaching laboratories, clinical units, library, reading and computer rooms.

The computer equipment is suitable and sufficient for learning, including access to good quality software packages such as the statistical analysis package SPSS 19.0. There is sufficient online access within the faculty and the KVK dormitories also have internet access.

Study field subjects and practical professional training take place in phantom head classes and in fully equipped training dental offices. The inspection panel noted the investment made by the College (150,000 Euro) to improve learning resources and there are now 10 fully-equipped dental units available in the training base and there are sufficient resources to train students fully in sterilisation procedures. The equipment and oral hygiene materials used by the DH students were of good quality. As with other colleges the students were expected to pay around 50Euro per year for personal protective equipment when working within the College.

The programme has sufficient number of clinical bases supported by the co-operation agreements with 18 social partners in outreach centres. The expert panel visited a practice outreach centre which was equipped to a high standard and evidence was presented that the level and quality of the input given to the DH training by the social partners was high.

The KVK Faculty of Health Sciences Library has a fully-computerised catalogue and a good selection of databases both of which are accessible remotely via the internet. Fifty one additional work stations have been installed, 22 of which have computer access. DH students also have access to other libraries facilities within the College including access to the KVK institutional virtual library, the Lithuanian academic electronic library *eLABa*, subscription databases and open-access electronic resources. The DH students interviewed by the expert panel confirmed that the specialist textbooks in the library and the library opening hours were sufficient for their needs. The expert panel found the library facilities to be sufficient for the educational needs of the DH students, although there is scope for the acquisition of more international standard textbooks.

**Strengths:**

- *Improved facilities and material resources within the building following significant investment.*

**Weaknesses:**

- *Relatively few standard textbooks (methodological publications) available in the library, especially international textbooks. However, this was not raised as an issue by the students.*

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

The admission requirements are clear and in accordance with the rules of admission to higher education institutions and are available online. Secondary school requirements for entry are calculated using a weighted coefficient with biology being the most important (0.4), chemistry or maths (0.2) and Lithuanian language (0.2). Average competitive scores for entry onto the programme have been increasing (16.6 for the academic year 2013-14), along with a reduction in the range of competitive scores. This suggests that the academic ability of the students entering the programing is increasing. Furthermore, there has been an increase in the number of students applying for entry (2013-14 approximately 1 place per every 21 applicants) which is probably due to the good employment prospects. The numbers of students reaching graduation is relatively high (generally around 85%) and regular meetings with the student tutors are used to overcome student academic issues.

The SER of DH study programme presents comprehensive information of study process and its assessment. The study process (study conditions and rules, students' rights and duties, relations among the administration, teachers and students, the duration of working week, hours and time table) is regulated by the KVK Study Regulations and is published on the KVK website. There were several examples of where feedback from stakeholders have resulted in positive changes to the programme. For example, following feedback from the students and graduates a specific theatre event was organised to improve communication skills which involved the students, teachers, graduates and social partners. The expert panel commends the efforts made, following feedback, to improve the communication training of the students inconjunction with the staff and social partners. This activity should be continued and developed further.

Students are involved in applied research activities and are encouraged to choose topics for their term papers and final theses based on research field developed by the Department "Studies on the Oral Health-Related Quality of Life". In the academic year 2012-13 three students (13%) and two students (9%) in the academic year 2013-14 chose subjects for their final theses directly related with the main applied research field pursued by the Department. The research supervisors for final theses have also carried out research requested by the social partners, typically involving regional issues, and DH students have been involved in this research and some projects have involved commercial companies. As well carrying out the applied research and producing their final theses, many of these projects also had a focus of raising the awareness on the importance of oral health. As part of the process of producing the final theses, the students must carry out a compulsory literature search, and in most subject areas, give an oral presentation of their work. The expert panel were able to examine a range of final theses and the standard of the work was generally very high. The abstract had to be written in English and the students

confirmed that a significant amount of the research literature they needed to review for their final theses were in English. Both of these aspects further promote the English skills of the students. But as stated in the SER and confirmed during the experts' visit, students are not very actively involved in the applied research. This is an area in which the expert panel recommends to be further developed.

Although there are 28 Erasmus partner institutions available within the Faculty of Health Sciences only 8 are directly related to the DH programme. The number of DH students undertaking exchanges has been small and more should be encouraged to do so. One way to do this would be to have English as a study subject throughout the curriculum, it would increase the student's confidence and self-realisation. Increased numbers of student exchanges with more dental hygiene partner institutions would also promote further benchmarking of the curriculum. Two exchange students from Portugal were present in the outreach practice visited by the expert panel and efforts should be made to encourage more student exchanges to the College.

There are adequate levels of social support in place regarding social grants for incentive grants for learning, to help students from disadvantaged backgrounds and for students with disabilities. There are adequate and fair provision to allow students to clear their institutional debts. Students can also get assistance on various social and academic issues through the Student Union which has a lot of useful information available on its website. Students from outside Klaipeda can apply to stay in one of the four College dormitories. There is also adequate provision for students to carry out extracurricular sports and cultural activities.

The College have various ways to help students with academic and pastoral issues. Students with psychological issues affecting their studies can be referred by the Study and Career Service for specialist help. Information on support for students is available on the KVK website. Students also have weekly sessions with their group tutors (generally 2 hours per week) where issues relating to their studies can be addressed.

The assessment system is transparent, appropriate and information about it is available to the students. A standard criteria-based ten-point scoring system is used to assess the students' attainment of the subject learning outcomes in terms of their knowledge, understanding and abilities. Students' academic progress and their achievement of the learning outcomes are reviewed twice yearly at staff meetings at the end of each semester. Electronic student feedback surveys are carried out at the end of each semester to help the further development of the teaching.

The placement rates of graduates are relatively high with many gaining employment in the practices where they had student placements. Although the figures are incomplete, the employment rate of graduates in 2012 was 75% and in 2013 was 89.5% (work and further studies).

***Strengths:***

- *The programme is attracting more academically capable students and there is significant competition for places.*

- *The assessment system is transparent, appropriate and is freely available to the students.*
- *There is clear evidence of feedback from stakeholders being taken into account in the modification/development of the programme. The relationship between the programme and the social partners is exceptional.*

**Weaknesses:**

- *Although the provisional of communication has improved following feedback from the students and the graduates, this area needs further development.*
- *Although students are involved in applied research this needs to be expanded and the students need to have more systematically involved.*
- *The numbers of students involved in the Erasmus exchange programme is small and more should be encouraged to do so. One way to do this would be to have English as a study subject throughout the curriculum.*

## **2.6. Programme management**

Improvements in the study programme are carried out systematically. All stakeholders (College, students, graduates, teachers and social partners) have an input into the evaluation, decision-making and implementation of improvements in the DH study programme. Within the College the study programme is managed at the department, faculty and college levels.

At the programme level the Study Programme Committee (whichs of 1 student, 3 teachers and 1 representative of the employers) is responsible for the continued improvement of the programme following feedback from the various stakeholders, including the social partners. Department teachers are responsible for issues relating to the quality of the subject teaching.

The Faculty of Health Sciences (FHS) is responsible for the overall organisation of the programmes, the applied research and the implementation of the faculty services. Changes to the DH programme have to be approved by the FHS Study Committee and the FHS Dean's Office is responsible for the organisation of study processes (scheduling of lecture and assessments, quality assurance of the faculty programmes, etc). Overall, there is a clear decision making committee structure both internally within the programme and within the Faculty.

Data on the implementation of the study programme is collected using electronic surveys created by the College and the findings are analysed and used to make changes to the programme. Following the collection of feedback from the students, graduates, teachers and social partners possible changes to the programme are discussed at a departmental meeting at the end of each academic year. Minor changes to the programme are made annually and are implemented at the beginning of academic year, while major changes are made every 3 years. At the subject level, students are surveyed following the completion of the subjects at the end of every semester. Surveys of the first and final year students, graduates and the employers are used to assess the quality of the study process and the study programme.

From the SER and the site visit to the College it is clear that significant and appropriate changes have been implemented following the recommendations made by the previous external evaluation. For example, new subjects have been introduced, students are now exposed to a

wider variety of patients in their practices (geriatric and special needs patients) and further exchange agreements have been signed. Improvements made through the programme's evaluation processes include the introduction of additional teaching to improve communication skills and the inclusion of all students in the discussions following the results of examinations. The conclusions made by international expert panel (2015) will be published on SKVC and KVK websites.

Stakeholders have a direct input into the Study Programme Committee, where a representative of employers works in conjunction with a student representative and the teachers to implement improvements to the DH study programme. The main social partners (dental clinic Lela, Public Institution Klaipėdos miesto stomatologijos poliklinika, Public Health Bureau of Klaipėda City and the Public Health Bureau of Klaipėda County Municipality) are involved in the study programme assessment and improvement processes through the Study Programme Committee and Qualification Commissions. DH students also have an active role in the planning, implementation and evaluation of the study process. There are student representatives on the Study Programme Committee, the FHS Study Committee, the Academic Council and the KVK Council.

The internal quality assurance measures for the DH study programme are effective and appropriate. They are based on the requirements for ISO9001, EFQM and other governance legislation affecting the operation of the College. There are on-going effective protocols to monitor, evaluate and modify the learning outcomes of the DH programme. Similar internal monitoring and evaluation protocols are used for other key aspects of the programme including staffing, assessment methods and outcomes, facilities, admission requirements and numbers, co-operation with social partners, etc.

Feedback gained from the stakeholders (students, graduates and employers) through the use of regular surveys and through direct lines of communication, such as input into various committees, is used to assess and evaluate the programme. This information is fed into the committee structures at both the programme and College levels in order to make continued improvements to the programme.

The expert panel strongly commends the close and effective working relationship which exists between the programme and the various stakeholders, especially with the alumni and the social partners. We consider the interaction of the alumni and the social partners with the programme to be exceptional and an example of excellence. During the expert panel visit it was very clear that the alumni and the social partners had a significant input into the continued development of the programme through various feedback mechanisms and input directly into the programme committees. The social partners were involved in the applied research and had an important role in the measures taken to implement the changes recommended by the previous expert panel. Feedback from the alumni contributed to the introduction of the additional communication skills training in which many of the stakeholders benefitted from, not just the students. It was also clear during the visit that the social partners had an extensive knowledge of the programme and the enthusiasm of both the alumni and the social partners regarding the programme and its students was inspiring.

**Strengths:**

- *The programme management structure is clearly defined.*
- *The close and effective working relationship of the alumni and the social partners with the programme and their positive influence on the programme is an example of excellence.*

**Weaknesses:**

- *Although in the SER comments were made regarding the insufficient implementation of the improvement actions there was little evidence of this during the visit. An action plan to overcome any issues appears to be already be in place.*

**2.7. Examples of excellence (if there are any).**

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**III. RECOMMENDATIONS**

1. English language and communication skills still need to be improved.
2. Further increasing the amount of clinical practice, especially more experience of complex periodontal cases.
3. In order to encourage a higher level of team work the expert panel recommends that the DH and DA students work clinically together more often.
4. More systematic involvement of students in applied research.

**IV. SUMMARY****1. Programme aims and learning outcomes**

The programme aims and learning outcomes were clearly defined and formulated with regards to both the National and European Qualification Frameworks. The programme aims and learning outcomes comply with those of international partner institutions and with the recommendations of the International Federation of Dental Hygienists. The learning outcomes of subjects are consistent with the learning outcomes of the programme and the KVK DH study programme is consistent with identical study programmes of other colleges in Lithuania. The DH study programme's aims and learning outcomes are widely available to the public. All stakeholders in the programme have an input into the development/modification of the programme learning outcomes.

## ***2. Curriculum design***

The DH study programme complies with the Description of the General Requirements of Degree Study Programmes and complies with the ECTS requirements for a first cycle Bachelor degree programme. It is a 3 year full-time programme consisting of 180 ECTS. All of the general college subjects are taught in the 1st year with the study field subjects and practice being appropriately distributed over the 3 years of the programme. Student selected elective projects are taken during 2nd year and 3rd year. Preparation for the qualifying examination and for defence of the final thesis take place in 3rd year. The expert panel acknowledges the changes in the programme implemented following the recommendations made by the previous expert panel. Benchmarking of the curriculum with international partners has been carried out and this will continue as more international exchange agreements are signed. Students now have more access to geriatric and special needs patients, however, there is more scope for students to treat patients with more complex periodontal needs.

Overall the study subjects are appropriately distributed within the programme, are consistent with the programme learning outcomes and there is little evidence of inappropriate repetition. There is scope to utilise MOODLE more in the learning and teaching process. Changes in the programme content have resulted from a comparison of the DH programme with international standards, benchmarking with international partner institutions and recommendations provided by experts during the external evaluation 2012. The expert panel recommends that the teaching of English is carried out throughout the curriculum, and the DH and DA students should work clinically together more often to encourage a higher level of teamwork.

## ***3. Staff***

The staff engaged in the implementation of the programme complies with the legal requirements. In the academic year 2013-14 27 teachers (15 full-time, 12 part-time) were involved in the implementation of the DH programme. The study field subjects are taught by 20 teachers, 2 of which have doctoral degrees in science. There are 8 full-time teacher-practitioners (5 dental hygienists and 3 dentists) are involved in the delivery of the clinical practices. The number of staff is sufficient to ensure the delivery of the learning outcomes and the expert panel commend the good staff-student ratios for the practical/clinical aspects of the programme. The expert panel considered that having 2 out of the 5 practices within the College was a very positive aspect of the programme. There are clear procedures for the monitoring of the continuing professional development needs of the teaching staff. The number of staff undertaking international exchanges with partner institutions has been small and should be increased. This would further encourage staff to develop their English language skills and may promote more student exchanges. The College should also encourage staff to enroll onto longitudinal English language courses. DH teachers are involved in applied research activities directly related to the programme. Students have the opportunity to carryout applied research for their term papers and their final theses which are based on the applied research projects carried out by the department.

#### ***4. Facilities and learning resource***

The infrastructure within the faculty, both in terms of size and equipment, is sufficient for the implementation of the programme in comparison to the number of enrolled students. The computer equipment is suitable and sufficient for learning. There are now 10 fully-equipped dental units available in the training base and there are sufficient resources to train students fully in sterilisation procedures. The programme has sufficient number of clinical bases supported by the co-operation agreements with 18 social partners in outreach centres. The library facilities are sufficient for the educational needs of the DH students, although there is scope for the acquisition of more international standard textbooks.

#### ***5. Study process and students' performance assessment***

The admission requirements are clear and in accordance with the rules of admission to higher education institutions and are available online. The programme is attracting more academically capable students and there is significant competition for places. The assessment system is transparent, appropriate and is freely available to the students. There is clear evidence of feedback from stakeholders being taken into account in the modification/development of the programme. Communication training of the students has improved following feedback, however, this activity should be developed further. Students are involved in applied research but this area needs to be developed further to allow them to be more systematically involved. The number of students involved in the Erasmus exchange programme is small and more should be encouraged to do so. One way to do this would be to have English as a study subject throughout the curriculum.

#### ***6. Programme management***

The programme management structure is clearly defined and improvements in the study programme are carried out systematically. The internal quality assurance measures for the DH study programme are effective and appropriate. They are based on the requirements for ISO9001, EFQM and other governance legislation affecting the operation of the College. There are on-going effective protocols to monitor, evaluate and modify the learning outcomes of the DH programme. Similar internal monitoring and evaluation protocols are used for other key aspects of the programme including staffing, assessment methods and outcomes, facilities, admission requirements and numbers, co-operation with social partners.

All stakeholders (College, students, graduates, teachers and social partners) have an input into the evaluation, decision-making and implementation of improvements in the DH study programme. The close and effective working relationship of the alumni and the social partners with the programme and their positive influence on the programme is an example of excellence. Significant and appropriate changes have been implemented following the recommendations made by the previous external evaluation. For example, new subjects have been introduced, students are now exposed to a wider variety of patients in their practices (geriatric and special needs patients) and further exchange agreements have been signed.

## V. GENERAL ASSESSMENT

The study programme *Dental Hygiene* (state code – 653A51005) at *Klaipėda State College* given **positive** evaluation.

*Study programme assessment in points by evaluation areas.*

No.	Evaluation Area	Evaluation of an area in points*
1.	Programme aims and learning outcomes	3
2.	Curriculum design	3
3.	Teaching staff	3
4.	Facilities and learning resources	3
5.	Study process and students' performance assessment	3
6.	Programme management	4
	<b>Total:</b>	<b>19</b>

\*1 (unsatisfactory) - there are essential shortcomings that must be eliminated;

2 (satisfactory) - meets the established minimum requirements, needs improvement;

3 (good) - the field develops systematically, has distinctive features;

4 (very good) - the field is exceptionally good.

Grupės vadovas: Team leader:	Dr. Kevin J Davey
Grupės nariai: Team members:	Prof. dr. Sandra Ribeiro Graca
	Assoc. prof. dr. Egita Senakola
	Mrs Erminija Guzaitienė
	Mr Mindaugas Vilius

**KLAIPĖDOS VALSTYBINĖS KOLEGIJOS PIRMOSIOS PAKOPOS STUDIJŲ  
PROGRAMOS *BURNOS HIGIENA* (VALSTYBINIS KODAS – 653A51005)  
2015-06-18 EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-154 IŠRAŠAS**

&lt;...&gt;

**V. APIBENDRINAMASIS ĮVERTINIMAS**

Klaipėdos valstybinės kolegijos studijų programa *Burnos higiena* (valstybinis kodas – 653A51005) vertinama **teigiamai**.

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

\* 1 - Nepatenkinamai (yra esminių trūkumų, kuriuos būtina pašalinti)

2 - Patenkinamai (tenkina minimalius reikalavimus, reikia tobulinti)

3 - Gerai (sistemiškai plėtojama sritis, turi savitų bruožų)

4 - Labai gerai (sritis yra išskirtinė)

&lt;...&gt;

**IV. SANTRAUKA****1. Programos tikslai ir numatomi studijų rezultatai**

Programos tikslai ir numatomi studijų rezultatai aiškiai apibrėžti ir suformuluoti atsižvelgiant tiek į nacionalinę, tiek į Europos kvalifikacijų sąrangas. Programos tikslai ir numatomi studijų rezultatai atitinka tarptautinių partnerių institucijų studijų tikslus bei rezultatus ir Tarptautinės burnos higienistų federacijos rekomendacijas. Numatomi studijų dalykų rezultatai atitinka programos studijų rezultatus, KVK studijų programa *Burnos higiena* dera su kitose Lietuvos kolegijose vykdomomis panašiomis studijų programomis. Studijų programos *Burnos higiena* tikslai ir numatomi studijų rezultatai skelbiami viešai. Tobulinant (keičiant) numatomus šios programos studijų rezultatus dalyvauja visi programos socialiniai dalininkai.

**2. Programos sandara**

Studijų programa *Burnos higiena* atitinka Laipsnį suteikiančių (pirmosios pakopos ir vientisųjų) studijų programų bendrųjų reikalavimų aprašą ir pirmosios pakopos (bakaluro) programoms keliamus ECTS reikalavimus. Tai trejų metų trukmės nuolatinė studijų programa, apimanti 180 ECTS kreditų. Visi bendrieji dalykai kolegijoje dėstomi pirmaisiais studijų metais, studijų krypties dalykus ir praktiką tinkamai paskirstant per trejus šios programos įgyvendinimo metus. Pasirenkamuosius dalykus (projektus) studentai mokosi antraisiais ir trečiaisiais studijų metais. Kvalifikacijos egzaminui ir baigiamojo darbo gynimui rengiamasi trečiaisiais studijų

metais. Ekspertų grupė pripažįsta, kad, atsižvelgiant į ankstesnių vertinimų ekspertų rekomendacijas, yra padaryti šios programos pakeitimai. Programos sandara lyginta su tarptautinių partnerių institucijų programomis; tai bus daroma ir toliau, nes pasirašyta daugiau tarptautinių mainų susitarimų. Dabar studentai turi daugiau galimybių praktikuoti metu dirbti su senyvo amžiaus ir specialiųjų poreikių pacientais, gydyti daugiau sudėtingų periodonto problemų turinčių pacientų.

Apskritai studijų dalykai yra tinkamai išdėstyti per visą programą, atitinka šios programos numatomus studijų rezultatus, nėra aiškių netinkamo pasikartojimo požymių. Mokymo ir mokymosi procese būtų galima daugiau naudotis virtualiąja mokymosi aplinka Moodle. Studijų programą *Burnos higiena* palyginus su tarptautiniais standartais, tarptautinių partnerių aukštųjų mokyklų programomis ir atsižvelgus į 2012 m. išorinį vertinimą atlikusių ekspertų rekomendacijas, yra atlikti šios programos turinio pakeitimai. Ekspertų grupė rekomenduoja, kad anglų kalba būtų dėstoma per visą programos įgyvendinimo laikotarpį ir kad, siekiant kokybiško kolektyvinio darbo, abiejų studijų programų – *Burnos higiena* ir *Odontologinė priežiūra* – studentai dažniau kartu atliktų klinikinę praktiką.

### **3. Personalas**

Šią programą įgyvendinantis personalas atitinka teisės aktų reikalavimus. 2013–2014 m. studijų programą *Burnos higiena* vykdė 27 dėstytojai (15 iš jų dirbo visu etatu, 12 – ne visu etatu). Studijų krypties dalykus dėsto 20 dėstytojų, iš jų du turi mokslo daktaro laipsnį. Klinikinę praktiką dėsto 8 visu etatu dirbantys praktikos dėstytojai (5 burnos higienistai ir 3 odontologai). Dėstytojų skaičius yra pakankamas numatomiems studijų rezultatams pasiekti, taigi ekspertų grupė gerai vertina darbuotojų ir studentų santykį, turėdama omeny praktinį (klinikinį) šios programos aspektą. Ekspertų manymu, labai pozityvu tai, jog kolegija iš penkių praktikų dvejų praktikų įgyvendinimą pasirinko ne kolegijoje. Yra nustatytos aiškios nuolatinio dėstytojų profesinio tobulėjimo poreikių stebėjimo procedūros. Tarptautinių mainų su partnerių institucijomis programose dalyvauja mažai dėstytojų, ši skaičių reikėtų didinti. Tai padėtų dėstytojams toliau tobulinti anglų kalbos įgūdžius ir gali paskatinti studentų mainus. Be to, kolegija turėtų raginti darbuotojus lankyti ilgalaikius anglų kalbos kursus. Studijų programos *Burnos higiena* dėstytojai dalyvauja taikomųjų mokslinių tyrimų veikloje, tiesiogiai susijusioje su šia programa. Studentai turi galimybę atlikti taikomuosius mokslinius tyrimus, susijusius su jų kursiniais ir baigiamaisiais darbais, kurie yra pagrįsti katedroje vykdomais taikomųjų mokslinių tyrimų projektais.

### **4. Materialieji ištekliai**

Fakulteto infrastruktūra, turint omenyje patalpų dydį ir įrangą, pagal studentų skaičių yra pakankama programai įgyvendinti. Kompiuterinė įranga tinkama, studijoms jos pakanka. Mokymo bazėje šiuo metu yra 10 pilnai įrengtų odontologijos kabinetų; išteklių, reikalingų norint išmokyti studentus atlikti sterilizacijos procedūras, pakanka. Yra pakankamai šiai programai įgyvendinti skirtų klinikinių bazių, dėl jų pasirašyti 18 bendradarbiavimo susitarimų su socialiniais partneriais iš odontologinių paslaugų centrų. Bibliotekos išteklių *Burnos higienos* programos studentų švietimo reikmėms pakanka, tačiau būtų galima įsigyti daugiau tarptautinį standartą atitinkančių vadovėlių.

### **5. Studijų eiga ir jos vertinimas**

Priėmimo reikalavimai yra aiškūs, atitinkantys priėmimo į aukštąsias mokyklas bendrąsias taisykles ir skelbiami internete. Ši programa labiau traukia gagesnių studentų dėmesį, egzistuoja didelė konkurencija dėl studijų vietų. Vertinimo sistema yra skaidri, tinkama, informacija apie ją lengvai prieinama studentams. Akivaizdu, kad keičiant ir (arba) tobulinant programą

atsižvelgiama į socialinių dalininkų nuomones. Atsižvelgiant į studentų apklausų rezultatus, buvo daugiau dėmesio skirta studentų komunikacinių įgūdžių gerinimui, tačiau reikėtų šią veiklą tobulinti toliau. Studentai dalyvauja taikomuosiuose moksliniuose tyrimuose, tik šią sritį reikia plėtoti, kad jų dalyvavimas taptų sistemiškesnis. Erasmus mainų programoje dalyvauja nedaug studentų, tad reikėtų skatinti jų dalyvavimą. Vienas iš būdų tai padaryti būtų anglų kalbos, kaip studijų dalyko, mokymasis per visą programos įgyvendinimo laikotarpį.

## **6. Programos vadyba**

Programos vadybos struktūra yra aiškiai apibrėžta, studijų programa nuolat tobulinama. Vidinio studijų programos *Burnos higiena* kokybės užtikrinimo priemonės yra tinkamos ir veiksmingos. Jos pagrįstos ISO 9001 standarto nuostatomis, Europos kokybės vadybos fondo (EFQM) dokumentais ir teisės aktų, kuriais reglamentuojama kolegijos veikla, reikalavimus. Studijų programos *Burnos higiena* studijų rezultatų efektyvi stebėseną yra nurodyta ir nuolatinio kokybės monitoringo protokoluose. Panašūs vidaus stebėsenos ir vertinimo protokolai naudojami ir kitose svarbiausiose šios programos srityse, įskaitant darbuotojų priėmimą, vertinimo metodus ir rezultatus, materialiuosius išteklius, priėmimo reikalavimus ir studentų skaičių, bendradarbiavimą su socialiniais partneriais.

Prie studijų programos *Burnos higiena* vertinimo, tobulinimo ir sprendimų priėmimo prisideda visi socialiniai dalininkai (kolegija, studentai, absolventai, dėstytojai ir socialiniai partneriai). Glaudus ir veiksmingas alumnų bei socialinių partnerių bendradarbiavimas įgyvendinant šią programą ir jų teigiamas poveikis programai yra gerosios praktikos pavyzdys. Po to, kai buvo pateiktos ankstesnio išorinio vertinimo rekomendacijos, atlikta svarbių ir tinkamų studijų programos pakeitimų. Pavyzdžiui, įtraukta naujų studijų dalykų, per praktiką studentai turi galimybę dirbti su įvairesniais pacientais (senyvo amžiaus ir turinčiais specialiųjų poreikių), pasirašyta daugiau susitarimų dėl mainų.

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## **III. REKOMENDACIJOS**

1. Reikia toliau tobulinti dėstytojų ir studentų anglų kalbos ir bendravimo anglų kalba įgūdžius.
2. Toliau didinti klinikinės praktikos apimtį, ypač sudėtingų periodonto ligų gydymo patirtį.
3. Ekspertų grupė rekomenduoja, kad, siekiant gerinti grupinio darbo įgūdžius, studijų programų *Burnos higiena* ir *Odontologinė priežiūra* studentai dažniau kartu atliktų klinikinę praktiką.
4. Studentai turėtų sistemishiau dalyvauti taikomuosiuose moksliniuose tyrimuose.

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Paslaugos teikėjas patvirtina, jog yra susipažinęs su Lietuvos Respublikos baudžiamojo kodekso 235 straipsnio, numatančio atsakomybę už melagingą ar žinomai neteisingai atliktą vertimą, reikalavimais.

Vertėjos rekvizitai (vardas, pavardė, parašas)