



STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

Vilniaus universiteto
STUDIJŲ PROGRAMOS
VISUOMENĖS SVEIKATA (621A60001)
VERTINIMO IŠVADOS

EVALUATION REPORT
OF PUBLIC HEALTH (621A60001)
STUDY PROGRAMME

At Vilnius University

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Išvados parengtos anglų kalba
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Vilnius
2014

DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	<i>Visuomenės sveikata</i>
Valstybinis kodas	621A60001
Studijų sritis	biomedicinos mokslų
Studijų kryptis	visuomenės sveikata
Studijų programos rūšis	universitetinės studijos
Studijų pakopa	antroji
Studijų forma (trukmė metais)	nuolatinė (2)
Studijų programos apimtis kreditais	120
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	visuomenės sveikatos magistras
Studijų programos įregistravimo data	1998 m. birželio 25 d.

INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	<i>Public Health</i>
State code	621A60001
Study area	Biomedical Sciences
Study field	Public Health
Kind of the study programme	University studies
Study cycle	Second cycle
Study mode (length in years)	Full-time (2)
Volume of the study programme in credits	120
Degree and (or) professional qualifications awarded	Master of Public Health
Date of registration of the study programme	25 June 1998

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The Centre for Quality Assessment in Higher Education

CONTENTS

CONTENTS	3
I. INTRODUCTION	4
II. PROGRAMME ANALYSIS	4
1. Programme aims and learning outcomes.....	4
2. Curriculum design	5
3. Staff	6
4. Facilities and learning resources	7
6. Programme management	10
III. RECOMMENDATIONS	11
IV. SUMMARY	11
V. GENERAL ASSESSMENT	13

I. INTRODUCTION

As it is known from public health reports the relative risk of premature mortality of the populations of the Post-Soviet states (among them Lithuania) is about four times higher than the average risk of the population of the 15 states that comprised the European Union before May 2004 (EU15). It reflects not only a serious public health problem of these countries but may also deteriorate the sustainable development and international competitiveness of their economy due to weakening human resources. Improving the health of the population is a key challenge of our times in Lithuania. Closing the health gap between the EU15 and the country needs well trained public health professionals being able to motivate the whole society in improving health and preventing diseases and disabilities. The pivotal role of public health training to the development and orientation of the necessary human resources is unequivocal. The importance of chronic non-communicable diseases, as well as that of health policy and management issues in the public health practice became more and more recognised, and educational needs were reformulated to meet these needs. Similarly to public health services, public health educational institutions/departments – among them the Public Health Institute of Vilnius University – have developed and implemented programmes with a high priority on monitoring and controlling non-communicable diseases.

In accordance with the Bologna process the Master in Public Health programme is built on the Bachelor in Public Health training to further improve knowledge, skills and competencies obtained at undergraduate level.

The present review has been carried out under the guidelines and procedures of the Centre of Quality Assessment in Higher Education (hereinafter referred as SKVC). This evaluation report is based on the self-evaluation report (hereinafter referred as SER) and on a site visit on 1st April 2014. During the site visit, the team had the opportunity to discuss the Programme with Faculty administration, Self-evaluation group, teaching staff, students, graduates and social partners. The review team also visited the library, classrooms and offices associated with the programme. After the visit, the review team held a meeting in which the outcomes of the evaluation were discussed and adjusted to represent the opinions of the whole group.

II. PROGRAMME ANALYSIS

1. Programme aims and learning outcomes

The aim of the Public Health second cycle study programme is well defined and it is in harmony with the requirements of the Association of Schools of Public Health in the European Region (ASPHER), i.e. to train public health specialists/leaders, who have the skills of strategic, analytical and systemic thinking and are able to actively participate in developing health policy and managing public health programmes; and who are also able to design and perform research activities to improve the population's health and to reduce health inequalities. The study programme is aimed to ensure strong fundamental knowledge on health and its determinants, as well as skills to professionally apply this knowledge in practice.

The programme aims and the study programme were developed by considering

- Tuning Educational Structures in Europe,
- results of the project *The creation of the system for the training, qualification raising and development, and planning, of the Public Health supervision specialists*,
- guidelines of European Credit Transfer and Accumulation System (ECTS),
- ASPHER recommendations,
- legal acts of the Ministry of Education and Science of the Republic of Lithuania,

- the documents of the Centre for Quality Assessment and those of Vilnius University,
- WHO Regional office for Europe document *European Action Plan on Strengthening Public Health Capacities and Services*,
- outline of Lithuanian Health Care system's development for the year of 2011-2020 (2011),
- Lithuanian Health Programme 2020 (draft),
- Lithuanian national Public Health strategy for the year of 2006-2013 (2006),
- White Paper *A Strategic Approach for the EU 2008-2013* (2007),
- the Lithuanian progress strategy *Lithuania 2030*,
- National progress programme (2012),
- European strategy *Europe 2020*,
- WHO Health 2020: European strategy for health and wellbeing,
- EU European pact on mental health and wellbeing (2008),
- WHO Moscow declaration *On the control of healthy lifestyle and non-infectious diseases* (2011),
- UN political declaration *On the control and prevention of non-infectious diseases* (2012),
- WHO European region action plan on the strategies for realisation of the control and prevention of non-infectious diseases in Europe (within the year of 2011-2016) (2010),
- and other international public health priorities.

In addition students' feedback and suggestions of stakeholders were also considered. On the basis of this information the review team concluded that the programme aims and learning outcomes meet the academic and professional requirements, public needs and the needs of the labour market. The learning outcomes are appropriate for the master programme (it is aimed to train public health professionals, who are able not only to participate in delivering preventive interventions, but can also act as public health leaders and take part in public health policy development) and they are formulated in a clear manner understandable to the potential students and stakeholders. They are consistent with the type and level of studies, as well as the qualifications offered. Learning outcomes, content and the qualifications offered are compatible with each other.

2. Curriculum design

The curriculum design meets legal requirements, i.e. fully respects the legal acts of the Ministry of Education and Science of the Republic of Lithuania, the documents of the Centre for Quality Assessment and those of Vilnius University. The themes of subjects are not repetitive. Although in comparison with the previous evaluation significant improvement in the curriculum (more focused on public health methodology, information technology, subject names better coincide with international terminology based on the suggestions in the ASPHER 'Blue book', during the practice more attention is paid to the topic of health promotion) can be seen, but certain elements are still missing.

The latest achievements in science and practice are not represented well in the curriculum. Although among the results of the study programme "The ability to evaluate the impact of different environmental factors on the health of the population and its separate groups, to suggest ways for controlling the negative effects" is clearly defined the review team noted that rather than being clearly defined, the health impact assessment (HIA) topics are covered in the content of several subjects. A clearer definition would make the outcome more readily achievable. The review team understand that the fundamentals of genomics is an obligatory prerequisite for entering master of public health study programme however, the new emerging discipline of

public health – the public health genomics – is also not represented in the Masters curriculum. The names of subjects may be correct in Lithuanian, but their names in English sound primly. Presently the subject names in the master programme are the following: Epidemiology and Public Health; Environment and Public Health; Nutrition and Public Health; Health Promotion, Education and Public Health; etc. Instead of combining the traditional subject names with the term „public health“ it would be better to use: Advanced Epidemiology, Environmental Health, Public Health Nutrition, and simply Health Promotion in different settings. In the evaluation report in 2007 the subject names were criticised – they were not in harmony with the European terminology. Presently the subject names need further improvement. It is suggested by the review team that further comparison and benchmarking with other similar European programmes would help guide the team in programme development and naming subjects in this area.

The review team concluded that the content of the subjects is consistent with the type and level of the studies. The programme is in harmony with the first cycle public health programme, it is based on the bachelor programme, but the subjects in the master course are on a higher scientific level than the subjects of the first cycle studies. The social partners' opinion that the communication skills of the graduates are not sufficient should be carefully considered and the curriculum should be developed accordingly.

3. Staff

There are 29 teachers employed in the Public Health Institute. As it is stated in the SER 15 lecturers of the Public Health Institute (4 professors, 4 associate professors, 7 lecturers) take part in the implementation of the Public Health master programme. The review team concluded that the qualifications of the teaching staff seem to be adequate to ensure learning outcomes however the terms to define the qualifications of the staff members are not consistent – concerning the education of staff members different names are indicated in the field of public health as “the doctor hygienist”, “doctor of hygiene” (3 times), the “master of public health” (3 times), “public health physician” (2 times) – it is difficult to convert these terms into the European graduation degrees. The Lithuanian research degrees system seems to differ from the European system, so it is highly recommended to give a clear indication of the equivalence of the degree obtained to the Lithuanian/European qualifications framework.

The teaching staff turnover documented in Table 8 of the SER is able to ensure an adequate provision of the programme. The main reason for turnover is retirement, when young professionals who have usually completed the third cycle studies at Vilnius University are accepted into teaching positions at the Public Health Institute. Presently there are 7 PhD students supervised by the professors from the Public Health Institute. They are potential candidates for positions emptying in the future. Concerning the teachers' mobility in the recent 5 years only five teachers have gone to read lectures in foreign universities, while every year 3 to 4 visiting lecturers are welcomed by the Institute from foreign universities. So, the mobility is unbalanced. As it is indicated in the SER the major restriction for lecturer mobility is that the teachers have only prepared their courses in Lithuanian. The staff can easily overcome this obstacle by preparing their courses also in English. In this way the participation of staff members in international teacher exchange programmes can be further improved.

The teaching staff of the programme is involved in research directly related to the study programme being reviewed. As it is stated in the SER every member of the academic staff takes part in scientific conferences at least twice a year and makes presentations in national and international conferences. However, a significant number of staff members have no publications

included on Pubmed search. Staff members should be encouraged to publish in international journals.

4. Facilities and learning resources

The premises for the Public Health second cycle programme are adequate both in their size and quality. The number of classrooms, computer rooms and laboratories of the Public Health Institute and of all the faculty is sufficient to arrange the optimal timetable. There are 3 computer rooms with 63 computers, 98 workstations and multimedia for lectures and seminars, there is Nutrition laboratory with 35 workstations and technical equipment and Educational laboratory that has 28 workstations, 14 computers and multimedia for the disposal of the students as well as 16 other rooms with the necessary equipment and 1 reading room with 3 computers. The Public Health second cycle students also have 70 workstations and multimedia with computers in 2 rooms of Centre for Health Education and Disease Prevention. The classrooms meet the requirements of work safety and hygiene according to the public health safety evaluation report presented by Vilnius Public Health Centre in 2007.

The teaching and learning equipment are adequate in quality but not enough in size. Since the last evaluation the facilities have been greatly improved according to the recommendations – all the rooms for studying have the necessary equipment, are renovated, have new furniture. 3 computer classrooms have been established. Students can use software in all three computer classrooms, when there are no lectures taking place there. Students are recommended (especially for individual work) to use freeware: WinPepi, EpiInfo, OpenEpi in all three classrooms. Students are also introduced to this software during lectures. New computers were purchased in 2011-2013, as well as the software. Wireless network is available in the Faculty.

There are only 3 computers in the Reading room (Room 131) that are not used for lectures and seminars and can be used for individual work. This problem has been tried to be partially solved by introducing wireless network to the faculty, so that the students would be able to use it via their laptops but the Internet access does not solve the computerized learning problem because the necessary software and access to the necessary databases exist only in the computers of the University or via a VPN. Although for the development of practical skills new computer software is purchased continually, which can be used during the time of practical work, it is very limited due to the number of licences and computers.

The students of Public Health second cycle programme share the learning equipment with students from other programmes of the Faculty. As the Public Health programme is rather small in comparison with the other programmes, the priority to the access to the learning equipment is also given to the students from other programmes.

Multimedia equipment and computers with the necessary software in the classrooms enable teachers and students to use modern and various teaching methods such as PowerPoint presentations, simulation of situations, data review, case studies.

Although the modern electronic examination system and electronic questionnaire for students have been established they are not sufficiently adapted to the needs of the students and according to the SER and in discussion with teachers and students, appear to be under utilised. According to the students, they have tried the new electronic examination system but the lecturers declare that they do not use it because it is not sufficiently convenient when the answers to different questions during the examination are checked by different lecturers.

The websites of Vilnius University, the Faculty of Medicine, Public Health Institute, the Ministry of Education and Science of the Republic of Lithuania, AIKOS website are used to spread information on the study programme. There is a technical possibility (virtual learning environment) to present the subjects for the students on the Internet but students reported that this facility is underused.

The Public Health Institute has adequate arrangements for students' practice. Collaboration agreements with the main institutions of Lithuanian public health system have been signed, for example, with the Radiation Protection Centre, with the Centre for Health Promotion and Disease Prevention, the State Food and Veterinary Service, Vilnius Public Health Centre, Vilnius Public Health Bureau, the Institute of Hygiene, and other institutions. The learning outcomes of the study programme are based on the professional fields in public health centres, public health bureaus, public health institutions ruled by the Ministry of Health, State Food and Veterinary Service, and other institutions, where the students perform their professional practice.

Teaching materials are adequate and accessible. The students use 3 libraries and their reading rooms: the Library of the Faculty of Medicine, the Library of Vilnius University and the Library of the Ministry of Health. Some literature is also provided from the Library of the Public Health Institute. During the meeting the students stated that they have the access to the necessary literature and have the possibility to get the textbooks for the second cycle programme. The variety of teaching materials is efficient to fulfil the aims of the programme. The holdings of the Library of the Faculty of Medicine are supplemented and restored yearly with 2000-6000 publications. Textbooks and methodological literature every year are supplemented with newly published literature, taking into account the remarks made by the students and the teachers. The students are asked (question No. 11 in the Questionnaire) to evaluate the accessibility of necessary textbooks of the library during the survey at the end of every semester but the response to the questionnaire is low.

The University Library regularly sends textbooks from relevant databases to teachers for testing and then funding is allocated for subscription to the selected textbooks. Currently electronic textbooks have been subscribed to for Fundamentals of Health Economics and Management, Public Mental Health.

Vilnius University library orders Lithuanian and foreign medical journals, subscribes to scientific journal data bases, including BMJ Journals; Cochrane Library; Lippincott Williams & Wilkins Custom; PubMed Central and other. The databases ordered are accessible to the students from Vilnius University computers or from personal computers via the VPN programme. The students use data from different databases for their literature review in their final theses.

5. Study process and student assessment

In the SER it is stated that in 2002 “the Department of Hygiene, Social Medicine Centre, the Centre of Medical history and information, and Bioethical centre were merged, and thus, the Public Health Institute (PHI) of the Faculty of Medicine of Vilnius University was founded”. Presently “Environment Health section, Medical History and Ethics section and Social Medicine section” are specified. The structure of the Institute is not in harmony with the main fields of the “new public health” as Biostatistics and Epidemiology (both epidemiology of communicable and that of non-communicable diseases), Health Promotion, Environmental Health, Health Policy. Although the link between the departmental structure of the Institute and the master programme implementation is not absolutely direct, the training could be more focused and better organized if the staff members are more connected to the main pillars of the discipline.

The students are admitted into the Public Health second cycle programme after they have completed the BA studies in the biomedicine field. The admission requirements for the Public Health Master programme and information on the studies are published on the VU website. The competitive grades of the applicants are always high, students are convinced that the Master degree has a considerable impact on their career prospects. In addition, every year, the journal 'VU invites' is published, and a CD is released about all study programmes including the Public Health second cycle study programme. The students of the Public Health first cycle study programme are motivated to continue their studies in the second cycle programme. Open days, higher education fairs and similar events are also organized. Members of the Student Representation of the Faculty of Medicine also take part in these events and present leaflets on the Public Health second cycle programme.

The University informs the students adequately (VU internet webpage, posters) on mobility (student exchange possibilities), but does not motivate them sufficiently to seize this opportunity. The students of the Public Health second cycle programme find it difficult to manage the studies abroad. As it is explained in the SER the training in the Public Health second cycle studies in Lithuania and other European high education institutions is different (in admission requirements, study length, subjects taught) which complicates the mobility. If this is the fact, VU should further adjust the training conditions and open the ways to exchange programmes. Whilst the review team acknowledge that establishing mobility is often complex, the programme management should give a special attention to making students' mobility possible.

It is written in the SER, that students are informed about requirements for assessment and that the assessment system of students' performance is clear, adequate and publicly available. Further discussion with students indicated that there is no clear and consistent approach in ensuring that the mode of assessment is aligned with the skills that students will need to acquire during the programme, for example team working. The review team was advised by students that feedback from examinations is given to students on request. Whilst the students were satisfied with this, the programme team considered that feedback is an important formative component of assessment and should be routinely given to students as a component of all assessments.

The final theses are an important part of the study process. The topics specified by the staff members well represent the main challenges in the field of public health. A review of the final theses revealed that in the majority of theses the list of references is very short, and does not show that the students are familiar with the international literature background of the topic they studied. The small surveys that the students carried out in Vilnius (8 of the 18 thesis works) mainly have local relevance, but the international data are important even in these cases not only for the interpretation of the results, but for making suggestion for good practice interventions.

In discussion with social partners, satisfaction was expressed with the professional activities of the majority of graduates and confirmed that their expectations were met except the communication skills of the graduates. The SER indicates that after completing the Bachelor studies, the majority (70-80%) of the graduates continue their studies in the Public Health Master programme at Vilnius University. The majority of students we met had completed the Bachelor programme, gained full time employment and concurrently study in the Public Health Master programme full time. They are able to do this because social partners and the programme team managed the scheduling of work and study to enable this arrangement. The review team recommends inserting more communication-related topics and practice into the curriculum.

6. Programme management

As it is described in the SER the study programme is supervised by the Study Programme Committee which includes a student representative, as well as a social partner representative. The functions of programme implementation coordinator are performed by the Vice-Dean, who is the quality management coordinator in the faculty. In addition to the master study programme in general, as well as the contents of separate subjects the Committee deals with quality questions, gives recommendations, and prepares a report to the Council of the Faculty at the end of every academic year. The documents that reflect the implementation of the programme, the data on student achievements, the results of students' surveys as well as scholarship data are stored in the Dean's office and VU electronic information system.

Both in the Council of the Faculty and in the Study Programme Committee, there are student representatives who give suggestions for the study programme development. Decisions upon study questions are offered for consideration and approval in the Senate.

It is clear both from the SER and discussions with stakeholders that the outcomes of internal and external evaluations of the programme are used for the improvement of the programme. The master programme in its present form reflects the suggestions of the former external evaluation report, the programme was improved accordingly.

The SER advises that in 2008 the University established the online student survey system, which guarantees the necessary feedback. It is worth mentioning that the response to the electronic survey that is carried out at the end of every semester is low. The students evaluate the questionnaire of this survey as being too long and complicated.

The review team noted that a weakness of the programme identified in the SER was that "it is not always possible to pay attention to the suggestions made by the students for the programme development, since it sometimes opposes the regulations in the study regulating documents. Students vaguely participate in the filling in of the online survey. The social partners, such as the representative of the Ministry of Health in the Study programme committee, student practice supervisors, and public health ALUMNI, are not very active in the process of study development. There is no centralised graduate career observation system." This is in harmony with the impression of the review team that the mechanisms for collecting and responding to feedback were at times too formal and at others too informal and not structured enough to gather meaningful information. For this reason whilst the review team concluded that the internal quality assurance measures are effective and efficient in so much as they do collect and act on feedback but the full potential is not realised. The internal quality assurance system could be significantly strengthened for improving the programme based on internal feedback.

The review team concluded that although mechanisms are in place to gather feedback from students and social partners, they are not fit for purpose as they are unsystematic and ineffective. This is unfortunate as the programme team has demonstrated a clear capacity to introduce substantial beneficial programme developments but are not benefitting from effective in programme feedback which could accelerate the pace of change and increase the relevance, attractiveness and significance of the programme for stakeholders. The review team was impressed by the significant changes and development that had taken place since the previous evaluation and conclude that the programme team is easily capable of responding effectively to external feedback. The internal quality assurance measures could be significantly strengthened so that the programme team takes greater responsibility for improving the programme based on

internal feedback. The review team recommends that internal quality processes are reviewed to ensure that feedback is systematically collected and analysed.

III. RECOMMENDATIONS

1. The latest achievements in public health science and practice should be reflected in the curriculum. Harmonization of the programme with other European public health programmes would be beneficial.
2. Staff members should be encouraged to publish in international journals.
3. Student mobility needs further improvement and support.
4. The internal quality assurance system should be strengthened for improving the programme based on internal feedback.
5. Clear and consistent approach is necessary in ensuring that the mode of assessment is aligned with the skills that students will need to acquire during the programme.
6. Students should be advised to interpret their findings obtained in connection with their thesis work in international context by discussing the results in international comparison.

IV. SUMMARY

The present review has been carried out under the guidelines and procedures of the Centre of Quality Assessment in Higher Education. This evaluation report is based on the self-evaluation report and on a site visit on 1st April 2014. During the site visit, the team had the opportunity to discuss the Programme with Faculty administration, Self-evaluation group, teaching staff, students, graduates and social partners. The review team also visited the library, classrooms and offices associated with the programme. After the visit, the review team held a meeting in which the outcomes of the evaluation were discussed and adjusted to represent the opinions of the whole group.

The aim of the Public Health second cycle study programme is well defined and it is in harmony with the requirements of the Association of Schools of Public Health in the European Region, i.e. to train public health specialists/leaders, who have the skills of strategic, analytical and systemic thinking and are able to actively participate in developing health policy and managing public health programmes; and who are also able to design and perform research activities to improve the population's health and to reduce health inequalities. The study programme is aimed to ensure strong fundamental knowledge on health and its determinants, as well as skills to professionally apply this knowledge in practice.

The study programme was developed by considering and respecting the suggestions of relevant international documents. Although in comparison with the previous evaluation significant improvement in the curriculum can be seen, but certain elements are still missing. The latest achievements in science and practice (health impact assessment, public health genomics) are not represented well in the curriculum. In addition the subject names need further improvement. To guarantee the international competitiveness of the programme harmonization of the curriculum and training frame/schedule with that of the European leading training institutions seems to be important.

The programme is delivered by well qualified staff who participate in research in their field. A number of teachers from other countries contribute to the programme which provides an opportunity to add an international dimension. The programme could have a more international

focus if more sessions were delivered in English which would enhance the possibility of incoming and outgoing mobility of teachers and students. Study facilities are adequate for the programme and the classroom infrastructure has been recently refreshed. Students have access to the relevant journals and databases for their study. Students have the opportunity to spend time and practice in the main institutions of the Lithuanian public health system. Graduates from the programme state that the qualification enhanced their employment prospects and employers value the qualification although they would wish a greater emphasis on communication skills. The programme team have made significant positive changes and considerable developments to the programme over recent years and improved arrangements for collecting and acting on student and employer feedback will contribute to the continuation of this.

The University informs the students adequately (VU internet webpage, posters) on mobility (student exchange possibilities), but does not motivate them sufficiently to seize this opportunity.

V. GENERAL ASSESSMENT

The study programme *Public Health* (state code – 621A60001) at Vilnius University is given **positive** evaluation.

Study programme assessment in points by evaluation areas.

No.	Evaluation Area	Evaluation Area in Points*
1.	Programme aims and learning outcomes	3
2.	Curriculum design	3
3.	Staff	3
4.	Material resources	3
5.	Study process and assessment (student admission, study process student support, achievement assessment)	3
6.	Programme management (programme administration, internal quality assurance)	3
	Total:	18

*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:

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**VILNIAUS UNIVERSITETO ANTROSIOS PAKOPOS STUDIJŲ PROGRAMOS
VISUOMENĖS SVEIKATA (VALSTYBINIS KODAS – 621A60001) 2014-06-05
EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-293 IŠRAŠAS**

<...>

V. APIBENDRINAMASIS ĮVERTINIMAS

Vilniaus universiteto studijų programa *Visuomenės sveikata* (valstybinis kodas – 621A60001) vertinama **teigiamai**.

Eil. Nr.	Vertinimo sritis	Srities įvertinimas, balais*
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	3
	Iš viso:	18

* 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)

<...>

IV. SANTRAUKA

Šis vertinimas atliktas vadovaujantis Studijų kokybės vertinimo centro nurodymais ir procedūromis. Šios vertinimo išvados pagrįstos savianalizės suvestine ir 2014 m. balandžio 1 d. vizitu. Vizito metu vertinimo grupė turėjo galimybę aptarti šią studijų programą su fakulteto administracija, savianalizės rengimo grupe, dėstytojais, studentais, absolventais ir socialiniais partneriais. Be to, vertinimo grupė apsilankė bibliotekoje, auditorijose ir kabinetuose, susijusiuose su šia programa. Pasibaigus vizitui, vertinimo grupė sukvieta susirinkimą, kuriame buvo aptartos vertinimo išvados ir pakoreguotos atsižvelgus į visų grupės narių nuomonę.

Visuomenės sveikatos antrosios pakopos (magistrantūros) studijų programos tikslas aiškiai apibrėžtas ir atitinka Europos regiono visuomenės sveikatos mokyklų asociacijos reikalavimus, t. y. rengti visuomenės sveikatos specialistus / vadovus, turinčius strateginio, analitinio ir sisteminio mąstymo gebėjimų ir galinčius aktyviai dalyvauti kuriant sveikatos politiką ir vadovauti visuomenės sveikatos programoms, taip pat gebančius planuoti ir vykdyti mokslinių tyrimų veiklą, skirtą visuomenės sveikatai gerinti ir sveikatos priežiūros skirtumams mažinti. Šia studijų programa siekiama užtikrinti tvirtas pagrindines žinias apie sveikatą ir ją sąlygojančius veiksniai, gebėjimą profesionaliai taikyti šias žinias praktikoje.

Atsižvelgus į tam tikruose tarptautiniuose dokumentuose pateiktus pasiūlymus, ši studijų programa buvo patobulinta. Nors pastebima, kad studijų turinys, palyginus su ankstesniu vertinimu, patobulintas, kai kurių elementų vis dar trūksta. Jame nepakankamai atsispindi naujausi pasiekimai moksle ir praktikoje (poveikio sveikatai vertinimas, visuomenės sveikatos genomika). Be to, reikia toliau tobulinti dalykų pavadinimus. Siekiant užtikrinti programos konkurencingumą tarptautinėje rinkoje, būtų svarbu studijų turinį ir mokymo planą suderinti su pagrindinių Europos mokymo įstaigų studijų turiniu ir mokymo planu.

Šią programą dėsto kvalifikuotas personalas, kuris dalyvauja savo srities moksliniuose tyrimuose. Įgyvendinti šią programą padeda nemažai dėstytojų iš kitų šalių, ir tai sustiprina tarptautinę šios programos dimensiją. Programos tarptautiškumas galėtų būti didesnis, jei daugiau paskaitų būtų dėstoma anglų kalba – tai padidintų dėstytojų ir studentų atvykstamojo bei išvykstamojo judumo galimybę. Studijų bazė yra tinkama ir pakankama šiai programai įgyvendinti, neseniai atnaujinta auditorijų infrastruktūra. Studentams prieinami studijoms reikalingi žurnalai ir duomenų bazės. Studentai turi galimybę leisti laiką ir atlikti praktiką pagrindinėse Lietuvos visuomenės sveikatos sistemos institucijose. Programos absolventai tvirtina, kad įgyta kvalifikacija padidino jų įsidarbinimo galimybes, o darbdaviai vertina jų kvalifikaciją, nors pageidautų, kad daugiau dėmesio būtų skiriama bendravimo įgūdžiams. Pastaraisiais metais programos grupė atliko nemažai teigiamų pakeitimų ir patobulinimų; patobulinimai, susiję su studentų ir darbdavių grįžtamosios informacijos gavimu bei panaudojimu imantis priemonių, padės toliau tęsti šį darbą.

Universitetas tinkamai informuoja studentus (VU interneto svetainė, skelbimai) apie judumą (studentų mainų galimybes), bet nepakankamai skatina juos pasinaudoti šia galimybe.

<...>

III. REKOMENDACIJOS

1. Studijų turinyje turi atsispindėti naujausi pasiekimai visuomenės sveikatos moksle ir praktikoje. Būtų naudinga suderinti šią programą su kitomis Europos visuomenės sveikatos programomis.
2. Darbuotojai turėtų būti raginami skelbti publikacijas tarptautiniuose žurnaluose.
3. Reikia toliau gerinti ir remti studentų judumą.
4. Siekiant patobulinti programą remiantis vidaus grįžtamojo ryšiu, turėtų būti stiprinama vidinio studijų kokybės užtikrinimo sistema.
5. Būtina taikyti aiškų ir darnų požiūrį, užtikrinantį, kad vertinimo metodas atitiktų gebėjimus, kuriuos studentai turės įgyti studijuodami šią programą.
6. Studentai turėtų būti konsultuojami, kaip aiškinti savo išvadas, gautas rengiantis baigiamajam darbui, tarptautiniame kontekste, aptariant šiuos rezultatus ir palyginant su tarptautiniais rezultatais.

<...>

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)