

## STUDIJŲ KOKYBĖS VERTINIMO CENTRAS

# VILNIAUS UNIVERSITETO STUDIJŲ PROGRAMOS KINEZITERAPIJA (valstybinis kodas - 612B31001) VERTINIMO IŠVADOS

## EVALUATION REPORT OF PHYSIOTHERAPY (state code - 612B31001) STUDY PROGRAMME at VILNIUS UNIVERSITY

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- 3. Prof. dr. Manuela Ferreira, academic,
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Išvados parengtos anglų kalba Report language – English

## DUOMENYS APIE ĮVERTINTĄ PROGRAMĄ

Studijų programos pavadinimas	Kineziterapija
Valstybinis kodas	612B31001
Studijų sritis	Biomedicinos mokslai
Studijų kryptis	Reabilitacija
Studijų programos rūšis	Universitetinės studijos
Studijų pakopa	Pirmoji
Studijų forma (trukmė metais)	Nuolatinė (4 metai)
Studijų programos apimtis kreditais	240
Suteikiamas laipsnis ir (ar) profesinė kvalifikacija	Kineziterapijos bakalauras, Kineziterapeutas
Studijų programos įregistravimo data	2001 m. gegužės 24 d. Nr. 877

## INFORMATION ON EVALUATED STUDY PROGRAMME

Title of the study programme	Physiotherapy
State code	612B31001
Study area	Biomedical Studies
Study field	Rehabilitation
Type of the study programme	University Studies
Study cycle	First
Study mode (length in years)	Full-time (4 years)
Volume of the study programme in credits	240 credits
Degree and (or) professional qualifications awarded	Bachelor of Physiotherapy, Physiotherapist
Date of registration of the study programme	24 May, 2001; Order No. 877

Studijų kokybės vertinimo centras  $\mathbb C$ 

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 selfevaluation report prepared by Higher Education Institution (hereafter – HEI); 2) visit of the expert review team (hereafter – ET) at the higher education institution; 3) production of the evaluation report by the ET 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.

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

The Department of Rehabilitation, Physical and Sports Medicine is set up within the Faculty of Medicine at Vilnius University. Three programmes are managed within this Department: Physiotherapy and Occupational Therapy at Bachelor level and Rehabilitation at Master level. This report concerns the evaluation for the Physiotherapy Programme and the key data was presented at the beginning of this report.

Six meetings were held to explore further on the contents of the self-evaluation report and to collect evidence. This report and the evaluation analysis is based on the outcome of the due diligence of the self-evaluation report and these meetings. In addition, the ET visited the facilities available for Physiotherapy students' learning, both at the Central building of the Faculty of Medicine (M. K. Čiurlionio 21/27, Vilnius), premises of the Department of Rehabilitation Physical and Sports Medicine (Žirmūnų 124, Vilnius), Santariskes site.

#### 1.4. The Review Team

The ET was completed according to the *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 7<sup>th</sup> April, 2015.

- 1. Dr. Raija Kuisma (team leader), Course Leader MSc Rehabilitation Science, School of Health Sciences, University of Brighton, United Kingdom.
- **2. Dr. John Xerri de Caro,** *Lecturer within the Physiotherapy Department, Faculty of Health Sciences, University of Malta, Malta.*
- **3. Prof. dr. Manuela Ferreira,** *Professor of the School Escola Superior de Saúde do Alcoitão, Portugal.*
- **4. Dr. Marie-Antoinette Minis,** Senior Lecturer & Researcher at Faculty of Health, Behavior and Society, HAN University of Applied Sciences.
- **5.** Dr. Milda Žukauskienė, the Head of Rehabilitation Department, Faculty of Health Care, Vilnius College.
- **6.** Ms. Živilė Kondrotaitė, student of Vilnius Gediminas Technical University study programme Bioengineering.

The ET was very grateful for the warm welcome received by the staff at the Department and was able to conduct their evaluation in a serene atmosphere.

#### **II. PROGRAMME ANALYSIS**

#### 2.1. Programme aims and learning outcomes

The purpose of the Physiotherapy programme was presented clearly and succinctly in the Description of the Study Programme, SER, annex 3.1. as.... "to train physiotherapy specialists, who are able to preserve, improve and regain persons maximum physical and functional movement capabilities, make recommendations about the importance of physical activity, taking responsibility for professional development through applied research and generating innovative ideas while working in a team and independently". The programme aims and learning outcomes are generally expressed in line with the Bachelor level programmes as described in the Resolution approving the description of the Lithuanian Qualification Framework No 535, 4 May 2010, page 6, level VI.

It refers to the wide variety of knowledge and skills that are complex and require application, analysis, independence etc. as described above, for a current day autonomous professional, e.g. annex 3.2. Page 2., "3.1.Ability to analyse human structure and function, normal and abnormal patterns of human development and movement., 4.1 Ability to make physiotherapy diagnosis based on the analysis and critical interpretation of collected information and the related physiotherapy assessment. Predict the probable short- and long-term effects".

However some current topics e.g. health promotion and prevention which are emerging areas in physiotherapy could be further emphasised in the future development of the programme and the programme team has plans to include these in the future, which is strongly recommended. Also, as the programme team has indicated (SER p.11), the competences of students, such as cooperation, management and an ability to take initiative are not incorporated in the learning outcomes or the programme. ET considers these to be essential qualities for the current day practicing physiotherapist and by enhancing these competencies - multidisciplinary team work, innovation, entrepreneurship and management skills, the programme will better meet with the current physiotherapy standards as expected by the World Confederation of Physical Therapy (WCPT). This would also enhance the employment opportunities for graduates nationally and internationally. The ET also suggests learning outcomes of some subjects could be expressed with more measurable terminology, i.e. how the students will be able to demonstrate that they 'will understand, will know and will have the basic knowledge' noted on p. 46. The learning outcomes of the course unit could also be more specific to the units and therefore different from the programme learning outcomes. As an example 'Basics of Kinesiology'; description of the study programme (annex 3.1, plan of Physiotherapy study programme) presents competences such as: "ability to collaborate, communicate and work as a physiotherapist in interdisciplinary or multidisciplinary settings; ability to organize work effectively working in team/group, make proposals for a common goal and to take responsibility for the results; ability to analyse human structure and function, normal and abnormal patterns of human development and movement; ability to collect, analyse and synthesize relevant information from different sources". In the description of study subjects; 1.1; 2.1; 3.1; and 7.1 (annex 3.2, p. 5) the learning outcomes of the course unit are exactly the same. A more specific learning outcomes relevant, e.g. to Kinesiology could be therefore developed so that the study unit could address and assess those in its specific context.

In general, learning outcomes could be expressed in measurable terms as expressed above, how will the students demonstrate their learning, and this would allow the assessment tasks to be linked to the learning outcomes more explicitly. The title of the programme was presented in different forms in the discussions and documentation: Physiotherapy, Physical Therapy and Kinesiotherapy. It would be more appropriate to consider one term that is used consistently – Physiotherapy/Physiotherapist – as this is the more common term used in Europe.

There appear to be some discrepancies between the different topics and the depth of learning outcomes and the knowledge required, e.g. the medically oriented subject and physiotherapy related knowledge and skills. Perhaps the balance of these could be reviewed to allow time in the programme to integrate more contemporary topics of physiotherapy as mentioned above.

#### 2.2. Curriculum design

The curriculum design meets legal requirements. The Physiotherapy Bachelor study programme is based on the Law on Higher Research and Education of the Republic of Lithuania, the Description of the general requirements for degree study programmes of first cycle and the integrated study programmes and the Regulation of study programmes of Vilnius University. The total scope of the Physiotherapy study programme is 240 ECTS (4 years), form of studies – full-time. The programme has no specialisations. The scope of the programme is sufficient and it is in the line with the recommendations of World Confederation for Physical Therapy (WCPT) where no less than 180 ECTS physiotherapy education is recommended. One academic year has 60 study credits. 15 ECTS is allocated for general university study subjects. 188 credits in the Physiotherapy study programme are allocated for study field subjects, 44 credits of which are allocated for professional practice. The scope of the programme is sufficient to reach provided learning outcomes.

It seems to ET that study subjects are spread evenly. Although having the fact, that the first year of studies does not contain Physiotherapy subjects at all but is dedicated to more general subjects (Functional Anatomy, General Kinesiology etc.) and students start physiotherapy studies at the second year (3<sup>rd</sup> semester) and have only one subject of "Basics of Physiotherapy" in whole year, it would be recommended to think about possibility to start physiotherapy earlier to encourage and motivate students for the profession they choose.

The members of ET agreed that the content of the subjects and/or modules is, on the whole, consistent with the type and level of the studies. However, in reviewing the SER and the content of the description of the study subjects, the process and the evaluation of professional development of students wasn't fully clear to the ET. It is notable that the learning outcomes of some study subjects do not reflect the competences necessary for physiotherapists. Example – study course "physical agents" (annex 3.2. p. 99-102). Learning outcomes of this course unit (be

able to recognise pathological conditions, explain their effect on the body structures, use appropriate methods of intervention knowledge, integrating them into practice; be able to gather and interpret information regarding patient condition, and, critically assessing it, to select appropriate physical modalities; be able to select appropriate physical modalities, correct methods and techniques of their use; be able to gather, analyse and compare relevant information about physical agents from literature sources) do not show and reflect the application of the electrotherapy procedures. Even more – the only methods of student's performance are power point presentation, test (closed-ended questions) and examination (the test consists of closed-ended questions). The ET understands that students can demonstrate knowledge application in writing, but they cannot demonstrate skill application in writing. So the student effort involved in evaluation is not reflected in the assessment tasks. And even when the learning outcomes that have to be reached are clear, the alignment with assessments can be better specified.

The reference lists presented in annex 3.2. (Description of study subjects) do not vary significantly and books remain the major reference source for all study subjects (and the number of books is not shown) whereas it would be expected that primary sources of references from academic journals are also available at level 6. It shows that students are not encouraged to use scientific sources, contrary to the declared idea and aim of the programme "to train highly-qualified physical therapists who are capable of applying *modern scientific knowledge* and making a *critical analysis* while applying these knowledge to prevention and treatment in all health care, educational and health promotion institutions" (SER, p. 6).

Another concern is for the description of clinical practices. For example Clinical Practice I/VI (p. 83-86 of annex 3.2.). According to the description of working hours, all contact hours are dedicated for seminars (seminar task is to prepare for seminar about the certain topic) and for practical training as well (should be mistake in calculation, since 32+99 is 131, but not 134 as it is written in SER, p.85). The assessment strategy presented in the description is the activity during seminars (case study presentation and evaluations (30%); the presentation of individual assignment (Power point presentation) (60%); and practice report and diary presentation (10%). The ET did not clearly understand the aim of these seminars. It seems from the description of tasks, that this is more a theoretical subject rather than clinical practice where students have the possibility to demonstrate practical skills. The aim of these seminars was not clearly explained during the site visit as well. But in the description of further clinical practices the professional growth can be noticed and it appears that during seminars different clinical cases are discussed.

The diversity and appropriate use of the teaching and learning methods was not very clearly confirmed during the meeting with staff and students. Although teachers expressed that they are able to participate in different courses about teaching, preparing a lecture, distance learning, psychological aspects, problem based teaching etc., only one teacher knew and used an active teaching and learning methods. Students mainly named such methods as theoretical lectures, seminars and practice experience.

#### 2.3. Teaching staff

The study programme is provided by staff meeting legal requirements. According to annex 3.4 of the self-evaluation report, the Programme involves 52 teachers: 5 are professors, 9 associated professors, 21 lecturers (of which 2 doctoral students), 17 assistants (of which 2 doctoral students). 38 members of the teaching staff are full-time University employees (5 professors, 7 associated professors, 17 lecturers, 9 assistants). The ET compared these two documents presented for evaluation (SER and annex 3.4.) It becomes visible that 4 of 38 regular teachers presented in annex 3.4. (Jonas Algis Abaravičius, Ramunė Čepulienė, Dalia Paškevičienė, Vytautas Tutkus) are not listed in table 5 of SER. If so, then only 34 teachers should be listed as regular teachers of the programme. Furthermore, 6 of them are teaching other mandatory university studies subjects. So, 28 teachers are teaching subjects of study field and 14 of them have a doctoral degree. According to the *description of the general requirements for degree study programmes of first degree and integrated study programmes* approved by Order of the Subjects in the study field must be taught by scientists or scholars and recognised artists (art subjects)'. It shows that the teaching staff meets minimum legal requirements.

The qualifications of the teaching staff are adequate to ensure learning outcomes. According to Annex 3.4, 57.69 % of the teachers of the subjects accounting for 51.5 % of all the subjects of the Physiotherapy study programme were having a doctoral degree (of which 3 physiotherapists). According to Annex 3.4 and confirmed during the site visit, all teaching staff members have experience in practical activities. Teachers of the Physiotherapy programme carry out not only research, but also practical work at the Vilnius University Hospital Santariskiu Klinikos Rehabilitation, Physical and Sports Medicine Centre. Clearly, there are enough and experienced teachers in the Programme to ensure its learning outcomes.

The ET understood from the SER that the University organizes and offers to all teachers' different courses for enhancing and developing their pedagogical competences. According to the ET this is important indeed and encouraging. As a teacher both backgrounds (practical and pedagogical) are needed. There seems also a need to be more PT areas of interest

in Teachers' curriculums. During the visit the ET understood that many teachers are teaching several subjects in different areas of interest. So the management of the programme has an additional responsibility in order to avoid gaps in teaching areas.

According to SER (p. 19), teachers are recruited and re-attested by way of public competition according to the *Regulation on the attestation of teaching and research personnel, and the procedure for the organizing competitions for taking up positions of Vilnius University* approved by the Senate of Vilnius University; the Regulation establishes the procedure for the attestation, organizing of competitions for recruitment of teaching and research personnel, and defines their qualification requirements. The attestation and the competitions are arranged every five years. The work load per teacher, approved by the Council of the Faculty of Medicine in 2009 (SER, p. 19) is around 1584 h per year, distributed by Auditorium work, Methodological work and other teaching activities, Research and Organizational work. This distribution depends on the teacher's position. There were no complaints by the teachers about this topic.

The ET understood from the SER that teachers engage in professional development by participating in different international or national scientific conferences (16 participations), and seminars (12 participations). Teachers of the study programme have been making presentations at different scientific conferences both in Lithuania and abroad so it seemed to ET that university creates conditions for their professional development necessary for the provision of the programme but it is recommended to mandate continuing professional development (CPDs) for all Teachers.

An area for improvement could be mobility programs of the teachers. According to SER and confirmed during the visits, the teacher's participation in mobility programs is very low and rather inexistent, so the ET strongly recommends the strengthening of these exchange programs.

#### 2.4. Facilities and learning resources

The premises provided by the University for the Programme are very adequate both in their size and quality. Teaching takes place in 2 locations, in the Central building of the Faculty of Medicine (M. K. Čiurlionio 21/27, Vilnius), premises of the Department of Rehabilitation Physical and Sports Medicine (Žirmūnų 124, Vilnius). Clinical studies take place at the educational training centres of Vilnius University. Student's practical training is conducted in the premises of fieldwork places of the University, as well as the fieldwork places of its social partners. As part of the infrastructure improvement programme that the ET could observe, the second building of the Faculty of Medicine, now in the process of construction in Santariškės, will provide more rooms for lectures and practical activities and increase the possibilities to perform the research.

The premises for studies have the teaching and learning equipment (laboratory and computer equipment, consumables) that is adequate both in size and quality. The ET understood from the SER (p. 22) and confirmed this during the site visit that in all premises the learners have possibilities to use computers and multimedia equipment, part of the rooms provide internet connection, wireless internet is available in all premises of the Faculty of Medicine. In auditoriums and practical rooms not equipped with multimedia equipment teachers may use laptops and portable multimedia projectors from the Department. With a view to ensuring more efficient conditions for distant and independent studying, 5 virtual learning environments were introduced (gradually all subjects of the Physiotherapy will be provided access to the all-University virtual learning environment) using the Moodle service). Workplaces of practical activities are supplied with all the aids required for the practical sessions.

Students of the Bachelor's degree study programme in Physiotherapy carry out their professional practical training at the fieldwork centres of the University and its social partners. These fieldwork facilities provide for practical training of 53 physiotherapy students at a time, enough for the Programme. As it was confirmed during the site visit when meeting the students the places for the Clinical practice of Physiotherapy programme students are selected according to the subjects studied during the semester. ET didn't hear any complaints on this topic so it seems that there is an adequate arrangement for the practice.

The ET understood from the SER (p. 24) and confirmed during the site visit that the main publications required for the implementation of the Physiotherapy study programme are available at the library of the Faculty of Medicine of Vilnius University, other publications may be found in the Library of Vilnius University or the Lithuanian Medical Library (information available in the Lithuanian and English languages). Computers of Vilnius University provide access to a number of subscribed databases. Currently the Library subscribes to 66 databases (Annual Reviews (USD); BMJ Clinical Evidence; BMJ Journals; Cochrane Library and others). The electronic resources of the University also provide access to electronic journals, VU science magazines (37), Lithuanian science journals (187), foreign science journals (23), and electronic books (824), free-access electronic books subscribed by the Library of Vilnius University (793), free access resources (47). Students may access and use these electronic resources from their homes. The ET could confirm that the Learning Resources in the Physiotherapy field are very good.

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

The requirements for admission to the Programme are clear. Admission follows the standard system set by Rules of the Government and Rules of Admission to the VU. In this

system, the applicants to the Programme are rated according to their "competition score." Compared to two years ago the profession is better known in society and increasingly popular among applicants. According to the data on student admission and competition, there have been between 39 and 53 students admitted annually to the Programme during the years 2010 to 2014, of which on average 4 students each year were funded by the state.

Student drop-out rate is noted to be low and in the last year it was 15%. A variety of reasons were expressed by the students for this, of which complex examinations in the first and second year appeared most consistent.

The study process is well described and organized. However the rationale for the variety of contact hours and self-study hours could be better clarified; during the site visit it was claimed to ET that it is up to the teacher to decide. According to the students the distribution of workload was reasonable. The statement in the SER about subjects taught in cycles, with compulsory and optional subjects is clearly stated. The competences that have to be reached are clearly explained to the students. The content of the compulsory subjects taught and the content of the elective subjects are specified. The Study Programme is periodically reviewed and updated, based on a variety of stakeholders. During the site visit all parties i.e. teachers, students, graduates and social parties appeared satisfied with what had been done to improve the study and the addition of specific subjects such as paediatrics.

The ET recognises that the possibilities for international exchange have been low, however it was informed that international mobility is developing. In support of teacher and student mobility, the Faculty has signed a few Erasmus exchange agreements with foreign universities and other higher educational institutes. The Erasmus programme as well as participation of teachers and students in the ENPHE will provide increasing possibilities for students to go abroad. This will also provide opportunities for students to visit Vilnius University. The ET recommends that the Department works to develop these opportunities and to use more national and international input to improve the programme.

Academic Support is provided in order for the students to familiarise themselves with the requirements for a Bachelor study throughout the programme. Students can participate in the Scientific Society of Rehabilitation, Physical and Sports Medicine. The activities carried out in society are another opportunity for students to deepen knowledge. The subjects of the thesis reflect those opportunities.

The University provides the following forms of social support to the students: Scholarships for particularly good study results; social scholarships for students from the needy families or living alone, for those receiving social allowance, for those with moderate or severe disability, and for those below 25 years of age who are granted care or whose both parents (or one of the parents) are deceased; one-time social scholarships in cases of death of a family member, natural or other kind of disaster, disease or other similar case; and one-time target scholarships for students who have achieved good results either in sports or in cultural, research or public activities. Students with disabilities can receive social support from the Faculty. Whether they can study according to an individual plan is not clarified. Neither is it specified if students are offered 'support services'. All in all it seems that system of academic and social support is working well.

Justification for examination grades is given to students and it is possible to lodge a formal appeal to the Appeals Committee if agreement on the grade or the assessment process in not reached. To-date it appears that no complaints were submitted by the students to the Appeals committee. The availability of teachers for students provides enough possibilities to discuss issues that do arise. The recently introduced survey among students provides a clearer picture of strength and weaknesses of the programme and helps the staff to improve the programme. According to the staff they had not realized what the needs of the students were prior to the surveys, and as an example, as a consequence, an increase in fieldwork hours was already arranged.

Teaching and learning methods do not always correspond to the assessment methods. As an example it was not clear to the ET the assessment of problem based teaching can be a written survey. If the problem based teaching (or at least elements of it) is used, assessment should reflect the professional context in which students are able to show how they cope with acting and thinking like a professional. The assessment would better be recalled the application of knowledge and skills involving a range of intellectual and practical activities in a variety of contexts. The same examples can be found in description of other study subjects as well (p. 49-52; 79-81 etc.).

The Bachelor's thesis receives a written review. The thesis is assessed by two independent examiners. Based on the grades and what was read by the ET the marks seem to be quite high. As an example, the abstracts written in English were commonly flawed with grammatical and scientific errors, and nonetheless the thesis was graded with full marks. This beats the scope of having an abstract written in English. ET would also like to recommend that not all the theses use a quantitative methodology but offer a wider choice of methodology and analysis that is more qualitative lending itself more towards the social sciences. During the site visit and familiarizing with final theses another issue became noticeable – the professional ethics of patients data presentation. There were some theses where pictures of patients (especially teenagers and kids) were presented with the uncovered faces and no consent to publish these

pictures was found in the theses. With respect to the theses it is also being recommended that the "summary" that is written in English have its wording changed to "abstract" that indicates that this is a research document and not a summary of a chapter for example. For the university level 6 this abstract (and where necessary the thesis) should include a paragraph on the methodology selected with a little bit of detail included. This will help anybody, especially an ET to give a fairer opinion of the thesis being presented.

The Professional activity of the graduates meets the programme providers' expectations: According to the SER the graduates are supported by the staff to find employment if necessary.

#### 2.6. Programme management

The analysis and evaluation of the programmes followed the recommendations of the Methodology for the evaluation of higher education study programmes approved by the Director of the Centre for Quality Assessment in Higher Education by Order No 1-01-162 of 20 December 2010, and in particular analysis of programme management involved looking at decision-making procedures and ways to ensure quality of the programme (Section IV, 108). No previous external evaluation occurred and therefore any changes could not be addressed in this direction. Likewise, in evaluating the programme management area, it was aimed to establish adequacy, effectiveness and transparency of the programme management and the internal assurance of the programme quality (Section V, II, 133).

It was clear to the ET that the responsibilities for decisions and the monitoring of the implementation of the programme were clearly allocated in a vertical context with the more important decisions being taken at the level of the Council of the Faculty, such as changes to the Programme, whilst general management is considered by the Study Programme Committee (SPC). Although it was written in SER that decisions were taken by SPC, there was a doubt if such a committee exists as the ET heard no reference to this body in any of the meetings when questions were made regarding the Management. As an example, students were unable to identify their representative on the SPC. This reinforced the notion of a very vertical management. The wider involvement of the stakeholders in the feedback process was very evident and confirmed by the teachers, students and social partners. Involvement was common in every step and decision especially through surveys, open channels of communication between the teaching staff and students and yearly meetings organised to discuss the programme. Feedback given seems to have been taken on board, such as proposals to add lectures on biomechanics and anatomy, or to specifically introduce 'joint mobilisations' as a methodology of treatment and hydrotherapy. The latter examples were suggested following a student's experience whilst on clinical practice abroad during which comparisons with foreign curricula were noted. This reinforces the importance of internationalisation within the general context of the programme and is regarded by the ET as a way forward to ensure effective quality.

It was clear that the programme internal evaluations were being used to effect changes immediately for the improvement of the course, so much so that final year students expressed to be unlucky not to benefit from the changes implemented by their very own proposals. Notwithstanding it appears to the ET that, whilst the involvement of students, social partners and graduates is very active, this does come across as being spontaneous, and it suggested that internal evaluations are formalised by being recorded and accounted for, as most of the evidence rested on anecdotal feedback from the participants at the meetings. For example, it is unclear how many respondents participate in the surveys, what are the response options and the results. Furthermore, a consideration should be given towards the creation of an 'alumni platform' that will serve for previous students to remain engaged with the work of the Department.

Mechanisms to ascertain quality amongst teachers was also noted to be effective as they are encouraged to enhance and develop their pedagogical competence through CPDs, but as discussed earlier, this should be included as a mandatory obligation for all teachers if quality is to be assured efficiently as much as effectively.

The vertical management system is very rigorous and decisions taken appeared to the ET to lack transparency as the stakeholders including the students were unaware of the SPC; and whilst the ET is convinced that systems for quality assurance exist and the students are able to communicate their concerns, there was no evidence for this as students could not identify the representative on the SPC (as an example), if they were at all aware of this, and concrete examples for changes to the programme were not forthcoming. The identified weak points during SER meeting were problematic areas of management, the general view of subjects, and students and teachers mobility. Better transparency in the operational management would serve to enhance the evaluation in the field.

#### 2.7. Examples of excellence \*

\* if there are any to be shared as a good practice

### **III. RECOMMENDATIONS**

- 1. Reconsider Programme Aims and Learning Outcomes when including Health Promotion and Disease Prevention.
- 2. Review the Learning Outcome descriptors and ensure that they are all measurable.
- **3.** Align the assessments of the study units to reflect the learning/teaching methods.
- 4. Employ more teachers with a Doctoral level qualification in Physiotherapy.
- 5. Develop and enhance mobility for both Staff and Students.
- 6. Find a way to create conditions to increase the research output in physiotherapy.
- 7. Support the integration of different methodological approaches in the Bachelor Thesis.
- **8.** Replace the Summary with an English Abstract in the Thesis report and to ensure good English writing.
- 9. Operate a management system that is more transparent in its activities.
- 10. Mandate CPDs for all Teachers.
- **11.** Formalise and record the internal evaluations.

#### **IV. SUMMARY**

First of all, the ET notes that the Bachelor of Physiotherapy programme at the Vilnius University meets the general international and national requirements and expectations for entrylevel qualification in the profession of physiotherapy. However a number of shortcomings have been noted and suggestions made for improvements.

Given the challenges faced for physiotherapists in an ever-changing social environment, it is important that the programme better reflects its aims and learning outcomes and how the competences acquired with this degree will allow students to work not only in the traditional local clinical settings but also internationally.

The programme has among its strengths an experienced and varied teaching team, specialized in many different fields, although, in fact, not so many have a Doctoral level qualification in the field of physiotherapy. It was noticeably good that teachers are offered the possibility to engage in continuous professional development particularly in the areas of pedagogical competence however it is of concern that staff (and students) so not enagage so evidently in ERASMUS exchange programmes as this limits their exposure to what is happening in a more global dimension.

The strongest point appears to be the facilities and learning resources that emanates from the recent investments by the University into new buildings and facilities.

The weakest areas came across in the Programmes' Aims and Learning Objectives and in the area of Programme Management. Health promotion and disease prevention are not addressed in the current programme and the ET considers these to be essential qualities for the current day practicing physiotherapist to better meet with the current physiotherapy standards as expected by the World Confederation of Physical Therapy (WCPT). This would also enhance the employment opportunities for graduates nationally and internationally. The vertical management system is very rigorous and decisions taken appeared to the ET to lack transparency as it appeared that the decisions lay solely in a limited group of persons dictated by a strong vertical context. Better transparency in the operational management would serve to enhance the evaluation in the field.

### V. GENERAL ASSESSMENT

The study programme PHYSIOTHERAPY (state code - 612B31001) at VILNIUS UNIVERSITY is given **positive** evaluation.

Study programme assessment in points b	v evaluation areas.
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No.	Evaluation Area	Evaluation of an area in points*
1.	Programme aims and learning outcomes	2
2.	Curriculum design	3
3.	Teaching staff	3
4.	Facilities and learning resources	4
5.	Study process and students' performance assessment	3
6.	Programme management	2
	Total:	17

\*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. Raija Kuisma
Grupės nariai: Team members:	Dr. John Xerri de Caro
	Prof. dr. Manuela Ferreira
	Dr. Marie-Antoinette Minis
	Dr. Milda Žukauskienė
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# VILNIAUS UNIVERSITETO PIRMOSIOS PAKOPOS STUDIJŲ PROGRAMOS *KINEZITERAPIJA* (VALSTYBINIS KODAS – 612B31001) 2015-08-21 EKSPERTINIO VERTINIMO IŠVADŲ NR. SV4-241 IŠRAŠAS

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#### V. APIBENDRINAMASIS ĮVERTINIMAS

VILNIAUS UNIVERSITETO studijų programa *KINEZITERAPIJA* (valstybinis kodas – 612B31001) vertinama **teigiamai**.

Eil. Nr.	Vertinimo sritis	Srities įvertinimas, balais*
1.	Programos tikslai ir numatomi studijų rezultatai	2
2.	Programos sandara	3
3.	Personalas	3
4.	Materialieji ištekliai	4
5.	Studijų eiga ir jos vertinimas	3
6.	Programos vadyba	2
	Iš viso:	17

\* 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

Visų pirma ekspertų grupė (EG) pažymi, kad Vilniaus universitete dėstoma kineziterapijos bakalauro programa atitinka bendruosius tarptautinius bei nacionalinius reikalavimus ir kineziterapijos profesijos minimaliuosius kvalifikacinius lūkesčius. Tačiau pastebėta nemažai trūkumų ir pateikiama pasiūlymų, ką reikėtų pataisyti.

Turint omenyje iššūkius, su kuriais kineziterapeutams tenka susidurti nuolat besikeičiančioje socialinėje aplinkoje, svarbu, kad programa geriau atspindėtų savo tikslus, studijų rezultatus ir tai, kaip šiuo laipsniu įgyjamos kompetencijos leis studentams dirbti ne tik įprastoje vietinėje klinikinėje, bet ir tarptautinėje aplinkoje.

Viena iš programos stiprybių – prityrusi ir įvairi daugelio įvairių sričių specializaciją turinčių dėstytojų komanda, nors toli gražu ne visi turi kineziterapijos srities mokslų daktaro laipsnį. Pagirtina, kad dėstytojams suteikiama galimybė nuolat kelti profesinę kvalifikaciją pedagoginės kompetencijos srityje, tačiau susirūpinimą kelia faktas, jog personalas (ir studentai) palyginti neaktyviai dalyvauja *Erasmus* mainų programose – tai riboja jų galimybes susipažinti su tuo, kas vyksta globalesniu mastu.

Didžiausia stiprybe laikytinos patalpos ir mokymosi ištekliai – universitetas neseniai investavo į naujus pastatus ir infrastruktūrą.

Silpniausios vietos – programos tikslai, studijų rezultatai ir programos vadyba. Sveikatos mokymo ir ligų prevencijos dalykas dabartinėje programoje nenumatytas, tačiau, EG manymu, šios kvalifikacijos yra itin svarbios šiuolaikiniam praktikuojančiam kineziterapeutui, kad jis geriau atitiktų dabartinius kineziterapijos standartus, nustatytus Pasaulinės kineziterapijos konfederacijos (WCPT). Be to, tai padidintų absolventų galimybes įsidarbinti šalyje ir užsienyje. Vertikaliosios vadybos sistema labai griežta – EG susidarė įspūdis, kad priimamiems sprendimams trūksta skaidrumo ir jie priklauso tik nuo ribotos žmonių grupės, griežtai vertikaliai diktuojančios kontekstą. Didesnis vadybos veiksmų skaidrumas leistų geriau įvertinti šią sritį.

### **III. REKOMENDACIJOS**

- 1. Įtraukus sveikatos mokymo ir ligų prevencijos dalyką, persvarstyti programos tikslus ir studijų rezultatus.
- 2. Peržiūrėti studijų rezultatų deskriptorius ir užtikrinti jų visų išmatuojamumą.
- 3. Suvienodinti studijų dalykų vertinimus, kad atspindėtų mokymosi ir dėstymo metodus.
- 4. Įdarbinti daugiau dėstytojų, turinčių kineziterapijos mokslų daktaro laipsnį.
- 5. Plėtoti ir didinti darbuotojų ir studentų mobilumą.
- 6. Rasti būdų sudaryti sąlygas didinti kineziterapijos mokslinių tyrimų apimtį.
- 7. Palaikyti įvairių metodologinių požiūrių taikymą rašant bakalauro baigiamąjį darbą.
- 8. Baigiamuosiuose darbuose pavadinimą "Summary" (liet. santrauka) keisti anglišku žodžiu "Abstract" (liet. mokslinio darbo santrauka) ir užtikrinti, kad būtų rašoma taisyklinga anglų kalba.
- 9. Vykdyti vadybos sistemą taip, kad jos veikla taptų skaidresnė.
- 10. Visus dėstytojus įpareigoti nuolat kelti profesinę kvalifikaciją.
- 11. Formalizuoti ir fiksuoti vidinius vertinimus.

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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)