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ΑΝΩΤΑΤΗΣ ΕΚΠΑΙΔΕΥΣΗΣ	AGENCY
	FOR HIGHER EDUCATION

## **EXTERNAL EVALUATION REPORT**

**DEPARTMENT OF MIDWIFERY  
ALEXANDREIO TECHNOLOGICAL EDUCATIONAL INSTITUTE  
OF THESSALONIKI**

December 2011

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### **The External Evaluation Committee**

The Committee responsible for the External Evaluation of the Alexandreio Technological Educational Institute of Thessaloniki the Department of Midwifery consisted of the following four (4) expert evaluators, drawn from the Registry constituted by the HQAA in accordance with Law 3374/2005:

**1. Dr Martha Apostolidou, PhD (Coordinator)**

Associate Professor, Frederick University, Nicosia, Cyprus

**2. Dr Jette Aaroe Clausen, PhD**

Associate Professor, Danish Midwifery Education University College Metropol  
Copenhagen, Denmark

**3. Dr Milko Sirakov, PhD**

Associate Professor, Head of III Gynecological Clinic, University Obstetrics &  
Gynecology Hospital, Sofia, Bulgaria

**4. Dr Zana Bumbuliene, PhD**

Assistant Professor, Department. of Obstetrics and Gynecology, Vilnius University,  
Lithuania.

*N.B. The structure of the “Template” proposed for the External Evaluation Report mirrors the requirements of Law 3374/2005 and corresponds overall to the structure of the Internal Evaluation Report submitted by the Department.*

*The length of text in each box is free. Questions included in each box are not exclusive nor should they always be answered separately; they are meant to provide a general outline of matters that should be addressed by the Committee when formulating its comments.*

## Introduction

The External Evaluation Committee (EEC) welcomed the opportunity to participate in this important evaluation instigated by the Ministry of Education of the Government of Greece.

The first short meeting of the ECC committee took place at the ADIP Headquarters in Athens. The members of the Committee were briefed about the procedures to be followed during the evaluation process and they were informed that the fifth member of the committee, Dr Manju Chugan from New Delhi, India cancelled participation.

The EEC was warmly received by members of the staff and faculty of the Alexandreio Technological Educational Institute of Thessaloniki (ATEITH) and the Department of Midwifery. The staff welcomed the possibility to be evaluated and all who participated in the process were very willing to help the EEC.

The EEC felt well equipped to address the tasks assigned by the H.Q.Q.A. The conclusions described below were reached unanimously.

For this report the term midwife, as referred to in the International Definition of the Midwife (2005), is used:

*A midwife is a person who, having been regularly admitted to a midwifery educational program, duly recognized in the country in which it is located, has successfully completed the prescribed course of studies in midwifery and has acquired the requisite qualifications to be registered and/or legally licensed to practice midwifery.*

*The midwife is recognized as a responsible and accountable professional who works in partnership with women to give the necessary support, care and advice during pregnancy, labour and the postpartum period, to conduct births on the midwife's own responsibility and to provide care for the newborn and the infant. This care includes preventative measures, the promotion of normal birth, the detection of complications in mother and child, the accessing of medical care or other appropriate assistance and the carrying out of emergency measures. The midwife has an important task in health counseling and education, not only for the woman, but also within the family and the community. This work should involve antenatal education and preparation for parenthood and may extend to women's health, sexual or reproductive health and child care. A midwife may practice in any setting including the home, community, hospitals, clinics or health units (Adopted by the International Confederation of Midwives Council, July 19 2005 in Brisbane, Australia).*

### **Description of the ATEITH Department of Midwifery**

The Midwifery Department is one of six Departments in the School of Health and Social Care Professions of Alexandreio TEI of Thessaloniki. The Department was founded by provisions of Ministerial Decision no. E5/652 on February 9, 1984. It offers a bachelor programme in Midwifery. On completion of the undergraduate degree a graduate applies to the Hellenic Midwives Association to become a licensed midwife in order to be eligible to practice midwifery in clinical and community settings in Greece.

The ATEITH Department of Midwifery is comprised of 2 Professors (of pharmacology and of surgery), 2 Associate Professors (one of them a midwife and the other of Obstetrics and Gynecology), 1 Assistant Professor (of Anatomy), 6 lecturers (who are midwives and hold a master's degree) and 6 visiting lecturers (2 in midwifery, 1 in obstetrics and gynecology, 1 in reproductive biology, 1 in psychology, 1 in paediatrics and neonatology), 1 laboratory technician and specialised technical staff. In all, 6 lecturers and 1 Associate Professor are midwives.

The Bachelor's program at ATEITH Midwifery Department is comprised of 7 semesters of theoretical and clinical study and 1 final semester in which the students complete their internship and a dissertation. The Midwifery Department, as from last year accepts 100 students per year. The total number of students in the academic Year 2011-2012 is 471. Students currently enrol across the 8 semesters of the program. There are enormous variations in student numbers per semester. For example, there are 100 students in the 1st semester and 13 students in the 6<sup>th</sup> semester. The student/teacher ratio varies. In theoretical subjects all students enrolled for the subject follow lectures together with one lecturer in the same classroom.

In laboratory classes the ratio is 1:20-25 students. In clinical training in hospital settings the ratio is 1 mentor (clinical teacher) to 4-10 students, depending on the unit. For example in Neonatal Intensive Care Unit (NICU) the ratio is 1:4-5. In the Outpatient department the ratio is 1:10.

### **I. The External Evaluation Procedure**

Below follows a brief account of the visits performed, people met /interviewed and reports and documents reviewed by the EEC.

**The External Evaluation Committee (EEC) has visited:**

- 1) the Hellenic Quality Assurance Agency for Higher Education (HQAAHE)
- 2) the main campus of Alexandreio TEI Thessaloniki (ATEITH)
- 3) the Midwifery Department of ATEITH
- 4) the library of the Midwifery Department
- 5) the students' restaurant and cafeteria at ATEITH
- 6) the Research Unit of ATEITH
- 7) the Gym of ATEITH
- 8) the staff restaurant of ATEITH
- 9) the Erasmus Centre of ATEITH
- 10) the Evosmo Health Centre
- 11) the Centre for antenatal preparation at Papageorgiou Hospital
- 12) the Papageorgiou Hospital (maternity section)
- 13) the "Natural birth" Room at Papageorgiou Hospital

**The External Evaluation Committee (EEC) has met:**

- 1) the President, the Director and the secretariat (responsible for ATEITH Evaluation) of the Hellenic Quality Assurance Agency for Higher Education
- 2) the Vice President of ATEITH.
- 3) the Academic staff of the ATEITH Midwifery Department (the Internal Evaluation Group, the elected academic staff, clinical teachers and mentors)
- 4) a group of undergraduate midwifery students from ATEITH Midwifery Department
- 5) the secretariat of the ATEITH Midwifery Department
- 6) the staff of the Research Unit at ATEITH
- 7) staff of the Medical Centre of the Papageorgiou Hospital
- 8) Midwifery Instructors at Papageorgiou Hospital
- 9) the Director of Midwives in the Papageorgiou Hospital
- 10) staff at the in service training Unit at Papageorgiou Hospital
- 11) the Director of Evosmo Health Center
- 12) Midwives at the Evosmo Health Centre
- 13) clients at the Evosmo Health Centre

**The reports and the documents provided by the (HQAAHE) and the ATEITH Midwifery Department that have been reviewed by the EEC comprise of the following:**

- 1) the External Evaluation of Higher Education Academic Units Guidelines for Members of External Evaluation Committees
- 2) the Internal Evaluation Report (IER) of the ATEITH Midwifery Department (2010)
- 3) the ATEITH Midwifery Student Handbook
- 4) the Dissertation Handbook of the undergraduate ATEITH Midwifery Students
- 5) the Curriculum Vitae of the Faculty members of the ATEITH Midwifery Department (2010)
- 6) samples of ATEITH Midwifery student examination papers
- 7) samples of dissertations of undergraduate ATEITH Midwifery Students
- 8) the curriculum of the ATEITH undergraduate midwifery studies
- 9) the timetable for the fall semester for all years
- 10) the Guide for the clinical practice of ATEITH Midwifery Students
- 11) the Handbook/evaluation of ATEITH Midwifery Students' clinical practice in the hospital setting
- 12) documents describing skills that students should acquire at every stage of their clinical practice
- 13) documents for evaluation of students' clinical practice in different skills/specialities
- 14) document for approval of students' clinical placement
- 15) documents for communication between ATEITH, Hospitals and Health Centers in relation to students' teaching practice.
- 16) the labor/birth experience Clinical Practice Record for ATEITH Midwifery Students
- 17) the written policy document of the Papageorgiou Hospital for the practice of undergraduate ATEITH Midwifery Students
- 18) students' application for selecting/ enrolling on courses
- 19) leaflets produced by students as part of their coursework (on breast feeding and baby care)
- 20) the Definition of a Midwife from the International Confederation of Midwives (2005)
- 21) Directive 2005/36/EC of the European Parliament and of the Council of 7 September 2005 on the Recognition of Professional Qualifications.

**The groups of teaching and administrative staff and students interviewed by the EEC comprised the following:**

- 1) the Academic staff of the ATEITH (members of the Internal Evaluation Group, the elected academic staff, and scientific staff)
- 2) laboratory associates from ATEITH Midwifery Department
- 3) special technical staff members
- 4) a group of undergraduate Midwifery Students of ATEITH Department (22 students)
- 5) a person from the secretariat of the ATEITH Department
- 6) 2 primary health care Midwives
- 7) Midwifery Instructors at Midwifery Unit at Papageorgiou Hospital
- 8) 2 Midwifery Instructors at Evosmo Health Center

The atmosphere during the site visits was collegial and receptive, while remaining on a professional level. Faculty members were very friendly and they facilitated the EEC's work by establishing a constructive dialogue and providing information and data, wherever possible. The meeting with ATEITH Midwifery Students was very enlightening and constructive.

## **II. The Internal Evaluation Procedure**

Midwifery Department provided adequate, good quality and up to date documentation that was fully informative for the EEC. Many relevant documents, however, were in Greek and this imposed constraints for the non Greek speaking EEC members. The objectives of the H.Q.A.A. internal evaluation were met by the ATEITH Midwifery Department and the EEC recognizes that a great effort and a lot of work were put into the process in order to translate many documents into English.

Due to the overloaded programme, the EEC members did not have sufficient time to read and assess the material in such a way that it could be used to its full potential. The non Greek members of the EEC want to highlight the effort of the Greek speaking member of the group to translate during meetings and also to provide an overview of the material handed over to the EEC in Greek.

The ECC faced numerous challenges during the evaluation process, the programme was excessive and overloaded and there was a lack of balance between the amount of work and the time allowed to do this. The fact that the committee had to travel for almost a whole day back and forth between Athens and Thessaloniki put extra pressure on the group. The

facilities provided for the writing of the report were insufficient in the sense that the committee often lacked the possibility to discuss under confidential conditions because the facilities were shared with another EEC.

## **A. CURRICULUM**

### **APPROACH**

Overall, the curriculum is in line with European standards for midwifery education and it is responsive to the needs for clinical work and/or the workplace midwifery services. The curriculum offers opportunities for students to fulfil the requirements as described in the Presidential Decree no 351/ 1989. However, despite the fact that contemporary international models of midwifery practice that focus on a non-interventional birth and woman centered continuity of care are addressed in the curriculum, this is not clearly visible and appropriately highlighted.

The adoption of the European Credit Transfer System (ECTS) makes the curriculum flexible and contributes to the international academic and vocational recognition of the qualifications awarded by the ATEITH Department. Furthermore, it enables student mobility and exchanges of student (ERASMUS programme).

The curriculum has been structured to respond to the ATEITH Midwifery Department's objectives, and is characterized by:

1. interdependence between the different disciplines and setting of rules regarding module registration-attendance (pre-required modules)
2. very good cooperation with the State Midwifery Services (that also provide the main employment opportunities for ATEITH graduates) through well-organized vocational training
3. satisfactory structure and organization of teaching and learning material
4. incorporation of research activities in students' assignments and the dissertation procedure and
5. the use of both quantitative and qualitative methods for student evaluation

**How was the curriculum decided? Were all constituents of the Department, including students and other stakeholders, consulted?  
Has the unit set a procedure for the revision of the curriculum?**

Both internal and external factors have influenced the development of the objectives and the curriculum of the ATEITH Department. It should be noted that midwifery students' participation in curriculum development has been encouraged through their representatives in the council of the Department. Stakeholders such as women, Non-Government Organisations (NGOs), Health Services and the general community have not been consulted in curriculum development.

The EEC notices that the curriculum is described in a language that strongly reflects medical and nursing theory. This is also evident in the description of the Graduate Profile (IER p. 10-11). This carries consequences; midwifery content and competences are not easily identified and some course titles are often misleading. During the interviews with the faculty it was clarified that emphasis on midwifery content was placed in both classroom and clinical activities. Furthermore, although many extracurricular activities focus on midwifery issues (i.e. activities organized during the international Midwives day, HIV-AIDS day, breastfeeding promotion international day etc.), these are not clearly identified in the formal curriculum. Examples that can illustrate this: *Basic Nursing* is the name of the introductory module. The title of a module refers to the areas that education wants to highlight and, therefore, the title should be consistent with and reflect the content of the module. This program aims to give students a possibility to obtain a bachelor degree in midwifery and it is structured as a direct entrance programme. Modules should, therefore, be firmly anchored in midwifery and this should be reflected in the formal curriculum.

Another example that highlights the invisibility of midwifery is evident in the description of the midwife's professional rights and duties that is used in the IER of the ATEITH Department of midwifery (2009-2010, page 12) to describe midwifery duties and standards of practice. This document was issued by the Presidential Decree no. 351/1989 (Government Gazette Issue No 159/14-6-89-vol. A), in 1989 and it served its purpose at the time which was to develop a place for midwives in the Greek hospitals. The EEC recognizes the importance of this process but it also recognizes that it can have counterproductive and unintended effects if used in educational setting. The framing of midwives clinical competencies in a medical language is misleading because it describes them as purely technical and instrumental. Such a framing does not give space to contemporary issues and women centered models of midwifery care. Although it became evident from both discussions with the faculty and the

students that such issues are covered during lectures, it is considered of prime importance to address them in the formal curriculum as well.

Regulations imposed by the Ministry of Education and ATEITH impede the ability of the Midwifery Department to design and implement a curriculum that would be more in line with contemporary approaches (i.e. health promotion, community care, gender issues). Updating the objectives and suggestions for improvement are acknowledged and are included in the IER of the ATEITH Midwifery Department. Responsiveness to some social issues, such as culture and gender, is not evident in the curriculum even though the interviews with the faculty and the students identified that these issues were addressed in some courses and were also evident in research projects led by the department.

The EEC strongly believes that the curriculum should be enriched with theoretical resources, that can help students to develop a critical approach to everyday maternity care in Greece (concepts such as medicalisation, risk discourses, choice etc.). Such resources can be found in sociology, medical anthropology, women's studies and in the health humanities in general.

## **CURRICULUM IMPLEMENTATION**

It generally appears that the Department's goal is achieved. The faculty members of the ATEITH Midwifery Department use available resources (that are not always adequate) to the best of their ability in order to implement the curriculum's aims and objectives effectively. The faculty members appear to be very enthusiastic and are well qualified to implement the curriculum effectively. All midwives lecturers have master's degrees and six of them are currently working on their PhD thesis. This indicates the department's commitment to the advancement of midwifery education and practice.

The experience of the staff varies as several members have only been in the department for a few years and some only joined recently.

The structure of the curriculum is rational and clearly articulated; however, the medical focus of the curriculum inevitably influences both the content and the choice of learning resources. This means that the focus is directed towards disease and medical interventions rather than normality, health and primary health care.

The hard work of the faculty members of ATEITH Midwifery Department to achieve the aims and objectives of the curriculum, under difficult circumstances, is evident.

## **RESULTS - IMPROVEMENTS**

The need for curriculum improvement is identified in the IRE. The issue was also raised during the meetings with the faculty members. The last amendment to the Studies Programme was made in 2008, after a proposal from the Scientific Committee in the Midwifery Department to the council of ATEITH. Several faculty members identified areas for curriculum development and their awareness towards the need for a continuous curriculum development was evident. During the interviews several faculty members pointed to areas where changes could facilitate a process towards the development of a curriculum that is more midwifery focused and that is more attuned to the challenges that midwives face in today's healthcare and community settings in a multicultural society.

However, many questions remain open as to how and when changes could be implemented. The uncertainty was both due to changes in the relevant legislation and to the Greek financial crisis.

## **B. TEACHING**

The pedagogical approach used in the ATEITH Department of Midwifery is evident of the philosophy of the faculty who maintain that student participation is very important. They, therefore, use varied methodologies (i.e. group work, discussions etc.) so as to enable students to get involved and acquire a critical approach. The faculty has a strong commitment to use evidence based teaching, and they try to offer students the opportunities to get practical training either in laboratories situated in the department or in clinical settings.

Teaching methods used by the faculty include lectures, e-learning, case studies, discussions, workshops, literature search, participation in conferences and hands on practical activities, both in laboratories and in the clinical settings. There is an integration of new technologies and electronic media, such as use of educational videos, power point presentations, internet connections and web surfing for particular projects within or outside the classes. It was especially encouraging to see that the department invites 'on-line lectures' from other parts of Greece to teach in their specialty i.e. homebirth. The midwifery lecturers use the internet to assess resources in countries that have a more developed midwifery research basis (i.e. England that provides MIDIRS Midwives information and resources service and The Royal College of Midwives). These diverse learning activities develop the students' cognitive as well as psychomotor and affective competencies.

During the interviews with the students the issue of non attendance was raised and this was also confirmed by several of the teaching staff as a serious problem. Non attendance is unevenly distributed between the different modules, but students estimated that it could be up to 40% in some courses. Attendance is not compulsory due to the legislation enacted. The problem of non attendance is a significant issue in a program such as midwifery where students are learning to become responsible, autonomous health professionals working with women and their babies; no aspect of program content, theory or practice, should be non compulsory.

### **Teaching staff/student ratio**

The student/teacher ratio varies. In theoretical subjects all students enrolled for the subject are in the classroom with one teacher.

In laboratory lessons the ratio is 1:20-25 students. In clinical training in hospital settings the ratio is 1 mentor (clinical teacher) to 4-10 students, depending on the unit. For example, in Neonatal Intensive Care Unit (NICU) the ratio is 1:4-5. In the Outpatient department the ratio is 1:10.

The ratio of 1:5 for the clinical practice is excellent with all students well supported by both a midwife mentor within the ATEITH Department of Midwifery and the ATEITH midwives (clinical teachers). However, the fact that most clinical teachers can only work for 4 hours/week imposes constraints in relation to continuation of care (i.e. a student who wants to follow a woman throughout labour can not do this with the support of the clinical teacher, for an elaboration of this see page 20).

### **Teacher/student collaboration**

The collaboration between teachers and students is excellent. During the interviews students expressed their appreciation towards their teachers and they stressed that they are very supportive and easily accessible. They underlined that the teachers were committed to midwifery and to the students' professional development. The relationship between teachers and students can be described as respectful and promotes a fruitful learning environment that supports the development of a woman centred philosophical approach of care.

The Department of Midwifery shares the same building facilities with the Department of Early Childhood Care and Education, the Library of School of Health and Social Care Professions, the Office for ERASMUS/SOCRATES exchange programs and the Large Amphitheatre in a two-storey building within the premises of ATEITH. This building is

located at Sindos urban zone and it is within a distance of 20 kilometers from the city of Thessaloniki. The Secretariat of the Department, the faculty offices, the Lecture Rooms, the Laboratories of Human Anatomy and the Neonatal Nursing Care Unit are situated in the ground floor. It should be noted here that most faculty members share offices (one office for 2-3 members). Offices of Professors, the Computer Science Center, the laboratories for Basic Nursing and Midwifery Care, the laboratory for Pharmacology and the Room for Psychophysical Preparation for Parenthood are located in the second floor area. Access to Department is possible by private car and by Public Buses.

Computers, remote controls and video projectors are available in most classrooms. Seats in classrooms are in good condition. Air-condition, heating and sanitation are generally in good condition. Noise does not pose a problem as the building is located at the back side of ATEITH campus.

There is a good laboratory infrastructure. Use of laboratories out of predefined schedule is available under the supervision of a laboratory technician or a specialized technical Staff member.

### **Use of information technologies**

There is electronic/digital platform for e-Learning. Students have reliable regular access to the World Wide Web, to enhance their information literacy skills and extend their learning through important resources such as the Cochrane Pregnancy and Childbirth Data Base of Systematic Reviews and other databases that provide access to online journals. Flexible and interactive group learning experience is enhanced and individual theory learning via online teaching strategies and resources can be developed. The TEITH Web site needs to be further developed, in English as well.

### **Examination system**

ATEITH Midwifery students are assessed through a two hour written exam at the end of each course and at the end of the semester, as required by the Greek legislation. There are two exam periods for each semester, thus giving students the opportunity to repeat the exam in case of initial failure. However, for quality learning, students should be evaluated with diverse and ongoing assessment methods and should receive corresponding feedback.

Laboratory courses are evaluated on the basis of a scale that measures willingness, initiative, interest, capabilities, knowledge, skills and behavior of students either in simulated conditions (in the Department) or in real circumstances in health care settings (Hospitals and

Health centers). It is worth noting that different assessment forms are used for every level of clinical teaching.

All midwifery students are evaluated for clinical practice in Health settings by continuous assessment and scores are recorded in the individual booklet of clinical practice, which accompanies the student from 2nd to 7th semester of studies. The clinical assessment handbook of midwifery students covers all the competences that are stated in the course descriptions.

## **IMPLEMENTATION**

In the following the ECC reflects on the quality of teaching procedures, material and resources:

The ATEITH midwifery students have reported to be highly satisfied with the teaching procedures to which they have been exposed.

The library of ATEITH offers services to both staff and students, such as the access to a range of databases, reference services, virtual learning environment, online bibliographic management tool and official government gazette and it is Wi-Fi enabled. There appears to be a lack of Midwifery bibliography and many of the resources and materials are inappropriately medically and nursing oriented and, often, out dated.

### **Linking of research with teaching**

The ATEITH Department of Midwifery applies research findings in midwifery and maternity care to teaching and learning. This is evident both in students' dissertations, which indicate a good knowledge and understanding of research, and in bibliography used by midwifery teachers in the course outlines.

The Department of Midwifery subscribes to evidence based obstetrics and midwifery which is very appropriate and necessary. Such an approach does not only face difficulties in the current health care system, but it can also prove to be a challenge in educational settings such as the Midwifery Department. Many treatments and procedures are not based in evidence from randomised controlled trials. This issue was also raised by the students, who talked of the differences between what they learned in theory and what is practiced in hospital settings. One such example is the use of episiotomy. The episiotomy rate in Greece is high even though evidence from randomised trials suggests that this has counterproductive effects (Carroli & Mignini Episiotomy for vaginal birth. *Cochrane Database of Systematic Reviews*, 2009). The students expressed their concern and it was evident that they had a genuine desire

to provide good quality care for women, and, thus, it was very frustrating to be in a clinical setting that used substandard care in an area of great importance both in terms of the woman's birthing experience but also for her health in the long term.

### **Mobility of academic staff and students**

The ATEITH Department of Midwifery values and takes part in European exchange programmes such as ERASMUS and Leonardo da Vinci, which provide important opportunities for both staff and midwifery student exchanges. However, till now, these exchanges were very limited, as only 2 midwifery students participated in the Erasmus Programme. These students visited Belgium and they both reported rewarding exchange. During 2009-2010 there were 4 incoming students from Belgium for clinical placement. For 2011-2012 five Greek student midwives had fill in an application of interest for internship in England, Sweden, Germany and Cyprus.

The ATEITH Department of Midwifery has sent an Open Invitation through the Erasmus office of ATEITH and the Greek State Scholarship Foundation in order to promote bilateral and multilateral agreements with Foreign Midwifery Institutions. However, despite these attempts there had not been much success.

Academic staff can apply for funding in order to attend national and international conferences to present their research. Funding depends on ATEITH budget. Up to 60 days a year for study leave can be applied for. ATEITH Midwifery academic staff members present their research work at domestic and international conferences, often at their own expenses.

### **Evaluation by the students of**

#### **(a) the teaching and**

#### **(b) the course content and study material/resources?**

As stated in the IER (2009 -2010), the ATEITH academic staff of the Midwifery Department was evaluated by the midwifery students by the questionnaire provided by HQAA. Most midwifery students believe that the objectives of the courses were clear in a very good or in a satisfactory degree that contents of courses corresponded very well to the objectives of courses and 2/3 of students believe that evaluation criteria were clear and transparent. During interviews with students the EEC had feedback that corresponded to the above.

## RESULTS

The use of clinical midwifery mentors is a crucial link between theory and practice. It is the aim of the Midwifery department to have clinical instructors present in the clinical setting in order to support midwifery students, but this cannot be achieved in all cases. The number of clinical tutors is limited, and clinical tutors will often provide support for a group of 4-5 students at the same time.

As mentioned earlier, the hard work of the faculty members of Midwifery Department to achieve the aims and objectives of the curriculum under difficult circumstances was evident, albeit of difficult circumstances that were identified on many levels. The ATEITH midwives and clinical midwifery mentors are competent teachers of midwifery in theory and practice.

All Six midwifery lecturers have full-time employment in the department, and they all have to invest excessive hours at work. To give an example, a midwife lecturer is employed 20 hours by the department, during this time she must provide 8 hours of teaching, supervise students' thesis and internship, do work for the ERASMUS programme and, often, carry out clinical supervision and training for 8 hours per week, which is placed on two different working days. Travelling between the midwifery department and the clinical setting (hospitals, primary health centres) is very time consuming and also places extra expenses on the staff (as they themselves have to pay for transport and/or provide use their own cars for transportation).

Greek maternity care is strongly medicalised, with high intervention rates, (i.e. high caesarean section rates of 59 % at Papageorgiou General Hospital in 2009). Thus, midwives work with both normal and medical births. The term 'natural birth' and 'normal birth' has traditionally been used in many countries to describe the kind of birth that midwives attend to and that falls within the midwives independent scope of practice. However, these terms have proved problematic. 'Normal' can both refer to an ideal state (i.e. natural birth) or to what is common practice (Wackerhausen, S. 1999, *What is natural. Deciding what to do in medicine and healthcare. BJOG* 106;11:1009-112). To avoid misunderstandings the European legislation now uses the term 'spontaneous birth' to describe midwives scope of practice. Midwives are however involved with both spontaneous birth and surgical birth, and should be capable to give woman-centred care to women, no matter the route of delivery.

However in a setting with high numbers of surgical births, the opportunity to teach midwifery competences in relation to spontaneous birth becomes diminished. It became evident during the interviews with the students that, during their clinical training, they experienced only a few spontaneous births, without medical interventions. The students

expressed a strong desire to be placed in settings that could offer them more opportunities to develop midwifery competencies that are related to natural childbirth.

Most clinical midwifery mentors are primarily employed as midwives in the state hospital and they work for ATEITH on a part time basis. As this is their second job, legislation does not permit them to work for more than four hours per week. The consequence of this is that, before internship, midwifery students cannot follow a woman for more than four hours, as they cannot have a midwifery mentor with them all the time. Furthermore, this arrangement creates difficulties for students, as they need a lot of time to move from hospitals to ATEITH campus and, therefore have shorter study days. Apart from the time students noted that there is also the financial issue.

Lecturers at the Midwifery Department also work as clinical midwifery tutors in different clinical settings. This is helpful in order to shape good connections between theory and practice. This relationship creates a productive link that can be used as a resource, not only in terms of providing a fruitful learning environment for midwifery students, but also for contributing to the development of an up to date curriculum. This can eventually benefit the hospitals and other clinical setting from theoretical resources provided by the Midwifery Department.

Some discrepancies in the success/failure percentages between courses were evident in the IER. It was noted that students appear to perform better in midwifery courses compared to non-midwifery ones. This raises a question of course relevance.

Careful efforts have been undertaken to document student progress. If ATEITH midwifery students failed the exams, until now are allowed to repeat courses indefinitely. However, new legislation sets limits to indefinite repetition of courses.

According to the programme of study, completion time should be a minimum of 4 years. The majority of students need no more than 5 to 6 years to graduate. However, enactment of the new legislation will facilitate faster student graduation.

The faculty members of Midwifery Department expressed their satisfaction regarding some parts of the new legislation that will have a positive influence on student progress and completion. Other parts of the new legislation however were regarded as potentially problematic. The EEC committee believes that enactment of the new legislation will positively contribute to the successful completion of courses.

## **IMPROVEMENT**

The faculty members of the Midwifery Department proposed improvements of the curriculum currently in use both in the IER and during the interviews. Furthermore, they feel that without the possibility of Masters and Doctoral programs there can be no progress. Another issue is to increase the number of permanent staff.

## **C. RESEARCH**

### **APPROACH**

#### **What is the Department's policy and main objective in research?**

Research activity is considered to be a significant contribution to science from academic institutions. The Department's policy stresses the importance of research.

The ATEITH Midwifery Department's policy and main objectives for research seem to be individualized as evidenced by a high percentage of non-midwifery based research work conducted mainly by the medical doctors. As a result, the majority of research is not midwifery focused.

#### **Internal standards for assessing research**

Guidelines for midwifery students' research processes as well as internal standards for assessing research are provided in the Dissertation Handbook of the ATEITH Midwifery Department. Dissertation standards are high and they enhance research skills. Midwifery students' theses are evaluated by a three member committee (the members of this committee are elected among academic staff every year). The EEC had the opportunity to look into students' theses and was impressed with the quality of some of them.

## **IMPLEMENTATION**

#### **How does the Department promote and support research?**

Several research projects are being conducted by faculty members of the Department or are under approval. The fact that 6 members of the midwives on the staff are currently PhD candidates is very encouraging and it is going to add up to the Department's scientific contribution.

The EEC was very pleased to see that members of staff coordinated or cooperated in midwifery focused research projects such as the "Promoting Health Access and Protection of

Roma” and “Relationship between self-respect, positive feelings and depression during gestation and puerperium”.

At this point it should be stressed out that, apart from inadequate funding, faculty members of ATEITH have an inappropriately heavy workload that includes teaching, clinical supervision, dissertation supervision, administrative work etc. All the above responsibilities leave little time for research activity.

The Department’s policy stresses the importance of research and aims to familiarize and encourage students to design and perform research at the undergraduate level.

Integrated in the curriculum of Midwifery Department of ATEITH is the course “Research in Midwifery Care” that aims to serve this purpose.

Furthermore, midwifery students are required to complete a thesis during their final semester. The Department promotes and supports research among midwifery students by encouraging bibliographical or small scale research projects and through presentation of the students’ research work in the classroom, in seminars and conferences.

### **Quality and adequacy of research infrastructure and support.**

Research facilities are generally considered as satisfactory. Midwifery Department possess independent premises for students’ research. However, supply of research equipment through the regular budget of ATEITH has been reduced, since financial resources are now scarce.

As mentioned above the inadequate funding, coupled with faculty’s heavy workload do not encourage and support research.

### **Scientific publications.**

Regardless of the fact that there isn't adequate support for research activity, the significant number of recent publications, citations and presentations at scientific conferences (as presented in Table 1 below), shows that, given the circumstances, the faculty of the Department has a very encouraging potential in this respect.

***Scientific activities of Educational Staff members in Midwifery Department over the years  
2006-2010***

<i>Citations</i>	44
<i>Book reviews</i>	2
<i>Participation in committees of Scientific Congresses</i>	11
<i>Participation in editorial board of Scientific Journals</i>	11
<i>Invitations for lectures in Scientific Congresses</i>	7
<i>Peer-reviewed presentations at Scientific Congresses (without proceedings)</i>	8
<i>Non peer-reviewed presentations at Scientific Congresses (without proceedings)</i>	2
<i>Other</i>	19
<i>Books/ Monographies</i>	5
<i>Publications in peer-reviewed Journals</i>	114
<i>Publications in Journals without peer-review</i>	13
<i>Conference Proceedings (peer-reviewed)</i>	55
<i>Conference Proceedings (no peer-review)</i>	33
<i>Chapters in Society Books</i>	6

The ATEITH provides funding of the academic staff to attend national and international conferences. Funding depends on the ATEITH Department's budget. ATEITH Midwifery faculty members often give presentations of their research work at international conferences at their own expense.

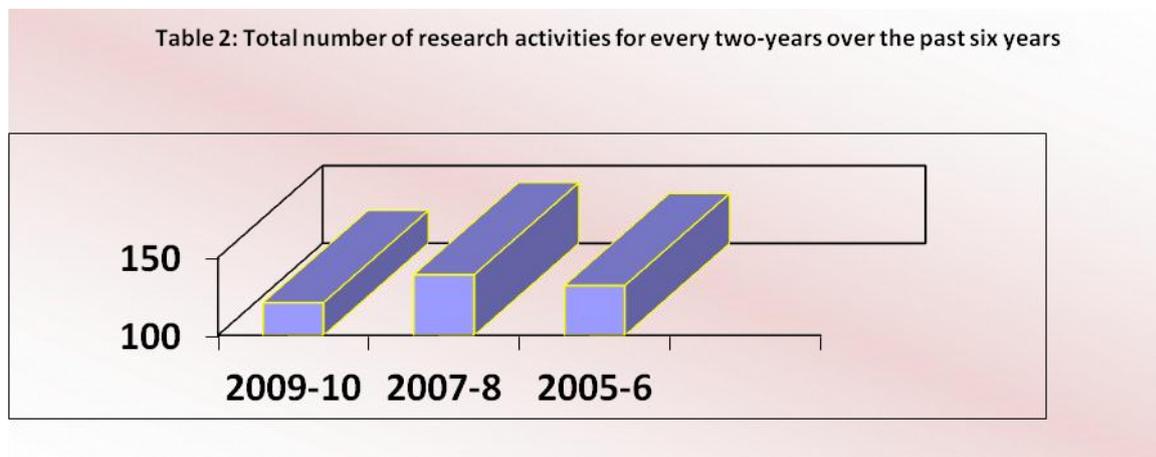
### **Research collaborations.**

Several research projects are conducted with collaboration of European countries, such as UK, Spain, and Italy. ATEITH faculty members expressed their disappointment as they noted that, although they asked, they were not given the opportunity to cooperate in research projects on an institutional basis with the Aristotle University of Thessaloniki.

## **RESULTS**

According to existing requirements, the ATEITH Midwifery Department's research objectives are successfully achieved. The research of the ATEITH Midwifery Department is both acknowledged and made visible outside the ATEITH through scientific publications, conference presentations, and professional meetings and through the departmental website

both in Greek and in English. As has been noted above, the scope of research projects undertaken by the Department should be woman centered and focused towards normal midwifery practices and community-based maternity health care. Epidemiological research that explores the current situation in maternity care in Greece can prove to be very useful in terms of understanding the situation and enriching teaching.



The above Table demonstrates that research activities of Staff members show an increase over the years 2007-08 and declined during 2009 and the first semester of 2010.

The 5<sup>th</sup> Scientific Meeting, performed in the end of academic year 2009-10 in the area of “Research and Current Issues in Midwifery”, constitutes an annual scientific event held in the premises of ATEI Thessaloniki. In this event, academic staff members, students and graduates presented original scientific projects and contributed in the Organizing and the Scientific Committee.

No external awards were noted for distinctions in midwifery-related research.

## IMPROVEMENT

Despite ATEITH mandates, there is no protected time for the ATEITH Midwifery Department for research activities. This is compounded by inadequate funding and an inappropriately heavy workload including teaching, clinical supervision, dissertation supervision, administrative work and so on. Non-midwife members of the faculty have lower teaching requirements, according to current legislation and are, therefore, indirectly supported in their research. The midwife professor and the midwife lecturers undertake demanding teaching and administrative responsibilities which prevent them from being research-active, despite their desire and requirement to do so. The Midwifery Department reports in the IER that the quality and adequacy of research infrastructure, facilities and support are not inadequate or inappropriate, nor do they meet high specifications.

Funding is reported to be inadequate or even scarce. Expenses of students for carrying out small research projects can be covered by the Department.

## **D. OTHER SERVICES**

### **APPROACH**

The Midwifery Department uses the available institutional ATEiTh resources in an effective way.

The library of ATEiTh is situated at the School of Health and Social Care Professions located on the first floor of the building. The library offers services to both staff and students such as the access to a range of databases, reference services, virtual learning environment, online bibliographic management tool and official government gazette and it is Wi-Fi enabled. The library offers in library loans to both students and staff. However, it was brought forward that students were not allowed to access the Thessaloniki University library on their own, a possibility that would be much appreciated by students.

According to the IER and the EEC's observations the Office for Support and Development of Electronic Courses of Library of ATEiTh provides the use of an electronic platform for tutoring (virtual learning environment) in the context of upgrading, modernization and quality in education. The use of informatics and communications technologies (ICT) concerns all courses (lectures and lab) and involves the use of software in certain lessons. Also, ICT are used by tutors as a way of contact with students. An one hour orientation to the library's resources and services is offered to entering students. The process of student's familiarization with ICT promotes their competitive profile as upcoming professionals and scientists.

According to the IER a well-organised electronic registration system and a system for student grades operates in the department. Grades are uploaded within two weeks from written exams by the respective tutor. Each member of staff, including laboratory associates have a personal password for registration of student grade in the electronic system "Pytheia". Moreover, access to system "Pytheia" is provided to the Secretariat of the department and to each active registered student. This system ensures a high level of security in the process for registration of grades, prevents any mistakes being made and, simultaneously, informs students of their performance.

## **IMPLEMENTATION**

### **Administration of the Department**

The Secretariat of the ATEITH Department of Midwifery is staffed by 2 persons who have to provide administrative services to faculty members and students. The Secretariat cannot cover the needs of all staff members of the Department. As a result, some of the secretariat tasks are performed by the academic staff of the Midwifery Department, leading to wasting time, resources and creating an unnecessary burden on them.

The recent retirement of a secretary poses extra work on the administrative and the academic staff. It is recognized that there is a need to increase the number of administrative staff. In general, both faculty and students commented that the administrative and other services of the Department are not adequate. Several examples of the Department views on this issue have been provided above.

### **Infrastructure**

The ATEITH staff of the Department notes that the infrastructure is satisfactory. The EEC considers that the library facilities are adequately established. Student access to the library, PCs and free internet access is also considered satisfactory. However, there is a limited access to up to date obstetric and midwifery textbooks and other relevant bibliography.

According to the staff, counseling services (psychologist, etc.) are available for the students. The EEC visited the gym, the cafeteria of the ATEITH and found them to be adequate. There is a kindergarten School for children of both staff and students of ATEITH within the premises.

### **COLLABORATION WITH SOCIAL AND CULTURAL ORGANIZATIONS.**

The ATEITH closely collaborates with institutions that promote breastfeeding and family planning in order to promote sexual and reproductive health.

## **E. STRATEGIC PLANNING, PERSPECTIVES FOR IMPROVEMENT AND DEALING WITH POTENTIAL INHIBITING FACTORS**

Strategies for Academic development and proposals for improvement are clearly stated in chapter 7 of the IER of Department (2009-2010). The faculty presented their ideas and plans during the interviews. These mainly relate to academic and professional advancement.

The EEC considers the potential inhibiting factors to include:

### ***At State level***

1. The location of the Department of Midwifery in the ATEITH Campus, that is located 20 kms away from the city's Hospitals and Health centers.
2. The absence of autonomous postgraduate and doctoral programmes in Midwifery.
3. Lack of collaborative policy and documentation regarding women's health as well as maternal and neonatal care and outcomes in the country of Greece (i.e. statistics on cesarean sections etc.).
4. The lack of adequate research funding within the ATEITH Department of Midwifery.

### ***At Institutional level***

1. Limited numbers of midwives as permanent faculty members
2. Disproportionate numbers of medical doctors (permanent and visiting) on the Department's faculty at all levels and an inadequate number of midwife faculty members, particularly at senior posts.
3. Allocation of inadequate facilities and premises (lecture rooms and faculty offices etc.).
4. Lack of research funding.
5. Heavy work load of midwives faculty members.
6. Administrative and secretarial tasks carried out by the faculty members due to the insufficient assignment of technical and assistant staff with ATEITH Midwifery Department.
7. Limited international educational exchange opportunities both for faculty and midwifery students.

### ***At Departmental level:***

1. Medically and nursing orientated curriculum and research.

2. Lack of structured Research Plan that focuses on midwifery issues (A structured Research Plan that focuses on midwifery issues has been discussed and decided but not been implemented as yet).
3. Increased bureaucracy imposed by government, education and health care system authorities.

Some proposals on how to overcome the above inhibiting factors are outlined below concluding with recommendations of the EEC.

## **F. FINAL CONCLUSIONS AND RECOMMENDATIONS OF THE EEC**

Conclusions and recommendations of the EEC on:

- the development of the Department to this date and its present situation, including explicit comments on good practices and weaknesses identified through the External Evaluation process and recommendations for improvement
- the Department's readiness and capability to change/improve
- the Department's quality assurance.

The EEC has been very impressed with the enthusiasm and motivation that was expressed by all the staff in the Midwifery Department throughout the whole evaluation process. The staff strongly expressed their desire to build a midwifery education of high international standards that will provide midwives who are capable of offering quality care to women in Greece and who can both promote woman-centred care and be innovative in relation to normal and non interventionist childbirth in Greece.

The Midwifery department at the ATEITH strives to create a learning environment that promotes the acquisition of midwifery competencies for the benefit of women, fathers, unborn/newborn, and families in Greece.

The ECC wants to highlight the following:

1. The academic staff of the Midwifery department is very committed to provide education that will offer the best outcomes for women.
2. Internationally, it is expected that the head of Midwifery department is a midwife, and the ECC is happy to note that this is the case in the Midwifery department of ATEITH. This is an important step in the development of the midwifery profession in Greece.

3. The commitment of ATEITH midwife faculty to teach woman-centred care, as it is described by the International Confederation of Midwives and the European Standards (2005) despite of the difficulties imposed by the medicalised approach to birth.
4. The commitment of ATEITH midwives to promote professional woman-centred care, with a focus on normality, wellness and research.
5. The strong commitment of the staff toward the midwifery department, despite of the lack of resources and difficult working conditions.
6. The use of internet resources in the department that facilitates learning.
7. The existence of a unique antenatal education room in the Midwifery department that enables ATEITH students to gain experience in psycho prophylaxis and to develop their competencies in teaching.
8. The members of the ECC were very impressed by the highly motivated and passionate midwifery students that they met at ATEITH.
9. The exceptional respectful relationship between midwifery students and all the staff in the Midwifery Department.
10. The ECC is impressed by the faculty's willingness and eagerness to engage in this evaluation process. The faculty has expressed a strong desire to make the evaluation process a valuable learning experience.

The EEC found the ATEITH Department to be challenged in terms of:

1. The fact that the Department of Midwifery is situated at a TEI instead of a University, as this creates difficulties in relation to education, research, and career advancement for midwives and the midwifery profession in Greece.
2. The highly medicalised maternity care situation that is currently the situation in Greece, as this has implications on the curriculum, the course content and research.
3. The high rate of non attendance of students in some theoretical courses.
4. The effect of the financial crisis on staffing, resources, midwifery research and the development of the department as a whole.

The EEC found a high level of consistency between the IER, the information gained from the interviews and discussions with faculty, students and other staff of the department and the midwives that were interviewed during the visits in hospital settings.

The ECC wants to thank all participants for their contribution to this evaluation and wish them well in their endeavour to develop midwifery in Greece.

After having completed this review and given due consideration to the findings, the EEC recommends the following for the attention and address of the Ministry of Education and the Ministry of Health (where relevant).

**It is recommended that:**

1. A curriculum that is firmly and primarily focused in midwifery should be implemented by the Department.
2. The Department should focus mainly on midwifery research.
3. The Department encourages epidemiological research that explores the current situation in maternity care in Greece
4. Measures that can diminish student non attendance are implemented.
5. Teaching and methodology courses are offered to newly employed teaching staff by the Midwifery department in cooperation with ATEITH
6. The Midwifery Department develops assessments tools, and encourages the use of tools that support student learning.
7. The ATEITH library is enriched with more contemporary midwifery bibliography and literature from sociology and the humanities that cover issues such as medicalization, risk and choice.
8. PhD and postgraduate studies in midwifery are encouraged by the Midwifery Department and ATEITH.
9. Career development of midwifery faculty at ATEITH is supported.
10. Excessive demands on faculty and staff (workload) are addressed.
11. An Internal Human Research Ethics Committee is established and rights of women and patients are highlighted.
12. A Department of Midwifery, emerging from the ATEITH Department, is established in the University sector.