EXTERNAL EVALUATION REPORT

DEPARTMENT OF NURSING
UNIVERSITY OF ATHENS

June 2011
External Evaluation Committee

The Committee responsible for the External Evaluation of the Department ...of Nursing ....... of the University of ...Athens............... consisted of the following four (4) expert evaluators drawn from the Registry constituted by the HQAA in accordance with Law 3374/2005:

1. Professor Alex Molassiotis (President)
   School of Nursing, Midwifery & Social Work, University of Manchester, UK

2. Professor Irena Papadopoulos
   School of Health & Social Sciences, Middlesex University, London, UK

3. Professor Joanna Floros
   Evan Pugh Professor, Milton S. Hershey Medical Centre, College of Medicine, Department of Pediatrics, Penn State Hershey, Hershey, Pennsylvania, USA

4. Professor Olga Kanitsaki
   School of Nursing, Royal Melbourne Institute of Technology, Melbourne, Australia


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**

I. The External Evaluation Procedure

The external evaluation committee (EEC) carried out the site visits of the evaluation between the 6th of June and the 7th of June 2011, and the report was prepared between the 8th of June and the 10th of June 2011. The EEC on the 31st of May met with members of the HQAA for orientation and the opportunity to ask any questions during or after a presentation overview. The EEC also met with members of the HQAA on the 8th of June for debriefing.

The EEC carried out a number of discussions, observations, and meetings with academic, clinical, and administrative staff, and students of both undergraduate and postgraduate level. The first day of the official site visit included a meeting and introduction of the academic members of the Nursing department, a description of the history of the department of nursing at the University and a presentation based largely on the internal evaluation also providing extra metric information. The EEC visited several clinics e.g. the centre of community mental health, paediatric clinic in the nearby paediatric hospital, physiology lab, etc. In the afternoon the EEC met with a large group of undergraduate and postgraduate students together. The second day of the site visit the EEC visited clinics (e.g. infectious disease, pathology, liver clinic) located at the “ELENA VENIZELOU” hospital as well as clinics (e.g. intensive care unit) in “AGIOI ANARGYROI” hospital. In the latter the EEC met with the CEO, the director of nursing and other leaders of the hospital. In the afternoon the EEC visited several laboratories including the organization and evaluation of health sciences lab, clinical skills lab, biology lab, information technology lab and others. A meeting with only the nursing members of the department also took place. The EEC met with the committee members of the internal review for a debriefing at the end of the day.

II. The internal evaluation procedure

A number of documents were made available to the EEC for review and information. These included, the power point slide presentation of the internal evaluation, internal review documents of the 2010 year and earlier years, the study guide that included the course outline for each semester, the curriculum, evaluation of courses, details for postgraduate studies and other documents (e.g questionnaire and course evaluations). The appropriateness and the quality of the documents provided were good. The objectives of the internal evaluation were met, although the philosophy of the department was not clearly articulated during the first day face to face meeting.
More specifically, the EEC had access to the following:
1) The internal evaluation report 2010, the internal evaluation report 2009 and a copy of the presentation summarising the report and providing other metric characteristics for the department
2) The student’s guide
3) List of publications and staff CVs
4) Curriculum documents and study guides

General comments about the evaluation process
During the visit the EEC encountered some difficulties in making changes to the planned programme. This may have been due to misunderstandings of the processes and procedures involved bearing in mind that this was the first external evaluation the Department of Nursing was experiencing. However, this did not unduly impede the EEC from conducting the evaluation and from producing an objective and balanced report. The vast majority of staff were, however, welcoming and facilitative of the evaluation process.

Furthermore, a few students with certain political ideologies showed considerable disrespect to EEC members and to a certain extent to their fellow students. They tried to force their presence and wanted to express their thoughts before the chair’s opening remarks. They were kindly asked to wait and were the first to express their views as to the purpose of the committee which was largely based on misinformation. Shortly after they articulated their thoughts, they walked out indicating that they were not interested in a dialogue and/or a constructive discussion.
## A. Curriculum

### PREAMBLE

This report deals with both the undergraduate and postgraduate programmes unless otherwise stated.

### APPROACH

- What are the goals and objectives of the Curriculum? What is the plan for achieving them?

### UNDERGRADUATE PROGRAMME

The EEC was not able to establish the specific objectives of the undergraduate curriculum from the documents that were provided and from the face-to-face discussions with the academic staff which took place at the start of the evaluation. However, the general aim/mission of the Department of Nursing is articulated in one of the documents as follows:

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“The Department of Nursing aims in the comprehensive education of nurse scientists in undergraduate, postgraduate and doctoral level. The content of the theoretical and practical preparation refers to health care (prevention, therapy/care and rehabilitation) of the healthy or ill individual, his/her family and the community”.
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Objectives, however, exist for every single teaching unit and these are clear and appropriate for their respective units.

- How were the objectives decided? Which factors were taken into account? Were they set against appropriate standards? Did the unit consult other stakeholders?

The objectives of the units are decided upon by a committee from each of the five specialist sectors (‘Τοµείς’). This committee is a small group of academic staff, it includes undergraduate and postgraduate students but no clinical collaborators. It accepts nominations for consideration of new teaching units which appear to be based on individual interests and expertise within each specialty sector. Their proposals are reviewed and approved by the departmental management committee (‘Συνέλευση’). The standards of the curricular units comply with the European Union directives for nursing education.
It appears there is no formal process of consultation with other stakeholders, although relevant discussions may take place on an informal basis. Indeed, a long list of a broad range of collaborations with stakeholders and prestigious societies was provided, but there was no clarity from the discussions the EEC had and the documents provided about their role or contribution to the curriculum development nor on how they contributed to the quality of the studies offered.

The specialist sectors (τομείς) are headed by a professor, all of whom are currently from a non-nursing background.

**POST GRADUATE TAUGHT PROGRAMMES**

The Department provides a comprehensive range of ten postgraduate programmes (two of which are inter-departmental, one with 5 specialties and with 6 clinical directions, and 5 where the department is collaborating with other departments of the University of Athens and University of Crete).

No specific aims have been found for the postgraduate courses based on the documents provided. As mentioned previously there are Departmental aims which appear to refer to both undergraduate and postgraduate programmes alike.

- Is the curriculum consistent with the objectives of the Curriculum and the requirements of the society?

Due to the absence of overall programme objectives in both undergraduate and postgraduate curricula, the EEC is unable to confirm with certainty that the courses offered are consistent with the overall objectives and are responsive to the society’s needs. Both the undergraduate and postgraduate courses are heavily orientated towards and overburdened by biomedical knowledge, with many led by non-nursing staff, and some of these courses appear to reflect individual interests rather than the nursing expertise available or needed. Many of the core subjects are biomedical in nature. The core nursing subjects are limited, and many important and fundamental nursing subjects are electives, which are often not selected by the students. Such examples include cancer nursing, which deals with care of about one-third of the population, evidence-based nursing that impacts on the provision of quality care, gerontological nursing which reflects the changing demographic needs of the society, to mention but a few. Also, this situation does not reflect the changing demographic and epidemiological needs of the society –such as those related to the increasing number of refugees, asylum seekers and economic migrants - and the current nursing developments in
other countries –such as emphasis on health promotion, care in the community, working in multidisciplinary teams and multisectoral partnerships.

There are 42 core subjects that all students must take in order to graduate plus 14 subjects which are selected from a significantly large number of elective subjects (=58). This huge number in combination with the available student numbers result in many subjects not having enough students selecting them and hence they are not delivered. The EEC has noticed a strong student tendency to select non-nursing subjects than nursing ones, possibly because of the impression – given by the non-nursing academics who are the majority – of what nursing is.

 Similarities with the above reflect the postgraduate curriculum too, with many topics for the dissertations being medically orientated.

- Has the unit set a procedure for the revision of the curriculum?

 There is an undergraduate and postgraduate programme committee that deals with curricula issues, although their remit is not exclusively about the curriculum. Other committees potentially feed to this committee. There is no clear evidence from the documents and from the EEC’s observations that the department consults students or clinical staff from the clinical placement areas about the curriculum development.

 In terms of the procedures for the revision of the curricula, even though the department has an evaluation committee, it does not have an overall strategic plan, including a plan for curriculum revision.

 IMPLEMENTATION
- How effectively is the Department’s goal implemented by the curriculum?

 The delivery, from the students’ point of view, is excellent and students generally enjoy the courses. Some postgraduate students commented on the lack of flexibility in their courses in relation to their working and family lives. The EEC is of the opinion that some content –in the undergraduate curriculum- is unnecessary and/or inappropriate, for example, the content of “Pathology” or “Surgery” could be omitted and that of “Pathological Nursing” or “Surgical Nursing” could be enhanced. There are many such examples. The curriculum content is heavily iatro-centric which may perhaps be a reflection of the health care system in Greece, the government’s policy in the area, the history of nursing education and the medical pressures which continue to
exist today. Despite the Department’s overall aim as expressed in the mission statement and discussions with the EEC referring to comprehensive care i.e. from prevention to care and cure for individuals and the community, and considering the biopsychosocial and cultural aspects of illness, this is not reflected in the curriculum with its significant focus on biomedicine at the expense of all others.

The infrastructure (library facilities and classrooms) are inadequate in meeting the needs of the curriculum. The health science library has an extremely small section with nursing books, the Department’s own small library is not operational due to the lack of a librarian, and access to e-journals is problematic. It is expected that the new building currently in construction will significantly improve the physical and teaching environment. Some labs are, however, adequate and well equipped but some of them are with the non-nursing orientation mentioned earlier. The clinical nursing skills lab needs upgrading. The addition of another two clinical nursing skills labs with state of the art equipment seems necessary for effective student training and also to decrease additional staff workloads from the current need to repeat sessions in this single available lab.

- How does the curriculum compare with appropriate, universally accepted standards for the specific area of study?

The broad aims and the delivery of the curricula (undergraduate and postgraduate) are -despite their biomedical orientation- comparable to appropriate and universally accepted standards. In some areas the programme is even better than other programmes abroad, equipping nurses with good levels of scientific knowledge. They combine theory and practice well and have a logical and coherent structure. The EEC is content that the education standards that are set will be acceptable to any member state of the EU as minimum, and the academic rigour is equivalent to a Bachelor /Master degree respectively.

- Is the material for each course appropriate and the time offered sufficient?

In the EEC’s view some of the content is not appropriate such as many of the subjects which are taught by non-nursing academic staff such as embryology, biophysics, isobaric and hyperbaric oxygen therapy or genetics, as examples. The focus on such subjects should be less prominent in the curriculum. Some nursing subjects are offered as electives, but they should be core subjects as
they represent a large proportion of the knowledge that graduates need to care for patients, such as oncology, chronic illness, palliative care, transcultural nursing, and others; this way the programme will also be based more on current health care trends and needs.

As stated previously the department lacks certain resources but it is particularly lacking clinical placements and staff for the supervision of students in clinical practice. This is perhaps the result of lack of dedicated funds from the state for this activity.

The postgraduate courses are of high quality, although with a bias towards biomedical sciences. However, the students are satisfied with the quality of the teaching which equips them with new knowledge.

The programmes offered are equivalent to other European universities and beyond. It is however obvious that the state must pass legislation and has clarity and the political will to enable a positive environment for the nursing discipline /profession to advance and flourish as an independent (autonomous) and patient-centred profession as it currently is in other countries.

- Does the Department have the necessary resources and appropriately qualified and trained staff to implement the curriculum?

The staff, both the non-nursing and nursing ones, are highly qualified, often leading in their respective fields. Their high quality is reflected in student evaluations and the very strong and competitive CVs they have. The power dynamics in the department are, however, problematic because of the greater number of medical academic staff to nursing. The number of nursing academic staff, although of high quality, is not sufficient for a nursing-centric programme.

RESULTS

The EEC believes that the current curriculum needs to focus more on nursing and less on biomedical sciences. The Department formally evaluates its courses with the students and discusses issues with them in an effort to improve them. The curriculum was internally reviewed last year taking into consideration the students’ formal feedback but the extent of changes was not evident to the EEC.
IMPROVEMENT

The curriculum should have specific overall aims and objectives that should be reflected in the courses delivered. The biomedical dominance needs to steadily decrease over the next few years. A curriculum committee from all five specialty sectors of the Department should be able to address these issues more carefully in the near future and a strategic plan developed to respond to nursing developments and demographic changes. The postgraduate courses are too many and reflect the need of each specialty sector (τοµεις) to develop such programmes; a more rational approach to developing postgraduate nursing courses is needed and the curriculum committee should be able to address these issues too. The introduction and delivery of courses is seemingly done based on self-interests of the specialty sectors rather than on identified need or a coherent approach to curriculum development. The department should continue with its annual internal evaluations and take appropriate actions in a more effective manner. The philosophy and ethos of the department needs to be clarified to be unmistakably nursing orientated and the curriculum should reflect this ethos.

B. Teaching

APPROACH:

According to the documentary evidence provided to the EEC, the teaching approach used by the department is a mixed approach such as face to face, group work, tutorials and practice based learning. The use of e-class is limited as is the use of e-learning. The general pedagogic approach is welcomed by both students and staff whilst the quality of the teaching sessions is highly rated by the students.

Undergraduate students enter the clinical field in Semester 3 and they are provided with a number of clinical experiences which meet the EU directives. However, there are acknowledged difficulties in providing satisfactory clinical experiences to undergraduate students due to the lack of clinical teachers and dependency for clinical supervision on clinical nurses in the hospitals and postgraduate students. The academic staff provided examples of teaching approaches which promoted critical thinking and reflexivity, although the students -both undergraduate and postgraduate- appeared to value teaching approaches which promoted scientific knowledge.
Overall, the teaching methods employed by the Department are widely used internationally in higher education and the EEC believes that they are comparable to approaches used within the EU and beyond and they are appropriate for achieving the programme’s learning outcomes although the clinical teaching of the undergraduate students needs to significantly improve.

The teaching staff/student ratio for the undergraduate programme is 1:24 of active students, 1:10 for postgraduate taught programmes and 1:3.6 for doctoral students. These levels are comparable to other EU universities.

- Teacher/student collaboration
  Internal evaluations that were provided by the Department and face-to-face discussions with students indicate that the professional relationship between students and teachers is very good, leading to effective and productive collaborations and indicating the dedication and commitment of staff to facilitate a high quality teaching, learning and supportive environment for all the students. Students have also communicated with the EEC, however, that at times timetables are inflexible and geared around the needs and availability of the academic staff rather than the students.

- Adequacy of means and resources
  As previously discussed there are shortcomings in terms of library and teaching spaces particularly in relation to clinical labs. The delays in establishing the clinical and lab facilities of the Department at the Ag. Anargyroi hospital have added to challenges for both teachers and students. These are gradually being addressed. The work on the additional spaces on new Departmental building will also alleviate some of the problems in the near to medium term.

- Use of information technologies
  The EEC was told that e-class is used in the delivery of education to students. This is innovative and excellent resource that needs to be supported and further developed in establishing courses which are provided fully on-line. The EEC was told by the students that e-learning is highly desirable and would be beneficial to all students but particularly those whose social and employment responsibilities prevent them from getting to class or arriving late for their classes.

- Examination system
  The examinations take place at the end of each semester. They are written,
The system allows for numerous examination attempts of every course resulting in students remaining on the programme for many years. The EEC regards this system as inefficient and recommends that a maximum of three attempts at each examination should be allowed after which –if the student does not successfully pass the examination- should be discontinued from the programme.

The clinical practice of the 8th semester is examined through a diary of clinical case studies which requires a critical analysis of the student’s experiences and supplemented by bibliographical evidence. The final assessment of the student in the 8th semester includes their evaluation by the clinical teachers.

IMPLEMENTATION

- Quality of teaching procedures
  As previously mentioned, the students have reported to be highly satisfied with the teaching procedures they have been exposed to.

- Quality and adequacy of teaching materials and resources.
  The academic staff reported shortages in teaching spaces –classrooms and laboratories. Students reported difficulties in accessing e-journals; some books were outdated and the range of relevant books was limited. Because of the nature of the majority of the courses provided in both undergraduate and postgraduate programmes, the bibliographical references recommended to the students are extremely medically orientated. There is also a need for more computer labs which are easily accessible for all students to use throughout the day.

- Linking of research with teaching
  Based on the documentary evidence provided to the EEC and the discussions with the academic staff and students, the linking of research with teaching can be improved. The internal evaluation document reports that 41% of the academic staff believes that the linking of research to teaching occurs only sometimes and 11% that this does not happen at all. Courses such as evidence-based nursing and research methodology should be core instead of being electives. The documentary evidence provided indicated that for some reason these courses are not selected by the students and this must be addressed. The Department’s staff is highly research active –a very positive situation which the EEC wishes to congratulate- who provide the links between research and teaching, but their efforts could be enhanced.
Better links between research and clinical teaching will be achieved by the provision of well prepared clinical teachers who should be available in all areas of practice to replace the current informal system which relies on postgraduate students and (unpaid) clinical nurses. A very good example of a service developed by the department, linking with the community and training students, is the psychiatric outpatient clinic shown to the EEC during the first day of site visits. The opportunities to create a progressive clinical, teaching and research environment with the new hospital of Ag, Anargyroi are plenty and the hospital management is eager to pilot new and innovative approaches to patient care, such as nurse-led clinics; these opportunities should not be missed. Also, the establishment of autonomous Nursing Clinical Chairs in the new Ag.Anargyroi Hospital will promote the application of research to teaching and practice and will greatly enhance evidence-based nursing. Discussions of the EEC with the senior hospital management and nursing director confirmed the close collaboration and willingness to develop new ideas.

- Mobility of academic staff and students
According to the documentation provided to the EEC, the Department is taking part in European programmes such as Erasmus. Students’ and teachers’ exchanges with universities in Finland, Sweden, England, Ireland, Austria, Germany, Hungary and Cyprus have taken place. This is excellent and a great opportunity for staff and students to widen their nursing education and experiences.

- Evaluation by the students of (a) the teaching and (b) the course content and study material/resources
Students evaluate each course (the teaching, content and materials) through completion of questionnaires. In summary, the evidence provided to the EEC indicates that the students are highly satisfied with the teaching, course content and organisation of the theoretical component of the curriculum. The clinical component of the undergraduate programme tended to be better evaluated in the last semesters.

RESULTS
As described in detail in earlier sections, there is high quality teaching through knowledgeable doctorate-level educated and motivated academic staff. This is an area of consistent satisfaction by the students. In 2008-9, ninety eight percent of the grades awarded to the undergraduate finalists was good to very good. However, during the same year, 5% of the total undergraduate student population was in their 5th year of
studies, 3% was in their 6th year, 2% in the 7th year, 2% in their 8th year and 17% in their 8+ year. Although the percentages exceeding the 4th year are small they nevertheless add to the Department’s workload and is exceedingly uneconomical. This phenomenon does not exist in other EU universities and ways must be identified and applied forthwith to eradicate it.

**IMPROVEMENT**

The Department has identified a list of short-term goals, some of which have already been addressed while others are in the process of being dealt with. Although the Department does not have a formal strategy for future development, its articulated vision stresses the need for programmes which are more nursing orientated and outward looking. In addition their vision sees society regarding nursing as a science and nurses being at the centre of all levels of decision making within the healthcare system. While all the staff in the Department can contribute to the realization of this vision, it is clear that this also requires the support of the relevant Government departments and ministries.

It is clear, from the evidence the EEC has examined, that many aspects related to the teaching and delivery of both undergraduate and postgraduate curricula have been consistently improved in the last 10 years and this is due to the dedication and hard work of the staff in the Department. Given the required support, the Department can flourish even further and firmly establish itself as a centre of excellence for nursing education and research.

Furthermore, during discussions it was apparent that the department did not want to collaborate with TEI in running postgraduate courses together, maintaining a relationship of dependency on behalf of TEI staff to the University, and that the department’s staff do not consider the level of TEI courses equivalent to theirs. The lack of cooperation between nurses in the University and TEI for common challenges and ideals is problematic and divisive for the advancement of the nursing profession and must be addressed more carefully.

**C. Research**

**APPROACH**

- What is the Department’s policy and main objective in research?
- Has the Department set internal standards for assessing research?
The Department has acknowledged that there is no research strategy in place. There is no evidence of attempting to develop such a strategy either. The research foci are mostly based on individual initiative and at times are opportunistic as judged by the diverse publications seen in staff CVs. There are currently 20 funded research projects (and 44 over the years), most of them in basic sciences and epidemiology. A number of unfunded projects is also carried out, with the vast majority of academic staff being involved in research. A significant number of the output is the result of publications from postgraduate or doctoral students.

There are excellent research facilities in some of the Department’s labs, such as the neurophysiology and the Information Technology lab that produce highly esteemed and quantitatively high number of publications. The Public Health lab has particularly impressed the EEC with its high quality output in nursing-relevant topics.

Some research topics are exploring issues that have been done before in the international literature many times. The EEC’s suggestion is to move away from such research foci and develop more innovative nursing-relevant research.

Scholarly activities, staff support for attending and presenting at scientific conferences and engagement with international societies and agencies provide further evidence of the Department’s research esteem. The impact of the research carried out by the Department in the wider community and patient populations is currently not assessed and it would be desirable in the future to focus on such impact, highlighting the contribution of nursing research in improving the lives of patients and the community. Publicity of significant research findings should be enhanced by nursing academics.

A significant number of doctoral students is registered with the Department, currently consisting of 123 students. The topics, as discussed earlier, reflect more biosciences rather than nursing. Through discussions with doctoral students it has come to the EEC’s attention that the students often have to provide 15 hours of support per week to their supervisor. While this may be appropriate and necessary if this is linked with the needs of the student’s project, sometimes students reported doing unrelated activities (e.g. teaching, tutorials or offering assistance in the labs); this should be kept to a minimum, and used only to enhance the students’ experience and their transferable skills rather than doing unrelated activities. The students also communicated that at times there was limited supervision to them by their supervisor.
The Department is the leading (and only one of two) university departments of nursing in the country. As such it should lead the way in supporting the development of doctorally-prepared nurses from across the higher education sector, including TEI. Currently, out of 123 registered PhD students, only 2 are reported to be directly graduates from TEI. The department should assist more TEI graduates that meet entry criteria for a PhD in order to improve the evidently significant need of TEI graduates to have PhD preparation. TEI are, as a result of current legislation, dependent on Universities to offer them doctoral studies opportunities, and the department of nursing has not done enough to decrease this inequality. It seems that graduates from the undergraduate programme of the department are often admitted for postgraduate studies in the department and many of them then are admitted for doctoral studies. This progression is positive and welcomed, however it discourages cross-fertilisation of ideas from people coming from different institutions and perpetuates an academic inbreeding that risks stifling advancement of the profession. This must change and the Department should be more outward looking, particularly in significantly increasing the number of admissions from TEI postgraduates to carry out doctoral level studies.

The EEC has not become aware of any formal set of standards for assessing the Department’s research outputs although throughout our discussions the staff were fully aware of internationally recognised quality indicators (e.g. impact factor, quality of journals, etc) and the need of maintaining and incorporating these in the assessment of their research output.

IMPLEMENTATION AND RESULTS

• How does the Department promote and support research?

As previously mentioned, the Department promotes and supports research through supervising and teaching research in the undergraduate and postgraduate programmes, staff research development, and a variety of research activities through individual and collective efforts.

• Quality and adequacy of research infrastructure and support.
• Scientific publications.

A high number of publications in peer reviewed journals is evident. This amounts to a total of about 39 publications on average per academic staff
member dating from the establishment of the department. The publications themselves are impressive, being published in high quality journals with impact factors. Some staff, however, seem to pursue publications mostly in Greek journals. As mentioned earlier, the publications have a biosciences bias. In addition, there is a significant number of conference presentations as well as books (although many of these are translations of mainly books by American authors) and book chapters. The average number of total citations is 245, which is above average. Staff members are also reviewers in international journals, have delivered more than 40 keynote speeches and take part in the organizing committees of national and international conferences. The above are clear indications of the significant and high quality research output in the department, necessary for the academic status of the profession.

- Research projects
As mentioned earlier, funded research is common, with 20 projects currently being undertaken. Many of them are funded through European funding. Unfunded research projects are commonly conducted by many of the staff members.

- Research collaborations.
Research collaborations are active and international. This is an area of strength for the department.

**IMPROVEMENT**

- Improvements in research proposed by the Department, if necessary.
- Initiatives in this direction undertaken by the Department.

The department is making a significant effort to develop collaborative research with Greek and international partners, despite funding restrictions in the current wider economic climate. The absence of a research strategy, also identified as important limitation by the department, is hampering concrete research progress. There is an urgent need for the department to set up a research strategy and consolidate the expertise of the academic staff. The establishment of nursing professorial chairs in clinical settings would significantly promote the link between research and practice as mentioned earlier.

**D. All Other Services**

**APPROACH**
The EEC observed that the new building is in the process of expansion. As it currently stands, however, the department has one nursing lab where a large number of students have to practice their clinical skills. It is evident therefore that two additional nursing skills labs are needed to accommodate concurrent practice sessions with small groups of students. Furthermore, the current lab and any additional labs need to be appropriately furnished with up to date nursing teaching and learning equipment and tools that reflect current clinical realities and developments.

While a computer lab is available, this is primarily for research and postgraduate programmes and hence the number of computers available to undergraduate students for everyday use appears to be inadequate.

Similarly, there was no evidence that PhD students were provided with individual or collective physical space or equipment with relevant tools that would facilitate a conducive environment for learning and exchanging of research experiences and ideas. In the main, the PhD student facilities existed only in the clinical settings and labs.

Library facilities particularly in regards to nursing textbooks were limited and many were outdated. Similarly, access to nursing electronic journals is limited. Student support in the library was limited due to only one librarian available.

The EEC was unable to ascertain what facilities were available in the clinical settings in which students undertake the clinical education. Because of the time of this external evaluation, there were no students in the clinical areas to be visited by the EEC, something which would have been desirable.

A large number of undergraduate, postgraduate and PhD students offer their services and provide support to a variety of worthwhile community health and patient organisations, which should be embraced more in the future, considering the social responsibility bestowed upon universities.

IMPLEMENTATION AND RESULTS
Administrative support is adequate and well-organised. The establishment of electronic systems that facilitate administrative access to students seem to have reduced administrative workload. For this reason, administration can adequately manage current departmental administrative demands. This is evidenced by discussions with the administrative staff and students.

Some aspects of the infrastructure, e.g. free internet access and PCs, are necessary and need to be attended to enable and further enhance student learning.
The improvement of the role of the student advisor is particularly welcomed as it is the set up of an advisor committee constituted by academic staff members with a remit to guide students in their long-term professional planning.

**IMPROVEMENTS**

- Has the Department identified ways and methods to improve the services provided?

The Department is taking advantage of the new technologies in the administration. It has also enhanced the administrative support of the department.

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**Collaboration with social, cultural and production organizations**

In general students are provided with access to a variety of social and psychological services, and economically disadvantaged students could benefit from (limited) University scholarships. It is evident that the new building is constructed to facilitate access for disabled students. Students participate in a number of volunteering opportunities and other non-governmental service provision, although we cannot comment on the quality and originality of these projects. The EEC found these to be important activities linking the Department with the wider community. The importance of social responsibility needs to be highlighted to the students in a more concrete way (ie. academic staff to encourage more such activities, develop plans for social responsibility activities, incorporate some of them as part of the student learning, etc) as it is an important aspect of the wider university education.

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**E. Strategic Planning, Perspectives for Improvement and Dealing with Potential Inhibiting Factors**
• Potential inhibiting factors at State, Institutional and Departmental level, and proposals on ways to overcome them.

The rigid rules governing higher education are inhibiting factors at the state level. As mentioned previously, the current practice of permitting students to extend their study time creates significant organisational and resource problems for the Department.

• Short-, medium- and long-term goals.
A number of goals have been identified by the department and some actions have taken place to address some of the short term goals. The EEC identified a written and detailed Departmental plan for improvements in their internal evaluation report of 2009, further explicated in the internal evaluation report of 2010.

More specifically, short-term improvement plans are referring to:
- Expansion of teaching activities in the new building
- Move of the academic clinics to Ag. Anargyroi hospital
- Improvements of the undergraduate and postgraduate curriculum
- Improvements in the department’s website
- Improvement of the role of the student advisor and set up of a committee to support students in their long-term professional development
- Use of new e-technologies in the administration of the department
- Attending to the library issues
- Seeking more funding from the state
- Incorporation of the student evaluations in the improvement of the department’s processes and goals.

The medium-term goals include:
- Further development of international collaborations
- Completion of the new building
- Increase of the number of academic, laboratory and administrative staff in the department
- Decrease the number of student admissions
- Improve the research infrastructure and output in the department
- Encourage academic staff to take sabbaticals abroad

It is evident that to operationalise many of the above goals there needs to be
central university and political recognition and support.

**F. Final Conclusions and recommendations of the EEC**

**CONCLUSIONS**

Overall, despite the limitations identified by the EEC in the previous sections and highlighted below, this is a department that provides a strong theoretical preparation and research-based education for nurses and contributes to the development of nursing leadership. This is the leading nursing department in the country offering high quality academic and research education and training to nurses and should be further supported.

It is unequivocally recognized that there should only be one level of nursing education in Greece this being University level. This is in line with all other developed countries which have eliminated/are eliminating the divisive different levels of nursing education across tertiary education institutes and have moved completely to university-based nursing education. Not to do this will perpetuate problems in this field of over 30 years, will not be in accordance with international trends and will create further problems with the professional status of nursing, which is the fundamental cornerstone in any health care system. The EEC strongly supports the one-level university-based nursing education and strongly recommends to the Ministry of Education to take immediate action towards this goal.

Furthermore, while it is not part of the EEC’s remit, the EEC would like to comment on the significant problem in the Greek society where there is overproduction of doctors (highest number in OECD countries with 5.4 doctors/1,000 population) and severe underproduction of nurses (lowest number in OECD countries just above Mexico and Turkey with 3.2 nurses/1,000 population). This trend must change and the number of highly educated nurses at university level must significantly increase. Funding should be re-distributed from medical education to nursing education, in order to meet the society’s needs.

The EEC found the Department to be excellent in terms of:

- a) The high quality academic staff, both nursing and non-nursing ones
- b) The very good student-teacher interactions;
- c) the collaborations, interactions and student exchanges with schools of nursing and individuals in other countries;
- d) the research activities and output of the academic staff
Broad areas of improvement include:

a) Curriculum review with emphasis on a more nursing-centric programme of studies
b) Clinical training of undergraduate students
c) Teaching facilities and resources
d) Governance of nursing department to be by nurses for nurses.

The EEC is surprised to find out that the Ministry of Education’s regulations state that the student voting power is a high percentage. In the EEC’s view, such high percentage is not common practice in the higher education institutions in the countries that the EEC’s members are employed. While student representation is extremely important and welcomed for a learning environment, student voting should be significantly reduced.

RECOMMENDATIONS (not in any order of importance)

1. Increase the ratio of nursing to non-nursing core staff
2. Reduce student voting power.
3. Clinical nursing skills labs should be equipped with up to date nursing and medical equipment used in everyday nursing practice.
4. Establish Professorial Nursing Chairs -supported by legislation if necessary and jointly funded by the Ministry of Education & the Ministry of Health- in selected health care services to promote an educational and practice environment that is conducive to research, continuing education and cultural change. The opportunities for innovation and creating a high-quality learning, teaching and research environment in the new hospital of Ag. Anargyroi are ample and the willingness to exploit such opportunities from the hospital management and nursing leadership is evident through the EEC’s discussions with the CEO and the Director of Nursing in the hospital. This close collaboration with the hospital may also mean more active participation of the department’s academic staff members in the life and management of the hospital.
5. Significantly increase the intake of TEI graduates meeting entry criteria to carry out doctoral (PhD) studies.
6. Work closer with TEI nursing departments to develop common and jointly run nursing-orientated postgraduate courses.
7. Further enhance e-learning and develop interactive online courses.
8. Develop clear research strategic plans with specific deliverables.
9. Develop a clear strategic plan for student clinical education.
10. Significantly focus on the delivery of clinical education to undergraduate students, develop a clear and comprehensive assessment of student practice and enhance the clinical experience of students.
11. Make better use of existing and new collaborations with international institutions, focussing on joint research and scholarly activities.
12. Review the curriculum to achieve balance between nursing-specific topics and broader medical/health topics, and introduce more contemporary nursing content as core courses.
13. Develop clear and transparent Departmental, faculty and university curriculum development and review processes.
14. Significantly decrease the number of elective courses from the current 58.
15. Improve the communication between the five specialty sectors (Τοµεις)
16. Discontinuation of the students who have been registering in the courses for many years.
17. Further enhance the students’ (and staff’s) social responsibility opportunities and incorporate the notion of social responsibility in the ethos of the department, its learning environment and its curricula.
18. Provision of funding for clinical teachers to support students in practice by the Ministry of Education.
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