EXTERNAL EVALUATION REPORT

DEPARTMENT OF MIDWIFERY

TEI OF ATHENS

July 2011
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External Evaluation Committee

The Committee responsible for the External Evaluation of the Department Midwifery of the High Technological Institution of Athens consisted of the following five (5) expert evaluators drawn from the Registry constituted by the HQAA in accordance with Law 3374/2005:

1. Dr Vasílios Raftopoulos (Coordinator)
   Assistant Professor Cyprus University of Technology, Cyprus

2. Dr Martha Apostolidou
   Associate Professor, Frederick University, Cyprus

3. Dr Ólöf Ásta Ólafsdóttir
   Assistant professor, University of Iceland, Head of Department of Midwifery, Iceland

4. Dr Heather Ann Hancock
   Adjunct Associate Professor, The University of Adelaide, South Australia, Australia

5. Dr Breyette Lorntz
   Educator Research Analyst, Hanover Research Companies. Member, Board of Directors. Association of Midwifery Educators, USA.

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 EEC was warmly received by both faculty and staff of the Technological Educational Institution of Athens Midwifery Department (TEIM Department) who went out of their way to facilitate the efficient functioning of the EEC. The TEIM Department contributed whole-heartedly to the evaluation process with professionalism, honesty and enthusiasm. The EEC felt well equipped to address the tasks assigned by the H.Q.Q.A. and was able to complete the review effectively. The conclusions described below were reached unanimously.

Readers of this report are referred to the International Definition of the Midwife (2005), as follows, for all references to the term midwife used throughout:

**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 TEIM Department

The TEIM Department is comprised of 3 Professors, 2 Assistant Professors and 10 lecturers. Of these 2 Professors and 1 Assistant Professor are medical doctors and only two are midwives. The Bachelor’s program at TEIM Department of Athens is comprised of 7 semesters of theoretical and clinical study and 1 final semester in which a clinical placement and a dissertation are completed. The TEIM Department accepts approximately 125 students into its undergraduate midwifery program each year and has approximately 500 students currently
enrolled across the 8 semesters of the program. At the end of this 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.

Since the 2007-08 academic year, the TEIM Department has also collaborated with the Faculty of Medicine of the National and Kapodistrian University of Athens to offer a postgraduate studies program (combined coursework and research) entitled "Research in Female Reproduction". For this multidisciplinary master's degree, student applicants are drawn, in equal proportions, from midwifery, medicine and biology. This four semester long program is the only master's degree program that runs in collaboration with the TEIM Department of Athens in Greece. This program is taught by approximately 60, mostly Medical professors. Professors of midwifery studies contribute to the academic teaching of this postgraduate program (lectures, supervision of dissertations etc). The program has an intake of approximately 8 midwives per year. Out of the 112 students who have been enrolled there since the program's inception, 41 were TEI midwives. At the end of this program, students are equipped to conduct further research projects and are subsequently eligible to apply for doctoral level study at a University or employment as a lecturer at a TEI.

Throughout this report we limit our discussion to the activities at the bachelor's level, as it forms the bulk of the TEIM Department's effort. We only briefly mention the postgraduate program towards the end of this report.

I. The External Evaluation Procedure

- Dates and brief account of the site visit.
- Whom did the Committee meet?
- List of Reports, documents, other data examined by the Committee.
- Groups of teaching and administrative staff and students interviewed
- Facilities visited by the External Evaluation Committee.

The External Evaluation Committee (EEC) has visited:
1) the Hellenic Quality Assurance Agency for Higher Education (HQAAHE)
2) the main campus of TEI of Athens
3) the Midwifery Department (Mitrodotou str, Academia Platonos) of the TEI
4) the library of TEI
5) the cafeteria of the TEI
6) the Medical centre of TEI in which there is a gynecological clinic that led by midwives from the TEIM Department and offers health services to TEIM students (counseling health education, lifestyle programs for the prevention of cervical cancer, cervical screening, breast examination and BSE education to the women attending the clinic)
7) the restaurant of the TEI
8) the Vyronas Health Centre
9) the Elena Venizelou Hospital (maternity section) and
10) the Areteion Hospital (seminar room) during the first three days of the Evaluation Procedure.

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

1) the President and the Director (responsible for TEI Evaluation) of the Hellenic Quality Assurance Agency for Higher Education  
2) the Academic staff of the TEIM Department (the Internal Evaluation Group, the elected academic and scientific staff)  
3) the Director of the School of Health Sciences of TEI and Deputy Director  
4) a group of undergraduate midwifery students from TEIM Department  
5) a group of postgraduate students from the postgraduate collaborative Master’s program (of the TEIM Department in collaboration with the Medical School of the National Kapodistrian University of Athens)  
6) the head of the secretariat of the TEIM Department  
7) staff of the Medical Centre of the Athens TEI  
8) a group of Midwifery Instructors in the Elena Venizelou Hospital  
9) the Director of Midwives in the Elena Venizelou Hospital  
10) the staff of the Vyronas Health Centre  
11) the Director of the postgraduate program  
12) The Coordinator of the EEC has met the President of Athens TEI.

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

1. External Evaluation of Higher Education Academic Units Guidelines for Members of External Evaluation Committees March 2010  
2. The Internal Evaluation Report (IER) of the TEIM Department (2010)  
3. The TEI Midwifery Student Handbook  
4. The Dissertation Handbook of the undergraduate TEI Midwifery Students  
5. The Guide for the clinical practice of TEI Midwifery Students  
6. The Curriculum Vitae of the Faculty members of the TEIM Department (2010)  
7. The Handbook/evaluation of TEI Midwifery Students’ clinical practice in the hospital setting (8th semester practicum)  
8. The labor/birth experience Clinical Practice Record for TEI Midwifery Students  
9. A sample of a TEI Midwifery student examination paper  
10. Samples of dissertations of undergraduate TEI Midwifery Students  
11. The curriculum of the TEI undergraduate studies (midwifery and nursing)  
12. The curriculum of the postgraduate studies collaborative Master’s program  
13. The written policy document of the Elena Venizelou Hospital for the practice of undergraduate TEI Midwifery Students  
14. Preliminary Program of the 8th Congress on Women’s Health and Disease, Kos Island,
The groups of teaching and administrative staff and students interviewed by the EEC comprised the following:

1) The Academic staff of the TEIM (the Internal Evaluation Group, the elected academic staff, and scientific staff)
2) laboratory associates from TEIM Department and the Elena Venizelou Hospital
3) special technical staff members
4) academic staff from the Medical School of the University of Athens
5) a group of undergraduate Midwifery Students of TEIM Department (18 students)
6) a group of postgraduate Master’s students (20 students)
7) a person from the secretariat of the TEIM Department
8) 2 Community Midwives
9) the Director of the School of Health Sciences of TEI
10) a group of Midwifery Instructors in the Elena Venizelou Hospital
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 EEC particularly enjoyed the constructive meeting with TEIM Department students.

II. The Internal Evaluation Procedure

Please comment on:

- Appropriateness of sources and documentation used
- Quality and completeness of evidence reviewed and provided
- To what extent have the objectives of the internal evaluation process been met by the Department?

The TEIM Department provided documentation that was of good quality; it was adequate and the evidence was up to date and fully informative for the EEC. The objectives of the H.Q.A.A. internal evaluation were met by the TEIM Department and the EEC recognizes that a great effort was put into the process. In particular, the EEC would like to acknowledge the very good work and the challenges involved in the translation of all relevant documents.

A. Curriculum

*To be filled separately for each undergraduate, graduate and doctoral programme.*

**APPROACH**

- What are the goals and objectives of the Curriculum? What is the plan for achieving them?
- How were the objectives decided? Which factors were taken into account? Were they set against appropriate standards? Did the unit consult other stakeholders?
- Is the curriculum consistent with the objectives of the Curriculum and the requirements of the society?
- 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?

**Undergraduate curriculum**

The goals and objectives of the current undergraduate Curriculum:

1. Are clearly stated in the IER of TEIM Department
2. Are adequate for a Bachelor Degree in Midwifery
3. Prepare students to become professional midwives
4. Are medically oriented
5. Provide midwifery graduates with the academic background necessary for postgraduate studies

In general, the curriculum is consistent with European standards for midwifery education. It
also responds to the new demands of clinical work although it does not fully address contemporary international changing models of midwifery practice that focus on midwifery led continuity of care. 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 TEIM Department.

The curriculum has been structured to respond to the TEIM 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. multiple and highly transparent methods of evaluating midwifery students
3. satisfactory structure and organization of teaching and learning material
4. incorporation of research activities in the dissertation procedure and
5. effective link with the job market through well-organized vocational training

The EEC is concerned about the overwhelming number of courses in the midwifery curriculum that are medically rather than midwifery oriented.

Regulations imposed by the Ministry of Education and TEI impede the ability of the TEIM Department to design and implement a curriculum more in line with modern and international midwifery standards. Updating of the objectives and suggestions for improvement are acknowledged as included in the IER of TEIM Department.

Both internal and external factors have influenced the development of the objectives and the curriculum development by the TEIM Department. It should be noted that midwifery students’ participation has been encouraged. Stakeholders such as women, Non-Government Organisations (NGOs), Health Services and the general community have not been consulted in curriculum development. The curriculum is aligned with the standards identified in the IER.

The curriculum objectives are consistent. Responsiveness to some social issues (e.g. culture and gender) is not evident. A committee for the evaluation and the revision of the curriculum (undertaken every two years) has been established from the TEIM Department.

**IMPLEMENTATION**

- How effectively is the Department’s goal implemented by the curriculum?
- How does the curriculum compare with appropriate, universally accepted standards for the specific area of study?
- Is the structure of the curriculum rational and clearly articulated?
- Is the curriculum coherent and functional?
- Is the material for each course appropriate and the time offered sufficient?
- Does the Department have the necessary resources and appropriately qualified and trained staff to implement the curriculum?

The TEIM Departments’ goals are implemented effectively by the curriculum in accordance with European midwifery standards. The curriculum is rational, clearly articulated and its
structure is functional. It combines theory and practice well. However, medicalisation (ιαηρικοποίηζη) of the curriculum has inappropriately influenced both the content and the choice of learning resources (including text books) towards medicine and in some cases nursing. This means that the focus is somewhat directed towards disease and medical interventions rather than normality, health and primary health care, their maintenance and promotion.

Resources are not always adequate. The midwives of the TEIM Department, though small in numbers, are very well qualified to implement the curriculum effectively. The fact that five of the midwives are PhD candidates is commendable and indicates their direct commitment to the advancement of midwifery education and practice.

RESULTS

- How well is the implementation achieving the Department’s predefined goals and objectives?
- If not, why is it so? How is this problem dealt with?
- Does the Department understand why and how it achieved or failed to achieve these results?

There is a good alignment between the predefined goals and objectives of the curriculum and its subsequent implementation. The hard work of the faculty members of TEIM Department to achieve the aims and objectives of the curriculum under difficult circumstances is evident.

IMPROVEMENT

- Does the Department know how the Curriculum should be improved?
- Which improvements does the Department plan to introduce?

Several areas of the curriculum that need to be improved have been both stated in the IER and identified during the meetings with the faculty members of the TEIM Department. These areas include providing increased opportunities for the use of the English language, addressing gaps in the modules related to the implementation of research and contemporary midwifery care, and enriching the content in terms of including issues such as domestic violence against women and sexual abuse. The TEIM department plans for improving the curriculum are provided in detail in Section 10 of the IER.

B. Teaching

APPROACH:

- Does the Department have a defined pedagogic policy with regard to teaching approach and methodology?
The TEIM Department has done a lot of work to create and advance a strong set of academic teaching policies and methodologies. This is evident from the IER of the TEIM Department, its formal and informal curricula and the discussions the EEC had with faculty members, midwives in clinical placements and the TEI midwifery students. The results of these policies culminate in the production of graduates with a high level of theory and practice abilities who are adequately prepared for ongoing postgraduate studies and are well-equipped to work as professional midwives. This is supported by the successful participation of graduate TEI midwives in the master’s program.

Please comment on:

- Teaching methods used

The IER indicates that various methods of teaching are used in theoretical and practical education including lectures, discussions, interactive workshops and skills acquisition. This varied methodology appears to cover learning objectives in all domains (cognitive, psychomotor, and affective). It is noted with great concern that TEIM student attendance is not compulsory due to the legislation enacted. This 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 IER identified an academic staff/student ratio of 1:80 and 1:60 in theoretical modules. On clarification of this, given a staff cohort of 15 and approximately 500 students the ratio would be approximately 1:33, which is much better. Clinical module ratios are stated as 2:25 which is adequate although the laboratory rooms are not spacious and not as well-resourced as they should be. The ideal classroom ratio is 1:20 for quality teaching and learning in a program of the nature of midwifery. The ratio of 1:5 for the clinical practice is excellent with all students well supported by both a midwife mentor within the TEIM Department and the TEIM midwives.

- Teacher/student collaboration

The TEIM midwives are available to midwifery students before, during and after each semester. TEI Midwifery students affirmed the willingness of the faculty staff to support them in their learning and were very praiseworthy of their commitment to teaching midwifery and their passion for midwifery overall. It was evident in meetings with the TEI midwifery students that there is an excellent and respectful relationship between them and the TEIM midwifery faculty members, which creates an effective learning environment in the spirit of the midwifery
philosophy of woman centered care.

- Adequacy of means and resources

The TEIM Department functions very well under difficult circumstances. Undersized classrooms in a building with no sound proofing make all external noise loud and disruptive. The teaching rooms are not all digitally equipped and comprise inflexible seating arrangements which do not enable effective small group work. There is no access for disabled individuals. Office accommodation is extremely inadequate and would not comply with Occupational Health and Safety requirements, nor would the toilet facilities and the absence of fire exits, that is potentially dangerous. The staff and students deserve much better. The EEC would like to note the existence of an innovative classroom within the TEIM Department building that is used for education of community pregnant women with midwifery students present. This classroom is designed in a friendly non-threatening way with good consideration given to furnishings typical of an excellent antenatal education setting.

- Use of information technologies

As stated earlier, there is no electronic/digital platform for eLearning and study skills support. Students need to be able to 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. They could also achieve flexible and interactive group learning experiences and develop their individual theory learning via online teaching strategies and resources. The TEIM Web site needs to be further developed to equate with contemporary midwifery education web sites.

- System of written exams

TEI Midwifery students are assessed through a two hour written exam at the end of each course at the end of the semester, as required by the Greek legislation. This appears to be managed equitably and effectively. However, for quality learning, students should be evaluated with diverse and ongoing assessment methods and should receive corresponding feedback. The TEIM midwives are to be commended for providing additional options for assessment as learning extension, engendering critical thinking albeit this assessment is not compulsory. The clinical assessment of TEI midwifery students during their practical experiences is excellent with a clearly understood procedure for determination of clinical competence and safety as well as thorough detailing of clinical experiences and students performance evaluation.

IMPLEMENTATION
Quality of teaching procedures

As previously mentioned, the TEI midwifery students have reported to be highly satisfied with the teaching procedures to which they have been exposed.

Quality and adequacy of teaching materials and resources.

The EEC visited the TEI library which appears to be an adequate resource. The EEC also reviewed textbooks and teaching materials used in courses and found them to be relevant and appropriate. However, many of the resources and materials are inappropriately medically oriented (as they have been written by medical doctors of the Department) and are out dated due to translation delays. The midwives of the TEIM Department have written, translated and edited several midwifery books (e.g. Skills for midwifery practice, Women’s health and community midwifery). Overall, the students reported that they were very satisfied with the use of the existing electronic literature databases as available and their access to printers that enable them to print learning materials, such as research articles. The TEIM Department members would like to see library resources developed more extensively to advantage students’ learning. TEI midwifery students and TEIM staff have experienced some problems with the distribution of key textbooks. Students reported that services such as the library and computer/clinical labs should be more accessible and flexible.

Linking of research with teaching

The TEIM Department applies research findings in midwifery and maternity care to teaching and learning and affirms the importance of this link to effective care in midwifery and working with women. TEIM students show the effectiveness of this in their dissertations which indicate a good knowledge and understanding of research.

Mobility of academic staff and students

The TEIM Department values and takes part in European exchange programmes such as ERASMUS and Leonardo, which provide important opportunities for both staff and midwifery student exchanges. However, due to lack of adequate funding by TEIM Department these opportunities are not exploited well despite their value. A few TEIM students reported rewarding exchange visits to Finland and Belgium and they plan an exchange to France.

Academic staff can apply for funding to attend national and international conferences once a year although this is not guaranteed and is dependent upon the TEI budget. TEIM midwives travel to give presentations about their research work at international conferences, often at their own expense.

Evaluation by the students of (a) the teaching and (b) the course content and study
material/resources?

The TEIM academic staff is evaluated by the TEI midwifery students every 6 months through the use of a structured questionnaire developed by the TEI. The evaluation is distributed during the 8th and 10th week of each module/course. The questionnaires from each course are coded by the person in charge who enters the data in a statistical analysis program which is analyzed by a member of the academic staff. Midwifery students at TEIM are highly satisfied with the efforts made by the TEI midwives to achieve the aims and objectives of the curriculum. They are also concerned that they are not always able to apply knowledge learned and evidence based, woman centred midwifery care in the medicalized environments of their clinical placements. TEI Midwifery students understand that there are externally imposed limitations and are eager to acquire midwifery-specific knowledge, skills and attitudes in spite of the medicalisation of the curriculum.

RESULTS

- Efficacy of teaching

The TEIM midwives and clinical midwifery mentors are very effective teachers of midwifery in theory and practice. This was documented statistically in the IER-based evaluative surveys of courses and staff, and was emphatically confirmed by the TEI midwifery students. The goals and objectives of the curriculum are met both through carefully constructed formal and informal curricula.

The final curriculum is described in section 3.1 of the IER. The informal curriculum includes the invaluable ongoing yet voluntary contribution of a community/home birth midwife. She contributes to the midwifery students’ knowledge and understanding of normal birth which is an extremely important asset to their learning. This innovative educational strategy, integrates theory and practice and contributes to the midwifery students’ ability to promote, protect and support normal birth; an ability which is fundamental to the development of a professional midwife. The TEIM midwives are also to be commended for including under-privileged women in this innovation through the provision of education and antenatal care within a specific educational strategy involving the midwifery students. However, due to the excessive and inappropriate influence of the medical profession on the curriculum, these vital strategies are not formally included, thus inhibiting the efficacy of teaching.

- Discrepancies in the success/failure percentages between courses and how they are justified

Some discrepancies in the success/failure percentages between courses were evident in the IER. Students appear to perform better in midwifery courses compared to non-midwifery ones.
Careful efforts have been undertaken to document student progress. If TEI midwifery students fail the exams, they are allowed to repeat courses indefinitely. Perhaps they should be asked to leave if they demonstrate that they are not suitable for the program and maximum expectations could be determined for final completion of courses.

- Differences between students and the time to graduation and final degree grades

Completion time should be a minimum of 4 years and this is held to overall as indicated in the IER. In the IER it is stated that the number of TEI midwifery students graduating after excessive years of studies is decreasing due to the efforts of the TEIM which is admirable.

- Whether the TEIM understands the reasons of such positive and negative results

The TEIM have discussed their concerns regarding legislation constraints and curriculum influences and the effects on student progress and completion. They have worked hard to improve student success and effective completion.

**IMPROVEMENT**

- Does the Department propose methods and ways for improvement?

The IER indicates the TEIM midwives’ commitment to ongoing improvement in teaching and learning quality, as stated in Section 10. The development of an educational model on which to base the curriculum, the program delivery and teaching and learning approaches would enhance cohesion, consistency and quality.

The TEIM acknowledges the need to progress an electronic learning and a learning support platform. This will provide students with greater flexibility in their learning and could improve student participation in theory learning.

- What initiatives does it take in this direction?

The program should be based on an evidence based educational model – one that resonates with a midwifery theoretical framework of woman centered care and uses a primary health approach for midwifery practice, such as experiential or problem based learning, which has been identified as being used within some courses.

As stated earlier, there is no electronic/digital platform for e-learning and study skills support. Students need to 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. They could also achieve interactive group learning experiences and develop their individual theory learning via online
teaching strategies and resources.

## C. Research

*For each particular matter, please distinguish between under- and post-graduate level, if necessary.*

### APPROACH

- What is the Department’s policy and main objective in research?

The TEIM Department’s policy and main objectives for research seem to be highly individualized as is evidenced by a high percentage of non-midwifery based research work conducted by the medical doctors on staff, who comprise 3 of 5 appointments above lecturer level; accordingly the majority of research is not directed specifically towards midwifery. However, most of the research conducted by the midwives working in the Department covers broader issues related to Midwifery (e.g. prenatal screening, breastfeeding, counselling, health promotion and sexual health).

The lack of research funds for the midwives of the TEIM Department as well as the collaboration with other Universities and disciplines that have access to research funds may be a barrier for midwifery focused and woman centered research.

- Has the Department set internal standards for assessing research?

The Dissertation Handbook of the TEIM Department provides clear standards and guidelines for midwifery students’ research processes. Dissertation standards are high and are beneficial for enhancing and evaluating research abilities in midwifery students. The EEC however did not scrutinise any internal standards, described through collective agreement/action for assessing either the quality of research projects or their alignment with midwifery.

### IMPLEMENTATION

- How does the Department promote and support research?
- Quality and adequacy of research infrastructure and support.
- Scientific publications.
- Research projects.
- Research collaborations.

The TEIM Department promotes and supports research among TEI midwifery students through offering research methodology classes throughout the curriculum. TEI midwifery students are also required to complete a dissertation during their final semester.

Despite TEI mandates, there is no protected time for the TEIM Department for research.
activities. This is compounded by inadequate funding and an inappropriately heavy workload including teaching, clinical supervision, dissertation supervision, administrative work, translation and so on. However, the teaching requirements for the TEIM medical doctors are low and therefore they are indirectly supported in their research. The midwife professor and midwife lecturers undertake demanding teaching responsibilities which prevent them from being research-active despite their desire and requirement to do so. The TEIM Department reports in the IER that the quality and adequacy of research infrastructure, facilities and support are inadequate and inappropriate and the do not meet high specifications.

Academic staff can apply for funding to attend national and international conferences once a year although this is not guaranteed depending on the TEI budget. TEIM midwives travel to give presentations about their research work at international conferences often at their own expense. An increase in this allowance would encourage more research activity.

It is important to note, though, that there are currently 5 midwives PhD candidates in the TEIM. The TEIM midwives research to the best of their ability in this medicalized milieu with good inclinations towards midwifery. The TEIM does encourage research among its faculty members as is evident in the significant numbers of recent books/monographs (19), publications in peer-reviewed journals (100) and presentations at scientific conferences (128) among other research endeavours.

RESULTS

- How successfully were the Department’s research objectives implemented?
- Scientific publications.
- Research projects.
- Research collaborations.
- Efficacy of research work. Applied results. Patents etc.
- Is the Department’s research acknowledged and visible outside the Department? Rewards and awards.

According to existent requirements, the TEIM Department’s research objectives are successfully achieved. The research of the TEIM Department is both acknowledged and made visible outside the TEIM Department through scientific publications, conference presentations, and professional meetings and through the departmental website (albeit not in English). As has been noted above, however, the scope of research projects undertaken by professors should be midwifery focused; research should be more focused on normality during the perinatal period, on woman-centered care, community-based maternity health and outcomes.

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

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

The improvements in research proposed by the TEIM Department and corresponding initiatives are described in Sector 10.2 of the IER and are well structured.

**D. All Other Services**

*For each particular matter, please distinguish between under- and post-graduate level, if necessary.*

**APPROACH**

- How does the Department view the various services provided to the members of the academic community (teaching staff, students).
- Does the Department have a policy to simplify administrative procedures? Are most procedures processed electronically?
- Does the Department have a policy to increase student presence on Campus?

The TEIM Department uses the available institutional resources in an effective way. According to the IER, the EEC’s observations and the comments of the TEI midwifery students and the academic staff not all the facilities of TEIM Department (e.g. offices, classrooms, and laboratories, meeting rooms) are adequate. The TEIM Department is very concerned about the lack of space for students, staff and infrastructure, and the EEC shares this concern. The permanent academic staff as well as the instructors lack of private office space and share the same space with many other persons (for example 11 midwifery academics in one small office). Furthermore, the TEIM Department does not have a reading/quiet study room and a counselling space for the TEI midwifery students or other adequate laboratory facilities. The EEC acknowledges the urgent need for office space for staff and counselling space for TEI midwifery students.

Administrative procedures have been simplified recently and now include electronic processing but there is a necessary place for continuous quality improvement.

Attendance during clinical placements by TEI midwifery students is exemplary. The staff of the TEIM Department recognizes that low midwifery student attendance at theory classes is due to several reasons (as discussed previously regarding legislation). Because a written policy to require compulsory attendance at theoretical classes is restricted by law both the TEIM Department and the EEC are highly concerned about TEI midwifery student attendance in theory classes.

**IMPLEMENTATION**

- Organization and infrastructure of the Department’s administration (e.g. secretariat of the Department)
• Form and function of academic services and infrastructure for students (e.g. library, PCs and free internet access, student counseling, athletic-cultural activity etc.).

The Secretariat of the TEIM Department is staffed by 2 persons who have to provide administrative services to 15 faculty members, 85 instructors and 750 students (the entire TEIM Department). The Secretariat cannot cover the needs of all the staff members of the TEIM Department let alone all other legitimate demands for their services. As a result many of the secretariat tasks are performed by the academic staff of the TEIM Department leading to wasting time and resources and creating an unnecessary burden for them.

The TEIM Department believes that the infrastructure is limited. For example the EEC considers that the library facilities are adequately established but there is a need to enrich the catalogue with midwifery journals, books and other educational electronic material. Student access to the library, PCs and free internet access is considered to be satisfactory with improvements necessary.

The EEC did not visit any athletic facilities of the TEI or the counseling services but found the cafeteria to be adequate.

RESULTS

• Are administrative and other services adequate and functional?
• How does the Department view the particular results?

Based on both the faculty’s and TEI midwifery students’ comments the administrative and other services are not adequate or functional. Several specific examples of the TEIM Department views on this issue have been provided above.

IMPROVEMENTS

• Has the Department identified ways and methods to improve the services provided?
• Initiatives undertaken in this direction.

The work of the administrative staff is vital for the effective functioning of the TEIM Department. Despite the efforts of the academic staff and support from the existing administrative staff, there is an urgent need for increasing the number of administrative staff due to the recent loss of an administrative staff member, and importantly for personal administrative support for the midwife professor.

Collaboration with social, cultural and production organizations

Please, comment on quality, originality and significance of the Department’s initiatives.
Overall the EEC is impressed with the quality, originality and significance of the TEIM Department’s initiatives. The passion, courage, intelligence and commitment of the midwives of the Department are inspiring. Among the most significant of the TEIM Department’s initiatives is its commitment to promoting natural (φυσιολογικός τοκετός), non-interventional childbirth (μη παρεμβατικές μέθοδοι τοκετού) and evidence based perinatal care. The IER indicates that the TEIM Department has effectively built the social image of the modern midwife through the ongoing collaboration with many social structures of the Greek state (e.g. municipalities, hospitals, schools, and the medical centre of TEI). In particular, the inclusion of community midwives who work with TEI midwifery students and under-privileged women is highly commendable. Relationships with hospitals in particular are excellent as personally experienced by the EEC. TEIM students are encouraged to organize and participate in several health education activities (lectures, preparation of leaflets etc.) for the general public and schools. This promotes health and well-being of the general community and strengthens the social and professional role of the midwife.

### E. Strategic Planning, Perspectives for Improvement and Dealing with Potential Inhibiting Factors

*For each particular matter, please distinguish between under- and post-graduate levels, if necessary.*

- Please, comment on the Department’s Potential inhibiting factors at State, Institutional and Departmental level and Proposals on ways to overcome the above inhibiting factors.
- Short-, medium- and long-term goals.
- Plan and actions for improvement by the Department/Academic Unit
- Long-term actions proposed by the Department.

Strategic Planning was well stated in the IER. It included an elaborate account of inhibiting and potentially inhibiting factors at all levels (State, Institutional and Departmental) and ways of dealing with them. Perspectives for improvement were also presented very passionately by the TEIM faculty members and the TEI Midwifery students who participated in the site visit during the evaluation period.

The EEC considers the potential inhibiting factors to include:

**At State level**

1. The location of the Department of Midwifery in the TEI and not in the University.
2. The absence of autonomous postgraduate and doctoral programmes in Midwifery in the country of Greece.
3. The impact of confounding legislature on efficient allocation of educational funding (for example, no realistic time limit for the completion of a degree, no limit on the number of
times a student can repeat a course).

4. Lack of collaborative policy and documentation regarding women’s health as well as maternal and neonatal care and outcomes in the country of Greece.

5. The lack of adequate research funding within the TEIM Department.

At Institutional level

1. Low numbers of permanent faculty members who are midwives.
2. Disproportionate numbers of medical doctors (permanent and visiting) dominating the TEIM Department at all levels including departmental policies, curriculum development, theory teaching and learning and research activities.
3. Allocation of inadequate facilities and premises (lecture rooms and faculty offices etc.).
4. Lack of research infrastructure, support and funding.
5. Unreasonably heavy work load of TEIM faculty members who are midwives, increasing potential for burnout.
6. Lack of formalized relationship between the TEIM Department and the national health care system.
7. Administrative and secretarial tasks carried out by the TEIM faculty members due to the insufficient assignment of technical and assistant staff with TEIM Department.
8. Limited international educational exchange opportunities for TEI faculty and midwifery students.

Departmental level:

1. TEIM Department is not led by a midwife.
2. Lack of formalized conceptual midwifery framework on which to anchor the curriculum, teaching and research.
3. Lack of structured Research Plan, which exclusively addresses midwifery issues and not obstetrical or other issues.
5. Increased bureaucracy imposed by government education and health care system authorities.

Proposals on ways to overcome the above inhibiting factors are outlined in the final chapter concluding with recommendations of the EEC.

Postgraduate studies

The TEIM Department offers a master’s program in collaboration with The Faculty of Medicine of the National Kapodistrian University of Athens, focusing on research in female reproduction. The research policies and objectives, as described by IER, respond to those of the TEIM Department. This program, which emphasizes a medicalized model, is designed to
be a rigorous research degree and easily meets the requirements of a Master's level award. The master's degree was designed to be collaborative; as noted above, students are drawn from the disciplines of TEI midwifery, medicine and biology. The quality and adequacy of the research infrastructure and support for the master's degree is superior to that of the undergraduate degree. Under the guidance of a director who has an extensive personal record of research and publications, academic staff linked to the master's degree program is well suited and qualified to teach, and supervise research projects regarding the promotion of reproductive health.

The EEC's discussions with the postgraduate students clearly showed that they are very satisfied with the program. Yet, students reported a desire for increased opportunities to collaborate with each other in an interdisciplinary manner and with students and professors from other Universities in Greece and from other countries.

Approximately 20-30 posts are offered each year and over 100 research master’s dissertations have been completed during the first years. The research conducted from the master students is disseminated through various channels which range from faculty-wide announcements to the hosting of an international conference in which TEIM midwives take part. Many of the completed projects have been submitted or accepted for publication in peer-reviewed journals.

According to the IER, the research objectives of the master’s program entitled “Research in Female Reproduction” are successfully implemented. The EEC is impressed. It considers that this innovative interdisciplinary postgraduate program is very important for the development of doctoral research in relation to reproductive health and indirectly midwifery. However, EEC notes, as with the undergraduate midwifery curriculum earlier, that midwifery research projects should be more firmly based on normality and wellness during the perinatal period and arise from the theoretical frameworks described by the International Confederation of Midwives.

While the breadth and scope of the completed midwifery student research projects is impressive and does include clinical research, laboratory research and questionnaire-based research, qualitative research methodologies and triangulation could and should be more explicitly incorporated into the program. Improvements also refer to the incorporation of social and cultural issues e.g. culture and gender issues that impact on reproductive health and development and quality management of primary health care for women.

F. Final Conclusions and recommendations of the EEC
For each particular matter, please distinguish between under- and post-graduate level, if necessary.

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 excellent calibre and motivation of the TEIM midwives’ performance and commitment across teaching and learning, research conduct and output and professional development, and equally with the passionate and dedicated TEI midwifery students they are educating. To this date the TEIM has performed extremely well indicating a level of scholarly endeavour characteristic of University level conduct and well above TEI standards. The TEIM has a clear and determined focus on achieving excellent TEI midwifery graduates for the benefit of women and their families in Greece.

In particular, in the IER and during the site visit the EEC, found the following to be admirable:

1. The midwives who provide inspiring education for TEI midwifery students who are clearly focused on achieving the very best outcomes for women in maternity care in Greece;
2. The competence of the TEI midwifery students and their passion for women and midwifery;
3. The exceptional TEI midwifery staff/TEI midwifery student relationships based on trust, respect, mutuality and integrity;
4. The atmosphere of support and nurturance, cooperation, loyalty, enthusiasm and determination in the spirit of woman centeredness, despite the challenging setting and circumstances;
5. The determination of TEI midwife faculty to teach woman-centered care (καθήμενη με έμφαση στη γυναικα), according to the dictates of the International Confederation of Midwives and the European Standards of 2005 and despite the setting and circumstances which inappropriately stipulate the instruction of a medicalized approach.
6. The commendable relationships that have been established with clinical and community health services who are highly praiseworthy of the TEI midwifery students and very supportive of their education with the provision of an expansive number of midwifery mentors for the students;
7. Attentive organisation, documentation and evaluation processes for TEI midwifery students’ practical learning within their clinical placements, enhanced by an outstanding staff/student ratio of 1:5;
8. The commitment of TEIM midwives to promoting effective professional woman centred care based on normality and wellness, research (including striving to achieve their own PhDs) and evidence based midwifery practice, which needs to be made strongly visible in the curriculum;
9. The significant opportunity for TEI midwifery students to learn from excellent home
birth midwives, to experience home births where possible, and, in all cases, to visit women in their homes as part of a vital strategy to learn about continuity of midwifery care, and promote normal birth, and health and wellness for women and their families in the community and translate this back to their on-going encounters with women in hospital settings;

10. The existence of a unique antenatal education room in the TEIM building which enables TEI midwifery students to experience antenatal education classes with women, provided by an exemplary community midwife; the women are immigrants/under-privileged and would otherwise not have any access to such important information and learning.

11. The innovation and creativity of the TEIM Department in developing a multidisciplinary Master of Science program in collaboration with the School of Medicine of the National Kapodistrian University of Athens focusing on research in female reproduction which enables midwives to advance to postgraduate studies and acquire research knowledge and skills otherwise not possible.

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

1. Being situated in a TEI instead of a University, despite its scholarly efficacy, as this prevents any education, research, leadership and career advancement for midwives and the midwifery profession in Greece;

2. The Head of Department not being a midwife, despite international expectations requiring this, which compromises the specificity, acumen and control of the TEIM as a midwifery discipline;

3. A highly medicalized milieu surrounding the curriculum, course content delivery, research, department management and decision-making;

4. The lack of requirement for compulsory attendance of students for all theory and practice components in the midwifery degree which poses serious risks regarding safety, knowledge, attitudes, confidence and responsibility;

5. The lack of an e-Learning capacity and electronic platform for supporting flexible, diverse and necessary learning strategies and resources;

6. Facilities that are inadequate, potentially unsafe and undesirable and not conducive to quality teaching and learning, in particular for students studying midwifery and working with women;

7. Budget impositions relating to staffing, resources, and teaching and learning, for example, essential aspects of midwifery education being provided by a community midwife who is not paid.

8. The Master of Science program’s lack of focus on qualitative research methodologies, quality management and, social and cultural issues that impact on women and their reproduction and health in Greece.

The TEIM Department’s readiness and capability to change/improve is laudable and demonstrates their resilience and veracity. The IER has been an informative and detailed
exposé of their functioning, quality improvement and aspirations. The TEIM is working extremely hard to progress the discipline of midwifery and influence maternity care provision for the promotion of normal birth and doing so with admirable tenacity under duress.

The EEC found a high level of consistency between the IER, the TEIM midwives’ discussions, the various visits and other TEI Department meetings, as well as the meeting with the TEI midwifery students, over the time of the evaluation period.

We thank the TEIM for their contribution to this evaluation and wish them well in their future development as a midwifery discipline.

Accordingly, 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 specific Department of midwifery, emerging from the TEIM Department, is established in the University sector, as a matter of necessity and urgency.**

   1.1 This has been clearly evident in this report in terms of the undesirable influences of medicalisation with disproportionate numbers of medical doctors dominating at all levels. The TEIM Department should be able to acquire University status and privilege in line with international standards. This is essential because midwifery does not currently exist as a University discipline within Greece. This will enable TEIM midwives to gain the independence to manage, control, direct and engage in, midwifery education and research and scholarly development, postgraduate midwifery studies and doctoral/postdoctoral midwifery research. This will abolish the current requirement for midwives to progress their postgraduate studies through a non-midwifery discipline. The significant benefits of this are for women and their families in Greece in improving women’s health, preconception and perinatal morbidity and mortality. Importantly, this will also advance the reputation and standing of midwives and the midwifery profession in Greece and internationally. A timely transition plan should be developed as soon as possible to expedite this process.

2. **Leadership of the midwifery discipline, initially the TEIM, is to be by a Professor of Midwifery who is a qualified midwife, only.**

   2.1 This will meet international expectations for midwifery education (2009 WHO Global standards for the initial education of professional nurses and midwives) and ensure appropriate professional midwifery leadership and direction for the discipline of midwifery.

3. **The inadequate facilities are addressed as a matter of urgency.**
3.1 Midwifery students and TEIM staff cannot be expected to function safely and effectively in the current setting. Moving the midwifery discipline to the University sector will mean the need to modify/replace/renew/update existing facilities to meet current needs.

4. **Confounding education legislation that impinges on students’ attendance and assessment is reviewed.**

4.1 The education of TEI midwifery students to become competent, evidence based and woman centred, responsible, accountable professional midwives cannot be left to random encounters with theory learning and no aspect of the Bachelor of Midwifery in theory or practice should be non-compulsory.

5. **National maternity care policy and perinatal data gathering is improved to enable midwifery education to respond proactively and implement improvements in women’s health and maternity care to subsequently improve perinatal mortality and morbidity.**

5.1 TEI midwifery students must be educated to meet the maternity population needs of Greece, in line with the 2009 WHO Global standards for the initial education of professional nurses and midwives (See Point 8 below).

6. **Budget constraints on staffing are addressed.**

6.1 TEI Midwifery academic staff and student teaching ratios must be set at safe quality teaching provision levels as a minimum 1:20 and midwifery academics, preferably with a PhD, must be employed to achieve this.

6.2 The number of administrative staff must be increased by at least two more appropriately qualified persons and one person exclusively for the administrative/academic support of the Midwife Head of the TEIM Department.

6.3 The Administration of TEI must support the Secretariat staff in personal career development so that they can fulfill their mission to provide high quality services to the students and the academic staff as the IER indicates.

6.4 The Secretariat staff needs education and skills related to the improvement of the communication with the staff and the students and to the development of a customer oriented culture that ensures customer satisfaction with the quality of services provided.

6.5 There is need to conduct a survey in order to evaluate the quality of services provided by the Secretariat. The results could be useful for the improvement of these services.

7. **Curriculum revisions are made to ensure the following are addressed.**

7.1 Qualitative research methodologies must be included within all research courses;
7.2 The creation of courses which address the following:
   7.2.1 Mental health and wellbeing including sexual abuse, domestic violence and perinatal anxiety and depression
   7.2.2 Women and gender studies,
   7.2.3 Social and cultural determinants of health
7.3 International exchanges need to be encouraged and funded.
7.4 Graduation outcomes indicators must be developed and included in the curriculum to specify the end result that TEI midwifery students and staff must aspire to.
7.5 It would be preferable for all 40 of the normal birth experiences to be detailed by the midwifery students rather than just the first 10 so that students can identify and analyse their developing confidence and competence in normal birth over time, as well as learn specifically from each one of these important experiences with women. Students should also gain and document feedback from women from their birth experiences over the duration of the program.

8. A stronger conceptual midwifery framework must anchor the midwifery curriculum, midwifery teaching and learning, and midwifery research to ensure that woman centred care, normal birth and women’s health are overtly promoted, protected and supported, as well as achieving internal and external consistency and reliability in theory and practice.
8.1 The curriculum framework should be based on the 2009 WHO Global Standards for the Initial Education of Professional Nurses and Midwives, as a minimum. These standards, based on the International Definition of the Midwife (2005), have been developed to establish educational criteria and assure outcomes that:
   a) are based on evidence and competency;
   b) promote the progressive nature of education and lifelong learning; and
   c) ensure the employment of practitioners who are competent and who, by providing quality care, promote positive health outcomes in the populations they serve.
8.2 The engagement of a Visiting Midwife Scholar could provide the TEIM midwives with an important professional development opportunity as well as enable them to work on curriculum revisions and develop the educational model and midwifery framework.

9. The program is based on a clear and specific educational model based on the midwifery conceptual framework of woman centered care and using a primary health approach for midwifery education and practice.
9.1 For example, this could be Experiential learning or Problem Based Learning (which has been identified as being used within some courses), using Positive Education Principles.
10. An electronic/digital platform for learning and study skills support is developed.

10.1 Students need to have reliable ongoing 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. They need to achieve flexible and interactive group learning experiences and develop their individual theory learning via online teaching strategies and resources.

11. The TEIM Department establishes an Internal Human Research Ethics Committee charged with the oversight and decision-making of all research in the TEIM Department.

11.1 This needs to be achieved expediently to ensure women are protected at all times and the TEIM determines, is accountable for and upholds appropriate standards for all research within its ambit.
The Members of the Committee

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<th>Name and Surname</th>
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<tr>
<td>1. Dr Vasilios Raftopoulos (Coordinator)</td>
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<td>2. Dr Martha Apostolidou</td>
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<td>3. Dr Ólöf Ásta Ólafsdóttir</td>
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