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Zagreb, 24 April 2009

TO THE NATIONAL COUNCIL FOR HIGHER EDUCATION  
ZAGREB

**FINAL REPORT OF THE EXPERT COMMITTEE ON THE EVALUATION OF THE  
FACULTY OF MEDICINE IN RIJEKA**

Pursuant to item 1 and 2 of paragraph 6 of Article 7, and Articles 16-18 of the Act on Scientific Activity and Higher Education (Official Gazette No. 123/03, 105/04, 174/04 and 46/07), and in accordance with the Regulation on the Measures and Criteria for Evaluating the Quality and Efficiency of Institutions and Study Programmes (Official Gazette No. 39/05), The National Council for Higher Education (NCHE) has on its 53<sup>rd</sup> meeting, held on 7 May 2008, reached a Decision on the appointment of expert committee whose task was to evaluate quality and efficiency of the School of Medicine, University of Rijeka. The Committee included:

1. Amir Hamzić, PhD, Faculty of Science, University of Zagreb, president;
2. Academician Ivica Kostović, School of Medicine, University of Zagreb;
3. Academician Pavao Rudan, Institute for Anthropological Research, Zagreb;
4. Hans-Günther Sonntag, PhD, Heidelberg University;
5. Marko Šarić, student of the Faculty of Medicine in Osijek.

Following the evaluation procedure, the Committee has looked into the Self-evaluation and Tables attached to it, submitted by the School of Medicine in Rijeka. On 2 and 3 March 2009, the Committee carried out its evaluation which involved working meetings with the members of the faculty management and members of related faculty committees, heads and

representatives of certain organizational units, professors, research project managers and other employees as well as the faculty students. In this way the Committee was given a direct insight into faculty activities and working conditions.

The Committee points out that the first versions of Self-evaluation and the Tables attached to it (submitted by the former Management of the School of Medicine) were not properly filled out. Such documentation was considered inadequate for the purpose of presenting the School of Medicine to public. Therefore the new Management was asked to carry out an overall revision of the documentation. The new, improved documentation was prepared within the given deadline which implies that the expressed criticism was taken seriously.

On the basis of conducted checks, talks and additional consultations, the Committee submits the following report.

## **1. Mission accomplishment, regulatory documentation and functionality of the institution**

The School of Medicine in Rijeka was founded in 1955, initially only offering final years of study. First postgraduate study programme was opened in 1961. First generation of students at the Department of Dentistry was enrolled in 1973. Today the School of Medicine consists of 41 chairs and 11 departments. Teaching is also done at 8 teaching bases in Rijeka and its surroundings. As is the case with other faculties of medicine, lack of clear and binding regulations on mutual relations between the faculty and clinics (teaching bases) limits possibilities for resolving many issues related to better integration of pre-clinical and clinical education and research.

The School of Medicine in Rijeka has 15 study programmes (with valid licenses) which educate students in majority of health-related occupations. Due to such scope of study programmes, the faculty is in fact a small university of medicine. Declared mission of the faculty was “clearly recognisable and competitive higher education institution with the concept of development based primarily on learning outcomes, dynamic inter- and multi-disciplinary research centre characterised with scientific projects and collaborative centres of excellence, a leader of biomedical thinking and promoter of academic community in all segments of the society“. Committee agrees that the faculty fulfils many conditions for implementation of its ambitiously defined mission and a wide scale of teaching activity, but emphasizes that the basic mission – quality classic education of doctors of medicine, dentists and nurses – must not be neglected.

Faculty activity is defined with a series of documents and regulations on the level of institution and university.

The School of Medicine in Rijeka has a significant professional activity and offers services ranging from the field of court medicine, dentistry, biology, chemistry, pathology to physiology. These activities also represent a very significant source of Faculty's own income.

Suggestions:

1. The Management of the School of Medicine in Rijeka is encouraged to collaborate with other faculties of medicine in Croatia on the issue of introducing clear and binding legislative provisions which would regulate mutual relations between faculties and teaching bases (belonging to the jurisdiction of the Ministry of Health and Social Welfare) in order to achieve better efficiency and true "organizational unity" of the mentioned institutions.
2. By abolishing doctors' internship and leaving this segment of education to faculties of medicine, the Ministry of Health and Social Welfare could save considerable amount of funds. The School of Medicine in Rijeka is encouraged to collaborate with other faculties of medicine in Croatia so as to win some of these funds in order to improve the quality of educating doctors in clinical skills (part of these funds could, for instance, be used for equipping a vast number of clinical skills practicum classrooms.)

## 2. Study programmes, organisation of study and learning outcomes

Regular graduate study of medicine in Rijeka exists from the academic year of 1957/58, dentistry was established in 1973/74, and the study for sanitary engineering was introduced in 1990/91. These study programmes were updated and adapted to Bologna process in 1995, and a new study programme - *Organisation, Planning and Management in Healthcare* – was introduced as well.

Professional study programmes at the School of Medicine in Rijeka are present from 1978: study programme for senior nurses/technicians (since 1978/79), study for engineers of medical radiology (since 1985/86), study for senior physiotherapists (1986/87) and study for medical and laboratory engineers (1987/88).

In 1999 these study programmes were transferred to newly established Department of Polytechnic in Rijeka and were subsequently returned under the School of Medicine a year later.

The School of Medicine today carries out a total of 15 study programmes, all of them completely re-established in line with the Bologna process in 2005.

- (a) Four university study programmes: integrated undergraduate and graduate study programmes *Medicine* (6+0) and *Dentistry* (5+0) and undergraduate and graduate study programmes *Sanitary Engineering* (3+2) and *Organization, Planning and Management in Healthcare* (OPMH) (3+2);
- (b) five professional study programmes (3+0) *Nursing*, *Physiotherapy*, *Medical Laboratory Diagnostics*, *Radiology* and *Midwifery*;
- (c) dislocated professional study (3+0) *Nursing* (in Karlovac).
- (d) four postgraduate professional studies: *Internal Medicine*, *Family Medicine*, *Biomedicine of Development Age* (Paediatrics) and *Healthcare Management*;
- (e) doctoral study: *Biomedicine*.

Carrying out such a large number of study programmes was one of the main issues during the visit of the Committee (however, the time given was not enough for in-depth analysis). The faculty management is aware of the scope of teaching workload, and stated in the Self-evaluation that it had to employ a large number of part-time employees. Committee was presented with material which was meant to confirm that the necessary and planned

teaching is carried out appropriately. The intention of the Committee was not formal check of teaching workload – we tried to point out that the purpose of university activity is lost with such a huge workload, since teaching component should be supplemented with the equally important research (scientific) activities. Our opinion is that the professors at the School of Medicine in Rijeka are definitely overloaded with teaching. For some of them that workload will increase even further with new study programmes, regardless of the fact that formally such studies are carried out by the university department, and not the School of Medicine.

Committee emphasizes that there is no problem with justification of all study programmes in medicine and dentistry at the School of Medicine in Rijeka. Long-time tradition of higher education and excellent teaching and scientific activity of professors and the rest of the staff resulted in quality graduates of these studies. Conditions for enrolment of students are well defined and the selection process is in line with other similar faculties in Croatia. Enrolment quotas are adequate for quality education of doctors of medicine and dentists and haven't been changed in the past several years. Still, analyses of the need for medical doctors in Croatia show that we should increase enrolment quotas in the near future. At the same time there is a lack of interest in the study of medicine. As other faculties, the School of Medicine in Rijeka has to increase its promotion in order to make the study and medical profession more popular and attractive for current and future students.

Unfortunately, Committee may not find equally good arguments and supportive words for some other study programmes.

First generation of students was enrolled at the undergraduate study programme /// in 2005/06. Small enrolment quota (30 students) was adapted to needs of the market, but (according to the viewpoint in the Self-evaluation) also to the conditions at the faculty (lack of space, equipment and adequate teaching staff). Therefore it was impossible to organize lectures for a large number of students (even now a part of practical teaching is done in Zagreb). Even though the quota was so small, it was only half-filled in all of the first three Bologna generations (majority of them were students of specialist secondary schools). Study programme is interdisciplinary and associate professors (from universities in Rijeka and Zagreb and Ruđer Bošković Institute) hold approx. 40% of lectures. A small number of enrolled students, interdisciplinary character of the study programme, significant number of part-time employees and difficulties with space and equipment put carrying out of this study at the School of Medicine under question.

In the academic year 2005/06 a new undergraduate study programme called *Organisation, Planning and Management in Healthcare* (OPMH) was established. The study programme was planned to educate for the functions of management or active participation in part of management structure on the basis of knowledge in medicine, economy, law, IT and psychology. Interdisciplinary study carried out by professors from several faculties of the University of Rijeka has 60% participation of the School of Medicine. Graduate students still haven't entered the labour market and so far we cannot judge to what extent the goals set during the establishment of the programme are met. However, even without that information, Committee thinks that this study programme does not fit into teaching activities of the School of Medicine and that a more adequate holder would be the University of Rijeka.

According to the information stated in the Tables, professional study programmes form a significant part of teaching activity because they entail over 60% hours of all lectures and seminars at the faculty. At the same time, 57% of teaching is carried out by part-time

employees. Return of these programmes to Medical faculty from the Department of Polytechnic was explained by the fact that the professors used to hold majority of teaching at that time, which is obviously not the case now.

Students' greatest interest lies in study programmes *Nursing* and *Physiotherapy*. Of course, the Committee does not want and cannot have various criteria compared to some other faculties of medicine in Croatia so the issue of justification of the *Nursing* study programme at the School of Medicine in Rijeka should not be discussed exclusively (although almost as much as 75% of all teaching hours is carried out by part-time employees!). Committee emphasizes that the study of *Nursing* should be organised in line with the changes of that profession during the last ten years: from subservient position nurses today became staff with a high level of responsibility and obligations which are realised in close cooperation and partnerships with doctors. Therefore their education requires solid elements of knowledge and skills, and a professional three-year study should train them for independent work.

### **3. Lecturing (lecturing methods and assessment) and professors**

Block teaching is not equally applied to all study programmes: in medical subjects teaching in first three years is organised in semesters and in the remaining three years teaching is done in blocks (for 2-3 clinical subjects); in dentistry, OPMH and some professional study programmes block teaching also entails first years and its introduction enabled better success and pass rate of students.

The faculty set a minimum pass threshold (60 ECTS) for the first two Bologna generations. That condition was on average met by 65% of students of medicine, 75% of students of dentistry, approx. 65% of sanitary engineering students and over 90% of OPMH students. Regarding professional studies, highest pass rate is at the study programmes in nursing and medical radiology (on average approx. 85%). Average at physiotherapy is 45% while in medical and laboratory diagnostics pass rate increased from initial 30% to over 90% in second generation!

Exams are in classic format: it is not defined to what extents do "other assessment methods" relate to OSCE, simulations, virtual patients, etc. Methods of passing exam at professional study programmes were not mentioned at all in documentation.

In their discussion students didn't have remarks or complaints about professors, teaching process or exams. Members of the Committee toured some parts of the teaching and their impression and opinions were very positive, from pre-clinical teaching in the first year of OPMH to clinical bedside teaching in neurology, urology and clinical pharmacy. At the same time, the Committee was greatly pleased with conditions and quality of teaching at the Department of Dentistry.

Although faculty contains several small cabinets of skill (for example, anaesthesiology), the Committee believes that a central, well-equipped cabinet of skills with, for instance, computer practice dolls would be very useful because it represents a very important teaching method. Such location should, above all, be available to students as many hours as possible.

Discussing the matters with junior researchers, it has been found that in the postgraduate and doctoral studies certain problems exist related to regular lectures of optional

courses (for instance, waiting for an adequate number of students to enrol before actually holding the classes), which significantly influences the duration of study altogether.

A total number of 375 full professors (holding scientific-educational, teaching or assistant position) take part in the carrying out of all the classes at the School of Medicine in Rijeka, 157 of which are cumulatively employed. On top of that, professors holding classes at clinical departments have to bear a workload significantly above the average. As is the case with other faculties of medicine, junior researchers are often overburdened with teaching activities as well.

Since it carries out a greater number of interdisciplinary studies, and because of the nature of the professional study programmes, the faculty also engaged a considerable number of subcontractors (278), 121 of which holding scientific-educational, teaching or assistant positions. Associate professors take over a considerable number of classes at professional studies, holding 35% to even 75% of the overall classes of the particular study.

In the period between 2003 and 2007, 75 doctoral dissertations and 78 master's theses have been defended at the School of Medicine in Rijeka. The faculty states that in the said period there were 69 doctoral dissertation mentors, but it remains unclear why the given number (697) of mentors' papers in foreign journals is far less than the number entered in the CROSB database (currently the only official database serving such purpose). Pursuant to the provisions of the Regulations on University Studies of the University of Rijeka, the Faculty currently has 85 mentors (project managers of the Ministry of Science, Education and Sports projects). Their scientific productivity (a criterion set by The National Council for Higher Education) is not defined as an element of choice, but is subject to subsequent checks.

#### Suggestions:

1. By negotiating with the competent ministries, to try to achieve an equal financial status of young faculty professors of pre-clinical subjects and their fellow workers in the clinic.
2. To set an initiative to provide the professors with some reimbursement of their travel and accommodation expenses in order to encourage their mobility on the national level, and to avoid payment of fees by including the classes held at another institution of higher education in the overall teaching load of each faculty professor.
3. The School of Medicine should update documents relating to the conditions required to become a mentor, taking into account the criteria set by The National Council for Higher Education.

#### **4. Students and studying**

The Committee held a special meeting with students (open call). Unfortunately, the meeting was mostly attended by the students of medicine (accompanied by several students of dentistry, OPMH and some other professional study programmes). Evidently the notice about the meeting (despite the claims of student representatives) was not sufficiently spread among the students.

The profile of the students present failed to provide the Committee with thorough information on all the problems the students are faced with. In addition, the members of the Committee gained an impression that particular student representatives acted in accordance

with a predetermined statement bearing a positive tone. Some specific and often problematic issues were brought forward the next day during lectures and in direct dialogue with the students themselves.

The students present were not fully satisfied with the system of mentorship, which is, according to them, present at the Department of Dentistry, and considerably less at the Department of Medicine (a typical response from a second year medicine student: "Last year we were given a list of mentors. I turned to mentor assigned to me and he told me that he didn't have a clue what to do with me."). In a direct contact with the students of sanitary engineering and OPMH, the Committee did not gain an impression that a system of mentorship existed in those studies (for instance, first year students of OPMH weren't even aware that they could find a list of mentors assigned to them on the Internet!).

The students were also generally not satisfied with the contents of the faculty website (a typical student comment: "You can only imagine what the website looked like before the introduction of the Bologna process"). The Committee also had negative remarks concerning the faculty website; although we do not possess the accurate number (or percentage) of the updated website information and contents relating to lectures and teaching, we are convinced that this number is far less than the one stated in The National Council recommendations. The faculty website should also include more information in English language.

Students expressed their satisfaction with the *Studis* programme that provides them with the updated examination periods and results. The Faculty hasn't yet reached a final decision on the possible future usage of some other information systems (ISVU – Information System for Higher Education Institutions).

Students considered the approach of faculty administration towards them as satisfactory, but emphasized that "the faculty failed to provide all the necessary conditions to ensure a proper relation of administration towards the students". The objective fact (that the Committee itself witnessed) is that the administrative staff in students' office is overburdened considering the current number of students (despite the introduction of the *Studis* programme). From the total four members of the administrative staff, only one person is responsible for the whole study of medicine (that is surely not sufficient). The working conditions also proved to be very dissatisfactory.

Students also criticized university questionnaires and evaluation procedures; the existing university questionnaire surveys were to a great extent assessed as too formal, and students called for faculty questionnaires and public display of the results.

Although the students expressed their satisfaction with the number of computers made available to them, it is indisputable that the well-equipped computer classroom should be made available to students at times when there are no lectures held at that classroom.

A large majority of students takes part in several student initiatives or activities which is very laudable.

The basic requirements set by the students are more study rooms, a skills laboratory (with undergraduate assistants) and a greater scope of literature being available in the library, which (as well as the skills laboratory) should considerably extend its working hours. Here are some students' comments on their current situation: "We are quite used to the present situation and have adapted to it because we have no choice. After all, we are students and we'll manage!"

#### Suggestions:

1. To improve the implementation of the mentorship system (within the scope of Bologna process) to a large extent unknown to students in all fields of study.
2. To organize the classes in the form of sessions with a clear outline of subject contents, classes timetable and examination periods.
3. The Management should put a greater emphasis on students' questionnaires and show the actual changes that resulted in improvement.
4. The faculty should meet the criteria set by The National Council for Higher Education relating to contents of the faculty website (the website should contain at least two thirds of courses in order to establish a form of communication between faculty professors and students, examination and midterms periods and the results of midterms and exams, additional learning material and other notices).

### **5. Research and professional activities**

Research activities at the School of Medicine in Rijeka currently cover 85 research projects. However, these projects do not equally cover pre-clinical and clinical research. The Committee has been informed that the faculty did not carry out an internal evaluation of these projects nor were the projects grouped in larger projects before applying to calls for proposals. The number of researchers assigned to each of the two projects also remains unknown. Taking into account the number of projects and junior researchers, it is evident that young researchers and scientists were not engaged on at least 30 % of the projects, and that only 9 junior researchers currently perform clinical research activities. Distribution of funds to each of the projects shows great disparities since nearly 60 % of projects got only approx. 30% of the overall funds allotted to projects.

In the recent years considerable funds have been invested in the essential research equipment; the members of the Committee have visited some of the research laboratories and agree that the existing conditions in those are in level with the internationally renowned laboratories. Moreover, the faculty has several excellent and internationally renowned scientific research teams, mostly on pre-clinical institutes. Those teams are in charge of the best financed Ministry of Science, Education and Sports projects, are engaged on the largest number of international projects, have the largest number of publications, citations and impact factors of journals in which their work is published. Research activities are not sufficiently and equally spread at the clinical institutes - the faculty should encourage development of research teams in clinics, as well as collaboration of pre-clinical and clinical scientific research and thus improve the overall research productivity. The Faculty lacks a considerable amount of strong research teams so that it could compete with other related institutions in its immediate environment.

Although the average research productivity is still relatively low, there has been a considerable increase in publications per scientist. The Self-evaluation states that one of the reasons for insufficient research activity is that "the scientific staff is overburdened with routine work it has to carry out in clinics, as well as its lecturing responsibilities", which only confirms the Committee's general opinion stated hereunder.

The current Management is aware of these disadvantages and the fact that the faculty lacks a well-defined strategy which would help determine the segments in which to encourage biomedical research in Rijeka. Therefore, it has undertaken certain actions and initiatives and the results are yet to be seen.



The Faculty has recently put considerable efforts in creating an administrative infrastructure which should in future represent a considerable help in conducting research projects.

The staff at the School of Medicine carries out a considerable amount of professional activities which proves to be an important source of faculty's own incomes. However, nearly all professional activities are carried out by only a few institutes (Pathology, Biology and Court Medicine Institutes). The faculty predicts that in future more institutes shall be involved in such activities. Such attitude is positive, but professional activities should by no means influence the key scientific and lecturing activities performed by the faculty staff.

Suggestions:

1. The Faculty should promote the growth of scientific research teams carrying out project tasks so as to promote competitiveness and increase efficiency.
2. The Faculty should also encourage young scientists to apply for the calls for proposals of national and international science foundations, which would increase the amount of funds invested in scientific research.

## **6. International activities**

The new versions of Self-evaluation and Tables include detailed information on activities of faculty professors in foreign countries and foreign faculty professors' visits. There is a large number of faculty professors from foreign universities (in Maribor, Umea, Oslo, Lyon, Ohio State, Munich) lecturing at the School of Medicine in Rijeka, as well as a number of faculty professors lecturing at other foreign universities (in Bosnia and Herzegovina, Serbia and Sweden). However, the Tables mention only 15 lecturing visits of faculty professors in foreign countries and 8 visits from foreign faculty professors who held lectures at the School of Medicine.

The official and informal international cooperation includes a large number of foreign institutions, but this is not equally present within all the chairs of the faculty. Unfortunately, the current Self-evaluation does not state even an approximation of the possible number of papers resulting from such cooperation.

The faculty still maintains the tradition of sending its employees to postgraduate study programmes in foreign countries. Such approach is highly positive since it opens numerous possibilities for new mutual projects and cooperation.

The international exchange activities entail also students through the activities of international students' associations.

Suggestions:

1. The Faculty should continue the positive trend of sending its young scientists to further training in foreign countries.

## **7. Space and equipment**

The School of Medicine uses 26 classrooms, eight of which are in the main faculty building. The Committee points out that they are well-equipped. According to the submitted Tables, weekly occupation of the classrooms is 35 hours a week on average (or 7 hours daily). The stated occupation of the laboratories/practicum rooms (used during teaching activities) is for the most of locations lesser than 8 hours a day. These data (which show a satisfactory number of free periods of use) are somewhat different from the attitude of the management (stated several times in the Self-evaluation) that the faculty is having space difficulties and limitations. On the other hand, certain locations (dentist's offices 1 and 5) record incredible weekly occupations of 107 or 117 hours (19 hours, 6 days a week), the fact which remains without any comment.

The faculty has a computer classroom (with modern computer equipment) at its disposal, which should largely be at hand for students outside school hours.

The School of Medicine has sizeable space used only for scientific and research work which is very well-equipped as well.

The library is networked, but of insufficient size as per number of users (irrelevant of the fact that faculty associates are increasingly using on-line access to journals). Working hours of the library are inadequate. Having in mind that due to lack of space for study the students are increasingly using the library, the Committee feels necessary for the faculty management to find a way to extend its working hours. The management emphasises that the that the existing space issues will be resolved in two to three years time by building the central University Library within the University Campus at Trsat – however, it remains unclear how the new location will be suitable for large number of professors and students that are located in the main building a few kilometres away.

The library has a sizeable number of course books at student's disposal; although it was impossible to check whether this number matches the standards, the fact remains that the Committee has not seen the 15000 course books the faculty states in its materials! The Committee emphasizes that the faculty management should invest far more of its own resources for the procurement of necessary teaching literature.

The school uses electronic access to journals and databases (financed by the Ministry of Science, Education and Sports); the faculty's own investments in the procurement of additional journals and electronic access are not significant because there is no need for them (as the researchers themselves claim).

The students' office is of inadequate size considering the number of students.

The faculty institutes/chairs have different numbers of employees and different available useful spaces, therefore the conditions for accommodating the teaching and other staff vary - the Committee is unanimous that the average space conditions for accommodation of the employees are at this point satisfactory.

The value of the essential research equipment (in the period between 2002 and 2007) exceeds 18 M HRK, which is a respectable amount, but it is unclear why this list states "Peugeot van" and/or "Mounting of gas pipeline fittings"!

## **8. Quality monitoring**

Quality assurance and management represent a way to improve medical education and demand a well organized system of data collection and their analysis. The School of Medicine founded the Committee for monitoring the quality of teaching. Quality monitoring is performed in close cooperation with the University Quality Improvement Centre. The faculty has founded a Quality Office, university questionnaire surveys are conducted, the causes of unsuccessful studies investigated, the student's expectations regarding the study are analysed, a system of mentorship has been established and SWOT analyses performed.

Although the above activities are positive, the Committee believes that these activities should be conducted primarily on the faculty level in order to achieve satisfactory quality assessment and assurance. This view was also expressed by the students, who are not satisfied with the university questionnaires which seem as a mere formality to them. They point out that they are not familiar with the detailed results and that they are not given necessary feedback, and the professors do not acknowledge the results ("We wanted to publicly proclaim the best professors, but the Management dismissed this idea.") The Committee agrees that the results of the evaluation procedures should be made public with clear positive and/or negative consequences; they should result in, for instance, introducing new forms of classes, teaching methods, harmonising the student's duties to their obligations and increasing the effectiveness of the studies and the results of learning and competencies, as well as replacing professors if negative marks reoccur.

External judgement could also prove to be a very important additional element, for instance, the rate of passing the state exam or the validation exam for USA.

Suggestions:

1. The faculty should set up transparent mechanism of reverse actions based on the questionnaire survey results (stimulating successful and propulsive programmes/professors, dismissing and sanctioning the ones who are unsuccessful); implementing similar models of reverse actions for students, proportionate to the dynamics of their accomplishments in the course of studies.

## **9. Financial resources**

The submitted data show that the School of Medicine in Rijeka realizes most of its incomes through its own activities. In incomes statements, the stated income for postgraduate study fees remains vaguely small for the faculty's own junior researchers (only around 60 000,00 HRK for 60 junior researchers?). On the other hand, in 2007, from the total amount of 24 m HRK of the faculty's own income, professional services take up 45%, undergraduate and graduate fees around 20%, assets of scientific projects (not those from the Ministry of Science, Education and Sports) and professional projects around 20%. If the data is correct (according to the data which the Committee possesses) about the values of 12 international

projects of the faculty, their share can be seen in the incomes for the financial statements for 2006 and 2007. The faculty has an important number of external associates who take part in the teaching activities, but a significant reduction of income for the expenses of external associates is commented by a statement that this was made possible by rationalisation inside the faculty and the University of Rijeka (it remains unclear whether this implies that a portion of external associates is not being funded).

As for the expenditures, there are expenditures for intellectual and personal services: about 40% of market income is spent for bonuses and fees for professional activities. At the same time, the outsourcing expenditures (which are very high) could not be tracked in the overall expenditure. A significant amount was spent on official trips.

The Committee is unable to accept the faculty expressed view that its own income should not be used for covering the operational expenditures. The Committee also warns that the amounts for overhead expenditures for certain projects have to be used for its original purpose (covering the business expenses) instead of being reinvested into research (as we were informed during the visit).

The presentation of the financial statement in a way that each year expenditures and income are equal is legitimate, but it is surely not a real situation and therefore does not give insight into possible surplus or shortage of income as well as resources which remain at the disposal for all possible investments in own infrastructure or activity improvement (for example oral information which we have received, concerning the large investments in dentistry equipment from own income is a useful and significant information not included in the Self-evaluation).

During its visit the Committee was not entirely satisfied with the presenting of the faculty financial situation – each management should be entirely capable to fully present and explain the financial situation of its institution.

## **10. Administration and other staff**

The Committee did not perform a wide analysis of structure and number of administrative and other staff, because the issue was not stressed by the faculty management in the Self-evaluation. However, there proves to be an inadequate number of employees in the students' office, because, unfortunately, there is no information system that can replace the work of this staff.

## **11. Text quality**

The first version of documentation delivered by the School of Medicine (Self-evaluation text and the attached Tables) was inadequately filled out, there was a certain number of information missing or not adequately stated, and the text had more non-critical or imprecise parts. During its visit, the Committee, within the available time, pointed to some shortcomings, and stressed that the received materials cannot be accepted for the public representation of the faculty. The faculty management was given a set time for revision, which was met.

However, what seems to be a disadvantage of this type of approach is that the revised documents can to a greater or lesser extent vary from the first ones, which is significantly present in the case of School of Medicine in Rijeka. This shows that the first submitted documentation was even worse than it had been concluded in the beginning.

The Committee accepts the new documents as a relevant presentation of the School of Medicine in Rijeka, because it feels that the present management has accepted the criticism seriously and made an effort to amend the failures. However, there was an impression of under-professional first approach to the process of evaluation, which was not in accordance with the reputation of the School of Medicine in Rijeka.

## **FINAL MARKS AND RECCOMENDATIONS TO THE NATIONAL COUNCIL FOR HIGHER EDUCATION**

Having looked into all evaluation documentation and as a result of performed inspection during its visit, the Expert Committee for evaluation hereby confirms that the School of Medicine of the University of Rijeka meets all conditions and standards in educational, scientific and professional activities, while some of possible promotions are suggested herein.

Based on the analysis of the given information on teaching activity and study programmes, the scope of work performed by professors and space and staff capacities of the faculty, the Committee has reached a unanimous conclusion that the number and scope of present teaching programmes can have a negative effect on primary scientific and teaching tasks of School of Medicine, which presents a higher education institution for doctors and dentists.

This is why the Committee recommends:

1. The School of Medicine in Rijeka should focus exclusively on its main studies, this being the integrated studies of medicine and dentistry, for which it possesses all conditions.
2. Studies of *Sanitary engineering* and *Organization, Planning and Management in Healthcare* (OPMH) are less appropriate studies within the School of Medicine. Although it used to be a university study within this faculty, we think that the study of *Sanitary engineering* (due to its interdisciplinarity) should see its future within the University.
3. Regardless of the fact that it is impossible to evaluate the goals set while starting the study course *Organization, Planning and Management in Healthcare*, the Committee is unanimous in the opinion that this type of study does not fit into the teaching activity of a faculty of medicine, and that the University of Rijeka is its more appropriate (and more natural) holder.
4. As far as professional study programmes are concerned, the Committee implies that the study programmes of *Nursing* and *Midwifery* should not be (but can be) implemented in a way that is different from the ones present at other faculties of medicine in Croatia, but other professional study programmes should definitely be excluded from the School of Medicine and be organized at the level of University.

5. The faculty should create guidelines for its active promotion, so that the studies and the medical profession increase in popularity and become attractive for present as well as future students.
6. The faculty should increase investments in teaching equipment and student workbooks; part of its own income should be directed to, for example, forming and equipping of practicum classrooms for clinical skills with suitable models for exercising.
7. The faculty should persist in constant improving and consistent application of *Catalogues of skills and knowledges*.
8. The faculty should enlarge the implementation of mentorship system, reorganize complete pre-clinical and clinical classes into sessions with clear timetable of classes, subjects and exams. Also, it is necessary to boost the importance of questionnaire surveys and show actual changes which have resulted in improvements.
9. The faculty should encourage the growth of scientific and research teams performing project tasks at a higher level of competitiveness for the purpose of efficiency growth, and stimulate scientific activity in parts which have so far been underdeveloped. It is also necessary to continue with the positive trend of sending young scientists abroad for training and specialization.

The Committee is aware that in order to implement the stated recommendations, it is necessary to realize certain preliminary actions and that the entire process cannot be completed quickly when one has to take care of so many different factors (for instance, protection of student interests). However, a positive fact remains that the management itself considers necessary to reorganize its study programs and find (together with the University) new ways of organization and implementation. We hope that the stated critical suggestions and final recommendations will help the School of Medicine in the development of its new strategy of development and its effort to achieve high-quality level of scientific and teaching activities in the area of biomedicine and healthcare. In this sense, the Committee also supports the faculty *TransMedRi* project.

The Expert Committee for evaluation gives recommendation to The National Council for Higher Education to issue a work permit to the School of Medicine, University of Rijeka.

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